Dartmouth GEISEL SCHOOL OF MEDICINE

MEDICAL EDUCATION COMMITTEE MEETING MINUTES

Meeting Date: December 17, 2025
Time: 4:00 – 6:00 p.m.
Meeting Location: Zoom only
Approval:
Recorded By: Emily Godfrey

Attendance

Present = X, Absent = 0

Faculty Voting Members							
Black, Candice (Department of Pathology and Laboratory Medicine)	X	**Boardman, Maureen** (Preclinical & Clinical- Family Medicine, Community Preceptor Rep)	O	**Hofley, Marc** (Clinical – Pediatrics)	X	**Jankowski, Mary** (Department of Psychology)	X
Lee, Michael (Department of Medical Education)	X	**Marshall, Alison** (Clinical – Emergency)	X	**McCrory, KrisEmily** (Department of Family Medicine)	O	**McNulty, Nancy** (Department of Radiology)	X
Myers, Lawrence (Department of Med Ed & Biochemistry & Cell Biology)	X	**O' Sullivan, Brian** (Department of Pediatrics)	X	**Phillips, Oliver** (Department of Neurology)	X	**Reuman, Hannah** (Department of Medicine)	X
Seigel, Timothy (Department of Surgery)	X	**Thesen, Thomas** (Department of Medical Education)	X				

Student Voting Members									
Year 1									
Tietjen, Jack	O	**Garbis, Demetrios**	X	**Cayabyab, Kevin**	O	**Huang, Raymond**	X		
Year 2									
Ganga, Kiran	X	**Johnson, Jakobi**	X	**Sherman, Meredith**	X	**St. John, Emily**	X		
Year 3									
Dameron, Corbin (Co-academic chair)	X	**Darling – Mena, Addie**	O	**McNamara, Colin**	X	**Shirmer, Dain**	X	**Harring, Alden**	X
Year 4									
Hernandez, Eli	X	**Li, Kevin**	O	**Pfaff, Mairead**	O	**Plona, Kelsey**	O	**Ramkumar, Nividetta**	O
MD/PhD									
Gayne, Alexys	O	**Armero, Andre**	X	**Marshall, Abigail**	O	**Reiner, Timothy**	X		

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Non-Voting Members							
Albright, Amanda (Instructional Designer)	X	**Borges, Nicole** (Chair, Dept. of Medical Education)	O	**Cameron, Justine** (Director, Accreditation & CQI)	O	**Chimienti, Sonia** Dean for Educational Affairs	X
Cunningham, Tara (Associate Dean, Student Life)	O	**Dick III, John** (Assistant Dean for Clinical Skills Excellence)	X	**Eastman, Terri** (Director, Integrated Curriculum)	O	**Eidtson, Bill** (Assistant Dean, Student Success & Accessibility)	O
Fountain, Jennifer (Specialist, Senior Assessment)	X	**Garrett, Tiffany** (Associate Director, Health Sciences & Biomedical Libraries)	X	**Godfrey, Emily** (Medical Education Coordinator)	X	**Levy, Campbell** (Assistant Dean of Advanced Clinical Curriculum (Phase 3)	X
Lyons, Virginia (Pre-clerkship – Associate Dean Pre-clerkship Curriculum)	X	**Matthew, Leah** (Assistant Dean, Core Clinical Curriculum)	X	**McAllister, Steve** (Director, Educational Technology)	O	**McBride, Lisa** (Associate Dean, Diversity, and Inclusion)	O
Mishra, Manish (Director, Learning Environment)	O	**Pinto-Powell, Roshini** (Associate Dean, Admissions)	O	**Rich, Alex** (Registrar)	X	**Rose, Amy** (Educational Affairs)	O
Shaker, Susan (Director, Pre-clerkship Education)	X	**Taylor, Julie** (Associate Dean, Medical Education)	X	**Thompson, Rebecca** MEC Chair (Clinical Neurology)	X	**Vengrin, Courtney** (Director, Evaluation and Assessment)	X
Weissburg, Paul (Associate Dean, Evaluation and Assessment)	X						

Student Non-Voting Members							
Thomason, Helen (Co academic Chair)	X						

Guest(s)		
Samantha Yarmis	**Andrew Thomason**	**Heather Vestal**

Call to Order

Rebecca Thompson, MD Chair – Medical Education Committee

Rebecca Thompson called the meeting to order at 4:06 PM

Announcements

- MEC Executive committee has been re-named as the MEC Steering Committee
- Student-Faculty buddies have been established

Approval of Meeting Minutes

Rebecca Thompson, MD

Approval of November meeting minutes.

Thomas Thesen made a motion to approve the September 2025 MEC meeting minutes. The motion was seconded by Michael Lee. The motion passed unanimously.

Subcommittee Updates

1. Phase 1 – The Evaluation/Assessment team shared their updated course review process; Foundations review was done in November using this new process and will be presented to the MEC in the new year, Robin Maddalena from the library shared information about the new Clinical Key Student package.
2. Phase 2 – Contribute to the provision of optimal evidence-based care to patients of all ages in the outpatient setting, collaborating with members of the care team and considering the patient in the context of family, community, and social determinants of health. Social determinants of health --> Social drivers of health. Lottery prep, mid-year grade review presentations/ timeline, two new faulty needed to join P2CC.
3. Phase 3 – Sub Internship SPE revisions
4. GAOC – Clerkship Grading- Discussion of whether to use Standard Error when calculating the 50% Subject Exam cut-off and Discussion of EPC vs. Percentiles when reporting student performance on Subject Exams. At the end of the session, a survey was given to the GAOC members present (voting and non-voting). That data will be analyzed, and a recommendation will be brought to the Phase 2 Subcommittee.
5. CTs- Moving from quarterly to monthly meetings in 2026- focus of SOPs and QI, prep to formally sunset LC subcommittee of the MEC in early 2026 (dormant since 2024)

Consent Agenda

1. Vote: Acute Care Medicine Clerkship Grading- Dr. Samantha Yarmis/ Dr. Andrew Thomson/ Dr. Campbell Levy

Proposal for ACM Clerkship: Pass/Fail grading for this upcoming academic year
Rationale for Pass/Fail: Student equity, all clerkships utilize NBME exam as part of tiered grading but there is no current NBME exam for Acute Care Medicine, students favor formative vs summative assessments.

Assessment plan: Clinical performance data, case write ups, simulation evaluations, student feedback.

Oliver Phillips made a motion to approve a Pass/Fail grading schema for the Acute Care Medicine Clerkship in AY26-27. The motion was seconded by Marc Hofley. The motion passed.

Old Business

1. Vote: Principles of Pedagogy Policy- Dr. Virginia Lyons

Change	Rationale
Updated the name of the policy to Principles of Curricular Design	The focus of the policy being reviewed is the design of the curriculum at Geisel and the name should better reflect that. Pedagogy refers to the instructional methods used for teaching – these are outlined in a separate document titled Geisel Instructional Methods Guidelines.
Added definitions for objectives	The prior draft contained vague terms like "curricular objectives" and "learning objectives". To increase clarity the type of objective is now specified (e.g., program objectives, course objectives, etc.) and definitions have been added to the policy
Added definitions for SDL and UDL	Adds clarity to the policy; clearly explains what these terms mean with respect to the Geisel curriculum. The definition of SDL aligns with the definition used by the LCME.
Change	**Rationale**
Added language about revising the curriculum	The policy was originally designed to guide the creation of the curriculum launched in fall 2019. In order to keep the policy relevant, language was added to indicate the processes outlined apply not only to creation of curriculum, but ongoing curricular revision.
Revised language to emphasize collaboration in the design process	Multiple stakeholders should be involved in designing courses or clerkships including members of the MEC, the dean of the relevant phase, course leaders/clerkship directors and curricular thread leaders to ensure a comprehensive, integrated curriculum for each phase.
Change	**Rationale**
Added a phrase (blue text) about exceptions to the 40% lecture rule. Would the MEC prefer to increase the threshold slightly to 45 or 50%?	Phrase: In general, lectures should represent no more than 40% of total contact time for pre-clerkship courses; exceptions to this threshold may be made in unique situations with approval from the MEC. Pedagogy fluctuates as courses make improvements and at times lectures have represented slightly more than 40% of the pedagogy used. If a course is very well-received by students and students praise the lectures, should the course need to meet the threshold as long as they are close (e.g., within 5 percentage points)?
Reduced SDL hours in Phase 1 from 75 to 65	Currently there are 68 hours of SDL in the Phase 1 curriculum (PBL cases) and discussion at the MEC indicates that faculty and students feel this is an appropriate amount.
Added relevant LCME Standards and Geisel policies	Standard inclusions on all policies

Oliver Phillips made a motion to approve the revised Principles of Pedagogy Policy with the new language "exceptions to this threshold may be made in unique situations." The motion was seconded by Andrew Armero. The motion passed.

2. Competency working group update- Dr. John Dick

The working group is busy looking at the new AAMC foundational competencies and aligning with current Geisel competencies. The plan is to present to the phase 1, 2, and 3 subcommittees and student government to get input and feedback. Bringing back to the MEC in February, vote in March, and implementation hopefully in April.

New Business

1. SubI SPE Improvement Proposal- Dr. Campbell Levy

Vast majority of sub internships at Geisel use the SPE as their primary, if not their only, evaluation. There are a few one offs like Emergency Medicine and Anesthesia.

Goal: high yield incremental improvement of SubI SPE for AY26-27
Objectives: Single SPE used for all SubI's, align competencies between SubI courses, aligning competencies with AAMC Foundational Competencies and EPA's where appropriate, and reconsider the current assessment scales and align them.
Current assessment scale - misaligns with questions/ competency, descriptors are vague/not measurable/ not an observable skill, not aligned with tiered grade- 3–5-tiered scale applied to a 4-tiered grading rubric.

Examples of revisions - Current

COMPETENCY SPECIFIC EVALUATION:

Evaluate the competency specific performance using the anchors described below:

i. Unacceptable: Inadequate performance for current level of training that needs attention

ii. Below Expectations: Fair performance for current level of training, but needs more practice

iii. Meets Expectations: Solid, capable performance; at expected level for a student at current level of training

iv. Advanced: Above average performance for a student at current level of training

v. Outstanding: Outstanding performance for student at current level of training

vi. Unable to Evaluate

7. History Taking

○Unacceptable ○Below Expectations ○Meets Expectations ○Advanced ○Outstanding ○Unable to Evaluate

8. Physical Exam

○Unacceptable ○Below Expectations ○Meets Expectations ○Advanced ○Outstanding ○Unable to Evaluate

Examples of revisions - Proposed

For the following competency-based assessments, please select the option that best represents your impression of the student's performance. Please use the text boxes at the end of each competency section to provide more specific narrative feedback as appropriate. If you have significant concerns about a student's performance on any of the items below, please contact the Sub-Internship director.

Patient Care and Procedural Skills

6. Gathers relevant patient histories from multiple data sources, as necessary. (PCP2)

Below expectations	Meeting expectations	Above expectations	Early Intern Level	Unable to evaluate
Obtains incomplete or irrelevant components and does not use certain pertinent resources	Obtains mostly complete histories using pertinent sources and contextualizes to patient circumstances	Obtains relevant histories from multiple pertinent resources and contextualizes most details to patient circumstances	Adapts data-gathering strategies dynamically based on complexity and contextualizes to the patient circumstances	

7. Performs relevant physical examinations using appropriate techniques. (PCP3)

Below expectations	Meeting expectations	Above expectations	Early Intern Level	Unable to evaluate
Performs incomplete exam, only using basic techniques independently	Performs complete exam, using basic and advanced techniques independently for common presentations	Performs complete exam, adapted to the problem, using basic and advanced techniques for common and most uncommon/complex presentations	Performs complete exam, adapted to the problem, independently for presentations of all levels of complexity	

Proposal: the proposed SPE will be used for ALL Geisel SubI's, effective the beginning of AY26-27. Course directors may choose to add 1-3 questions to the SPE on a case-by-case basis, pending review by the Assistant Dean of Phase 3 and the ADAQ (or its delegates).

Ongoing Business

- Clerkship reviews
- Phase 1 review
- Grade Submission Policy

Future Meetings

MEC meetings are the 3rd Wednesday of each month from 4:00 – 6:00 p.m.

- January 21st
- February 18th