CEPC MEETING AGENDA  
01:00 PM - 02:30 PM  
06/09/2022

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; Jose Visente Sanchez

STUDENT REPRESENATIVES:
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; Martin Charmaine, MD; Jorge Cervantes, MD, PhD; Callaghan Kaitlyn; Curt Pfarr, PhD; Rebecca L. Campos, MD; Khatab Yacoub, Annabi Hani, Ellen F. Dudrey, MD; Dale W. Quest, PhD; Heather A. Balsiger, MS; Huddleston Melissa; Vashee Chandni; Diana Pettit, PhD; Ricardo Belmares, PhD

APPROVAL OF MINUTES
Minutes will be attached.

ITEM I NEW MEMBER - WELCOME
Presenter(s): Students

ITEM II - TOPICS FROM STUDENT REPRESENTATIVES
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**Item VI** Clerkship Directors Update
Presenter(s): Dr. Francis

**Open Forum**

**Adjourn**
MEMBERS IN ATTENDANCE:
Irene Alexandraki, Brad Fuhrman, Jessica Chacon, Houriya Ayoubieh, Maureen Francis, Nick Malize, Lisa Beinhoff, Osvaldo Padilla, Patricia Ortiz, Tanis Hogg, Jose Visente Sanchez, Tran Daniel

MEMBERS NOT IN ATTENDANCE:
Blake Busey, Linda S. Ellis Julio, Colby Genrich, Fatima Gutierrez, Munmun Chattopadhyay, Niti Manglik, Palvadi Karishma, Runail Ratnani, Rowan Sankar, Rohan Rereddy, Miraal Dharamsi, Whitney Shaffer

PRESENTERS/GUESTS IN ATTENDANCE:
Richard Brower, MD, FAAN; Diana Pettit, PhD; Dale Quest, Ricardo Belmares, PhD; Curt Pfarr, PhD, Khatab Yacoub, Annabi Hani, Maria Cotera; Priya Harindranathan, Rebecca L. Campos, MD

INVITED/GUESTS NOT IN ATTENDANCE:
Charmaine Martin, Jorge Cervantes, MD, PhD; Callaghan Kaitlyn; Ellen F. Dudrey, MD; Heather A. Balsiger, MS; Huddleston Melissa

REVIEW AND APPROVAL OF MINUTES
Dr. Alexandraki CEPC Chair
Meeting minutes from May 12, 2022 were adopted. Members voted electronically and asynchronously.

ITEM 1: NEW MEMBER - WELCOME
Presenter(s): Jose Visente Sanchez
Non-voting Associate Vice President for Information Technology designee
Mr. Sanchez works as the chief analyst for the IT Academics which serves all schools at the campus
Dr. Hogg said that he will be meeting with student representatives soon, and will provide an update about the new CEPC student members.

ITEM II - TOPICS FROM STUDENT REPRESENTATIVES
Presenter(s): Hani Annabi on behalf of Daniel Tran (MS3)

- No issues to report.

ITEM III PRE-CLERKSHIP PHASE REVIEW – MAS II&IV TEAM
Presenter(s): Dr. Francis

The review team identified the following course strengths:
- Course was well organized and useful to the students. 93% of students agreed that the course broadened their perspectives.
- Students overall enjoyed the opportunity to discuss the topics in depth.
- Essays were a good way to learn and improve writing skills.
- MS2s rated the practice ethics questions highly.
- Topics were relevant to the practice of medicine.

The team suggested the following areas of improvements:
- College Mentors – Dr. Gordon Woods and Dr. Herb Janssen retired at the end of AY 2020-2021 and Dr. Martine Coue and Dr. Brad Fuhrman are retiring at the end of AY 2021-2022 which will create a significant shortage of mentors. In addition, there are plans to open a 5th college due to class size expansion which could exacerbate the problem.
- There was some redundancy of topics with SCI.

An overview of selected LCME elements relevant to curriculum assessment:
- Program and Learning Objectives (6.1) – Met.
- Self-Directed and Life-Long Learning (6.3) - The students had essay assignments including ethical analyses and reflections based on prompts. The reflection essays were changed to “mini-reflections” that were done in class. In part, this change was made to be respectful.
of student time. College mentors provided the feedback. Essays were graded using rubrics that were available in the syllabi.

- **Academic Environments (6.7)** - There was an IPE Ethical case-based discussion in the spring semester of MS1 year. Physical therapy, pharmacy, and nursing students were invited to join and discuss pain management, drug diversion and addiction.

- **Inclusion of Biomedical, Behavioral, Social Sciences (7.1)** – Lack of diversity in the topics discussed was identified. Students would like to see topics relevant to current trends in medicine and the future of the medical profession.

- **Organ Systems/Life Cycle/Prevention/Symptoms/Signs/Differential Diagnosis, Treatment Planning (7.2)** – Met.

- **Scientific Method/Research (7.3)** – N/A.

- **Critical Judgment/Problem-Solving Skills (7.4)** - With the ethical questions that were proposed, students were encouraged to think critically about different situations and consider the complexity of ethical dilemmas. Critical thinking skills in regard to diagnostic skills weren’t addressed, but critical thinking skills were incorporated through the discussions especially concerning ethical topics.

- **Societal Problems (7.5)** – Students stated that racism could have been discussed, e.g. when discussion about Hela cells was held. They expressed the need for discussions on border health.

- **Cultural Competence and Health Care Disparities (7.6); Medical Ethics (7.7) and Communication Skills (7.8)** – Met.

- **Use of PGOs (8.2)** – Met.

- **Assessment System (9.4)** – Met.

- **Narrative Assessment (9.5)** – Met.

- **Formative Assessment and Feedback (9.7)** – Met.

The review team made the following recommendations:

- Provide more opportunities and venues for students to give feedback on topics of interest.

- Address sufficiency of college mentors for optimization of mentoring and advising.
- Review and address redundancy of topics with SCI.
- Enhance coverage of racism in health care topics.
- Address border health and disparities since a good portion of the patients seen on rotations are undocumented immigrants.

Discussion held regarding MAS II&IV review.

Dr. Pfarr stated that the biggest challenge would be staffing the colleges. He said the opening of the 5th college is ongoing, and there should be two college mentors in each college.

Student Hani Annabi commented that the topic of undocumented immigrants should be discussed. He explained that it would be useful to know what the protocol is when a border patrol agent is involved in patient care.

Dr. Ayoubieh noted that the border health topic is part of the course curriculum but it should be revisited based on students’ experiences.

**ITEM IV PRE-CLERKSHIP PHASE REVIEW – SPM II TEAM**

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

Scientific Principals of Medicine (SPM II) review team: Dr. Ayoubieh; Dr. Campos; Students: Yacoub Khatab and Hani Annabi.*Please see attached report.

The review team identified the following course strengths:
- Pathology slides in Hematology (HEM) unit were of high quality
- Cardiology and Pulm (CVR) unit: students found splitting the units useful.
- Cardio/Pulm/Renal (CVR) and (RNL) unit: students appreciated physiology content.
- Renal (RNL): the scheme presentations were useful.

The team identified areas for improvements across the units: some weeks very heavy in content; students did not appreciate the large group work case examples; students were using outside resources to cover the material because in-house material was deemed dated and inadequate;
students would like more self-assessment quizzes such as AMBOSS; Firecracker quizzes were not adequate to prepare for summative exam; students noted that the IRAT/TRAT and NBME should be aligned.

Final recommendations:
- Restructure coursework with enhanced foundation in physiology; students recommended that each week would offer an integrated, physiology-based lecture series that explores the entirety of a disease from diagnosis to treatment. Student Yacoub Khatab presented this concept/recommendation – report is attached.
- Review session flow and the amount of material to be covered during the week.
- Revise schemes. Update lectures and slides.
- Consider evenly distributing asynchronous learning each week and incorporating references to outside resources, such as First Aid and Amboss.
- Provide lecture recordings and consider involving the TA’s in reviewing the records or a scribe program through the students.
- Start with foundational material such as physiology as a base, e.g. in CVR in: EKG correlation, followed by pathology and pharmacology.
- Consider adding live pharmacology lectures to all weeks that is relevant to the scheme as it is both clinically relevant and heavily tested on board examinations.
- Build-in purposeful review, e.g. in cardio; cover EKG early in the first week, revisit EKG weekly specific to the schemes of the week/ revisit important pathology slides in HEM unit.
- Consider adding more self-assessment quizzes; many students seem to prefer using Amboss, in addition to Firecracker. Firecracker quizzes alone are not adequate to prepare for summative.
- Revise large group work case examples.
- Consider aligning the IRAT/TRAT and NBME questions.
- Anatomy: Present a vignette for every station and ask the students to choose the correctly label-ed structure; focus on clinically relevant anatomy.
Discussion held regarding SPM II review:

Student Yacoub Khatab explained that students’ intention is not to divert from the current curricular model but would like to incorporate different perspectives on each pathology. Dr. Brower commented that a disease-specific approach might distract from the clinical presentation level of analysis and learning which is the base of the curriculum. He stated that the number of specific diseases is so large, and the knowledge of each so vast, that the student-recommended approach would lose the “big picture”. He explained that this goes in line with the issues of “curricular bloat”. He said that at this level of learning, it’s not what tends to be heavily tested and he stated that the curricular model would be lost if the direction recommended by students is followed.

Dr. Campos explained that the review team’s intent was to address the flow and order of the material presentation, not necessarily eliminating components of schemes. Dr. Francis interjected to explain how the chest discomfort scheme was taught. She pointed out that even though the scheme mentions many diseases that were not cardiac, the focus was the cardiac causes. She noted that there might be a need for revisiting the order of topics per week for schemes due to possible changes over time. She added that there used to be a large group discussion about the sequencing during the week and that maybe this practice should be enforced again. She concluded by saying that the week is intended to follow a very logical flow (i.e., Kolb’s learning cycle), but it would be beneficial to take back the comments from students and verify if the schemes still make sense and follow this logical flow.

Dr. Pettit commented that with all the materials that have to be covered, aside from perhaps reorganizing things that might have gone out of sequence, there is no room for adding any more content without taking something out.

Dr. Ayoubieh added that there is a need for tying content better, making sure that there is connected physiology related to those pathologies that are presented earlier in the week, and then leading to a better flow.
Dr. Brower stated that, with the issue of designing the weeks, improving integration is always the goal. He said that pharmacology has been a longstanding area of challenge and that it is a natural place where integration should be happening throughout the week.

ITEM V PRE-CLERKSHIP PHASE REVIEW – SPM IV TEAM

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

Scientific Principals of Medicine (SPM IV) review team: Dr. Quest; Dr. Balsiger; Students: Yacoub Khatab and Hani Annabi

*Please see attached report.*

Dr. Quest stated that according to student evaluations the unit was well organized, with an appropriate and manageable amount of relevant material that aligned with session level learning objectives, and a fair unit summative assessment.

The students in the review team identified the following challenges:

- The process worksheets for this unit emphasized developmental milestones, but not enough attention to the most common conditions that lead to clinic visits for the various age categories (e.g., otitis media, strep throat), and are more reflective of the mixture of well child and sick visits that are seen in pediatric clinics.
- The current curriculum does not cover common pediatric surgery conditions during the human development weeks. Although some conditions are covered in other units (GI, MSK, etc.), it would be very helpful to recap them again during this unit.
- Neurocognitive disorders were not discussed at all in the Neuro unit prior to MHD.

The following suggestions for improvement were identified:

- It would be better to introduce the neurocognitive disorders in Neuro and then review them in more depth during MHD.
- Have more anatomy built into the developmental portion of the unit so students can solidify differences between child vs adult anatomy, that would be useful when doing physical exams.
Incorporate more microbiology, pharmacology, and pediatric surgery into the first 2 weeks of the unit to get well-rounded content coverage that is critical to STEP1 success and to third year as well.

Team discussed the tank side grand rounds:

This capstone event typically builds on the anatomy lab teams’ dissection of their donor cadaver. The ‘off campus’ pandemic contingency required each of the student groups to review an autopsy report instead that described the clinical history and gross findings, and to utilize the information provided to prepare a clinical pathologic correlation presented to an audience of their peers and faculty judges. Basic science and clinical faculty judged team presentations using the same grading rubric used in prior ‘on campus’ years. The overall learning experience in this pandemic year seemed to be as rich as ever. Continuing this method of using an autopsy report that includes medical test results may be a better way for students to prepare cases for tank side grand rounds cases because:

- Anatomy labs no longer involve full dissection.

Dr. Pettit commented that dementia should remain in the mental health unit and it should not be moved to the CSS unit, which is already a “huge” unit.

Dr. Belmares also noted that some imaging could be added to pediatric anatomy because there are no pediatric cadavers. Student Yacoub Khatab asked if it was possible to get a pediatric surgeon who could provide a presentation about the topic to help with anatomy. Dr. Pettit explained that some imaging was included and that they were working with the radiology members to support this. She agreed that a reorganization of the pediatric weeks is needed but the challenge is to acquire input from the clinical side because of their busy schedule. She said, however, that they will continue working on this matter.
Members voted electronically and asynchronously, and adopted the following items:

- Meeting minutes from May 12, 2022
- College Colloquium (MAS II&IV) course review
- Scientific Principals of Medicine (SPM II) course review
- Scientific Principals of Medicine (SPM IV) course review
- Clerkship directors update

Meeting adjourned at 2:30pm.

ITEM VI CLERKSHIP DIRECTORS UPDATE
Presenter(s): Dr. Francis

- Dr. Lynn Hernan (Fuhrman) is retiring – replacement is pending
- Dr. Singh has been appointed as the assistant clerkship director for the pediatric clerkship. Dr. Francis presented Dr. Singh’s curriculum vitae* (attached).

ADJOURN

Members voted electronically and asynchronously, and adopted the following items:

- Meeting minutes from May 12, 2022
- College Colloquium (MAS II&IV) course review
- Scientific Principals of Medicine (SPM II) course review
- Scientific Principals of Medicine (SPM IV) course review
- Clerkship directors update

Meeting adjourned at 2:30pm.