

Patient Care Work Group Meeting Minutes  
August 19, 2014 | HSB, Room D310

In Attendance: Curt Bennett, Sarah Shirley, Mark Whipple, Connie Lamb, Basak Coruh, Michael Ryan, Eric, Sherilyn Smith, Roger Tatum, Jan Carline Misbah Keen, Heidi Combs

### **Is it possible to fit neurology into the third year?**

There are a lot of constraints to fitting neurology into the third year, as having multiple clerkships of different lengths impacts availability across sites. If neurology is required in the third year, this would cut down the number of available clerkships from 13 to 8. The committee discussed allowing students to take neurology in either the third or fourth year (which would preserve the majority of the clerkships), but creating a requirement for how many clerkship weeks a student must complete before signing up for neuro.

The committee was favorable towards students taking 6-12 weeks of clerkships before being allowed to take neuro. This timeframe then could be open for people who are taking neuro later, or who want to do neurosurgery in the fourth year. There was discussion about whether neurology should be considered a core clerkship, as one of the goals of the new patient care phase was to ensure students take neuro before Step 2 of the boards. With an earlier clinical curriculum, students may want to take Step 2 earlier in the year. The patient care work group would like to see this model mocked up, with an estimate of how many students could take the neuro clerkship before Step 2.

### **Would completing all of the core clerkships in one year be a requirement?**

Students should complete these clerkships before their applications to residency programs. The required core clerkships should fit in a year but it doesn't have to be a year for every student. The vast majority would need to finish within a year, but we could have exceptions for research, other electives, etc., where students would have to apply for the extended time and go through an approval process.

### **What should fill the "dead space" between the four-week and six-week blocks?**

For this portion we could do vacation, electives, travel time, etc. Students would have a lot of options on the 12, 6, 4, and 2 model. Most people in the work group like the model with one-week intersessions and two-week winter break.

### **Can't remediation happen during the intersession? Can they stay at their site during the intersession?**

This depends. Could we schedule certain intersessions to happen at each site, like having choices as to where you could go and what you could do during your intersession? We could also use this time for students to spend a couple of days at testing sites doing assessment, etc. This way evaluation could be done with the exiting and entering groups.

This model could introduce the intersession and allow us to start working on competencies, etc. while still keeping what is familiar. This would be a standardization of orientation and evaluation and would allow students time to travel.

There was also discussion about carving out a few days of the clerkship in place of intersessions.

The work group also needs to consider the place of OSCES in the new curriculum – perhaps spaced out during intersessions, or all at once. There does need to be an increase in case numbers in the new curriculum.

**Integration of basic science into the patient care phase:**

There's been a large transformation with the foundational phase of the curriculum, to include clinical relevance and to make room for the early start to the clinical years. On the patient care side, we want to ensure that we are doing integration of the basic sciences into the clinical curriculum. This is what the intersessions would have been for, but members of the work group mentioned placing basic science content into the intersessions is not true integration of the curriculum. Basic science concepts could be worked through the clerkships – for instance, a review of anatomy concepts in surgery, or re-visitation of MBB in the neuro clerkship, or a series of basic science related online modules/lectures.

**Next steps?**

Mark Whipple will create an alternate model with what was discussed.

Connie Lamb will also create another model. Mark will incorporate what was discussed in model, and will assume one week intersessions to cover MIDM. Intersessions will also allow for travel under this model.