CEPC MEETING AGENDA
05:00 PM - 06:30 PM
09/08/2021

CHAIR:
Dr. Irene Alexandraki, MD, MPH, FACP

VOTING MEMBERS:
Colby Genrich, MD; Fatima Gutierrez, MD; Fuhrman Brad MD; Houriya Ayoubieh, MD; Jessica Chacon, PhD; Nino Diego, MD, PhD; Niti Manglik, MD; Osvaldo Padilla, MD; Patricia Ortiz, MD

EX-OFFICIO:
Beinhoff Lisa PhD; Busey Blake, MS; Ellis Linda S, MD; Francis Maureen, MD; Hogg Tanis, PhD; Ortega Melissa, PhD

STUDENT REPRESENATIVES:
(Pending – MS1); Shaffer Whitney MS2 (Voting); Rereddy Rohan MS2 (Ex Officio); Tran Daniel MS3 (Ex Officio); Palvadi Karishma MS4 (Voting); Ratnani Runail MS4 (Ex Officio)

INVITED/GUESTS:
Brower, Richard, MD, FAAN; Christiane Herber-Valdez, PhD; Martin, Charmaine, MD;

APPROVAL OF MINUTES
Minutes will be attached.

ANNOUNCEMENTS
Presenter(s): Dr. Alexandraki
• CEPC management update
• The new student representatives welcome
## ITEMS FROM STUDENT REPRESENTATIVES

Presenter(s): Students

### ITEM I DISTINCTION IN GENETICS

Presenter(s): Dr. Ayoubieh

- Distinction in Genetics – Updates

### ITEM II GQ Report 2021

Presenter(s): Dr. Alexandraki

- GQ Report 2021 – Clerkship Phase in Focus

### OPEN FORUM

### ADJOURN
MEMBERS IN ATTENDANCE:
Brad Fuhrman, Christiane Herber-Valdez, Colby Genrich, Daniel Tran, Diego Nino, Houriya Ayoubieh, Irene Alexandraki, Jessica Chacon, Karishma Palvadi, Lisa Beinhoff, Maureen Francis, Mirjana Babic, Niti Manglik, Patricia Ortiz, Priya Harindranathan, Richard Brower, Rohan Rereddy, Runail Ratnani, Tanis Hogg

MEMBERS NOT IN ATTENDANCE:
Blake Busey, Charmaine Martine, Ellis, Linda S, Fatima Gutierrez, Melissa Ortega, Whitney Shaffer

PRESENTERS:
Irene Alexandraki, Houriya Ayoubieh

REVIEW AND APPROVAL OF MINUTES
Dr. Alexandraki CEPC Chair
Having met quorum, the meeting minutes from the August 11, 2021 meeting were voted on and approved as presented.
Dr. Chacon stated that she made the comments that were attributed to Dr. Ayoubieh. Correction to the August 2021 minutes made accordingly.

ANNOUNCEMENTS
Dr. Hogg
● Provided an update on the status of the student elections.
  o The election of eight students is ongoing; election results from two colleges are pending. After this process is finalized, he will host a meeting with students and provide the names of MS1 representatives who will serve at the CEPC.

Dr. Alexandraki
○ Introduced Mirjana Babic, the new facilitator for the CEPC.
○ Introduced the new revision cycle of the curriculum.
ITEMS FROM STUDENTS

MS1
- Not elected yet.

MS2-Rohan Rereddy
- No comments or issues.

MS3-Daniel Tran
- No comments of issues.

MS4- Palvadi Karishma
- Stated that there are no issues with the residency application process.

DISTINCTION IN GENETICS – UPDATES

Dr. Ayoubieh
- Provided a brief presentation.
- *Please see attached report
  
  o The Academic Council suggested that the title should be changed from “Distinction in clinical genomics” to “Distinction in clinical genetics” because the program’s focus is not on genomic technologies, and “genetics” is a more accurate reflection of the distinction program’s content and intent. There would still be inclusion of genomics in this program with Drs. Abadie, Perry, and Cervantes offering workshops and training in this area.

Dr. Nino
- Asked about the cost listed at the end of the proposal.

Dr. Ayoubieh
- Responded that this expense most likely will not be needed.

Dr. Nino
- Motions to approve.

Dr. Fuhrman
- Seconds the motion.

Proposal passed. Six members voted in favor.

GQ REPORT 2021 – CLERKSHIP PHASE IN FOCUS

Dr. Alexandraki
- Presented the results of the 2021 Graduation Questionnaire that pertain to the clerkship phase.
- *Please see attached report
Dr. Alexandraki indicated that the students’ response rate was lower than in previous years. Even so, she stressed out that the feedback from the graduating students raised concerns about several aspects of the medical education program.

OPEN DISCUSSION

Dr. Fuhrman
- Asked if we there was any data on how much the composition of the faculty has changed year to year.
  - Question is pivotal: Are same faculty providing less guidance, nurture, etc., or is the composition of the faculty essentially different?

Dr. Ortiz
- At the time the students responding to the 2021 GQ, the Psychiatry department had lost three faculty members which had a significant impact considering the small size of the department.

Dr. Francis
- This report reflects clerkships starting AY 19/20.
- Block 3 was affected because students were pulled from clinical activities on March, 16th, 2020, and they finished block 3 virtually.
- 4th year completed all required clerkships in person, but due to the pandemic clinical opportunities during the 4th year for these students were significantly affected.
- The majority of clinical sites were closed, so in order to graduate on time many students took a few electives virtually. There was no cap on the number of virtual electives that year.
- Many of the basic science faculty, and the clinical faculty stepped up during that time by providing virtual electives so the students could continue to receive the credit.
- Two meetings have been held with clerkship directors to discuss these; they are currently working on the creation of the cause-and-effect diagram.
- Many of the issues were systemic problems and that must be addressed by the institution.
- One of the issues was that faculty and the residents were burned out because of competing demands and pressure for clinical productivity that were in constant competition with educational time.
- Lack of faculty, faculty turnover, recruiting and maintaining community faculty has been an ongoing issue and so has the faculty appointment process.
Many issues are within the circle of the clerkships’ control, but many other things are within the institution’s control.

Dr. Herber-Valdez asked if it was considered to survey currently enrolled students to gather their perceptions on some of these same questions.

Dr. Alexandraki said our office (OME) has reviewed this year’s and past PLFSOM student surveys conducted by the Office of Institutional Effectiveness. There is a need for more internal surveys. A meeting with students was held but more feedback is essential to address all issues.

Dr. Herber-Valdez asked if there were any narrative comments that could explain some of the ratings.

Dr. Alexandraki said there were comments. These pertained to all the different aspects of the medical education program, from curriculum delivery to clerkship structure. Some were about the faculty, the residency application process, the MSPE letter process, support services, and advising.

Dr. Brower said students were seriously dissatisfied by the time they graduated. Students’ mindset when they were filling out the survey was already filled with frustrations they experienced with the match process and other administrative aspects. That experience darkened the lens through which they rated all aspects of the school. For that reason, the leadership has been looking at other data sets like the institutional, internal surveys going back five years to confirm and identify the trends.

Runail Ratnani asked if the committee would consider going back to the previous clerkship model. The school needs to have an advising program that starts early in the program.

Dr. Brower said Mr. Ratnani pointed out an important theme from the comments: issue of students feeling inadequately advised both in terms of their 4th year elective selections and going into the residents matching application process.
Dr. Alexandraki
- Is collaborating with the student affairs leadership and clerkship directors to address all these issues.
- The school has access to several resources, including Texas STAR AAMC resources, etc. that are not been utilized.
- Regarding the LIC model, all parties involved are aware of the issues and are willing to revisit the LIC model if needed.
- Students will be invited to be a part of these efforts.

Dr. Francis
- This year is the first full run of the LIC model and still studying it.
- Blocks are longer and ambulatory weeks are allowing for more continuity with family medicine.
- Based on the experience of other schools which put a similar model into the effect, the beginning of the third year for students is shown to be unconformable because they are facing a lot of challenges.
- Students would understand the approach better if it is presented during orientation.
- Students stated that if they were exposed to neurology earlier, they would have gone into neurology.
- Earlier experience in both emergency medicine and neurology would be beneficial for students.

Dr. Ortiz
- Feedback from the past block was overwhelmingly positive.
- There didn't seem to be any sign of this sort of dissatisfaction that was expressed in GQ.
- The latest results (2021 GQ) seemed like they came out of the blue.

Dr. Hogg
- Was reviewing Y2 questionnaire and some of the same elements came up.
- Recognized students’ concerns about faculty turnover.
- Will commit to a real deep dive into the Y2 to identify and address all issues.

Dr. Harindranathan
- Further analysis of survey results is warranted.

ADJOURN
- Meeting adjourned at: 6:30pm.
Distinction in Clinical Genetics

Faculty:  Houriya Ayoubieh, M.D, FACMG  
Jessica Chacon, PhD  
Jorge Cervantes, M.D, PhD  
Jude Abadie, PhD, FAACC, DABMGG, FACMG  
Martine Coue, PhD  
Cynthia Perry, PhD  
Curt Pfarr, PhD  

Purpose:  
Genetics is rapidly evolving and shaping patient care. Therefore, it is paramount that clinicians understand cutting-edge genetic applications. The Distinction in Clinical Genetics (DCG) Program offers a deep-dive into the molecular mechanisms of diseases, as well as, genomic concepts and technologies that are transforming the practice of medicine.

The goal of this program is to increase a student’s exposure to and competency with clinical genetics, whether the student will specializes in genetics and genomics specifically or are choosing another specialty. Since genetics is becoming integrated in all fields of medicine, this program should be of wide intertest to students. Students in good academic standing can apply for the DCG Program during the 1st semester of their MS1 year. Students must submit a complete application by January 1st of their MS1 year.

The goal of the DCG program is to provide a foundational overview of medical genetics. This is designed as part of an online curriculum for medical students, and will enable students to present in a Journal Club, participate in peer teaching for genetics topics, and experience genetics in a clinical setting.

Eligibility Criteria:  
All students in good academic standing and with a good record of professionalism are eligible to apply. Students are required to submit a letter of purpose. Students who fail any remediation, or semester, of any required course may not be eligible for the distinction designation and may be asked to withdraw if enrolled. Students who have recorded issues with professionalism, may be asked to withdraw from the program if enrolled.

Acceptance Process and Criteria:  
The application deadline is January 1st of the MS1 year. Acceptance is competitive and determined by a committee consisting of the participating faculty members, the Chair of the Department of Medical Education, the Associate Dean for Medical Education, and the Associate Dean for Student Affairs. Acceptance is to be based primarily on the applicant's general academic record and an essay explaining the applicant's motivation and professional goals as related to the DCG Program.

Capacity:  
The number of students accepted is to be determined each year by the participating faculty members, the Chair of the Department of Medical Education, the Associate Dean for Medical Education, and the Associate Dean for Student Affairs.
Summary of the DCG Program
- MS1/MS2: The course incorporates self-directed learning materials that prepare the student to complete DCG online assignments and presentations, followed by a discussion with the participating faculty and student peers. During the academic year, students are required to research and submit an online assignment and present about the genetics of a disease related to their current Scientific Principles of Medicine (SPM) unit, every 4-5 weeks, starting in January of their MS1 year through the end of MS2 year.
- Summer MS1: Students will research and present about clinical genetic testing techniques, emerging genomic methods and one research article for the Journal Club. They will also participate in molecular pathology and long read sequencing workshops.
- Summer MS1/ MS2/MS3: Identify a genomics-related scholarly project and develop peer teaching activities such as genomics related learning modules and or peer teaching review sessions.
- MS3/ MS4: Present and/or publish genomics-related research project findings/ learning modules.
- MS4: Participate in a clinical genetics elective locally or at an eligible external institution.

MS1, Summer Break and MS2
This course incorporates self-directed learning materials that prepare the student to complete DCG online assignments and presentations, followed by a discussion with the participating faculty and student peers. During the academic year, students are required to research and submit an online assignment and present about the genomics of a disease related to their current Scientific Principles of Medicine (SPM) unit, starting every 4-5 weeks in January of their MS1 year through the end of MS2 year. The number of presentations will range from 3-6 per academic year and will be determined each year by the participating faculty members.

Students are given at least 4 weeks to complete their online assignments and prepare their presentations. During the academic year, online assignments and presentations are due within one week of the student’s summative exam. Students will need to coordinate with the participating faculty to remediate missed or incomplete online assignments and presentations.

In the summer, students will research and present about clinical genetic testing techniques, emerging genomic methods and one research article for Journal Club. They will also participate in two activities in molecular pathology and a long read sequencing workshop.

Participating students are each required to develop a genomics-based scholarly project, which may also serve as the student’s SARP project if desired. Genomic-based projects may entail: research in disparities to genetics access, education research for genomics learning modules, etc. Students are required to develop peer teaching activities for medical students such as learning modules and or peer teaching review sessions. Students may also elect to pursue their scholarly projects at eligible external institutions that offer genomics laboratory and/or other molecular experiences.

Grades will be fail/pass/honors based on the average of all of the online assignments, presentations and Journal Club presentation. Students need to pass all the activities to remain in the program. Students will also complete pre- and post-evaluation forms for the components of the program.

MS3 Year
Students will participate in peer teaching activities. Students will continue to work on their genomics based research project. When the project is completed, the student will submit their genomics scholarship for peer-
reviewed publication or presentation at a regional or national meeting. Poster or platform presentation at a local or national conference is the minimum requirement for the research component of the DCG Program.

**MS4 Year**

Students will be required to enroll in and successfully complete a clinical genetics and genomics elective of at least 2 weeks in length at any eligible institution that offers a similar genetics clinical elective. If not already completed, students will submit their genomics scholarship for peer-reviewed publication or presentation at a regional or national meeting. Acceptance of the journal submission is not required; however, a poster presentation at a local or national conference is the minimum requirement for the scholarship component.

Runail – chat Thanks for a great discussion everyone, I have to log off. Again I would love to provide additional feedback and recommendations about how to improve advisement at PIFSOM especially for 4th year. Please let me know from Priya Harindranathan (internal) to everyone: 6:16 PM

Y2Q has similar elements on student-faculty interactions, student satisfaction. WOuld be interesting to look into it
<table>
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<tr>
<th>Format</th>
<th>Topics</th>
<th>Objectives: Students will be able to</th>
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<tbody>
<tr>
<td>Year1/Year 2 Online assignment</td>
<td>Students will choose and present Genetic conditions based on SPM units.</td>
<td>• Identify primary literature and a short set of learning objectives with regards to the genetic condition</td>
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<td>presentation</td>
<td>• Students will also create learning modules for at least two conditions.</td>
<td>• Using a patient scenario, provide a brief explanation of the disease and its etiology, gene implicated in the pathogenesis and its function, molecular mechanism of the disease, phenotype, inheritance risk, diagnosis, management, new and developing therapies.</td>
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<td>MS1 Summer Molecular diagnostics workshops</td>
<td>• Microsatellite instability, Exome analysis, Molecular pathology Laboratory experience</td>
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<td>Discussion of clinical presentations, treatments, and prognosis for disorders identified through molecular diagnostics</td>
<td>o Review molecular concepts that pertain to inherited cancer syndromes</td>
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<td>o Diagnose Lynch syndrome through interpreting lab data from cases using microsatellite instability</td>
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<td>o Understand the use of next generation sequencing for tumor and normal tissue for cancer evaluations</td>
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<td>o Complete Area9+ NEJM Learning Lab exercise to enhance understanding of inherited cancer syndromes</td>
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<td>o Practice interpreting electrophenograms in conjunction with other genetic tests to describe microsatellite instability to diagnose gastrointestinal cancers, to include Lynch syndrome</td>
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<td>o Practice interpreting NGS results to write a clinical report for trio tumor analysis (ethical considerations will also be discussed)</td>
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<td>Practice working through interpretation</td>
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<td>o Understand cytogenetic and microarray nomenclature to describe chromosome alterations</td>
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<td>o Practice interpreting microarray and/or cytogenetic results in the context of a clinical presentation</td>
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<td></td>
<td>o Practice interpreting NGS results to write a clinical report for trio testing (ethical considerations will also be discussed)</td>
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<td>Classifying molar pregnancies in the context of molecular diagnosis results and interpretation of practice cases</td>
<td>o Practice interpreting electrophenograms to diagnose molar pregnancies</td>
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<td>MS1 Summer Online assignment/presentation</td>
<td>Clinical Genetic Testing</td>
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<td>Recognize tools of molecular genetics used clinically, including karyotype, microarray, gene panels, methylation analysis, trinucleotide repeats and whole exome/genome sequencing</td>
<td>• Describe the methodology and limitations of each technique</td>
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<td>Describe how to counsel a patient about those genetic tests and possible results</td>
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<td>Emerging Genomic Analysis</td>
<td>• Describe genomic essays that are currently used for research and their potential applications in clinical medicine. E.g. polygenic risk scores, RNA sequencing, etc.</td>
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<td>MS1 Summer Next Generation Sequeancing workshop (3 hours)</td>
<td><strong>Long read sequencing</strong></td>
<td>• Describe the methodology of long-read sequencing technology, their advantages and disadvantages as well as their potential application.</td>
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<td>MS1 Summer Online assignment/presentation</td>
<td><strong>Journal Club</strong></td>
<td>• Present a Genomics related research article</td>
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<td>Year 2/Year 3 Peer teaching</td>
<td><strong>Students' choice</strong> (examples: synchronous/asynchronous lecture or skill/Genetics SPM review session)</td>
<td>• Identify primary literature and a short set of learning objectives for the teaching session. • Using patient scenarios, provide a brief explanation of the condition and its etiology, gene implicated in the pathogenesis and its function, molecular mechanism of the disease, phenotype, inheritance risk, diagnosis, and management. • Use team based activities to engage the audience</td>
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<td>Year 1-4 Research project (At TTUHSC or any other eligible institution after approval from the DCG faculty)</td>
<td><strong>Students' choice</strong></td>
<td>• Identify a research mentor • Design or participate in a scholarly project related to genomics • Present and/or publish genomics-related research project finding</td>
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<td>Year 4 Clinical Genetics elective (At TTUHSC or any other eligible institution after approval from the DCG faculty)</td>
<td><strong>Genetic History Physical Exam Family History Genetic counselling Management of genetic conditions</strong></td>
<td>• Recognize and demonstrate how to take a genetic history • Identify Dysmorphology exam clues • Recognize how to ask sensitive family history questions • Practice taking a family history • Demonstrate how to draw and analyze a pedigree • Provide individuals and families with information on the nature, inheritance, and implications of genetic disorders to help them make informed medical and personal decisions. • Demonstrate genetic counseling concepts such as risk assessment and the use of family history and testing to clarify genetic status for family members. • Demonstrate how to disclose physical exam observations and a potential genetic diagnosis to the patient</td>
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**Distinction**

Upon successful completion of all the above outlined elements of the program, with review and verification by the program committee (as described above for the acceptance process), students will receive either a designation of "Distinction in Clinical Genetics Program" on their diplomas or a notation in their official transcript indicating completion of the DCG Program (to be determined based on TTUHSCEP and TTU System academic policies).

**Student resources:**

- Direct to Consumer Genetic testing: https://medlineplus.gov/genetics/understanding/dtcgenetictesting/directtoconsumer/
- To look up specific genetic conditions use:
  https://omim.org/ Online Mendelian Inheritance in Man
  https://www.ncbi.nlm.nih.gov/books/NBK1116/ Gene Reviews

Cost:
Flow cell $1200 per year
Access to HGMD Pro $1900 per year
2021 PLFSOM GQ Results

CEPC Meeting
9/8/2021
Q.10 Rate the quality of your educational experiences in the following clerkships.
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Q.10 Rate the quality of your educational experiences in the following clerkships.

![Graph showing Neurology scores from 2016 to 2022. The graph indicates a decline in scores from 80 in 2016 to 53 in 2022.]

- **National**
- **PU SOM**
Q.10 Rate the quality of your educational experiences in the following clerkships.
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Q.10 Rate the quality of your educational experiences in the following clerkships.
Q.10 Rate the quality of your educational experiences in the following clerkships.
Teaching Effectiveness: Faculty and/or Resident

Internal Medicine: Faculty provided effective teaching during the clerkship

Year 2016-2022:
- 2016: 94.8%
- 2017: 92.1%
- 2018: 95.5%
- 2019: 94.1%
- 2020: 92.9%
- 2021: 87.5%

Internal Medicine: Residents provided effective teaching during the clerkship

Year 2016-2022:
- 2016: 96.2%
- 2017: 92.9%
- 2018: 95.7%
- 2019: 94.3%
- 2020: 80.3%

Q.11 Clerkship Experiences - MID-CLERKSHIP FEEDBACK, OBSERVED PERFORMING EXAM, OBSERVED TAKING HISTORY

IM EXAM OBSERVED

Year 2016-2022:
- 2016: 96.2%
- 2017: 94.8%
- 2018: 95%
- 2020: 96.4%

IM HISTORY OBSERVED

Year 2016-2022:
- 2016: 94.9%
- 2017: 95%
- 2018: 94.3%
- 2020: 96.5%

IM RECEIVED MID-CLERKSHIP FEEDBACK

Year 2016-2022:
- 2016: 98%
- 2017: 98%
- 2018: 98.2%
- 2020: 98.4%
Teaching Effectiveness: Faculty and/or Resident

Neurology: Faculty provided effective teaching during the clerkship

Neurology: Residents provided effective teaching during the clerkship

Q.11 Clerkship Experiences - MID-CLERKSHIP FEEDBACK, OBSERVED PERFORMING EXAM, OBSERVED TAKING HISTORY

NEURO EXAM OBSERVED

NEURO HISTORY OBSERVED

NEURO RECEIVED MID-CLERKSHIP FEEDBACK

Year | % Agree
--- | ---
2016 | 91.3
2017 | 90.9
2018 | 92.1
2019 | 95.2
2020 | 94
2021 | 87
2022 | 84.5

Year | % Agree
--- | ---
2016 | 91.3
2017 | 89.2
2018 | 92.2
2019 | 90.2
2020 | 91.7
2021 | 84.3

National | PUSOM
Teaching Effectiveness: Faculty and/or Resident

Obstetrics-Gynecology/Women’s Health: Faculty provided effective teaching during the clerkship

Year | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 | 2022
---|---|---|---|---|---|---|---
% Faculty Agree | 80.8 | 77.7 | 57.6 | 54.4 | 52.2 | 77.4 | 73.2

Obstetrics-Gynecology/Women’s Health: Residents provided effective teaching during the clerkship

Year | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 | 2022
---|---|---|---|---|---|---|---
% Residents Agree | 85.9 | 75.3 | 73.8 | 52.5 | 47.8 | 76 | 77.5 | 73.2

Q.11 Clerkship Experiences - MID-CLERKSHIP FEEDBACK, OBSERVED PERFORMING EXAM, OBSERVED TAKING HISTORY

OB/GYN EXAM OBSERVED

Year | 2016 | 2018 | 2020 | 2022
---|---|---|---|---
National | 91 | 88.6 | 87 | 89.5
PUSOM | 92.49 | 92.9 | 92.99 | 92.9

OB/GYN HISTORY OBSERVED

Year | 2016 | 2018 | 2020 | 2022
---|---|---|---|---
National | 88.1 | 84.4 | 87.2 | 100
PUSOM | 86.4 | 85.9 | 79.7 | 100

OB/GYN RECEIVED MID-CLERKSHIP FEEDBACK

Year | 2016 | 2018 | 2020 | 2022
---|---|---|---|---
National | 96.2 | 94.9 | 98.9 | 100
PUSOM | 94.9 | 94.2 | 94.8 | 94.4
Teaching Effectiveness: Faculty and/or Resident

Pediatrics: Faculty provided effective teaching during the clerkship

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Pediatrics: Residents provided effective teaching during the clerkship

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<tr>
<td>Score</td>
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<td>90</td>
<td>89.8</td>
<td>87.7</td>
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Q.11 Clerkship Experiences - MID-CLERKSHIP FEEDBACK, OBSERVED PERFORMING EXAM, OBSERVED TAKING HISTORY

PEDS EXAM OBSERVED

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<th>Year</th>
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<tr>
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PEDS HISTORY OBSERVED

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<td>96.2</td>
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PEDS RECEIVED MID-CLERKSHIP FEEDBACK

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<th>Year</th>
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<tr>
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<td>100</td>
<td>96.3</td>
<td>96.8</td>
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Teaching Effectiveness: Faculty and/or Resident

Surgery: Faculty provided effective teaching during the clerkship

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<tr>
<td>% Agree</td>
<td>75.6</td>
<td>73.9</td>
<td>74.7</td>
<td>73.9</td>
<td>73.9</td>
<td>50.7</td>
<td>76.1</td>
</tr>
</tbody>
</table>

Surgery: Residents provided effective teaching during the clerkship

<table>
<thead>
<tr>
<th>Year</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
<th>2020</th>
<th>2021</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Agree</td>
<td>79.5</td>
<td>79.6</td>
<td>87.6</td>
<td>78.7</td>
<td>75.4</td>
<td>80.1</td>
<td>82.2</td>
</tr>
</tbody>
</table>

Q.11 Clerkship Experiences - MID-CLERKSHIP FEEDBACK, OBSERVED PERFORMING EXAM, OBSERVED TAKING HISTORY

SURG EXAM OBSERVED

<table>
<thead>
<tr>
<th>Year</th>
<th>2016</th>
<th>2018</th>
<th>2020</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Agree</td>
<td>83.5</td>
<td>77.5</td>
<td>77.5</td>
<td>82.6</td>
</tr>
</tbody>
</table>

SURG HISTORY OBSERVED

<table>
<thead>
<tr>
<th>Year</th>
<th>2016</th>
<th>2018</th>
<th>2020</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Agree</td>
<td>78.2</td>
<td>74.9</td>
<td>72.5</td>
<td>78.3</td>
</tr>
</tbody>
</table>

SURG RECEIVED MID-CLERKSHIP FEEDBACK

<table>
<thead>
<tr>
<th>Year</th>
<th>2016</th>
<th>2018</th>
<th>2020</th>
<th>2022</th>
</tr>
</thead>
</table>
| % Agree | 98.7 | 96.2 | 97.8 | 98.6 | 100
By the time you have graduated from medical school, will you have completed any away rotations, either in-person or virt..
Respondent ratings on the frequency faculty demonstrate the following professional behavior:

*Actively listened and showed interest in patients*

<table>
<thead>
<tr>
<th>Never</th>
<th>Almost never</th>
<th>Sometimes</th>
<th>Fairly often</th>
<th>Very often</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

National and PUSOM data for the years 2018 to 2020.
Respondent ratings on the frequency faculty demonstrate the following professional behavior:

**Advocating appropriately on behalf of his/her patients**

<table>
<thead>
<tr>
<th>Year</th>
<th>Never</th>
<th>Almost never</th>
<th>Sometimes</th>
<th>Fairly often</th>
<th>Very often</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>0.00</td>
<td>0.10</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>2019</td>
<td>0.00</td>
<td>0.00</td>
<td>0.40</td>
<td>1.10</td>
<td>4.80</td>
<td>5.50</td>
</tr>
<tr>
<td>2020</td>
<td>0.00</td>
<td>0.00</td>
<td>1.10</td>
<td>3.80</td>
<td>5.00</td>
<td>5.00</td>
</tr>
</tbody>
</table>

**National**

- 2018: 0.00
- 2019: 0.00
- 2020: 0.00

**PUSOM**

- 2018: 0.00
- 2019: 0.00
- 2020: 0.00
Respondent ratings on the frequency faculty demonstrate the following professional behavior:

**Being respectful of house staff and other physicians**

<table>
<thead>
<tr>
<th>Type</th>
<th>Never</th>
<th>Almost never</th>
<th>Sometimes</th>
<th>Fairly often</th>
<th>Very often</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>National</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PUSOMA</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

![Graph showing respondent ratings over years for national and PUSOMA data.](image-url)
Respondent ratings on the frequency faculty demonstrate the following professional behavior:

**Being respectful of other health professions**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>1.30</td>
<td>0.200</td>
<td>0.400</td>
<td>0.000</td>
<td>0.000</td>
<td>0.000</td>
<td>0.000</td>
<td>0.000</td>
<td>0.000</td>
<td>0.000</td>
<td>0.000</td>
<td>0.000</td>
<td>0.000</td>
<td>0.000</td>
<td>0.000</td>
</tr>
<tr>
<td>Almost never</td>
<td>2.00</td>
<td>3.60</td>
<td>4.70</td>
<td>4.90</td>
<td>4.20</td>
<td>4.70</td>
<td>1.30</td>
<td>2.00</td>
<td>3.60</td>
<td>4.70</td>
<td>4.90</td>
<td>4.20</td>
<td>1.30</td>
<td>2.00</td>
<td>3.60</td>
</tr>
<tr>
<td>Very often</td>
<td>46.10</td>
<td>42.30</td>
<td>41.60</td>
<td>48.50</td>
<td>42.30</td>
<td>41.60</td>
<td>48.50</td>
<td>42.30</td>
<td>41.60</td>
<td>48.50</td>
<td>42.30</td>
<td>41.60</td>
<td>48.50</td>
<td>42.30</td>
<td>41.60</td>
</tr>
<tr>
<td>Always</td>
<td>37.70</td>
<td>38.20</td>
<td>37.70</td>
<td>38.20</td>
<td>37.70</td>
<td>38.20</td>
<td>37.70</td>
<td>38.20</td>
<td>37.70</td>
<td>38.20</td>
<td>37.70</td>
<td>38.20</td>
<td>37.70</td>
<td>38.20</td>
<td>37.70</td>
</tr>
</tbody>
</table>

**National**

**PU SOM**
Respondent ratings on the frequency faculty demonstrate the following professional behavior:

**Being respectful of other specialties**

<table>
<thead>
<tr>
<th>Year</th>
<th>National</th>
<th>Year</th>
<th>National</th>
<th>Year</th>
<th>National</th>
<th>Year</th>
<th>National</th>
<th>Year</th>
<th>National</th>
<th>Year</th>
<th>National</th>
<th>Year</th>
<th>National</th>
<th>Year</th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>0.20</td>
<td>2018</td>
<td>1.10</td>
<td>2018</td>
<td>11.70</td>
<td>2018</td>
<td>1.30</td>
<td>2018</td>
<td>1.50</td>
<td>2018</td>
<td>0.00</td>
<td>2018</td>
<td>0.00</td>
<td>2018</td>
<td>0.00</td>
</tr>
<tr>
<td></td>
<td>0.10</td>
<td></td>
<td>0.00</td>
<td></td>
<td>1.00</td>
<td></td>
<td>1.30</td>
<td></td>
<td>1.50</td>
<td></td>
<td>0.90</td>
<td></td>
<td>0.10</td>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td>2019</td>
<td>0.00</td>
<td>2019</td>
<td>0.00</td>
<td>2019</td>
<td>0.00</td>
<td>2019</td>
<td>0.00</td>
<td>2019</td>
<td>0.00</td>
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<td>0.00</td>
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<td>0.00</td>
<td>2019</td>
<td>0.00</td>
</tr>
<tr>
<td>2020</td>
<td>0.00</td>
<td>2020</td>
<td>0.00</td>
<td>2020</td>
<td>0.00</td>
<td>2020</td>
<td>0.00</td>
<td>2020</td>
<td>0.00</td>
<td>2020</td>
<td>0.00</td>
<td>2020</td>
<td>0.00</td>
<td>2020</td>
<td>0.00</td>
</tr>
</tbody>
</table>
Respondent ratings on the frequency faculty demonstrate the following professional behavior:

**Being respectful of patients’ dignity and autonomy**

<table>
<thead>
<tr>
<th>Year</th>
<th>Never</th>
<th>Almost never</th>
<th>Sometimes</th>
<th>Fairly often</th>
<th>Very often</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>0.00</td>
<td>0.00</td>
<td>1.30</td>
<td>2.20</td>
<td>2.00</td>
<td>2.60</td>
</tr>
<tr>
<td>2019</td>
<td>0.30</td>
<td>0.00</td>
<td>4.10</td>
<td>5.10</td>
<td>3.40</td>
<td>3.00</td>
</tr>
<tr>
<td>2020</td>
<td>0.00</td>
<td>0.30</td>
<td>2.60</td>
<td>3.40</td>
<td>3.80</td>
<td>9.10</td>
</tr>
</tbody>
</table>

- **National**
- **PUSOM**
Respondent ratings on the frequency faculty demonstrate the following professional behavior:

*Providing direction and constructive feedback*

<table>
<thead>
<tr>
<th>Year</th>
<th>Never</th>
<th>Almost never</th>
<th>Sometimes</th>
<th>Fairly often</th>
<th>Very often</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>0.20</td>
<td>1.10</td>
<td>1.90</td>
<td>1.50</td>
<td>13.90</td>
<td>3.90</td>
</tr>
<tr>
<td>2019</td>
<td>1.30</td>
<td>0.00</td>
<td>4.50</td>
<td>10.20</td>
<td>25.40</td>
<td>15.90</td>
</tr>
<tr>
<td>2020</td>
<td>0.20</td>
<td>1.70</td>
<td>1.10</td>
<td>9.10</td>
<td>24.80</td>
<td>18.20</td>
</tr>
</tbody>
</table>
Respondent ratings on the frequency faculty demonstrate the following professional behavior:

*Resolving conflicts in ways that respect the dignity of all involved*
Respondent ratings on the frequency faculty demonstrate the following professional behavior:

Respecting diversity
Respondent ratings on the frequency faculty demonstrate the following professional behavior:

**Respecting patient confidentiality**

<table>
<thead>
<tr>
<th>Year</th>
<th>Never</th>
<th>Almost never</th>
<th>Sometimes</th>
<th>Fairly often</th>
<th>Very often</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>0.00</td>
<td>0.10</td>
<td>0.00</td>
<td>0.10</td>
<td>1.10</td>
<td>1.90</td>
</tr>
<tr>
<td>2019</td>
<td>0.00</td>
<td>0.00</td>
<td>0.10</td>
<td>1.10</td>
<td>2.50</td>
<td>4.50</td>
</tr>
<tr>
<td>2020</td>
<td>0.00</td>
<td>0.00</td>
<td>1.40</td>
<td>1.40</td>
<td>1.90</td>
<td>6.30</td>
</tr>
<tr>
<td>2018</td>
<td>0.00</td>
<td>0.10</td>
<td>0.00</td>
<td>0.10</td>
<td>1.10</td>
<td>1.90</td>
</tr>
<tr>
<td>2019</td>
<td>0.00</td>
<td>0.00</td>
<td>0.10</td>
<td>1.10</td>
<td>2.50</td>
<td>4.50</td>
</tr>
<tr>
<td>2020</td>
<td>0.00</td>
<td>0.00</td>
<td>1.40</td>
<td>1.40</td>
<td>1.90</td>
<td>6.30</td>
</tr>
<tr>
<td>2018</td>
<td>0.00</td>
<td>0.10</td>
<td>0.00</td>
<td>0.10</td>
<td>1.10</td>
<td>1.90</td>
</tr>
<tr>
<td>2019</td>
<td>0.00</td>
<td>0.00</td>
<td>0.10</td>
<td>1.10</td>
<td>2.50</td>
<td>4.50</td>
</tr>
<tr>
<td>2020</td>
<td>0.00</td>
<td>0.00</td>
<td>1.40</td>
<td>1.40</td>
<td>1.90</td>
<td>6.30</td>
</tr>
</tbody>
</table>

**National**

**PUSOM**

- National: 62.00, 56.40, 52.50, 54.70, 46.20
- PUSOM: 61.80, 60.60, 54.70, 52.50, 46.20
Respondent ratings on the frequency faculty demonstrate the following professional behavior:

**Showing empathy and compassion**

<table>
<thead>
<tr>
<th>Year</th>
<th>Never</th>
<th>Almost never</th>
<th>Sometimes</th>
<th>Fairly often</th>
<th>Very often</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2020</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: The data for each year shows the percentage of respondents rating faculty behavior as 'Never', 'Almost never', 'Sometimes', 'Fairly often', 'Very often', and 'Always' respectively for each year from 2018 to 2020.
Respondent ratings on the frequency faculty demonstrate the following professional behavior:

**Taking time and effort to explain information to patients**

<table>
<thead>
<tr>
<th>Year</th>
<th>Never</th>
<th>Almost never</th>
<th>Sometimes</th>
<th>Fairly often</th>
<th>Very often</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>0.00</td>
<td>0.00</td>
<td>0.80</td>
<td>7.30</td>
<td>13.00</td>
<td>17.30</td>
</tr>
<tr>
<td>2019</td>
<td>0.10</td>
<td>0.00</td>
<td>0.80</td>
<td>7.60</td>
<td>13.00</td>
<td>19.30</td>
</tr>
<tr>
<td>2020</td>
<td>0.00</td>
<td>0.00</td>
<td>0.80</td>
<td>7.60</td>
<td>11.40</td>
<td>17.30</td>
</tr>
</tbody>
</table>

*National* line

*PU SOM* line
Respondent ratings on the frequency faculty demonstrate the following professional behavior:

*Using professional language/avoiding derogatory language*

<table>
<thead>
<tr>
<th>Year</th>
<th>Never</th>
<th>Almost never</th>
<th>Sometimes</th>
<th>Fairly often</th>
<th>Very often</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>1.30</td>
<td>1.10</td>
<td>1.50</td>
<td>0.00</td>
<td>2.50</td>
<td>0.00</td>
</tr>
<tr>
<td>2019</td>
<td>1.00</td>
<td>2.20</td>
<td>0.00</td>
<td>1.20</td>
<td>3.80</td>
<td>0.70</td>
</tr>
<tr>
<td>2020</td>
<td>3.90</td>
<td>5.10</td>
<td>4.50</td>
<td>3.80</td>
<td>11.50</td>
<td>1.10</td>
</tr>
</tbody>
</table>

The diagram shows the percentage of respondents rating the behavior on a scale from 0 to 60.
Nurturing Development

My medical school has done a good job of fostering and nurturing my development as a future physician

Year | National | PUSOM
---|---|---
2016 | 94.7 | 91.7
2017 | 91.8 | 91.1
2018 | 86.5 | 91.8
2019 | 91.9 | 91.2
2020 | 65.4 |

My medical school has done a good job of fostering and nurturing my development as a person

Year | National | PUSOM
---|---|---
2016 | 82.7 | 80.6
2017 | 73.9 | 80.3
2018 | 72.1 | 72.8
2019 | 72.872.8 | 37.3
2020 | 71.1 |
Satisfaction Services *Wellness*

Wellness: Student programs/activities that promote effective stress management, a balanced lifestyle and overall well being*

Year

2016 79.1
2017 72.1
2018 70.8
2019 68.8
2020 69.5
2021 66.2
2022 41.7