CEPC MEETING AGENDA
01:00 PM - 02:30 PM
03/10/2022

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

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

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

STUDENT REPRESENTATIVES:
Rowan Sankar MS1 (Voting); Nick Malize MS1 (Ex Officio); Whitney Shaffer MS2 (Voting); Rohan Rereddy MS2 (Ex Officio); Miraal Dharamsi MS3 (Voting); Daniel Tran MS3 (Ex Officio); Karishma Palvadi MS4 (Voting); Runail Ratnani MS4 (Ex Officio)

INVITED/GUESTS:
Richard Brower, MD, FAAN; Christiane Herber-Valdez, PhD; Martin Charmaine, MD; Thwe Htay, MD; Ellen F. Dudrey, MD; Geoffrey D. Guttmann, PhD; Heather A. Balsiger, MS; Johnson Athulya; Melissa Huddleston

APPROVAL OF MINUTES
Minutes will be attached.

ANNOUNCEMENTS

CEPC 03/10/2022
<table>
<thead>
<tr>
<th>Presenter(s): Dr. Alexandraki</th>
<th>The new CEPC member welcome</th>
</tr>
</thead>
</table>

**ITEMS FROM STUDENT REPRESENTATIVES**

Presenter(s): Students

**ITEM I: PRE-CLERKSHIP PHASE REVIEW – MSK I&III TEAM II**

Presenter(s): MSK I&III Review team presentation

**ITEM II: CLERKSHIP UPDATES & YEAR 3 CLERKSHIP BLOCK AND COMPARABILITY REPORT**

Presenter(s): Dr. Francis

- Updated clerkship directors’ list
- Year 3 Clerkship Block and Comparability report

**OPEN FORUM**

**ADJOURN**
MEMBERS IN ATTENDANCE:
Irene Alexandraki, Jessica Chacon, Houriya Ayoubieh, Munmun Chattopadhyay, Maureen Francis, Nick Malize, Niti Manglik, Tanis Hogg, Tran Daniel, Rowan Sankar, Lisa Beinhoff, Julio Batiz

MEMBERS NOT IN ATTENDANCE:
Blake Busey, Brad Fuhrman, Colby Genrich, Fatima Gutierrez, Linda S. Ellis, Osvaldo Padilla, Patricia Ortiz, Palvadi Karishma, Whitney Shaffer, Runail Ratnani, Miraal Dharmishi

PRESENTERS/GUESTS IN ATTENDANCE:
Richard Brower, Ellen F. Dudrey, Thwe Htay, Johnson Athulya, Melissa Huddleston, Maria Cotera, Priya Harindranathan

INVITED/GUESTS NOT IN ATTENDANCE:
Christiane Herber-Valdez, Martin Charmaine, Geoffrey D. Guttmann, Heather A. Balsiger

REVIEW AND APPROVAL OF MINUTES
A quorum was met for items below. Members voted asynchronously.

- Meeting minutes
- Pre-clerkship phase review - MSK I&III team review
- Updated clerkship directors’ list
- Year 3 clerkship block comparability summary report

ANNOUNCEMENTS
Presenter: Dr. Alexandraki
- Welcomed the newest CEPC member, Dr. Chattopadhyay.

*Curriculum Vitae is attached.
ITEMS FROM STUDENT REPRESENTATIVES
Presenter(s): Students
Rowan Sankar and Nick Malize (MS1)
Daniel Tran (MS3)
  o No issues to report
  o No issues to report.

ITEM I: PRE-CLERKSHIP PHASE REVIEW – MSK I&III TEAM II
Presenter(s): Dr. Dudrey
MSK I&III Review team: Dr. Dudrey; Dr. Guttmann, PhD; Balsiger; Students: Johnson Athulya and Melissa Huddleston
*Please see attached report.
  o Addressed two main course strengths: an excellent approach on how to teach students to become physicians and prompt feedback from faculty.

An overview of selected LCME elements relevant to curriculum assessment:

Dr. Dudrey (6.1)
Student: Melissa Huddleston (6.3)
  o Program and Learning Objectives (6.1) – MSK I&III met the program and learning objectives.
  o Self-Directed and Life-Long Learning (6.3) – Pointed out that students liked the amount of time given towards scheduled versus self-directed time. She explained that quizzes associated with each medical skill session were administered and students had an opportunity to get feedback and ask questions. Also, CEREGO quiz sets were offered to students to conduct self quizzes. She suggested that better promotion of CEREGO quizzes would benefit many students who were not aware of them. She added that some degree of individualized feedback on the SOAP notes would also be beneficial for students.

Dr. Dudrey (6.7)&(7.1)
  o Academic Environments (6.7) – Stated that there were three to four interprofessional healthcare educational sessions. These sessions involved interaction with students from School of Nursing (i.e., GGHSON), dental school (i.e., WLHSDM), UTEP Schools of Pharmacy and Physical Therapy, and they were very well received by the students.
  o Inclusion of Biomedical, Behavioral, Social Sciences (7.1) – The only gap identified by the team was the lack of standardized patient (SP) encounters focused on this area of medical education. Team suggested that SP encounters with focus on this area could be increased.

Student: Athulya Johnson (7.2); (7.3)&(7.4)
  o Organ Systems/Life Cycle/Prevention/Symptoms/Signs/Differential Diagnosis, Treatment Planning (7.2) – Student said that the following gaps were identified: course did not adequately address life
extremes such as geriatric, pediatric populations, pregnant, and newborns. The team recommended that more pediatric, geriatric, and pregnant SP cases could be added; they would be helpful especially for the transition from the pre-clerkship to clerkship phase. Differential Diagnoses were generally limited to the chief complaint of the week within the organ system (e.g., discussed during that week). The team recommended development of cases with multiple differential diagnoses covering multiple systems. Another suggestion was to add cases in the end-of-year or end-of-semester OSCE that cover multiple organ systems.

- **Scientific Method/Research (7.3)** – This topic was addressed in the Society, Community and the Individual course, and Scholarly Activity Research Project.
- **Critical Judgment/Problem-Solving Skills (7.4)** – The team identified a gap: problem-solving skills were limited to encounters within the organ system discussed during that week. They recommended that end-of-year or end-of-semester OSCE cases that cover multiple organ systems could be added to enhance student critical judgement and problem-solving skills.
- **Societal Problems (7.5)** – Element was covered in the course. Only one recommendation: to consider whether or not a patient could afford the ordered tests or medications that were given. It should be included in the plan of treatment.
- **Cultural Competence and Health Care Disparities (7.6)**; there was no opportunity to learn how to use interpreters or to practice an encounter in Spanish or some other language. Dr. Dudrey commented that this would be valuable in third year. SP cases could be added to cover these content areas.
- **Medical Ethics (7.7)** - She suggested that a session where the patient refuses the intended therapy, so students could learn how to adjust plans or refer elsewhere, should be included.
- **Communication Skills (7.8)** – N/A
- **Use of PGOs (8.2)** – No comments.
- **Assessment System (9.4)** – The assessment system was clearly described as was the process for remediation.
- **Narrative Assessment (9.5)** – No comments.
- **Formative Assessment and Feedback (9.7)** – The review team recommended consistent provision of feedback to each individual student for each physical exam skill that is assessed so that students can be told what they missed or did well.
After the conclusion of the course review report, Dr. Htay, Director of the Medical Skills I & III Course commented that she is aware of the need for more pediatric and geriatric cases. Explained that the curriculum is packed with activities, and finding an available time to add these cases is has been difficult. Also, there is a challenge in finding pediatric standardized patients. She noted that virtual simulations for pediatric and geriatric cases could be a substitute. In addition, per students’ requests, she is looking to include more preventive care issues in the weekly cases. Additionally, faculty will work on providing more feedback to students within the current resources. As far as more comprehensive cases, she stated that there might be some time at the end of second year for this to be offered to students. She concluded that she will share this valuable feedback with the medical skills group so they could create a plan for improvement.

Dr. Brower commented that Dr. Crawford’s team at TECHS has growing ability to develop virtual reality-based simulations/encounters.

Dr. Htay stated that the virtual reality simulation project is indeed planned for the summer 2022. She explained that many cases are complex, and she is planning to modify them to meet the level of the first and second year students.

**ITEM II: CLERKSHIP UPDATES & YEAR 3 CLERKSHIP BLOCK AND COMPARABILITY REPORT**

**Presenter(s): Dr. Francis**

**Updated clerkship directors’ list**

- New position of assistant clerkship director for Emergency Medicine: Kelley Stanko, MD will start in this new role. Dr. Francis shared her Biosketch with the committee.
  *Curriculum Vitae is attached.
- Dr. Francis explained that emergency medicine will be moving to the third year as part of the longitudinal integrated clerkship model in next academic (i.e., AY 2022-2023).
- OB/GYN assistant clerkship director: Dr. Stephanie Mishaw will replace Naima Khamsi. Dr. Francis shared her Biosketch with the committee.
  *Curriculum Vitae is attached.
Year 3 Clerkship Block and Comparability report

*Please see attached AY 2021-2022 Block 1 Comparability Summary Report

- Comparability report addressed the following LCME elements (6.2; 8.4; 8.5; 8.6; 8.7; 8.8; 9.5; 9.6; 9.7; 9.8).

- Review was conducted at the end of each block and at the end of academic year in aggregate.
  - Data was collected on the following items: Op log entries – The average number of patients was above the required number (from 40 to 70 patients for each clerkship). Compared with pre-pandemic numbers, these encounters were much higher. 100% of students met their op log requirements by seeing students or through alternative activities.
  - Top 10 diagnoses – There were no significant site specific differences in patient encounters.
  - Duty hours – Dr. Francis explained that this was the first real implementation of the LIC model in block 1. There were no duty hours violations found in the review of the schedules.
  - Mid-clerkship completion for Year 3 Clerkships - 100% compliance across all clerkships.
  - NBME scores – Average score was 74, and average nationally was 74.9.
  - Final grade completion for required MS3 courses 100% done in timely manner for the past 2 years based on PLFSOM policy. You may found out more at https://elpaso.ttuhsc.edu/som/ome/CEPC/_documents/Timely_Grade_Release.pdf
  - Student satisfaction data – overall numbers are close to 5 or above on a scale from 1 to 6.
  - Narrative feedback review - overall meets expectations in all third year clerkships.
  - Clerkships will continue to work on framing expectations for honors and pass, and on for each competency within their specialty, department, faculty and residents.

ADJOURN
Meeting adjourned at 2:30pm.
Munmun Chattopadhyay, Ph.D.
Associate Professor, Chair IACUC
Center of Emphasis in Diabetes and Metabolism
Paul L. Foster School of Medicine
Texas Tech University Health Sciences Center
El Paso (TTUHSC El Paso)
5001 El Paso Drive, El Paso, Texas 79905

Office: MSBI Room 4111
Lab: MSBI, Room 4210
Ph: (915) 215 4170 (O)
Fax: (915) 215 8875
Email: munmun.chattopadhyay@ttuhsc.edu

Education and Training

                    University of Calcutta
                    Calcutta, India

                      Jiwaji University
                      Gwalior, India

Sept.1993- Aug.1995  Junior Research Fellow
                      University Grants Commission

Sept.1995- Mar.1998  Senior Research Fellow
                      University Grants Commission

May 1998  Ph.D. (Neurosciences)
          Jiwaji University
          Gwalior, India

Academic Appointments

Apr.1998- Nov.1999  Post-doctoral Research Fellow
                    Molecular Genetics
                    National Institute of Immunology
                    Delhi, India

                    Department of Neurology
                    University of Pittsburgh
                    Pittsburgh, Pennsylvania

Jul. 2004 – Aug. 2010  Research Investigator
                        Department of Neurology
                        University of Michigan
                        Ann Arbor, Michigan

Sept. 2010 – Mar. 2014  Research Assistant Professor
                        Department of Neurology
                        University of Michigan
                        Ann Arbor, Michigan
Apr. 2014 – Aug. 2021  Assistant Professor  
Center of Emphasis in Diabetes and Metabolism  
Paul L. Foster School of Medicine  
Texas Tech University Health Sciences Center  
El Paso, El Paso, Texas.

Sept. 2014 – Current  Assistant Professor (Member)  
Graduate School of Biomedical Sciences  
Texas Tech University Health Sciences Center El Paso, El Paso, Texas

Sept. 2017 – Current  Assistant Professor (Adjunct)  
Graduate School, Biomedical Engineering  
The University of Texas at El Paso (UTEP)  
El Paso, Texas

Sept. 2020 – Current  Chair  
Institutional Animal Care and Use Committee  
Texas Tech University Health Sciences Center  
El Paso, El Paso, Texas

Sept. 2021 – Current  Associate Professor  
Center of Emphasis in Diabetes and Metabolism  
Paul L. Foster School of Medicine  
Texas Tech University Health Sciences Center  
El Paso, El Paso, Texas.

**Research Interests**

3. Epigenetic mechanisms, Biomedical Sciences.
4. Tissue engineered disease models, space biology and health.

**Teaching Interests**

1. Neurobiology
2. Cell Biology
3. Biochemistry
4. Immunology
5. Medical physiology, Space health
6. Epigenetics, nutrition and human diseases

**Current Research Support**

1. **TTUHSC El Paso / UTEP Joint Seed Grant, PI: Chattopadhyay/Joddar** 06/01/21-05/31/22
   Application of a tissue-engineered gastric patch for regeneration of interstitial cells of Cajal (ICC) in a gastroparetic mouse model.

2. **NSF/CASIS, PI: Chattopadhyay** 09/01/19-08/31/23
   Collaborative Proposal: ISS: Studying the Effects of Microgravity on 3D Cardiac Organoid Cultures; 15% effort.
3. TTUHSC El Paso Seed Scholarly Activity Research Project (SARP) Grant; PI: Chattopadhyay 06/01/18-07/31/21
   Role of histone modifications in hyperglycemic dorsal root ganglia neurons and NRK52E kidney cells.

4. TTUHSC El Paso Seed SARP Grant; PI: Chattopadhyay 06/01/19-07/31/22
   CXCR4 Receptor Signaling and Histone Modifications in Hyperglycemic Cardiomyocyte and Sensory Neuronal Cell Lines.

5. TTUHSC El Paso Seed SARP Grant; PI: Chattopadhyay 06/01/20-07/31/23
   Hyperglycemia mediated changes in cardiomyocyte function.

Completed Research Support

1. Edward N. and Margaret G. Marsh Foundation; PI: Chattopadhyay 12/01/19-11/30/21
   Gastroparesis, a Mysterious Stomach Disorder and its Prevalence in Women; 15% effort.

2. TTUHSC El Paso Seed SARP Grant; PI: Chattopadhyay 06/01/17-07/31/20
   Role of histone deacetylases in the brain in diabetic painful neuropathy.

3. TTUHSC El Paso Seed SARP Grant; PI: Chattopadhyay 6/01/16-07/31/19
   Role of Inflammatory Mediators in Diabetic complications.

4. Lizanell and Colbert Coldwell Foundation Grant; PI: Chattopadhyay 3/01/17-07/31/18
   Epigenetic changes in the gut of diabetic gastroparesis patients; 10% effort;
   Our current research is focused on determining the effect of inflammation and changes in histone deacetylases in diabetic patients with gastroparesis and will focus on the identification of the specific HDAC isoforms in the development of DG and its manipulation by using specific HDAC inhibitor(s) as a therapeutic strategy.

5. TTUHSC El Paso Seed Grant, PI: Chattopadhyay 9/01/17-08/31/18
   Role of histone deacetylases in nerve injury and pain: Grant # 183329-533312-20
   The studies proposed in this application are to understand the epigenetic regulation of class I histone deacetylases in neuronal proliferation in nerve injury model to identify better therapies for this debilitating conditions.

6. TTUHSC El Paso Mini Seed Grant PI: Chattopadhyay 3/01/17-08/31/17
   A mesenchymal stem cell based tissue engineered patch to restore normal gastric histology;
   This study is proposed to develop a hydrogel based scaffold (tissue engineered; TE patch) for cultivating mouse mesenchymal stem cells in vitro. We will graft the TE patch onto the diabetic gastroparetic mouse stomach tissue explants in order to check the survival, adhesion, proliferation rates of stem cells and restoration of enteric neurons and interstitial cells of Cajal (ICC) in the grafted TE patch with respect to host tissue in vitro.

   Paper published from the grant:

7. Periphagen Inc; (PI: Chattopadhyay) 12.1.14-8.31.17
   Direct injection of HSV vector in DRG of neuroma animals. Grant PGN-14-1880: 10% effort.
The current study will explore a new way to deliver the HSV vector in to the DRG or sciatic nerve of rats by 3 different ways to increase the efficiency of the transgene expression and explore the best effective way to deliver HSV vector which will mimic the delivery to patients.

8. American Diabetes Association: Basic Science Award. (PI: Chattopadhyay) 7.1.12 –6.30.16

The role of neuroinflammation in the pathogenesis of pain in diabetic neuropathy.
Grant #7-12-BS-021; 20% effort.

This grant is proposed to define the role of inflammatory cytokines in the development of Type 2 model of diabetes and whether HSV vector-mediated expression of anti-inflammatory cytokines would be capable of treating pain or prevent the development of pain in diabetes. These studies will provide a novel treatment strategy for what is now a relatively treatment resistant condition.

Papers published from the grant:


9. TTUHSC El Paso Seed Grant PI: Chattopadhyay  5/01/15-04/30/16

Identification of inflammatory markers in kidney of diabetic rats;

Diabetic nephropathy is a common debilitating complication of diabetes that leads to severe morbidity, physical disability and poor quality of life of the patients. In this study we will determine whether interruption of inflammation process would ameliorate the progression of nephropathy which would lead to a novel therapy for this difficult-to-treat complication of diabetes.


10. Michigan Diabetes Research and Training Center PI: Chattopadhyay (12/1/09-12/11)

Role of neuroinflammation in painful neuropathy in Type 2 diabetes. Grant # R000617

This pilot feasibility grant is proposed to define the role of inflammatory cytokines in the development of pain in Type 2 model of diabetes and whether HSV vector-mediated expression of anti-inflammatory cytokines would be capable of treating pain or prevent the development of pain in Type 2 model of diabetes. These studies will provide a novel treatment strategy for what is now a relatively treatment resistant condition.


11. Diabetes Action Research and Education Foundation (PI: Chattopadhyay) (1/1/06 – 12/31/08)

Erythropoietin Gene Transfer for Diabetic Neuropathy; Grant # 05-4921

This grant proposed to test whether HSV-mediated transfer of the erythropoietin (EPO) transgene
to the DRG would prevent the progression of, or reverse diabetic neuropathy, and to understand the molecular mechanisms of the EPO in the hyperglycemic sensory neurons.


**Honors and Awards**
Best Student Organizer; National Conference on Gerontology and Symposium on Molecular Markers of Aging, Jiwaji University, Gwalior, India, April 7-9, 1997.
Best Graduate Student Presenter, Symposium on Frontiers of Neuroscience, Jiwaji University, Gwalior, India, Dec. 8, 1997.
Junior Research Fellowship, University Grants Commission, India; 09/1993-08/1995
Senior Research Fellowship, University Grants Commission, India; 09/1995-04/1998
Peripheral Nerve Society Fellow for the year 2007.
Peripheral Nerve Society Fellow for the year 2009.
Peripheral Nerve Society Fellow for the year 2011.
Faculty Service Award, Student Government Association, TTUHSC El Paso for the year 2020.

**Memberships in Professional Societies**
American Society for Gene Therapy (2001-2012)
American Diabetes Association (Since 2010)
Society for Neuroscience (Since 2000)
European Society for Gene Therapy (2003)
Gerontology Society of India (Life member since 1994)
Peripheral Nerve Society (Since 2005)
Neuropathy Association (Since 2005)
Endocrine Society (Since 2014)

**Editorial Board Member**
Topics Board Editor: Bioengineering, MDPI (Basel, Switzerland) 2020 – Present.

**Peer-review Service**
Ad Hoc reviewer: Journal of Pain 2008
Ad Hoc reviewer: Functional and Integrative Genomics 2008
Ad Hoc reviewer: Neurotoxicity Research: Since 2008
Ad Hoc reviewer: Expert Opinion on Biological Therapy 2009
Ad Hoc reviewer: Current Diabetes Reviews 2010
Ad Hoc reviewer: Neural Regeneration Research, Virus Adaptation and Treatment 2011
Ad Hoc reviewer: Neurological Research 2010
Media Coverage


https://www.sciencenewsdigital.org/sciencenews/february_4_2017?search_term=chattopadhyay&doc_id=-1&search_term=chattopadhyay&pg=8#pg8


10. Being one of the four faculty members in the Paul L. Foster School of Medicine to be awarded a total of $29,000 in institutional funds to jump-start innovative research ideas during the 2017-18 academic year. http://eptechview.ttuhsc.edu/ttuhsc-el-paso/ttuhsc-el-paso-faculty-awarded-seed-grants/

11. Being recognized as a national expert in neuropathy and pain management. Following a recent publication of a paper in the field, I was contacted by Science News to comment on the significance of the research findings. http://eptechview.ttuhsc.edu/ttuhsc-el-paso/diabetes-research-recognized-nationally/

12. The fourth annual interactive conference which introduced El Paso area sixth and seventh grade students a hands on training to health sciences career. http://eptechview.ttuhsc.edu/uncategorized/adventures-for-your-future-event/

13. Three TTUHSC PLFSOM students and one research technician from my lab walked away at Faces of Diabetes Conference with cash awards for their research on diabetes. http://eptechview.ttuhsc.edu/ttuhsc-el-paso/ttuhsc-el-paso-students-research-tech-receive-awards-for-diabetes-research/

14. The three-year project, funded by the National Science Foundation (NSF) and the space station’s U.S. National Laboratory, to TTUHSC El Paso faculty scientist Munmun Chattopadhyay, Ph.D., and UTEP biomedical engineer Binata Jodddar, Ph.D. is to create tiny (less than 1 millimeter thick) heart-tissue structures, known as cardiac organoids, using human stem cells and 3D bioprinting technology to study microgravity effect in the international space station. A number of international media covered this work including Mexico, Canada, Germany, India and Italy. The links for the publications are given below.

http://eptechview.ttuhsc.edu/ttuhsc-el-paso/ttuhsc-el-paso-and-utep-team-up-for-international-space-station-research/


https://www.eldiariodechihuahua.mx/el-paso/texas-tech-y-utep-hacen-equipo-20200122-1618148.html

https://www.montrealtimes.news/el-paso-scientists-to-deliver-3d-bioprinted-miniature-hearts-to-
Teaching

Previous teaching experience: From September 1994-April 1998 to senior year Graduate students at School of Studies in Zoology, Jiwaji University, Gwalior, India. I taught introductory cellular biology, comparative vertebrate anatomy and introductory neurobiology for three semesters every year. Since joining the Department of Neurology at the University of Michigan in the research track in July 2004, my teaching responsibilities involved training undergraduate and graduate students to perform research independently. I spend 12-15 hours every week to teach and train students to perform research.


Course number: GSBS 5224, Course Name: Cellular and Molecular Neuroscience (Pain and Degeneration-regeneration).

Course number: GBSE 5301, Course Name: Biochemistry (Lipid structure & function and Lipid Biosynthesis)

Course number: GBSE 5302, Course Name: Cell Biology (Biomembrane Structure & Function and Integrating Cells into Tissue/Extracellular Matrix).

Course number: GSBS 5223, Course Name: Nutrition, Epigenetics and Human diseases (Course Director).

Course number: GSBS 5201, Course Name: Lab methods in Biosciences (Epigenetic methodologies).

Course number: GSBS 5222, Course Name: Advanced Human Genetics (Genetics of Diabetes).

Course number: GSBS 5104, Course Name: Seminars in Biomedical Sciences (Diabetic neuropathy).

Course number: GSBS 5225, Course Name: Immunology (Inflammatory diseases and allergies).

Course number: GSBS 5227, Course Name: Medical Physiology (Metabolism).

Undergraduate and Graduate student research training (2004-present)

I have trained 33 undergraduate students (2004-2020) and graduate student for lab rotations from graduate program, University of Michigan (U of M) (2006 - 2009), TTUHSC GSBS (2014-2020) as well as medical students TTUHSC PLFSOM (2015-2020). Under my guidance, these students learnt how to compile results, analyze and present data. I have trained them to perform animal behavior experiments. All the students were also trained in tissue culture techniques and procedures.
<table>
<thead>
<tr>
<th>Name</th>
<th>Years in the lab</th>
<th>Current Position</th>
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<tbody>
<tr>
<td>1. Calandra Jones</td>
<td>(09/20-Present)</td>
<td>Graduate Student, TTUHSC, El Paso, TX</td>
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<tr>
<td>2. Rupsikha Bora</td>
<td>(09/20-Present)</td>
<td>Graduate Student, TTUHSC, El Paso, TX</td>
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<tr>
<td>3. Jesus Gurora</td>
<td>(08/20-05/21)</td>
<td>Research Associate, TTUHSC, El Paso, TX</td>
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<td>4. Nmesoma Nwokoye</td>
<td>(03/20-05/21)</td>
<td>Graduate Student, TTUHSC, El Paso, TX</td>
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<tr>
<td>5. Narah Alcoreza</td>
<td>(09/18-05/20)</td>
<td>Research Associate, TTUHSC, El Paso, TX</td>
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<tr>
<td>6. Diana Sandoval</td>
<td>(08/19-05/20)</td>
<td>Research Associate, Dallas, TX.</td>
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<tr>
<td>7. Deborah Aldrete</td>
<td>(11/19-05/20)</td>
<td>Graduate Student, TTUHSC, El Paso, TX</td>
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<tr>
<td>8. Natalie Satterfield</td>
<td>(03/19-11/19)</td>
<td>Medical Student, TTUHSC, El Paso, TX</td>
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<tr>
<td>9. Hiral Waghela</td>
<td>(03/19-11/19)</td>
<td>Medical Student, TTUHSC, El Paso, TX</td>
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<tr>
<td>10. Robert Martinez</td>
<td>(05/18-05/19)</td>
<td>Graduate Student, TTUHSC, El Paso, TX</td>
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<tr>
<td>11. Jasmine Cazares</td>
<td>(08/18-05/19)</td>
<td>Graduate Student, TTUHSC, El Paso, TX</td>
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<tr>
<td>12. Bryan Koppa</td>
<td>(03/18-11/18)</td>
<td>Medical Student, TTUHSC, El Paso, TX</td>
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<tr>
<td>13. Carly Levin</td>
<td>(03/18-11/18)</td>
<td>Medical Student, TTUHSC, El Paso, TX</td>
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<tr>
<td>14. Mona Heydarian</td>
<td>(03/17-05/18)</td>
<td>Academic Tutor, EPCC, El Paso, Texas</td>
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<td>15. Elizabeth McCain</td>
<td>(03/17-11/17)</td>
<td>Medical Student, TTUHSC, El Paso, TX</td>
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<td>16. Huma Butta</td>
<td>(03/17-11/17)</td>
<td>Medical Student, TTUHSC, El Paso, TX</td>
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<tr>
<td>17. Josue Enriquez</td>
<td>(03/16-05/17)</td>
<td>Ph.D. Student, TTUHSC, Lubbock, TX</td>
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<tr>
<td>18. Pompeyo Quesada</td>
<td>(03/16-11/19)</td>
<td>Medical Student, TTUHSC, El Paso, TX</td>
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<tr>
<td>19. Roberto Solis</td>
<td>(03/16-11/17)</td>
<td>PGY-1, Otolaryngology, UC Davis, CA.</td>
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<tr>
<td>20. Mona Heydarian</td>
<td>(06/16-08/16)</td>
<td>Academic Tutor, EPCC, El Paso, Texas</td>
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<tr>
<td>21. Swetak Pradhan</td>
<td>(06/15-12/15)</td>
<td>Medical Tutor, Baylor College of Medicine, TX.</td>
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<tr>
<td>22. Amanda Yanez</td>
<td>(08/14-05/15)</td>
<td>Technical staff, VA Hospital, El Paso, TX.</td>
</tr>
<tr>
<td>23. Aviance Ramsey</td>
<td>(06/14-08/14)</td>
<td>Graduate Student, UTEP, Texas.</td>
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<tr>
<td>24. HaeJee Yoon</td>
<td>(08/12-03/14)</td>
<td>Research Assistant, U of M, Michigan.</td>
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<tr>
<td>25. Danielle Isham</td>
<td>(08/12-03/14)</td>
<td>Research Scholar, Michigan Nanotechnology Institute, U of M, Michigan.</td>
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<td>26. Rayen Patnaik</td>
<td>(08/12-12/13)</td>
<td>Business Associate, Michigan.</td>
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<tr>
<td>27. Mona Fayad</td>
<td>(03/11-03/14)</td>
<td>PGY1, Medicine, Icahn School of Medicine, NY.</td>
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<td>29. Deborah Blumenthal</td>
<td>(05/08-08/10)</td>
<td>Business Analyst, Washington.</td>
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<td>30. Blair Sutton</td>
<td>(08/08-05/09)</td>
<td>Field Medical Affairs Manager, Depomed, Inc.</td>
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<tr>
<td>31. Priyanka Jain</td>
<td>(08/08-06/09)</td>
<td>Internist, Mercy Health Physicians, Toledo, OH.</td>
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<td>32. Kathryn Maier</td>
<td>(04/07-04/10)</td>
<td>Pediatric Ophthalmologist, UT, Houston.</td>
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<tr>
<td>33. Micheal Mooney</td>
<td>(04/07-05/09)</td>
<td>Neurosurgeon, Barrow Neurological Institute, AZ.</td>
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<td>34. Jasprit Maraher</td>
<td>(08/07-05/08)</td>
<td>ICU RN, Rush University Medical Center, Chicago.</td>
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<td>35. Yurika Gunawan</td>
<td>(01/06-05/07)</td>
<td>Attending Physician, Medical School, Singapore.</td>
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<tr>
<td>36. Jeffery Collins</td>
<td>(08/05-08/07)</td>
<td>Asst. Professor, Emory University, Atlanta.</td>
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<tr>
<td>37. Claire Walter</td>
<td>(09/04-05/08)</td>
<td>Clinical Pharmacy Specialist in Cardiology, Allegheny General Hospital, Pittsburgh, PA.</td>
</tr>
</tbody>
</table>

**Most Important Teaching Contributions**

I have published my work with my student as a first and second author in peer-reviewed journals. I have presented a number of abstracts at scientific meetings and conferences with my students.
as first or second contributors. My student received Best Poster Award in Undergraduate Research Opportunity Program Symposium at University of Michigan, Ann Arbor.

**Paper(s) published with students (in bolds)**


**Abstract(s) with students (in bolds)**


3. Matthew Alonzo, Shweta Anil Kumar, **Munmun Chattopadhyay**, Yoshihiro Ito, Stephanie Willerth, Laura Suggs, Binata Joddar. A next generation 3D bioprinted cardiac patch with human cardiomyocytes and fibroblasts. Materials Science & Technology; Sept 29-Oct 03, 2019; Portland, OR, USA.


5. Vikram Thakur, **Narah Alcoreza, Bryan Koppa** and Munmun Chattopadhyay. Epigenetic changes in DRG neuronal cells under hyperglycemia. 13th Annual TTUHSC Research Colloquium; Paul L. Foster School of Medicine, TTUHSC, El Paso, TX. April 17-19, 2019.


8. V. Thakur, M. Gonzalez, **J. Enriquez** and M. Chattopadhyay. The Role of Histone Deacetylases in the Development of Diabetic Complications: 11th Annual TTUHSC Research Colloquium; Paul L. Foster School of Medicine, TTUHSC, El Paso, TX; April 20th 2017.

10. **Amanda Yanez** and Munmun Chattopadhyay. Role of Neuropeptides in the Gastrointestinal Tract Disorder of Diabetic Rats. Research Colloquium, Graduate School of Biomedical Sciences (GSBS); TTUHSC Lubbock, TX. March 12, 2015.

11. **Aviance Ramsey** and Munmun Chattopadhyay. Exercise training attenuates inflammatory mediators in DRG and spinal cord of Type 1 diabetic rats. Summer Accelerated Biomedical Research (SABR) Program, Graduate School of Biomedical Sciences (GSBS); TTUHSC El Paso, TX. June –August 2014.


22. Chattopadhyay M, **Walter C,** Mata M, and Fink DJ. Continuous delta opioid receptor activation reduces neuronal voltage gated sodium channel (Nav1.7) levels through activation of protein kinase c and p38 in painful diabetic neuropathy. 12th World Congress on Pain; International Association for the Study of Pain, August 17-22, 2008, Glasgow, Scotland.


**Mentorship**

Thesis Co-advisor: Shweta Anil Kumar, Doctoral candidate in Materials Science and Biomedical Engineering, UTEP El Paso, TX.
Title: Bio-fabrication of a functional cardiac tissue-on-a-chip.

Thesis Co-advisor: Matthew Alonzo, Doctoral candidate in Materials Science and Biomedical Engineering, UTEP El Paso, TX.
Title: Engineering cardiac tissues with three-dimensional bio-printing for biomedical applications.

Thesis Co-advisor: Monica Delgado, Doctoral candidate in Materials Science and Biomedical Engineering, UTEP El Paso, TX.
Title: Characterize a 3D bioprinted model of hyperglycemic myocardium (heart wall) to determine the role of SDF-1 and CXCR4 pathway in diabetics.

**International, National and Regional Lectures**

1. *Neuroprotective effect of HSV mediated neurotrophin gene transfer in cisplatin neuropathy.* 32\textsuperscript{nd} Annual Meeting, Society for Neuroscience, Orlando, FL, USA (Nov. 2-7, 2002).


4. *Extinguishing the fire of painful diabetic neuropathy: Continuous expression of enkephalin modifies voltage-gated sodium channel levels in DRG neurons;* Department of Neurology, University of Michigan, MI, USA January 25, 2008.

5. *NaV1.7 in painful diabetic neuropathy;* Department of Neurology, University of Michigan, MI, USA January 28, 2011.


7. *Novel Strategies for Alleviating Pain in Diabetic Neuropathy.* Paul L Foster School of Medicine, Texas Tech University Health Sciences Center, El Paso, TX; August 27, 2013.

8. *Novel Approaches to Ameliorate Pain in Diabetic Neuropathy.* Department of Physiology, Wayne State University, Detroit, MI; November 21, 2013.

9. *Diabetes and Neuroinflammation: Can we avoid the complications?* Women in Medicine and Science, Paul L Foster School of Medicine, TTUHSC, El Paso, TX; August 27, 2014.

10. *Here’s to Your Health.* 4\textsuperscript{th} Annual Adventure for Future Workshop; The Greater El Paso Chamber of Commerce and TTUHSC, El Paso, TX; January 31, 2015.

11. *Diabetes and inflammation.* Seminar on Neuroscience (invited talk). School of Studies in
Neuroscience; Jiwaji University; Gwalior, India. July 15, 2016.


13. **The Role of Histone Deacetylases in the Development of Diabetic Complications:** 11th Annual TTUHSC Research Colloquium; Paul L. Foster School of Medicine, TTUHSC, El Paso, TX; April 20, 2017.


16. **Diabetes and Nutrition.** Guest Lecture in Graduate School seminar series. Ravenshaw University, Orissa, India. Sept. 16th, 2020. *International*


18. **Alterations in Histone Acetylation and Neuroinflammation in Diabetic Painful Neuropathy.** Invited Speaker; GCC Texas Pain Research Highlights 2021 Conference, April 7-8, 2021.


**CME lectures**

1. **Importance of recognition by institution and peers.** Office of Faculty Development. TTUHSC El Paso. Institutional Faculty Development Course (IFDC) XV. How to recruit and retain good faculty conference. May 12, 2017. *CME credit 0.5.*

2. **Enhancing Basic Science Faculty Success.** Office of Faculty Development. TTUHSC El Paso. Institutional Faculty Development Course (IFDC) XVI. Tips for Faculty Success. May 11, 2018. *CME credit 0.5.*


4. **Writing a balanced discussion section: Writing Interest Group Course.** Office of Faculty Development. TTUHSC El Paso. Institutional Faculty Development Program XIX. Continuing online course; 2021. CME credit 0.5.

**Committee, Organizational and Volunteer Service**

**Institutional Animal Care and Use Committee (IACUC),** Veteran Affairs Ann Arbor Health System, Ann Arbor, MI. Committee service: Scientific member. 07/2005 - March 2014.

**Advisory Committee on Primary Research Appointments, Promotions, and Titles (APRAPT)** Medical School, University of Michigan; Ann Arbor, MI. Member; 2011- March 2014.

**Ad-hoc Scientific Reviewer, IACUC,** Emory University, Atlanta, GA; 2012- current; Committee service: Scientific member (Ad-hoc).


**Career Panel Advisor:** **Undergraduate Research Opportunity Program (UROP),** University of Michigan; Ann Arbor, MI. 2012-March 2014.

**Faculty Judge:** Annual Research Colloquium; Paul L. Foster School of Medicine, Texas Tech
University Health Sciences Center, El Paso, TX. May 2014 – Present.

**Library Council Member:** Texas Tech University Health Sciences Center, El Paso, TX. Member: May 2014–Present.

**Medical School Admissions Committee:** Paul L. Foster School of Medicine, Texas Tech University Health Sciences Center, El Paso, TX. Member: June 2015 – June 2019.

**Graduate School of Biomedical Sciences Admissions Committee:** Paul L. Foster School of Medicine, Texas Tech University Health Sciences Center, El Paso, TX. Member: June 2014 – Present.

**PLFSOM Women in Medicine and Science Research Collaborations Committee (WIMS):** Paul L. Foster School of Medicine, Texas Tech University Health Sciences Center, El Paso, TX. Member: August 2014– Present.

**Institutional Animal Care and Use Committee (IACUC), TTUHSC.** Committee service: Scientific member. September 2014 –Present.

**Faculty Judge:** Scholarly Activity and Research Program (SARP) Symposium; Paul L. Foster School of Medicine, Texas Tech University Health Sciences Center, El Paso, TX. November 2014-present.

**Director of COE in Diabetes and Metabolism Search Committee:** Paul L. Foster School of Medicine, Texas Tech University Health Sciences Center, El Paso, TX. Member: January 2015 – July 2016.

**Veterinarian Search Committee:** Paul L. Foster School of Medicine, Texas Tech University Health Sciences Center, El Paso, TX. Member: November 2014 – March 2016.

**Ad hoc Reviewer:** National Institute of Health, SCS study section. NIH, 2015-2016.

**Ad hoc Reviewer:** National Institute of Health, Brain Disorders and Clinical Neuroscience IRG, NIH, 2015 - 2016.

**Medical School Admissions Committee:** Paul L. Foster School of Medicine, Texas Tech University Health Sciences Center, El Paso, TX. Member: June 2015 – Present.

**Research Symposium Moderator:** 9th Annual TTUHSC Research Colloquium; Paul L. Foster School of Medicine, TTUHSC, El Paso, TX; May 2015.

**ADA Research Grant Review Committee:** American Diabetes Association, Alexandria, VA. Member: Jan 01, 2016- December 31, 2018.

**Chair Elect:** WIMS Research Collaborations Committee, TTUHSC, El Paso, TX. November 2015- October 2016.

**Chair:** WIMS Research Collaborations Committee, TTUHSC, El Paso, TX. November 2016-October 2017.


**Thesis Committee member:** Nishat Tasnim, Doctoral candidate in Materials Science and Biomedical Engineering, UTEP El Paso, TX. September 2017.

**Research Grant Reviewer (external):** Indiana Diabetes Research Center (IDRC), Indiana University, IN. May 2016- May 2017.

**Graduate Council Member:** Graduate School of Biomedical Sciences, Texas Tech University Health Sciences Center, El Paso, TX. Member: Jan 2017 – Present.

**Senator:** Faculty Senate; Texas Tech University Health Sciences Center, El Paso, TX. Member: Jan 2017 – 2021.

**Institutional Animal Care and Use Committee (IACUC),** TTUHSC. Chair. September 2020 – Present.

**Grant Reviewer:** Peer Reviewed Medical Research Program, Department of Defense. September 2020; May 2021.

**Executive Steering Committee Member** at Gulf Coast Consortia Texas Pain Research, 2020- Present.

**Grant Reviewer:** National Institute of Health, ad hoc reviewer for ZRG1 Digestive, Kidney and Urological Systems IRG, 2021.

**Grant Reviewer:** National Institute for Health Research, UK as ad hoc reviewer for Central Commissioning Facility, Birmingham Region BRC in Inflammation: Women's Metabolic Health; December 2021.

**Nucleotide sequence submission**

GenBank: AF156978.1


**Book Chapter**


**Bibliography**

**Peer Reviewed Journals and Articles**


8. Anil Kumar, S; Alonzo, M; Allen, S; Abelseth, L; Thakur, V; Akimoto, J; Ito, Y; Willerth, S; Suggs, L; Chattopadhyay, M; Joddar, B (2019). A visible light crosslinkable, fibrin-gelatin based bioprinted cardiac patch with human cardiomyocytes and fibroblasts. *ACS Biomaterials Science & Engineering* 2019, 5, 9, 4551-4563. doi: 10.1021/acsbiomaterials.9b00505. (*Impact factor 4.7*)


**Conferences, Seminars and Workshops**


13. Chattopadhyay M., Wolfe D.P., Goins W., Huang S., Glorioso J.C., Mata M. and Fink D.J. Prolonged bioactive transgene expression driven by the HSV Latency Active Promoter 2 (LAP2) in the peripheral nervous system. 7th Annual Meeting of the American Society of Gene Therapy, Minneapolis, MN, USA (June2-6, 2004).


17. NIDDK Workshop: Advances toward measuring diabetic retinopathy and neuropathy; National Institutes of Health, Bethesda, MD; April 4-5, 2007.


20. Chattopadhyay M., Walter C., Mata M., Fink D.J. Continuous delta opioid receptor activation reduces neuronal voltage gated sodium channel (Nav1.7) levels through activation of protein kinase c and p38 in painful diabetic neuropathy. 12th World Congress on Pain; International Association for the Study of Pain, Aug. 17-22, 2008; Glasgow, Scotland.


22. Chattopadhyay M., Maier K., Mata M., Fink D.J. Regulation of Na1.7 in painful diabetic neuropathy by GPCR activation. Peripheral Nerve Society Biennial meeting, Wurzburg, Germany, July 4-8, 2009.


27. Chemotherapy-Induced Peripheral Neuropathy (CIPN) Workshop, National Cancer Institute; National Institutes of Health, Rockville, MD; June 24th 2011.


33. Meyers, J. Galloway, C. and Chattopadhyay, M. Role of exercise in the reduction of inflammatory mediators in painful diabetic neuropathy. 42nd Annual Meeting of Society for


35. Isham D. and Chattopadhyay, M. Anti-inflammatory effects of exercise in rats with painful diabetic neuropathy. Undergraduate Research Opportunity Program, University of Michigan, Ann Arbor, MI USA, April 2013; Best poster presentation award.


40. Aviance Ramsey and Munmun Chattopadhyay. Exercise training attenuates inflammatory mediators in DRG and spinal cord of Type 1 diabetic rats. Summer Accelerated Biomedical Research (SABR) Program, Graduate School of Biomedical Sciences (GSBS); TTUHSC El Paso, TX. June –August 2014.

41. 13th Faculty Development Course: Paul L. Foster School of Medicine, Texas Tech University Health Sciences Center, El Paso, TX. Participant: Nov 05, 2014-July 22nd 2015.

42. 1st PLFSOM Women in Medicine and Science Research Professional Development Course: Doubletree Hotel, Paul L. Foster School of Medicine, Texas Tech University Health Sciences Center, El Paso, TX. Participant: Nov 22, 2014.

43. Thakur, V. and Chattopadhyay, M. Alterations of Inflammatory Mediators in DRG of Type 1 Diabetic Animals with Neuropathy. 97th Annual Meeting of Endocrine Society, San Diego, USA March 5-8, 2015.

44. Amanda Yanez and Munmun Chattopadhyay. Role of Neuropeptides in the Gastrointestinal Tract Disorder of Diabetic Rats. Research Colloquium, Graduate School of Biomedical Sciences (GSBS); TTUHSC Lubbock, TX. March 12, 2015.

45. Vikram Thakur, Mayra Gonzalez and Munmun Chattopadhyay. Role of TLR4 and HMGB1 in Changes in Pain in Type 1 and Type 2 Diabetic Animals. 75th Annual Meeting of American Diabetes Association, Boston, USA, June 5-9, 2015.

46. 2nd PLFSOM Women in Medicine and Science Research Professional Development Course. Country Inn, Sunland Park. Paul L. Foster School of Medicine, Texas Tech University Health Sciences Center, El Paso, TX. Participant: Sept 25, 2015.

47. Kristen Pennington, Vikram Thakur and Munmun Chattopadhyay. Changes in Inflammatory Mediators in DRG of Type 1 Diabetic Animals with Neuropathy. 2nd BBRC Symposium, El Paso, TX, USA. Sept 27th -29th 2015.


54. The Role of Histone Deacetylases in the Development of Diabetic Complications: V. Thakur, M. Gonzalez, J. Enriquez and M. Chattopadhyay. 11th Annual TTUHSC Research Colloquium; Paul L. Foster School of Medicine, TTUHSC, El Paso, TX; April 20th 2017.

55. Inspiring Intersections: A Call to Collaborate, Challenge, and Change. A Summit Sponsored by GDI and GWIMS, AAMC. May 4th-7th 2017; Palm Springs, CA, USA.


57. Learn Serve Lead: The AAMC Annual Meeting. November 3-7, 2017; Boston, MA, USA.


59. V. Thakur, M. Gonzalez, J. Sadanandan, M. Gonzalez and M. Chattopadhyay. Role of inflammation and histone acetylation in diabetic painful neuropathy: 12th Annual TTUHSC Research Colloquium; Paul L. Foster School of Medicine, TTUHSC, El Paso, TX; April 18th 2018.


63. Vikram Thakur, Irene Sarosiek, Richard W. McCallum, Munmun Chattopadhyay. Epigenetic Changes in Gastric Antral Smooth Muscle of Patients with Severe Gastroparesis of both Idiopathic and Diabetic Etiology. Digestive Disease Week, San Diego, CA, USA May 18–21, 2019.

64. Matthew Alonzo, Shweta Anil Kumar, Munmun Chattopadhyay, Yoshihiro Ito, Stephanie Willerth, Laura Suggs, Binata Joddar. A next generation 3D bioprinted cardiac patch with human cardiomyocytes and fibroblasts. Materials Science & Technology; Sept 29-Oct 03, 2019; Portland, OR, USA.


67. V Thakur, I Sarosiek, B Davis, R McCallum, **M Chattopadhyay**. Epigenetic alterations of inflammatory markers in diabetic and idiopathic gastroparesis; 4th International Meeting of the Federation of Neurogastroenterology and Motility, 14-17 Apr 2021; Adelaide, Australia (Virtual) Neurogastroenterology and Motility 32.

68. V Thakur, BR Davis, I Sarosiek, RW McCallum, **M Chattopadhyay**. Alterations in Epigenetic Modifiers in Gastric Antral Smooth Muscle of Patients with Diabetic Gastroparesis Compared To Idiopathic Etiology. Digestive Disease Week 2020, Virtual, May 2-5 2020; Gastroenterology 158 (6), S-1052.


**Community Outreach and Volunteer Service**


   Organize volunteer activities for kids to make blankets for cancer patients in the U of M hospital, make greeting cards for the senior center, bake cookies for the Ronald McDonald house patients’ families.

2. **Special Science session: Ann Arbor Public School (Jan 2012-Feb 2014)**

   Teaching kids about neuroscience.

3. **Emphasis on nutrition: “The right choice” TTUHSC administration and employees (Sept 5th and Oct 31st 2014)**

   Provided personal experience and interests on nutrition and cooking related to nutrition and how to increase the health benefit from food that we eat regularly.


   The Aim High Conference was geared toward encouraging pre-teen and teen girls ages 9-17 to aim high and dream big by setting high goals for themselves, achieving in academic realms and exploring professional opportunities for their future success. As presenters, we place a strong emphasis on careers where women are underrepresented such as science, technology, engineering and math.

5. **Workshop Presenter and Counselor: Adventure for Your Future Program (Jan 31, 2015)**

   This interactive conference was to introduce and build the interest of El Paso area sixth and seventh grade students to the field of health sciences careers. During the conference, students and parents had the opportunity to attend workshops presented by local health science professionals and
educators on a wide range of topics including heart health, nutrition, medical terminology, medical transport, the brain, and many more.


A number of high school teachers registered for this workshop. Dr. Chattopadhyay demonstrated the relation between nutrition and diabetes, while Dr. Janssen demonstrated the pathophysiology of diabetes in this workshop. The curriculum also offered some hands-on experience and small experiments that could be implemented in the high school classrooms. The teachers present in this workshop showed a great interest in learning about diabetes and nutrition.

7. **Career Emphasis Guidance Talk: Double T collegiate students (Oct 2015-Present)**

The Double T collegiate students are geared towards selecting medicine or related field as a career by setting high goals for themselves, achieving in academic realms and exploring professional opportunities for their future success. I presented my research work in this workshop.

8. **Science Fair Judge: El Paso Country Day School (Dec 16, 2015)**

Provided intellectual comments and judged scientific posters for 7th and 8th grade students.


*Diabetic complications: dealing with it every day:* Provided awareness on diabetes and complications. Discussed on exercise, nutrition and lifestyle changes. Demonstrated on how to get health benefit from exercising regularly and eating nutritious food.


*Presented Bio-wellness lecture in the first half with hands-on experiments. Second half of the lecture is on Diabetes and complications along with hands-on experiments.* The curriculum consists of interactive presentations with health career professionals, field trips, a mock crime scene investigation, financial aid information, and a reality store exercise (simulation of life expenses).
Pre-Clerkship Phase Review Report AY 2020/21 - Review Team II

Medical Skills I&III (MSK I&III – Fall AY2020/21)

Paul L. Foster School of Medicine
2-4-2022
Please provide a narrative that outlines the strengths of the course.
Strengths of the course would be (1) high levels of approval of the approach to teaching by the majority of students for all of the fall semester courses; (2) appreciation of the quality/teaching of the clinical faculty; (3) ability to receive prompt feedback from the SP’s as well as from the faculty when the students perform a medical skill or write a progress note.

Please provide your recommendations on areas of improvement.
There are several complaints about scheduling of the sessions wherein students seem to want to have both sessions contiguous and they would like the sessions to end on time. They also complain about being notified of responsibilities relatively late before they are due.
One recommendation would be an analysis of events to determine if there are several groups of inactive students and if so, can the scheduling be adjusted to limit this event? A small group of students apparently ended some of the sessions late and then debriefed and were unhappy about that occurrence; the evaluations do not allow analysis to determine if that was a frequent occurrence or if it only happened once and was reported several times.
During COVID 19, there was a hybrid session (split between in person and on site) where in person and virtual student groups were split with 30 min allowed for them to commute in to the school and this accounts for the time differential.

Please answer the following questions that relate to LCME standards and elements based on your review of the course (please see attached an outline of each LCME standard/element for your reference):

Element 6.1 Program and Learning Objectives
Are learning objectives provided for all activities? Yes_x__ No___
Are learning objectives appropriate for each learning activity? Yes___x_ No___
Each medical skills encounter is provided with objectives that are appropriate for each session and they are SMART in presentation.

Element 6.3 Self-Directed and Life-Long Learning
Does the course include scheduled time for self-directed learning? Yes___x_ No___
Is the amount of scheduled time appropriate? Yes_x__ No___
How is self-directed work monitored?
Although not clearly shown in Elentra, students who are not actively engaged in interactions with the SP or medical skills faculty would otherwise be ‘free’ to engage in self-directed learning. This amount of time appears to be around 3-4 hours each Thursday when medical skills is in session. Each medical skills session is ‘monitored’ by students completing a prequiz to ensure that they have done the necessary prework before their SP encounters; this quiz is a form of monitoring the performance of self-directed learning.

One suggestion might be to include work with the library staff so that students could be encouraged to identify significant journals in each of the fields they are studying (green journal in medicine or OB, etc). CEREGO sets of quizzes are provided for the CSS unit (MSKIII), another element of self-directed learning.

There is a fair amount of comment relating to the desire for additional evaluation of their SOAP notes, however, most of the evaluations are not specific about what they feel is needed and I’m not sure that additional time with a faculty member would suffice. There is review of SOAP notes by one faculty with a group of 3-4 students, called SPERSSA; the students who wrote these comments had not yet done the review.

Recommend: Consider extending SPERSSA so that after faculty is done, students could review all of the notes and give peer feedback so they could see other approaches to the notes. Consider allowing students to see the faculty note for their review. Add the character limits that they will see in MS3 year so that they can limit the size of their notes in the OSCE’s; identify the criteria for notes (no bullet points because it takes up a whole line of text).

Do students receive feedback on their self-directed work? Yes__x__ No___

If YES, then please complete the question below:

How do they receive feedback?

Their feedback would be in the form of quiz grades. The quizzes are discussed with the students during the medical skills session and the faculty assesses their performance on the medical skills of the week.

CEREGO quizzes are asynchronous feedback for MSKIII (CSS unit) and there is immediate feedback for each question. Other units would also benefit from CEREGO quizzes, such as IMN.

**Element 6.7  Academic Environments**

Does the course include instruction and/or experiences to prepare students to function in interprofessional health care teams? Yes_x__ No___

There are 3-4 interprofessional healthcare educational sessions during the MSI year and these involve interaction with students from GGHSON, dental school, UTEP school of pharmacy and physical therapy and they are very well received by the students.
LCME Standard 7: Curricular Content

Element 7.1 Inclusion of Biomedical, Behavioral, Social Sciences

Does the course include Biomedical, Behavioral, and Social Sciences content? Yes___x__ No____

Were any content gaps identified? Yes_x__ No____

If YES, please explain. What recommendations would you have to address these gaps?

The behavioral and social sciences content would most likely be found in the early weeks of IHD unit where failure to thrive and conditions that are often found in children are presented; these are addressed in the scheme presentations and worked cases. The medical skills session has objectives relating to children with poor growth, dehydration, etc. and there are videos and descriptions of how to manage the examination in these settings.

I would recommend that there be consideration of geriatric patients who may present with similar issues and this may be one way to have an SP encounter (children are not SP’s).

OSCE’s during third year include child abuse and elderly abuse and these would be good to include; especially in parent and child encounters in MHD unit.

Element 7.2 Organ Systems/Life Cycle/Prevention/Symptoms/Signs/Differential Diagnosis, Treatment Planning

Does the course include Organ Systems/Life Cycle/Prevention/Symptoms/Signs/Differential Diagnosis, Treatment Planning? Yes __x_No____

Were any content gaps identified? Yes_x__ No____

If YES, please explain. What recommendations would you have to address these gaps?

Differential diagnosis aspect is generally limited to whatever the topic of the week might be; therefore, harder to develop a ddx in the third year because it limits the options and it might be good to develop cases with a differential that could be identified and then limited. Guidelines for prevention were not well presented during MSK because ‘normal’ people are not presented during an SP encounter, for example Pap smear criteria; geriatric patients and fall prevention and changing home environment to make it safer.

Element 7.3 Scientific Method/Clinical/Translational Research

Does the course include Scientific Method/Clinical/Translational Research? Yes___ No__x__

Were any content gaps identified? Yes ___No__x__
If YES, please explain. What recommendations would you have to address these gaps?
No recommendation as this topic is addressed in SCI (biostats and epidemiology) and SARP projects.

**Element 7.4 Critical Judgment/Problem-Solving Skills**

Does the course include Critical Judgment/Problem-Solving Skills? Yes __x__ No__
Were any content gaps identified? Yes ___x__ No__
If YES, please explain. What recommendations would you have to address these gaps?
Consider adding cases where there is a differential diagnosis, maybe at the end of year OSCE, such as a cumulative inclusion of different units like GI and heme and MSK, etc. Maybe add problems that cover multiple units so that the differential diagnosis is larger.

**Element 7.5 Societal Problems**

Does the course include Societal Problems? Yes __x__ No__
Were any content gaps identified? Yes ___x__ No__
If YES, please explain. What recommendations would you have to address these gaps?
Considerations of whether or not a patient can afford the ordered tests or medications should be included in the plan for treatment.

**Element 7.6 Cultural Competence and Health Care Disparities**

Does the course include Cultural Competence and Health Care Disparities? Yes __x__ No__
Were any content gaps identified? Yes_____ No__x__
If YES, please explain. What recommendations would you have to address these gaps?
No opportunity to learn how to use interpreters or to practice an encounter in Spanish or some other language; this would be valuable in third year.

**Element 7.7 Medical Ethics**

Does the course include Medical Ethics? Yes _x__No__
Were any content gaps identified? Yes_x__ No__
If YES, please explain. What recommendations would you have to address these gaps?
Maybe include a session where the patient refuses intended therapy so students could learn how to adjust plans or refer elsewhere; how to withdraw care, comfort measures, and end of life care.

Element 7.8 Communication Skills
Does the course include Communication Skills? Yes _x__No___
Were any content gaps identified? Yes___ No_x__
If YES, please explain. What recommendations would you have to address these gaps?

Element 8.2 Use of Medical Educational Program Objectives
Do the learning objectives map accurately to the Educational Program Goals and Objectives?
Yes __x__No___

Element 9.4 Assessment System
Are the criteria for Passing the course clearly defined? Yes_x__ No___
If NO, please provide recommendations:

Is there a clearly defined process for remediation of students in the course? Yes_x__ No___
If NO, please provide recommendations:

Element 9.5 Narrative Assessment
Is a narrative description of performance included in the assessment of each student in the course? Yes___x___No___
If No, please provide recommendations:
Element 9.7 Formative Assessment and Feedback

Is formative assessment provided to each student? Yes_x__ No___

Recommend consistent provision to each student for each skill that is assessed so that students can be told what they missed or didn’t include. Same for the exam since that is the last time a student would demonstrate it for a faculty member.

- Final remarks and recommendations

This course receives high marks each year. Marks are slightly down from prior years due to much of the material being presented online and faculty are to be commended for providing an excellent learning opportunity during these difficult times.

Recommend checking to see why there were a large number of complaints of unprofessional behavior by TECHS staff and why there was one discriminatory complaint; this staff person is no longer with Texas Tech. Try to ensure that dress standards are consistently applied.

Reviewing the materials, it is difficult to determine if the extremes of life are represented, such as infants (no idea how this could be accomplished) and geriatrics. Medical skills IV presents these extremes of life.

Please use the link below to access the dashboard.

Elentra: AY20-21:

https://ttuhsc.analytics.healthintent.com/reports/100049111?project_id=100009365

Glossary

LCME Standard 6: Competencies, Curricular Objectives, and Curricular Design
Element 6.1 Program and Learning Objectives

The faculty of a medical school define its medical education program objectives in outcome-based terms that allow the assessment of medical students’ progress in developing the competencies that the profession and the public expect of a physician. The medical school makes these medical education program objectives known to all medical students and faculty.

Element 6.3 Self-Directed and Life-Long Learning

The faculty of a medical school ensure that the medical curriculum includes self-directed learning experiences and unscheduled time to allow medical students to develop the skills of lifelong learning. Self-directed learning involves medical students’ self-assessment of learning needs; independent identification, analysis, and synthesis of relevant information; appraisal of the credibility of information sources; and feedback on these skills.

Element 6.7 Academic Environments

The faculty of a medical school ensure that medical students have opportunities to learn in academic environments that permit interaction with students enrolled in other health professions, graduate and professional degree programs.

LCME Standard 7: Curricular Content

Element 7.1 Biomedical, Behavioral, Social Sciences

The faculty of a medical school ensure that the medical curriculum includes content from the biomedical, behavioral, and socioeconomic sciences to support medical students’ mastery of contemporary medical science knowledge and concepts and the methods fundamental to applying them to the health of individuals and populations.

Element 7.2 Organ Systems/Life Cycle/Prevention/Symptoms/Signs/Differential Diagnosis, Treatment Planning

The faculty of a medical school ensure that the medical curriculum includes content and clinical experiences related to each organ system; each phase of the human life cycle; continuity of care; and preventive, acute, chronic, rehabilitative, and end-of-life care.

Element 7.3 Scientific Method/Clinical/Translational Research

The faculty of a medical school ensure that the medical curriculum includes instruction in the scientific method and in the basic scientific and ethical principles of clinical and translational research, including the ways in which such research is conducted, evaluated, explained to patients, and applied to patient care.

Element 7.4 Critical Judgment/Problem-Solving Skills

The faculty of a medical school ensure that the medical curriculum incorporates the fundamental principles of medicine, provides opportunities for medical students to acquire skills of critical
judgment based on evidence and experience, and develops medical students' ability to use those principles and skills effectively in solving problems of health and disease.

Element 7.5 Societal Problems

The faculty of a medical school ensure that the medical curriculum includes instruction in the diagnosis, prevention, appropriate reporting, and treatment of the medical consequences of common societal problems.

Element 7.6 Cultural Competence and Health Care Disparities

The faculty of a medical school ensure that the medical curriculum provides opportunities for medical students to learn to recognize and appropriately address biases in themselves, in others, and in the health care delivery process. The medical curriculum includes content regarding the following:

- The diverse manner in which people perceive health and illness and respond to various symptoms, diseases, and treatments
- The basic principles of culturally competent health care
- Recognition of the impact of disparities in health care on all populations and potential methods to eliminate health care disparities
- The knowledge, skills, and core professional attributes needed to provide effective care in a multidimensional and diverse society

Element 7.7 Medical Ethics

The faculty of a medical school ensure that the medical curriculum includes instruction for medical students in medical ethics and human values both prior to and during their participation in patient care activities and require medical students to behave ethically in caring for patients and in relating to patients' families and others involved in patient care.

Element 7.8 Communication Skills

The faculty of a medical school ensure that the medical curriculum includes specific instruction in communication skills as they relate to communication with patients and their families, colleagues, and other health professionals.

Standard 8: Curricular Management, Evaluation, and Enhancement

Element 8.2 Use of Medical Educational Program Objectives

The faculty of a medical school, through the faculty committee responsible for the medical curriculum, ensure that the medical curriculum uses formally adopted medical education program objectives to guide the selection of curriculum content, and to review and revise the curriculum. The faculty leadership responsible for each required course and clerkship link the learning objectives of that course or clerkship to the medical education program objectives.

Standard 9: Teaching, Supervision, Assessment, and Student and Patient Safety
Element 9.4 Assessment System

A medical school ensures that, throughout its medical education program, there is a centralized system in place that employs a variety of measures (including direct observation) for the assessment of student achievement, including students’ acquisition of the knowledge, core clinical skills (e.g., medical history-taking, physical examination), behaviors, and attitudes specified in medical education program objectives, and that ensures that all medical students achieve the same medical education program objectives.

Element 9.5 Narrative Assessment

A medical school ensures that a narrative description of a medical student’s performance, including non-cognitive achievement, is included as a component of the assessment in each required course and clerkship of the medical education program whenever teacher-student interaction permits this form of assessment.

Element 9.7 Formative Assessment and Feedback

The medical school’s curricular governance committee ensures that each medical student is assessed and provided with formal formative feedback early enough during each required course or clerkship to allow sufficient time for remediation. Formal feedback occurs at least at the midpoint of the course or clerkship. A course or clerkship less than four weeks in length provides alternate means by which medical students can measure their progress in learning.
Medical Skills continues to adequately address Organ Systems, as encounters are based within chief complaints within organ systems. Several content gaps identified as below:

- Addresses Life Cycle; however does not adequately address life extremes such as geriatrics, pediatrics population, and newborn
  - Only 1 Encounter in MSK-III-CSS with geriatric care, 1 Encounter in MHD-with pediatric patient over pre-clerkship curriculum
  - Recommendation: Add more pediatrics cases, Geriatric care management.

- **Differential Diagnoses:** Differentials are generally limited to the chief complaint of the week, within the Organ System. Limited multi-system interaction to develop differentials between systems.
  - Recommendation: Develop cases with multiple differentials between systems. Suggest adding End-of-Year or End-of-Semester OSCE with comprehensive systems
  - Hospital H&P serves as good practice. Consider adding 1 or 2 more cases like the Hospital H&P
7.2 Continued

• **Prevention** guidelines were not well presented in Medical Skills such as guidelines for colonoscopy, pap smears, mammogram, fall prevention, screening for hypertension, DM2, etc.
  
  • Consider including prevention guidelines in several routine SP encounters in order to reiterate guidelines and better knowledge of prevention
Element 7.3 Scientific Method/Clinical/Translational Research

• Medical Skills does not address research as this topic is addressed in the “Society, Community and the Individual” course, and Scholarly Activity Research Project.
Element 7.4 Critical Judgment/Problem-Solving Skills

• Included in course; Content gaps identified

• Problem solving skills limited to encounters within the organ system;
  • However, consider adding encounters with expanded differentials that cover multiple organ systems, increased life cycle spectrum, more preventative care strategies, multi-problem management.

• Recommendation: Suggest adding End-of-Year or End-of-Semester OSCE with comprehensive system-based learning.
  • Hospital H&P serves as good practice. Consider adding 1 or 2 more cases like the Hospital H&P
  • Consider adding fall and spring semester comprehensive cases or OSCE’s to encourage retention, and broad differential diagnoses.
Year 3 Clerkship Block and Comparability Summary Report

Prepared by the Clerkship Central Administration
Maureen Francis, MD, MS-HPEd, FACP
Assistant Dean for Medical Education
Year 3 & 4 and CEPC Report
Block 1, AY 2021 – 2022
Related LCME Elements

• 6.2 Required Clinical Experiences
The faculty of a medical school define the types of patients and clinical conditions that medical students are required to encounter, the skills to be performed by medical students, the appropriate clinical settings for these experiences, and the expected levels of medical student responsibility.

• 8.4 Evaluation of Educational Program Outcomes
A medical school collects and uses a variety of outcome data, including national norms of accomplishment, to demonstrate the extent to which medical students are achieving medical education program objectives and to enhance the quality of the medical education program as a whole. These data are collected during program enrollment and after program completion.

• 8.5 Medical Student Feedback
In evaluating medical education program quality, a medical school has formal processes in place to collect and consider medical student evaluations of their courses, clerkships, and teachers, and other relevant information.

• 8.6 Monitoring of Completion of Required Clinical Experiences
A medical school has in place a system with central oversight that monitors and ensures completion by all medical students of required clinical experiences in the medical education program and remedies any identified gaps.

• 8.7 Comparability of Education/Assessment
A medical school ensures that the medical curriculum includes comparable educational experiences and equivalent methods of assessment across all locations within a given course and clerkship to ensure that all medical students achieve the same medical education program objectives.

• 8.8 Monitoring Student Time
The medical school faculty committee responsible for the medical curriculum and the program’s administration and leadership ensure the development and implementation of effective policies and procedures regarding the amount of time medical students spend in required activities, including the total number of hours medical students are required to spend in clinical and educational activities during clerkships.

• 9.5 Narrative Assessment
A medical school ensures that a narrative description of a medical student’s performance, including non-cognitive achievement, is included as a component of the assessment in each required course and clerkship of the medical education program whenever teacher-student interaction permits this form of assessment.

• 9.6 Setting Standards of Achievement
A medical school ensures that faculty members with appropriate knowledge and expertise set standards of achievement in each required learning experience in the medical education program.

• 9.7 Formative Assessment and Feedback
The medical school's curricular governance committee ensures that each medical student is assessed and provided with formal formative feedback early enough during each required course or clerkship to allow sufficient time for remediation. Formal feedback occurs at least at the midpoint of the course or clerkship. A course or clerkship less than four weeks in length provides alternate means by which medical students can measure their progress in learning.

• 9.8 Fair and Timely Summative Assessment
A medical school has in place a system of fair and timely summative assessment of medical student achievement in each course and clerkship of the medical education program. Final grades are available within six weeks of the end of a course or clerkship.
Structure and Process

- Data to be collected
  - Op log entries
  - Top 10 diagnoses
  - Duty hours
  - Mid-clerkship completion
  - NBME scores
  - Clerkship grade
  - Student satisfaction data
  - Narrative feedback review
- Review
  - End of each block
  - End of academic year in aggregate
<table>
<thead>
<tr>
<th></th>
<th>IM</th>
<th>Surgery</th>
<th>Psychiatry</th>
<th>Pediatrics</th>
<th>OB/GYN</th>
<th>FM</th>
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</thead>
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<tr>
<td>Required # encounters</td>
<td>30</td>
<td>30</td>
<td>30</td>
<td>29</td>
<td>41</td>
<td>20 – 2 each</td>
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<tr>
<td>Average # logged</td>
<td>45 -55</td>
<td>73</td>
<td>51</td>
<td>71</td>
<td>61</td>
<td>69</td>
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<tr>
<td>Level of responsibility</td>
<td>A/M</td>
<td>A/M</td>
<td>A/M</td>
<td>A/M</td>
<td>A/M</td>
<td>A/M</td>
</tr>
<tr>
<td>Met requirements</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
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<tr>
<td>Alternate activities</td>
<td>None</td>
<td>None</td>
<td>One DX</td>
<td>Multiple DX</td>
<td>Multiple Dx</td>
<td>Multiple DX</td>
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<tr>
<td># sites</td>
<td>3</td>
<td>1 for Gen Surg</td>
<td>Same</td>
<td>Same</td>
<td>Same</td>
<td>Same</td>
</tr>
</tbody>
</table>
Psychiatry Alternate Assignments

- Alternate assignment used for 1 diagnosis
  - Conduct Disorder: 9 students; Given 2 cases to read and submit a written discussion
Pediatric Alternate Activities

- Colic, infantile; 25 students – Lecture
- Jaundice; 10 students – Aquifer Peds Cases 8 & 9
- Diabetes mellitus; 14 students – Aquifer Peds Case 16
- Failure to Thrive; 12 students – Aquifer Peds Cases 9, 18, & 26
- Obesity; 15 students – Aquifer Peds Case 4
- Otitis; 8 students – Aquifer Peds Case 14
- Respiratory distress; 12 students – Aquifer Peds Case 13 or 7
- Well baby exam, 2/6 months; 9 students – Aquifer Peds Case 2
- Anemia; 10 students – Aquifer Peds cases 3, 5, & 30
- Asthma; 4 students – Aquifer Peds case 13
- Diarrhea; 3 students – Aquifer Peds case 15
- Sore Throat; 2 students – SOAP for encounter and Ddx
- Well baby exam, 4 mos; 4 students – SOAP for encounter, video
- Well baby exam, 12 mos; 3 students – SOAP for encounter, video
- Well baby X 3; 3 students – Aquifer Peds Case 1
- Child Abuse/Neglect; 7 students – Aquifer Peds Case 25
- Abdominal Pain; 2 students – Aquifer Peds cases 16, 22, & 27
- Developmental delay or regression; 2 students – Aquifer Peds case 28
- Well Child, School Age; 1 student – Aquifer Peds case 4
- Well Child, Adolescent; 1 student – Aquifer Peds cases 5 & 6
OB/GYN Alternate Assignments

• Block 1
  • Wet Mount – ABGO Case 32, 3 students
  • Pelvic Floor Surgery – Paper, 3 students
  • Preterm Labor – ABGO Case 24, 1 student
  • Hysteroscopy – Paper, 6 students
  • Bleeding in Pregnancy – ABGO Case 23, 4 students
  • D&C – Paper, 8 students
  • Uterine Surgery – paper, 4 students
  • Vaginal Prolapse – paper, 1 student
  • PCOS – ABGO Case 55, 1 student
  • L&D Cesarean – ABGO Cases 41 & 32, 1 student
  • Diabetes – Paper, 1 student
FM Alternate Assignments

- **Block 1**
  - Allergic Rhinitis – Vanderbilt Case (Food Allergies, Hypersensitivity), 1 student
  - Pharyngitis – Aquifer Case FM23, 4 students
  - URI – Aquifer Case FM 13, 4 students
  - Asthma – Online Med Ed Pulmonolgy 2, Case Files Online Wheezing and Asthma, Vanderbilt Case (Asthma Wheezing), 1 student
  - COPD – Case Files Online Dyspnea, Online Med Ed Pulmonary 6, Vanderbilt Case (COPD), 2 students
  - Back Pain – Vanderbilt Case (Low back pain, neck pain, fibromyalgia), 1 student
  - Chest Pain – Online Med Ed Cardiology 1 – 4, Surgery 11, 3 students
  - Depression – Access Medical Case 13, 1 student
  - Painful Urination – Access Medical, Cases 2,14, 16, 17, 20, 38, and 45, 1 student
• Patient encounters
  • No significant site specific differences in patient encounters

• Mid-clerkship completion
  • 100% compliance across all clerkships
## Duty Hour Review

<table>
<thead>
<tr>
<th>Clerkship</th>
<th>Duty Hour range by site</th>
<th>Average Duty Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>IM Inpatient</td>
<td>42 - 44</td>
<td>43</td>
</tr>
<tr>
<td>Psychiatry - inpatient</td>
<td>NA</td>
<td>33</td>
</tr>
<tr>
<td>FM</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>Medicine and the Mind Ambulatory</td>
<td>NA</td>
<td>25</td>
</tr>
<tr>
<td>Surgery</td>
<td>NA</td>
<td>50</td>
</tr>
<tr>
<td>Pediatrics – Wards &amp; Nursery</td>
<td>NA</td>
<td>31</td>
</tr>
<tr>
<td>OB/GYN L&amp;D and Gyn Surg</td>
<td>NA</td>
<td>32</td>
</tr>
<tr>
<td>OPS Ambulatory</td>
<td>NA</td>
<td>25</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Internal Medicine Clerkship

• 6 weeks on inpatient service
  • All students spend 3 weeks at UMC
  • Additional 3 weeks can be at
    • UMC
    • THOP - Transmountain
    • WBAMC
    • San Angelo

• 2 weeks on a “selective”

• Comparability report focused on inpatient service by site and across 6 weeks
## Comparison IM – AY 21/22
NBME Equated Percent Correct Score

<table>
<thead>
<tr>
<th>NBME Equated Percent Correct Score</th>
<th>UMC</th>
<th>WBAMC</th>
<th>THOP-TM</th>
<th>San Angelo</th>
<th>Overall</th>
</tr>
</thead>
<tbody>
<tr>
<td>AY 21/22 Block 1</td>
<td>74</td>
<td>N/A</td>
<td>75</td>
<td>73</td>
<td>74 [74.9 (9.3)]*</td>
</tr>
<tr>
<td>AY 20/21</td>
<td>74</td>
<td>77</td>
<td>76</td>
<td>76</td>
<td>75 [74.9 (9.3)]</td>
</tr>
<tr>
<td>AY 19/20</td>
<td>73</td>
<td>71</td>
<td>75</td>
<td>76</td>
<td>73 [75.3 (9.0)]</td>
</tr>
</tbody>
</table>

* [Comparison group (SD)]
# AY 2021-2022 IM Student Satisfaction Data

## Block 1

<table>
<thead>
<tr>
<th></th>
<th>UMC (N=41)</th>
<th>San Angelo (N=11)</th>
<th>THOP –TM (N=19)</th>
<th>WBAMC (N=4)</th>
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<tbody>
<tr>
<td>Duty hour policies were adhered to strictly in this clerkship</td>
<td>4.85</td>
<td>5.82</td>
<td>4.79</td>
<td>5.00</td>
</tr>
<tr>
<td>I was empowered to actively participate in patient care</td>
<td>5.46</td>
<td>5.82</td>
<td>5.00</td>
<td>5.50</td>
</tr>
<tr>
<td>I was observed performing the physical/mental status exam</td>
<td>5.51</td>
<td>5.18</td>
<td>5.11</td>
<td>5.50</td>
</tr>
<tr>
<td>I was observed taking a patient history</td>
<td>5.46</td>
<td>5.18</td>
<td>5.16</td>
<td>5.50</td>
</tr>
<tr>
<td>The number of patient care experiences were sufficient to support my learning</td>
<td>5.39</td>
<td>5.82</td>
<td>4.95</td>
<td>5.50</td>
</tr>
<tr>
<td>The variety of patient care experiences were sufficient to support my learning</td>
<td>5.39</td>
<td>5.82</td>
<td>4.89</td>
<td>5.50</td>
</tr>
</tbody>
</table>
Surgery Clerkship

- 3 weeks of General Surgery
  - WBAMC (not active in Fall semester)
  - UMC
- 2 week selective
- Ambulatory - Outpatient Breast Clinic

- Comparability focused on 3 week general surgery rotation
## Comparison Surgery – AY 2021/20 to AY 2019/20

### NBME

<table>
<thead>
<tr>
<th>NBME Equated Percent Correct Score</th>
<th>UMC</th>
<th>WBAMC</th>
<th>Overall</th>
</tr>
</thead>
<tbody>
<tr>
<td>AY 21/22 Block 1</td>
<td>68</td>
<td>N/A</td>
<td>68 [74.4 (8.6)]</td>
</tr>
<tr>
<td>AY 20/21</td>
<td>73</td>
<td>77</td>
<td>74 [74.4 (8.6)]</td>
</tr>
<tr>
<td>AY 19/20</td>
<td>73</td>
<td>76</td>
<td>74 [74.9 (8.4)]</td>
</tr>
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</table>
### AY 2021-2022 Surgery Student Satisfaction Data Block 1

*(scale 1 to 6)*

<table>
<thead>
<tr>
<th></th>
<th>UMC (N=44)</th>
<th>WBAMC</th>
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<tbody>
<tr>
<td>Duty hour policies were adhered to strictly in this clerkship</td>
<td>4.76</td>
<td>NA</td>
</tr>
<tr>
<td>I was empowered to actively participate in patient care</td>
<td>4.76</td>
<td>NA</td>
</tr>
<tr>
<td>I was observed performing the physical/mental status exam</td>
<td>4.52</td>
<td>NA</td>
</tr>
<tr>
<td>I was observed taking a patient history</td>
<td>4.52</td>
<td>NA</td>
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<tr>
<td>The number of patient care experiences were sufficient to support my learning</td>
<td>4.98</td>
<td>NA</td>
</tr>
<tr>
<td>The variety of patient care experiences were sufficient to support my learning</td>
<td>4.81</td>
<td>NA</td>
</tr>
</tbody>
</table>
Psychiatry Clerkship

- 3 weeks psychiatry
  - EPPC
  - CL Service
- Outpatient psychiatry during ambulatory blocks
Psychiatry – AY 2021/2022 Equated Percent Correct Score NBME

<table>
<thead>
<tr>
<th>Average NBME Equated Percent Correct Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>AY 2021/2022 Block 1</td>
</tr>
<tr>
<td>AY 2020/2021</td>
</tr>
<tr>
<td>AY 2019/2020</td>
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* [Comparison group (SD)]
## AY 2021-2022 Psychiatry Student Satisfaction Data Block 1

(scale 1 to 6)

<table>
<thead>
<tr>
<th></th>
<th>EPPC (N=43)</th>
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<tbody>
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<td>Duty hour policies were adhered to strictly in this clerkship</td>
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<td>I was empowered to actively participate in patient care</td>
<td>4.88</td>
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<td>5.14</td>
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<td>I was observed taking a patient history</td>
<td>5.10</td>
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<tr>
<td>The number of patient care experiences were sufficient to support my learning</td>
<td>5.09</td>
</tr>
<tr>
<td>The variety of patient care experiences were sufficient to support my learning</td>
<td>4.93</td>
</tr>
</tbody>
</table>
Pediatric Clerkship

• All students rotate at same site for inpatient but ambulatory now includes TM and Community Preceptors

• General Calendar
  • 1 week Wards
  • Ambulatory weeks includes specialty clinics
  • 1 week Nursery
  • 1 week ILP (Individual learning plan)
Pediatrics – AY 2021/2022 Equated Percent Correct Score NBME

<table>
<thead>
<tr>
<th></th>
<th>Average NBME Equated Percent Correct Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>AY 21/22 Block 1</td>
<td>74 [78.5 (8.3)]*</td>
</tr>
<tr>
<td>AY 2020/2021</td>
<td>78 [78.5 (8.3)]</td>
</tr>
<tr>
<td>AY 2019/2020</td>
<td>76 [78.5 (8.0)]</td>
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*[comparison group (SD)]
### AY 2021-2022 Pediatric Student Satisfaction Data - Block 1

<table>
<thead>
<tr>
<th>Item</th>
<th>EPCH</th>
<th>TTUHSC Alberta</th>
<th>TTUHSC TM</th>
<th>Community Preceptors</th>
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<td>5.49</td>
<td>5.39</td>
<td>5.40</td>
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<tr>
<td>I was empowered to actively participate in patient care</td>
<td>5.46</td>
<td>5.35</td>
<td>5.28</td>
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<td>4.92</td>
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<td>5.36</td>
<td>4.60</td>
<td>4.50</td>
<td>5.24</td>
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</table>
OG/GYN Clerkship

- All students rotate in outpt and inpt settings
  - Students beginning to rotate at TM Faculty clinics

- General Schedule
  - 9 weeks ambulatory (shared with Peds)
    - MFM is part of ambulatory
  - 4 weeks inpatient
    - L&D
    - GYN Surgery
OB/GYN – AY 2021/2022 Equated Percent Correct Score NBME

<table>
<thead>
<tr>
<th>Average NBME Equated Percent Correct Score</th>
<th></th>
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<tbody>
<tr>
<td>AY 21/22 Block 1</td>
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<td>AY 2020/21</td>
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<tr>
<td>AY 2019/20</td>
<td>77 [78.6 (7.7)]</td>
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</table>

* [comparison score (SD)]
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<th>TTUHSC TM</th>
<th>UMC</th>
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<td>5.26</td>
<td>5.26</td>
<td>5.13</td>
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<td>5.11</td>
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<tr>
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<td>5.12</td>
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<td>I was observed taking a patient history</td>
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<td>4.79</td>
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<td>5.19</td>
<td>4.87</td>
<td>5.05</td>
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<tr>
<td>The variety of patient care experiences were sufficient to support my learning</td>
<td>5.00</td>
<td>5.00</td>
<td>4.74</td>
<td>5.11</td>
</tr>
</tbody>
</table>
Family Medicine Clerkship

- All students rotate at same sites

- General Schedule
  - 9 weeks ambulatory shared with Psychiatry in IM/FM/Psych Block
  - Longitudinal experience in OPS Block
    - Starting with 3 sessions
### FM Equated Percent Correct Score NBME

<table>
<thead>
<tr>
<th></th>
<th>Average NBME Equated Percent Correct Score [76.8 (7.3)]</th>
</tr>
</thead>
<tbody>
<tr>
<td>AY 21/22 Block 1</td>
<td>73 [75.8 (7.5)]*</td>
</tr>
<tr>
<td>AY 2020/2021</td>
<td>75 [75.8 (7.5)]</td>
</tr>
<tr>
<td>AY 2019/2020</td>
<td>75 [76.8 (7.3)]</td>
</tr>
</tbody>
</table>

* [comparison group (SD)]
### AY 2021-2022 Family Medicine Student Satisfaction Data - Block 1

<table>
<thead>
<tr>
<th></th>
<th>TTUHSC Kenworthy (N=44)</th>
<th>TTUHSC TM (N=20)</th>
<th>Alpine (N=1)</th>
<th>Sanchez (N=8)</th>
<th>San Angelo (N=8)</th>
<th>Community Preceptors (N=28)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Duty hour policies were adhered to strictly in this clerkship</td>
<td>5.45</td>
<td>5.45</td>
<td>6.0</td>
<td>5.88</td>
<td>5.75</td>
<td>5.36</td>
</tr>
<tr>
<td>I was empowered to actively participate in patient care</td>
<td>5.32</td>
<td>5.25</td>
<td>6.0</td>
<td>5.88</td>
<td>5.50</td>
<td>5.14</td>
</tr>
<tr>
<td>I was observed performing the physical/mental status exam</td>
<td>5.09</td>
<td>5.25</td>
<td>6.0</td>
<td>5.88</td>
<td>5.43</td>
<td>4.58</td>
</tr>
<tr>
<td>I was observed taking a patient history</td>
<td>5.05</td>
<td>5.25</td>
<td>6.0</td>
<td>5.88</td>
<td>5.43</td>
<td>4.62</td>
</tr>
<tr>
<td>The number of patient care experiences were sufficient to support my learning</td>
<td>4.80</td>
<td>5.10</td>
<td>6.0</td>
<td>5.88</td>
<td>5.38</td>
<td>5.11</td>
</tr>
<tr>
<td>The variety of patient care experiences were sufficient to support my learning</td>
<td>4.89</td>
<td>5.25</td>
<td>6.0</td>
<td>5.63</td>
<td>5.63</td>
<td>5.07</td>
</tr>
</tbody>
</table>
# Final Grade Completion in TTAS
(# of days to submit final assessment after end of Block)

<table>
<thead>
<tr>
<th>Clerkship</th>
<th>Block 1 EOB: 10/29/21</th>
<th>AY 2020/21</th>
<th>AY 2019/20</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Medicine</td>
<td>19 - 21</td>
<td>3 - 28</td>
<td>7 – 28</td>
</tr>
<tr>
<td>Surgery</td>
<td>6 - 13</td>
<td>-4 – 28</td>
<td>7 - 21</td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>21 - 26</td>
<td>4 - 28</td>
<td>6 – 20</td>
</tr>
<tr>
<td>Psychiatry</td>
<td>20 - 25</td>
<td>10 – 28</td>
<td>7 - 28</td>
</tr>
<tr>
<td>OB/GYN</td>
<td>25 - 27</td>
<td>26 – 28</td>
<td>13 – 38**</td>
</tr>
<tr>
<td>Pediatrics</td>
<td>13 - 26</td>
<td>22 – 28</td>
<td>-1 - 27</td>
</tr>
</tbody>
</table>
Review of Narrative comments on Final assessments
Block 3 - AY 2018-2019

• All third year clerkships provide adequate narrative comments in each of the competencies and for the MSPE
• Dr Ellis provided a presentation to the Year 3 &4 Committee on CQI for MSPE comments
Conclusions

• No major comparability issues
• Clerkship requirements
  • All met by patient encounters or alternate assignments
  • Review patient encounter requirements as part of syllabus preparation for next academic year
• Areas that need attention and tracking
  • Continue to monitor student satisfaction given the implementation of changes in the curriculum in AY 2021/2022
  • Monitor outcomes, including NBME scores and final grades.
• Mid-clerkship completion for Year 3 Clerkships
  • excellent, all completed in timely manner
• Final grade completion – required courses MS3 year
  • 100% done in timely manner for the past 2 years based on PLFSOM policy (28 days).
  • 100% completed within 42 days (LCME standard). Last time > 42 days was in AY 2015-2016.
• Narrative comments
  • Overall meet expectations in all third year clerkships
    • Clerkships continue to work on framing expectations for honors, pass and needs improvement in each competency in their department with residents and faculty
    • Dr Ellis presented to the Year 3 & 4 Committee on improvements in MSPE comments and reducing implicit bias in comments
Suggestions/Questions?
<table>
<thead>
<tr>
<th>Year 3 Clerkship</th>
<th>Name</th>
<th>Title</th>
<th>FTE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internal Medicine</td>
<td>Suvarna Guvvala</td>
<td>Clerkship Director</td>
<td>0.5</td>
</tr>
<tr>
<td></td>
<td>Charishma Boppana</td>
<td>Assistant Clerkship Director</td>
<td>0.1</td>
</tr>
<tr>
<td>Psychiatry</td>
<td>Patricia Ortiz</td>
<td>Clerkship Director</td>
<td>0.4</td>
</tr>
<tr>
<td></td>
<td>Christopher Castaneda</td>
<td>Assistant Clerkship Director</td>
<td>0.2</td>
</tr>
<tr>
<td>Surgery</td>
<td>John Lawrence</td>
<td>Clerkship Director</td>
<td>0.5</td>
</tr>
<tr>
<td></td>
<td>Grace Ng</td>
<td>Assistant Clerkship Director</td>
<td>0.1</td>
</tr>
<tr>
<td>Family Medicine</td>
<td>Colby Genrich</td>
<td>Clerkship Director</td>
<td>0.4</td>
</tr>
<tr>
<td></td>
<td>Chenai Nettey</td>
<td>Assistant Clerkship Director</td>
<td>0.2</td>
</tr>
<tr>
<td>Pediatrics</td>
<td>Lynn Hernan (Fuhrman)</td>
<td>Clerkship Director</td>
<td>0.5</td>
</tr>
<tr>
<td></td>
<td>Joanna Wojciechowska</td>
<td>Assistant Clerkship Director</td>
<td>0.1</td>
</tr>
<tr>
<td></td>
<td>(resigned and is pending replacement)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OB/GYN</td>
<td>Patricia Rojas Mendez</td>
<td>Clerkship Director</td>
<td>0.5</td>
</tr>
<tr>
<td></td>
<td>Stephanie Mishaw</td>
<td>Assistant Clerkship Director</td>
<td>0.1</td>
</tr>
<tr>
<td></td>
<td>(Replacing Naima Khamsi)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year 4 Clerkship</td>
<td>Name</td>
<td>FTE</td>
<td></td>
</tr>
<tr>
<td>--------------------------</td>
<td>-----------------------------</td>
<td>-----</td>
<td></td>
</tr>
<tr>
<td>Surgery Sub I</td>
<td>Alonso Andrade</td>
<td>0.2</td>
<td></td>
</tr>
<tr>
<td>IM Sub I</td>
<td>Fatma Dihown</td>
<td>0.2</td>
<td></td>
</tr>
<tr>
<td>FM Sub I</td>
<td>Gerardo Vazquez</td>
<td>0.2</td>
<td></td>
</tr>
<tr>
<td>Pediatrics Sub I</td>
<td>Ittay Moreno</td>
<td>0.2</td>
<td></td>
</tr>
<tr>
<td>OB/GYN Sub I</td>
<td>Mary Ann Son</td>
<td>0.2</td>
<td></td>
</tr>
<tr>
<td>MICU</td>
<td>Harold Hughes</td>
<td>0.1</td>
<td></td>
</tr>
<tr>
<td>CVICU</td>
<td>Debabrata Mukherjee</td>
<td>0.1</td>
<td></td>
</tr>
<tr>
<td>PICU</td>
<td>Avi Kopstick</td>
<td>0.1</td>
<td></td>
</tr>
<tr>
<td>NICU</td>
<td>Ajay Singh</td>
<td>0.1</td>
<td></td>
</tr>
<tr>
<td>SICU</td>
<td>Susan McLean</td>
<td>0.1</td>
<td></td>
</tr>
<tr>
<td>Neuro ICU</td>
<td>Ananthia Vellipuram</td>
<td>0.1</td>
<td></td>
</tr>
<tr>
<td>Emergency Medicine</td>
<td>Michael Parsa</td>
<td>0.5</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Kelley Stanko – Assistant Clerkship Director</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neurology</td>
<td>Sushma Yerram</td>
<td>0.5</td>
<td></td>
</tr>
<tr>
<td>Bootcamp Co-director</td>
<td>Neha Sehgal</td>
<td>0.25</td>
<td></td>
</tr>
<tr>
<td>Bootcamp Co-director</td>
<td>Charishma Boppana</td>
<td>0.25</td>
<td></td>
</tr>
</tbody>
</table>
Stephanie M. Mishaw, M.D., M.P.H
Texas Tech University Health Sciences Center El Paso
Assistant Professor
Obstetrics and Gynecology
stephanie.mishaw@ttuhsc.edu
713-449-0486

Faculty Appointments

08/01/2020- Present  Assistant Professor
Texas Tech University Health Sciences Center Paul L. Foster School of Medicine, Department of Obstetrics and Gynecology.

Education

07/2019-06/2020  Academic Chief Resident in Obstetrics and Gynecology
Texas Tech University Health Science Center at El Paso
El Paso, Tx

07/2016-06/2020  Resident Physician in Obstetrics and Gynecology
Texas Tech University Health Science Center at El Paso
El Paso, Tx

07/2012- 05/2016  Doctor of Medicine
University of Texas Health School of Medicine at San Antonio
San Antonio, TX

01/2011-06/2012  Master of Public Health: Health Services Organization Major
University of Texas Health Science Center at Houston School of Public Health
Houston, TX

2006-2010  Bachelor of Arts in Biochemistry & Molecular Biology and International Relations
Agnes Scott College
Decatur, GA

Medical License/Board Certification

November 2021  American Board of Obstetrics and Gynecology
Active Member

May 2020  Texas Medical License
S6898
Posters/Published Works


Current Research

Mishaw S, Galic, V, Montoya, I, Maldonado Pedro A. Prevalence and Severity of Symptomatic Pelvic Floor Disorders in Latina vs non-Hispanic Survivors of Gynecologic Cancer. (Collecting Data.)

Committees

<table>
<thead>
<tr>
<th>2020- present</th>
<th>CCC Committee Member</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019-present</td>
<td>PEC Committee Member</td>
</tr>
</tbody>
</table>

Professional Organizations

<table>
<thead>
<tr>
<th>2021- present</th>
<th>Member, SASCOG</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015-present</td>
<td>Member, American Congress of Obstetricians and Gynecologists</td>
</tr>
<tr>
<td>2014-2016</td>
<td>Medical Student Representative, Bexar County Medical Society, Women in Medicine Committee</td>
</tr>
</tbody>
</table>

Awards/Honors

| 2020          | The Society for Academic Specialists in General Obstetrics and Gynecology Resident Award |
2020  The Society of Gynecologic Oncology, Outstanding Resident in Gynecologic Oncology

2016  The Paul C. Weinberg Scholarship Award, Department of Obstetrics and Gynecology at UT Health Science Center at San Antonio
Awarded in recognition of a strong social conscience, advocacy for women's rights and a respectful, caring and ethical approach to patients.

Lectures

Resident Lectures
- Intern Bootcamp: Fetal Heart Rate Tracings, June 26th, 2020 (3hrs)
- Basic OB Lecture Resident Didactics: Normal labor August 7th, 2020 (1hr)
- OB M&M, Oct 2nd, 2020 (1hr)
- Grand Rounds: Necrotizing Soft Tissue Infections November 13th, 2020 (1hr)
- Basic GYN Lecture Resident Didactics: PCOS April 30th, 2021 (1hr)
- Emergency Medicine Resident Didactics: Pregnancy Emergencies, April 15, 2021 (1hr)
- Basic OB Lecture Resident Didactics: Induction of Labor, July 2, 2021 (1hr)
- Basic OB Lecture Resident Didactics: Hypertension in Pregnancy, August 6, 2021 (1hr)
- Basic OB Lecture Resident Didactics: Multifetal Gestations, December 3, 2021 (1hr)
- Emergency Medicine Resident Didactics: Postpartum Hemorrhage January 13, 2022 (1hr)
- Basic OB Lecture Resident Didactics: Early Pregnancy Loss, February 4, 2022 (1hr)
- Basic OB Lecture Resident Didactics: Placenta Accreta Spectrum, February 25, 2022 (1hr)

Medical Student Lectures
- MS2 Medical Skills Station: Pelvic and Sonographic Correlation MS2, December 7, 2020 (8hrs)
- MS3 Clerkship Didactics: Normal labor and Intrapartum Fetal Surveillance, June 11, 2021 (1hr)
- MS2 Reproductive Medical Skills Course: Fetal heart rate tracing, November 22, 2021 (8hr)
- MS3 Clerkship Didactics: Normal labor and Intrapartum Fetal Surveillance, December 3, 2021 (1hr)
Kelley A. Stanko
2021 Bluff Creed St. Apt 902 El Paso, TX 79911
PHONE 480-239-2425 • E-MAIL kstanko@ttuhsc.edu

EDUCATION

July 2014-July 2017
University of Toledo
• Emergency Medicine Residency

July 2010-May 2014
University of Arizona College of Medicine
• Doctor of Medicine, May 2014

August 2004-2008
University of Arizona, Tucson, AZ
• Bachelor of Science, Molecular and Cellular Biology, cum laude

PROFESSIONAL EXPERIENCE

December 2021-Present
TTUHSC / UMC, El Paso Texas
Assistant professor, Associate Director of Ultrasound

July 2017-July 2021
Keesler AFB, Biloxi MS
Staff Physician – Emergency Department – Major USAF

July 2019-July 2021
Keesler AFB, Biloxi MS
Emergency Medical Service (EMS) Certified Medical Provider
• Functioned as not only the Medical Director for EMS for the entire military base but was also responsible for the training and maintenance of all EMTs and equipment. Had quarterly interdisciplinary meetings with Fire, Security Forces, Hospital and Base administrators to coordinate EMS response.

August 2019-February 2021
Merit Biloxi Hospital
PRN Emergency Physician

July 2014-July 2017
The University of Toledo
Emergency Medicine Resident

February 2011-Present
The United States Air Force Health Professions
Major
• Mentor to USAF HPSP applicants, participant in training, and community outreach

June 2011-July 2011
The United States Air Force Officer Training School
Flight Officer in Charge
• Leader of 15 trainees during USAF OTS training school; member of the Honor Squadron
Fall 2008-Spring 2010
Gilbert Public Schools
Substitute Teacher
- Grades K-12, all subjects

PRESENTATIONS

SimGHOSTS 2019
August 2019
Presentation Title:
Ocular Ultrasound Task Simulator: Journey from Invention to Patent

2nd Annual SDMPH Conference
August 2016
Presentation Title:
The University of Toledo Emergency Medicine Residency’s Global Outreach

Shanghai University Hospital
October 14, 2016
Presentation Titles:
Basic Ultrasound techniques
RUSH exam
Ocular and DVT ultrasound

TEACHING EXPERIENCE

December 2021-Present
TTUHSC El Paso, TX
Ultrasound instructor / Assistant professor of Emergency Medicine
- Provided ultrasound instruction during “Bootcamp” for 4th year medical students along with supervision of medical students and residents providing medical care in the UMC emergency department.

June 2019- July 2021
Keesler Air Force Base, Biloxi, MS
Ultrasound Instructor
- Provided lecture and hands on instruction to Internal Medicine Residents during their didactics

May 10-11 2017
Ohio ACEP
Ultrasound Instructor
- Provided hands on training to physicians attending a multi day CME course

October 2016
Shanghai University Hospital, Shanghai China
Visiting Lecturer
- Led hands on training in ultrasound, IO placement and interactive simulation

July 2014- July 2017
The University of Toledo
Emergency Medicine Teaching Track
- 1 of 2 residents in charge of PA, nursing and medical student simulation and procedure instruction on Emergency medicine situations and techniques
August 2015-2018
The University of Toledo Physicians Assistant Program
Ultrasound Instructor
  • prepared and taught multiple 4 hour hands on session of basic ultrasound theory and technique to over 50 second year PA students

August 2012-2014
The University of Arizona
Certified American Heart Association CPR Instruction
  • Taught AHA CPR to University hospital and medical staff as well as members of the public

August 2011-2014
The University of Arizona, REACT group
Continuous Chest Compression CPR instructor
  • Taught CCC CPR to children, school teachers and general public of Tucson

Fall 2008-Spring 2010
Gilbert Public Schools
Substitute Teacher
  • Grades K-12, all subjects

August 2007-2008
University of Arizona
Biology Tutor
  • Tutored undergraduate students in Basic biology

RESEARCH

Evan S. Glazer, MD, PhD, Kelley Stanko, BS, Evan S. Ong, MD, MS, FACS, Marlon A. Guerrero, MD, FACS,
*Obesity is associated with decreased inpatient mortality rates in patients with abdominal neuroendocrine tumors*

ACTIVITIES

CORD
*Resident Representative, 2016-2018*
  • Elected as a PGY 2, first resident representative ever from the University of Toledo Emergency Medicine Program

CORD Medical Student Advisement Taskforce
*Member, 2016-2018*
  • Selected from all Senior Emergency Medicine Resident CORD members to serve as a member of the taskforce whose purpose is to advise and teach medical students

College of Medicine Business Association
*Founder and President, August 2011-2012*
  • The objective of this organization is to educate and inform University of Arizona College of Medicine students about the steps involved in maintaining a private practice and the legal, financial and logistical requirements of starting their own business or being a partner in a small business.

The University of Arizona College of Medicine Honor Code Committee
*Vice-Chair, 2013-Present, Member, August 2010-2014*
  • Appointed by my class. Responsibilities include investigating claims, reviewing and analyzing cases of possible honor code violations and misconduct, voting on guilt or innocence and suggesting appropriate disciplinary actions to the Student Progress Committee.
The University of Arizona Student Advisory Committee
Member, May 2013-2014
- Appointed by the Dean of Student Affairs. Responsibilities included advising the Dean of Student Affairs on how better she can serve our medical student population.

CERTIFICATIONS

B.L.S. instructor June 2013-present
A.C.L.S. certified May 2013-present
P.A.L.S. certified May 2013-present
A.T.L.S. certified July 2014-present
A.W.L.S. certified May 2014-present

MEMBERSHIPS

Council of Emergency Medicine Residency Directors (CORD) 2016-2017
CORD Medical Student Advisory Taskforce 2016-2017
Society of Disaster Medicine and Public Healthy (SDMPH) 2015-present
Emergency Medicine Residents Association (EMRA) 2014-2017
The Society for Academic Emergency Medicine (SAEM) 2019-present