September 12, 2007

Memo to: Rich Comi, MD (MEC Member)
Eric Shirley, MD (Assistant Dean for Clinical Education, MEC member)
Petra Lewis (MEC ex-member, Y4 Radiology elective director)
Roshini Pinto-Powell (ex-MEC, Med clerkship co-director)

Brian Guercio (Y2 MEC rep)
Susan Kelly (Y3 MEC rep)
Laura Reis (Y4 MEC rep)
Courtney Mcllduff (Y4 student)

From: David Nierenberg

Subject: Invitation to serve on new study group to discuss several issues related to Year 3 clerkships and electives

I'd like to invite each of you to serve on an ad hoc working group to discuss and study several issues related to clerkships and electives that students select during Year 3, and in the first half of Year 4. There are several complex issues related to this, and the Medical Education Committee has requested that a small group study several of these issues in more depth, and then make specific recommendations back to the whole MEC for further study and possible action. There is no fixed time frame, but it would be optimal if the ad hoc working group might be able to report back consensus recommendations by January 2008 at the latest, so that your recommendations can then be discussed by the full MEC.

The specific issues I would like this small group to study are these:

§ Could our “lottery system” used near the end of Year 2 be improved?

§ How important is it, to how many students, to be able to take a clinical elective during the spring of Year 3? Does this depend on whether or not a clerkship gets delayed into Year 4?

§ Which approach or approaches might have the best chances of increasing student access to electives during Year 3, without having unintended negative consequence? Should Year 2 be shortened in some way? Should a clerkship or clerkships in Year 3 be shortened to make room for an elective?
I will include some more detailed background information below, but I very much hope that you might be willing to consider serving on this ad hoc group. Each of you has a valuable perspective to share with the group!

**Background:**

Over the past 3 years or so, the MEC has become aware that some Year 4 students feel that they are sometimes having increasing difficulty deciding what field of medicine to enter for their PGY I (and subsequent) years. Concerns and suggestions have included: need to set up more interest groups in the early years; need for societies to organize more activities related to helping students understand the range of specialties and subspecialties available; desire of some students to “split year 4”, for a variety of reasons which include providing more time to decide; and desire of students to have an opportunity to sample one or two electives earlier, during the latter half of Year 3, and before Year 4 usually begins on or about July 1.

While progress has been made in some of these areas (i.e. more interest groups forming in the first two years, more open forums about how to choose a career, more work of the three societies in this area, new symposia with alumni speakers, great flexibility and virtually infinite capacity for students to split Year 4), DMS has been quite limited in its ability to allow Year 3 students to take an elective in the second half of Year 3, thereby moving a required Year 3 clerkship into the first half of Year 4.

The MEC recently (Spring 2007) devoted most of one meeting to this issue of availability of elective experiences during Year 3, and last year we spent quite a bit of time on related issues. In a very condensed version, here is some relevant recent history. Our curriculum calls for all students to take six major clerkships during Year 3, and then during Year 4 to take a combination of required courses, clerkships, and electives. A few students can delay a major clerkship from Year 3 to Year 4 under the current schedule, usually about 18 students per year (depending on class sizes). For these 18 slots, about 7-10 of them are taken by students who “need” to delay a clerkship due to the academic need to spend extra time preparing for the boards at the beginning of Year 3, or those who fail a clerkship and need to repeat it, or those who have a personal or family health reason. That leaves each year about 7-9 slots for students who wish to delay a clerkship from spring of Year 3 to fall of Year 4, in order to provide time to take an elective near the end of Year 3. Of these 7-9 slots available, most years 2-4 students eventually come forward and sign up to take an elective during the end of Year 3. With the current structure of Year 3, the biggest obstacle to expanding elective slots for Year 3 students is clerkship capacity. Most clerkships, with our current sites, cannot take more than 13 students per cycle.

Last year, we were considering changing to a “7x7” plan, in which all students could fit all six required clerkships into Year 3 in a slightly shorter format, plus a seventh block that would include a 3-week elective plus a surgical selective. After nearly one year of intensive study and hard work, for various clerkship-related reasons, this plan turned out not to be workable.

At the April 2007 MEC meeting, students requested and the MEC approved a motion that I establish a working group to look into a number of issues related to helping more students have access to electives of choice during Year 3, preferably during the second half of Year 3. While it was generally agreed that many students would still prefer to take all required clerkships during Year 3, it was felt that the option to take an elective during Year 3 should be more widely available to Year 3 students, if there were a practical way to allow that to occur.

A number of approaches to achieving this end were mentioned, including these ideas:
1. Increase capacity for most or all clerkships by adding new affiliated clerkship sites, thereby increasing the number of students who could delay a major clerkship from the spring of Year 3 to the fall of Year 4.

2. Shorten one or more clerkships during Year 3, thereby freeing up time for all students to take a short elective during Year 3.

3. Begin Year 3 earlier, perhaps by one month, by somehow shortening Year 2 and/or Year 1. If Year 3 were to change from 12 months to 13 months, then it could include an elective experience for all students. (Note: This might become more feasible in the future if the NBME decides to proceed with its tentative plans to change the structure and timing of the NBME exams, possibly removing Step I from the end of Year 2.

4. Other ideas, or some combination of the above.

There was also some discussion about how the process for allowing students to select their Year 3 schedules might be improved. This year, the process was changed substantially to include two cycles: the first permitted all students to select a coherent clerkship sequence, and the second permitted students to select detailed sites and rotations within each clerkship. Some other ideas that surfaced were these:

1. There might be a computer program available that could help with either or both of these processes, increase student preferences, be affordable, and be adaptable to our particular constraints.

2. It might be useful to allow Year 2 students to plan their clerkships from April of Year 2 for all of Year 3 and into Year 4.

The MEC meeting in April did allow enough time to lay out some of these proposals, but did not allow enough time for thoughtful discussion of the pros and cons of each of these ideas, and indeed to see which ones are even technically feasible. While there are advantages to each of the ideas listed above, there are also a number of adverse unintended effects that could occur, which become more visible only with closer study. For this reason, and at the request of the MEC, I am inviting you to serve on this working group to study all of these issues, which basically come back to the single question: Are there things that the MEC can do to help students make their career decisions and provide more flexibility in elective experiences, without causing major disruptions to other important features of the curriculum?

Each of you who has been invited brings a valuable perspective to the process. Perhaps you are a faculty member who runs a clerkship or an elective. Perhaps you are a student who has helped run the lottery program, or who can look at the third and fourth years, and have a perspective on how crucial earlier exposure to electives might be for some students.

I have asked Dr. Rich Comi to chair this group. He has faced many similar issues in his years as director of the Medicine Residency Program and yet is not directly involved in running a particular clerkship or a specific elective. I would envision that this committee would need several months to meet, now that faculty and students are back on campus after summer activities. I certainly hope that you will be willing to help us with this important project. This is an issue that has been of concern to students for several years, and a joint student-faculty attempt at finding a better way could be of great value to all.