

Curriculum Connections

*A newsletter of the Education Council
and the Office of Medical Education*

March 1999

*Enclosed in this issue of Curriculum Connections is a draft of the
[Summative Competencies for Graduates](#) of the University of Kansas School of Medicine
which was endorsed by the Education Council and
which will be reviewed by the Faculty Council*

MESU Becomes OME

In January the Medical Education Support Unit (MESU) was renamed the Office of Medical Education (OME). OME incorporates MESU and the educational components of the Office of Primary Care. Under the direction of Giulia Bonaminio, Ph.D., the office reports to David Calkins, M.D., M.P.P., Senior Associate Dean for Education.

Sheryl Hodge, M.A., joined OME on Feb. 8th as a research and evaluation associate. Ms. Hodge will be working closely with Tony Paolo, Ph.D., on curriculum evaluation, educational research and the Center of Excellence Minority Medical Education Grant. Faculty are encouraged to contact Dr. Paolo for collaboration on evaluation and research projects dealing with undergraduate and graduate medical education. Dr. Paolo was recently named an external reviewer for the Research in Medical Education (RIME) section of the Group on Educational Affairs (GEA).

Educational Oversight Committees

Year 1-2 Oversight Committee Chair = George Enders, Ph.D

Year 3-4 Oversight Committee Chair = Michael Burke, M.D.

The committees have reviewed mid-year curriculum evaluations and are inviting course and clerkship directors to committee meetings to discuss their experiences from the fall semester.



MEDICAL STUDENT ONLINE SERVICE

The Office of Student Affairs (Kansas City) has created a web site to assist students as they travel the road from matriculation into medical school to the conferral of their M.D. degree.

Key sections of the site (<http://www.kumc.edu/som/medsos/>) include:

*Academic Development
*Career and Professional
Development
*Curriculum

*Interest Groups
*Student Advisory System
*Student Honor Code
*Student Organizations

*Personal Development
*Upcoming Events
*SOS Glossary

There is also a link from MED-SOS to the Wichita campus homepage (<http://wichita.kumc.edu/asa/>).

LCME Limited Site Visit

The report has been submitted to the Liaison Committee on Medical Education (LCME) for their upcoming limited site visit. The team will be visiting the medical school on April 11-14, 1999. OME would like to thank faculty, staff and students for their assistance in preparing the educational components of the report.

First Year News

Summary of Student Responses to the Mid-First Year Curriculum Evaluation (Fall 1998)

- The majority of students reported that the courses within the Cellular and Molecular Biology, Cardiovascular, Respiratory, and Musculo-skeletal blocks were well integrated.
- The majority of students reported that the length of the Respiratory, Cellular and Molecular Biology, and Cardiovascular blocks was about right. Most students noted that the Musculo-skeletal block was too short.
- Most students agreed that lecture time was used effectively and that clinically relevant material was provided in the lectures of Human Anatomy and Embryology (ATMY), Medical Physiology (PHYS), ICM 801: Clinical Skills (ClinSk), and Medical Biochemistry (BIOC). Less than half of respondents noted effective use of lecture time and presentation of clinically relevant material in Health Promotion Across the Life Span (HPAL) and Cell and Tissue Biology (CTB).
- Most students reported that lab time in ATMY was used effectively, while about one-fourth indicated that the lab time in CTB was used effectively.
- The majority of students indicated that small group time was used effectively and that the clinical relevance of small group sessions was made clear in BIOC, PHYS, and ClinSk. Less than one-third of respondents reported effective use of small group time and that the clinical relevance of small group sessions was made clear in HPAL.
- Most students indicated that the amount of scheduled contact time was about right for BIOC, ATMY, PHYS, CTB, and ClinSk, while more than two-thirds considered the amount of contact time for HPAL too much.
- Most students reported that the number of exams was about right. About half of the students indicated that the clustering of the exams was helpful.

A meeting with first year students and fall course directors to discuss the evaluation results took place on March 1, 1999.

Second Year News

Summary of Student Responses to the Mid-Second Year Curriculum Evaluation (Fall 1998)

- The majority of students agreed that the information presented across the courses was well integrated.
- Most students reported that the clinical relevance of the lecture material was made clear in General Pathology (PAON), Physical Diagnosis (PhyDx), and Microbiology (MBIO). About one-fourth of the students indicated that the clinical relevance of the Clinical Epidemiology and Prevention (CEP) lectures was made clear.
- The majority of students indicated that lecture time in PAON and PhyDx was used effectively. Less than half of the respondents reported that lecture time was used effectively in MBIO and CEP.
- Most students reported that small group time was used effectively and that the clinical relevance of the small group sessions was made clear in PAON, MBIO, and PhyDx. Less than one-fourth of the students agreed that CEP small group time was used effectively and that their clinical relevance was made clear.
- Most students noted that the scheduled contact time was about right for PAON, MBIO, and PhyDx, while the majority thought that the amount of contact time for CEP was too much.
- The majority of students indicated that the number of examinations was about right. Less than one-fourth of the students thought that clustering of the exams, like in the first year, would be helpful.

A meeting with second year students and fall course directors to discuss the evaluation results took place on March 5, 1999.

Third Year News

Summary of Student Responses to the Mid-Third Year Curriculum Evaluation (Fall 1998)

- At least half of students on both campuses reported that the Internal Medicine (IM), General Surgery (GS), Neuropsychiatry (NP), Pediatrics (PED), Family Medicine (FM), and Ambulatory Medicine/Geriatric (AM/G) clerkships provided a good learning experience. The majority of students in Wichita and one-third of the respondents in KC reported a good learning experience from the Ob/Gyn clerkship.
- Half or more of the respondents on both campuses reported that the objectives of the IM, NP, PED, FM, GS, and AM/G clerkships were clearly specified. Most students in Wichita and one-fourth of the students in KC agreed that the Ob/Gyn objectives were clearly specified.
- Most students on both campuses indicated that patient contact on the IM, GS, NP, PED, FM, and AM/G clerkships was sufficient for training purposes. For the Ob/Gyn clerkship, most Wichita students and less than half of the KC students indicated adequate patient contact.
- At least half of the students on both campuses reported that the didactic components on the IM, GS, NP, PED, FM, and Ob/Gyn clerkships enhanced the learning experience. About half of the KC and about one-third of the Wichita students noted that the AM/G clerkship didactic components enhanced the learning experience.
- Half or more of the students on both campuses indicated that they were able to complete the objectives of the IM, NP, Ob/Gyn, GS, FM, and AM/G clerkships within the allotted time. The majority of KC students, but less than half of the Wichita students, reported that they were able to complete the objectives of the PED clerkship.
- At least half of the students on both campuses noted that the evaluation methods were clearly explained on the IM, NP, PED, and FM clerkships. Less than half of the students on both campuses agreed that the methods used to evaluate their performance were clearly explained for the GS, AM/G, and Ob/Gyn clerkships.
- For all Kansas City clerkships, less than half of the students reported that the feedback about their progress was timely and appropriate. In Wichita, less than half indicated that timely feedback occurred on the GS, NP, Ob/Gyn, and AM/G clerkships. In contrast, more than half of the Wichita students reported timely feedback on the IM, PED, and FM clerkships.
- About half or more of the students on both campuses reported that the type and amount of faculty contact during the IM, NP, PED, GS, FM, and AM/G clerkships were adequate. Less than half of the respondents on both campuses agreed that the type and amount of faculty contact during the Ob/Gyn clerkship were adequate.

Fourth Year News

Summary of Student Responses to the Mid-Fourth Year Curriculum Evaluation (Fall 1998)

Results from the fourth year survey are being tabulated and will appear in the next issue of Curriculum Connections.

1998 AAMC Medical School Graduation Questionnaire Results

The 153 students who responded to the 1998 Graduation Questionnaire were part of the last class to complete their education under our old curriculum.

Student experiences in years one and two were addressed by a number of questions. Our graduates reported spending less time in case-based learning experiences than did students at other schools. For most courses, students agreed that basic science courses prepared students for clinical clerkships and these responses were similar to those of other schools. The response to questions concerning course objectives, integration, clinical relevance, etc. was similar to those of other schools. The greatest response differential was for questions dealing with integration and clinical relevance: our students reported less of both.

In years three and four, more of our students reported participating in primary care, family medicine, and community medicine in a rural setting than students at other schools. For most clerkships KU graduates reported that the quality of their educational experience was good.

The response to questions regarding preparation for clerkships, clarity of objectives, etc. was similar to that of other schools. Response differentials were greatest for clinical skills preparation for clerkships and number of patient experiences in clerkships: our graduates reported less of both.

Students reported an inadequate amount of time devoted to instruction in a variety of topics including medical socioeconomics, medical care cost control, and managed care. More than three-fourths of the respondents agreed that they were satisfied with their medical education and that they were confident that they had acquired the clinical skills required to begin a residency program. Regarding assessment of clinical skills, our students were less likely to report the use of standardized patients and computer case simulations. Compared to students at other schools, our graduates were more likely to report the use of computer-based record keeping and Internet/Intranet resources as an instructional aid.

Upcoming Events

University of Kansas School of Medicine Medical Education Retreat

June 4, 1999
Kansas Union
University of Kansas, Lawrence

Central Group on Educational Affairs (CGEA) Meeting

March 25-28, 1999
University of Missouri-Kansas City
Program available at
<http://www.medlib.iupui.edu/cgea/prog99.html>
Registration deadline: February 25, 1999
(One-day registration available)

Association of American Medical Colleges (AAMC) Annual Meeting

October 22-28, 1999
Washington, D.C.
Research in Medical Education (RIME)
Submission deadline: March 19, 1999
Information available at
<http://www.aamc.org/meetings/annual/1999/rime/>

International Association of Medical Science Educators (IAMSE) Meeting

Advances in Medical Science Education: Learning Modes and Teaching Strategies
July 17-20, 1999
Washington, D.C.
Abstract submission deadline: May 1, 1999
Information available at:
<http://www.IAMSE.org/4bic-poster.htm>

Leadership Course

Sponsored by the Office of Faculty Development

All sessions are from 1:00-3:00 p.m.

Organizational Change and Conflict Resolution

April 15, 1999
Rieke Auditorium
Richard Heimovics, Ph.D.
UMKC School of Business

Strategic Planning and Goal Setting

May 6, 1999
1023 Orr Major
Donald Hagen, M.D.
KUMC

Leadership and Time Management

April 22, 1999
1023 Orr Major
J. Michael Casparian, M.D.
Carmela J. Cannova, MBA
KUMC

Financial Issues and Budgets

May 13, 1999
1014 Orr Major
Dwayne Sackman
Mike Mulvaney
KUMC

Med Ed 101

A course sponsored by the Office of Faculty Development and the Office of Medical Education
All sessions are in 4050 Wescoe from 1:00-3:00 p.m.

Overview of Evaluation

March 5, 1999
Giulia Bonaminio, Ph.D.
Anthony Paolo, Ph.D.
Nancy Davis, Ph.D.
KUMC

Written Examinations

April 9, 1999
Steve Downing, Ph.D.
American Board of
Internal Medicine

Standardized Patients

May 7, 1999
Giulia Bonaminio, Ph.D.
David Virtue, Ph.D.
KUMC

A Message from the Chair of the Education Council

We are rapidly approaching the end of the spring semester and the completion of the two-year implementation phase of a significant curriculum revision and reorganization. This plan was developed in the Education Council and first approved by that body in the fall of 1993. The final guidelines and implementation plans were developed with the hard work and dedication of many faculty, staff and students. While the Education Council and its subcommittees have taken the lead in the process, many others including course and clerkship directors and the staff of the Office of Medical Education have contributed and continue to assist in making our curriculum a success. A hallmark of these efforts has been better communication and cooperation between academic departments and the two campuses of the Medical School. All of those involved are to be commended for a job well done, in spite of sometimes very challenging circumstances. A special thank you is due to the number of students whose input and sometimes criticisms have been important in making the curriculum plan work.

More recently, as a result of an examination of our curriculum and our expectations for our graduates, we have embarked on two additional efforts to facilitate both the coordination and improvement of our overall curriculum. The first of these is participation in the AAMC sponsored Curriculum Database Project which will allow us for the first time to construct a complete description of

our curriculum and all of its elements in an easily accessible format. The second of these efforts is the development of a summative competencies document describing the knowledge, skills and attitudes or behaviors we expect to develop in our graduates. Both of these efforts must, by their very nature, be works in progress. Course and clerkship directors have been asked for data for the database project and the Education Council recently approved a summative competencies document which will be sent to the Faculty Council. Additional data will be required for the appendices of this document and you will be seeing and hearing more about this effort.

Thus, while our work is not done, the Faculty of the School of Medicine has taken significant steps to make our educational programs both effective and successful. I know that each of you is dealing with competing demands for your time and effort and appreciate the daily choices you must make. I believe that what makes us unique as faculty members is our interest in education and the training of young professionals and future physicians. I hope you will continue to work with the Education Council, the Executive Dean and her Staff to recognize and reward educational efforts and to improve our curriculum. Each of you has a role in this continuing development and your input and involvement are both welcomed and necessary.

Allen B. Rawitch, Ph.D.
Chair, Education Council

Editorial Comments Invited

Curriculum Connections was developed by the Education Council to keep faculty and students informed about progress and procedures to reform the KU School of Medicine curriculum. Although the major implementation of the new curriculum is complete, the curriculum renewal process is ongoing and dynamic. *Curriculum Connections* will strive to keep faculty, students and staff up to date on the KU medical curriculum and you are invited to submit comments, suggestions and/or newsworthy items relating to medical education. Please contact either Dr. Allen Rawitch, Chair of the Education Council, or Dr. Giulia Bonaminio, Director of the Office of Medical Education, with your feedback.

Medical Education Network Sites

Featured site this month: Hays, Northwest Region

I don't know if the docs in NW Kansas are like the classic physicians in the days of old. I date back to that era, and think we generally provide better and more appropriate care with the divisions that we now have, than I did then. We do offer a lot at Hays, however, and in the smaller communities for the fourth-year rural preceptorship.

Hays has a broad range of medical specialties, ranging from Family Practice, through general Internal Medicine and Surgery to Cardiology and a Cardiovascular surgeon. Most of these specialists have evinced a willingness to teach if called upon. We have had a number of students take part or all of their third-year Pediatric and OB/GYN clerkships in Hays. We also have had at least two students complete all of their Family Medicine and Ambulatory Medicine/Geriatrics in Hays. There is a student there now who has taken much of her third year there, as well as a fourth-year selective in Radiology and a fourth-year Family Medicine clerkship. She plans on doing more Pediatrics and some Dermatology before she leaves our community.

We have had fourth-year preceptees in the region for many years. (Actually longer than the thirty-five years I have been in practice here. I precepted in Oakley in September of 1961 as a fourth-year student.) These students do get the

experience of an active small town family practice. Our present student stated that he has already had considerable OB experience, observing three deliveries and delivering one. He has also repaired lacerations, assisted at a tubal ligation and observed several colonoscopies. This is fairly typical of the experience offered to these students.

Those of us in NW Kansas believe that we practice contemporary medicine in an unhurried, compassionate manner. We welcome students to what may be one of the last such redoubts in Kansas.

Richard V. Ohmart, M.D.
Medical Education Site Director

Student Quotes

"The staff at Hays Hospital welcomed me into their "family" with warmth and kindness. I learned so much in such a short amount of time due to their willingness to teach."

Penelope Wright

"I have had a fantastic experience in Hays. The patient exposure has been excellent. The one-to-one teaching by the physicians that I have worked with has been invaluable."

Julia Reitz