



From the Education Council

Heidi Chumley, M.D.

The Office of Medical Education and the Education Council joined forces for the Annual Medical Education Retreat held June 16th, 2006. We were pleased to see 125 faculty members from the Kansas City and Wichita campuses in attendance.

The purpose of this retreat was to provide updates about major happenings in the medical school and provide skill-building breakout sessions for faculty members. Dr. Glen Cox summarized the LCME visit from October, 2005 which resulted in full 8 year accreditation. School strengths included the Office of Medical Education and the use of technology in learning. There is one major task to accomplish before the report in September, 2007: each overall learning objective must be tied to a measurable outcome.

Dr. James Fishback and Dr. John Wisner highlighted the new curricu-

lum, which began for incoming first year medical students on Aug 7, 2006. The new curriculum is structured in 4-8 week modules instead of semester long courses, has less lecture time and more small group time, and uses a strong technology platform. All students have a Hewlett-Packard Tablet PC. Learning materials are housed in Angel, a web-based course organization program. Electronic resources and virtual microscopy replaced paper textbooks and microscopes. Students have already figured out how to capture lectures as podcasts. (Ask someone under the age of 25...)

Dr. Scott Moser and Dr. Pam Shaw highlighted the changes in the third year of medical school. Each clerkship now has core conditions or symptoms and core skills and procedures each student should encounter while on that rotation. A new PDA-based patient encounter

program is up and running, allowing students and clerkship directors to see at any time how an individual student is progressing towards seeing patients with each of the core conditions. A group from both the Kansas City and Wichita campuses has put together a portfolio project that will begin this year on the Wichita campus. In this project, students gather documentation that they are meeting certain competencies and review this information with an advisor.

After a packed morning, participants chose to attend two of four sessions: Learning Styles, Problem-based Learning Tutor Training, Student Tablets, or Optimizing Student Performance. The Office of Medical Education and The Education Council appreciated the many faculty members who made time in their schedule for this important event.

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Special Point of Interest:

The School of Medicine's *New Faculty Orientation* website at <http://www.kumc.edu/som/guide/> has information necessary for teaching on the KUMC campus for the first time.

This is just one part of the new *Faculty Resources* link located on the left side of the School of Medicine's homepage: <http://www.kumc.edu/som/>.

Year I (Class of 2009) Curriculum Evaluation Results–Tony Paolo, PhD

Year 1 – Fall 2005 – Class of 2009

- The response rate was 49% (86/176).
- The majority of respondents (> 60%) agreed that the information presented across the courses within the semester was well integrated.
- The majority of respondents (> 66%) agreed that the overall quality of the course was good in all classes except Health Promotion Disease Prevention (HPDP). Less than half (33%) agreed that the overall quality of the course was good in (HPDP).
- The majority of respondents (> 62%) agreed that the lectures had sufficient illustrations of clinical relevance in all classes.
- The majority of respondents (> 61%) agreed that the lecture time was used effectively in all but HPDP classes. Only 29% agreed that the lecture time was used effectively in the HPDP class.
- The majority of respondents (> 72%) agreed that the lab sessions correlated with the lecture material in Cell and Tissue Biology (CTB), Human Anatomy and Embryology (ATMY), Medical Physiology (PHYS) and Clinical Skills (CSI).
- The majority of respondents (> 66%) agreed that the lab sessions facilitated learning of course objectives in CTB, ATMY, PHYS and CSI.
- Most respondents (> 59%) agreed that lab time was used effectively in CTB, ATMY, PHYS and CSI.
- The majority of respondents (> 79%) agreed that the small group sessions had sufficient illustrations of clinical relevance in BIOG, PHYS and Integrated PBL sessions. Only 36% agreed that the small group sessions had sufficient illustrations of clinical relevance in HPDP.
- The majority of respondents (> 73%) agreed that small group time was used effectively in BIOG, PHYS and Integrated PBL sessions. Only 29% agreed that the small group time was used effectively in HPDP.
- Most respondents (> 75%) reported that the amount of scheduled contact time was about right for BIOG, CTB, ATMY, PHYS and CSI. The majority of respondents (61%) indicated that the amount of scheduled contact time was too much for HPDP.
- The majority of respondents (> 74%) agreed that the length of the blocks was about right in the Cellular &

Molecular Biology block and in the Cardiovascular block. About half, for the Respiratory block and 46% for the Musculo-Skeletal block, indicated that the length of the block was too short.

- Most respondents (88%) reported that the number of exams was about right with 11% indicating there were too many. Only 31% of the respondents agreed that the clustering of the exams was helpful while 36% disagreed.

Year 1-Spring 2006–Class of 2009

- The response rate was 28% (48/172).
- The majority of students (> 59%) agreed that the information presented across the courses within the semester was well integrated.
- The majority of the respondents (> 82%) agreed that the overall quality of the course was good in Cell & Tissue Biology (CTB) and in Human Anatomy and Embryology (HAE). More than half of the respondents (> 62%) agreed that the overall quality of the course was good in Clinical Skills (CSI), Neuroscience (NEU) and Physiology (PHYS). Only 35% for Social Basis of Medical Practice (SBMP) and 46% for Medical Biochemistry (BIOC) agreed that the overall quality of the course was good. *Continued on page 3.*

Year II (Class of 2008) Curriculum Evaluation Results-Tony Paolo, PhD

Year 2 – Fall 2005 – Class of 2008

- The response rate was 56% (98/175).
- The majority of students (> 70%) agreed that the information presented across the courses within the semester was well integrated.
- About half of the respondents (> 59%) agreed that the overall quality of the course was good in Clinical Skills (CSII). The majority (> 68%) agreed that the overall quality of the
- course was good in Microbiology (MBIO) and General Pathology (PAON) and only 39% agreed for Clinical Epidemiology and Prevention (CEP).
- The majority of respondents (> 77%) agreed that the lectures had sufficient illustrations of clinical relevance in MBIO and CSII. Almost all agreed (> 96%) agreed that the lectures had sufficient illustrations of clinical relevance in PAON, while less than half (35%) agreed for CEP.

- The majority of respondents (> 62%) agreed that the lecture time was used effectively in MBIO and PAON. About half (58%) agreed that lecture time was used effectively in CSII while only 30% agreed for CEP.

- The majority of respondents (> 84%) agreed that the small groups had sufficient illustrations of clinical relevance in MBIO and Integrated PBL. Only 32% agreed that the small groups had sufficient illustrations of clinical relevance in CEP.

Continued on page 3.

Year I (Class of 2009) Curriculum Evaluation Results Cont.

Continued from page 2.

- The majority of respondents (> 74%) agreed that the lectures had sufficient illustrations of clinical relevance in all classes except BIOC and SBMP. Only 50% agreed that the lectures had sufficient illustrations of clinical relevance in BIOC and 42% agreed that the lectures had sufficient illustrations of clinical relevance in SBMP.
- More than half of the respondents (> 53%) agreed that the lecture time was used effectively in all classes except BIOC, CS1 and SBMP. Only 48% agreed that the lecture time was used effectively in CS1, 41% agreed that the lecture time was used effectively in BIOC and 30% agreed in SBMP.
- The majority of respondents (> 86%) agreed that the lab sessions correlated with the lecture material in all classes.
- The majority of respondents (> 73%) agreed that the lab sessions facilitated learning of course objectives in all classes.
- The majority of respondents (> 62%) agreed that lab time was used effectively in all classes.
- The majority of respondents (> 62%) agreed that the small group sessions had sufficient illustrations of clinical relevance in all classes except SBMP. Only 29% agreed that the small group sessions had sufficient illustrations of clinical relevance in SBMP.
- About half of the respondents (> 49%) agreed that small group time was used effectively in all classes except SBMP. Only 29% agreed that small group time was used effectively in SBMP.
- Most respondents (> 71%) reported that the amount of scheduled contact time was about right for all classes except SBMP. Only 47% reported that the amount of scheduled contact time was about right for SBMP.
- More than half of the respondents (> 51%) agreed that the length of the blocks was about right. It should be noted that 44% indicated that the length of the Neuroscience Biology block was too short and 38% reported that the length of the Endocrine System block was too short.
- The majority (73%) reported that the number of exams was about right and 25% indicated that there were too many. Only 25% of the respondents agreed that the clustering of the exams was helpful while 52% disagreed.

Year II (Class of 2008) Curriculum Evaluation Results Cont.

Continued from page 2.

- Most respondents (> 71%) agreed that small group time was used effectively in MBIO and Integrated PBL. Only 23% agreed that the small groups had sufficient illustrations of clinical relevance in CEP.
- The majority of respondents (> 77%) reported that the amount of scheduled contact time was about right for MBIO, PAON, and CSII. About half of the respondents (59%) indicated that the amount of scheduled contact time was about right for CEP.
- The majority of respondents (84%) agreed that the number of examinations during the semester was about right.
- across the courses within the semester was well integrated.
- The majority of the respondents (> 59%) agreed that the overall quality of the course was good in Systemic Pathology (PAON), Clinical Skills (CSII) and Behavioral Medicine (BehM). Less than half (38%) agreed that the overall quality of the course was good in Medical Ethics (MedE), while the majority (95%) agreed for the Pharmacology (PHRM).
- Almost all the respondents agreed that the lectures had sufficient illustrations of clinical relevance in PAON and PHRM. The majority of respondents (> 73%) agreed that the lectures had sufficient illustrations of clinical relevance in CSII and BehM. About half (52%) of the students agreed that the lectures had sufficient illustrations of clinical relevance in MedE.
- The majority of respondents (> 59%) agreed that the lecture time was used effectively in PAON, PHRM and BehM. Only 40% agreed that lecture time was used effectively in CSII, and only 24% agreed that lecture time was used effectively in MedE.
- The majority of respondents (> 85%) agreed that the small groups had sufficient illustrations of clinical relevance in Integrated PBL cases and PHRM. About half (57%) agreed that the small groups had sufficient illustrations of clinical relevance in MedE.
- The majority of respondents (> 65%) agreed that small group time was used effectively in Integrated PBL cases and PHRM. About half (52%) agreed that small groups time was used effectively in MedE.
- The majority of respondents (>55%) reported that the amount of scheduled contact time was about right for all classes.
- The majority of respondents (83%) agreed that the number of examinations during the semester was about right.

Year 2–Spring 2006–Class of 2008

- The response rate was 25% (43/170).
- The majority of students (70%) agreed that the information presented

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Is there something you would like to see featured? If so please email Connie Kramer at ckramer@kumc.edu.

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Teaching Tip – Lecture 101

Nellie Modares, Teaching and Learning Technology

As you prepare your lecture, try to present no more than three or four major issues in a lecture, with time for examples and questions. In this way, students can direct their attention to the most important information. Anything more than a few points and students will be overwhelmed.

According to research, students remember the first and the last ten minutes of lecture, but little of the intervening time. Therefore, break up your lectures so that they are presented in 20-minute chunks. Switch gears after each 20 minute mini-lecture and do something different: pose a discussion question, small group discussion, or problem-solving activity. Students have a limited attention span--so take advantage of it to structure your class

Phase I Curriculum—Jim Fishback, M.D.

.We have now finished the first two modules of the new curriculum, and we are beginning to take stock of what has been accomplished.

The Foundations module includes components of cell and tissue biology, biochemistry, biostatistics, bioethics, and medical interview skills. Sitting in on lectures, the flow of material seems to be integrated, though the students appear to favor the “hard science” material in their study schedules. Since the exams are integrated, this approach may have caught a few folks napping on the first test. As always, the students are adjusting, and their study regimen will no doubt improve on the second exam.

For the first time, we are using a “competency-based” exam in the first year, wherein students will have two chances at achieving the score they want on the final exam. This is modeled on the Pharmacology testing scheme, first popularized by Dr. John Doull, over 25 years ago. If the students fail the Friday exam, or don’t get the score they want,

they can then study over the weekend, and take a similar examination on Monday. It is a new approach to testing in Year 1, and both professors and students are adapting.

Perhaps the biggest hit in the new curriculum has been the HP Tablet PC. The model Compaq tc4200, along with Agilix GoBinder and Microsoft One-Note note-taking software, have enabled students to be more organized than ever before (even if organization is not one of their strong points). Agilix GoBinder currently appears to be the most popular choice for note-taking (approximately 80% of those surveyed), though Microsoft OneNote is expected to gain users, once the upgrade to Office 2007 occurs in January or February.

The Aperio virtual microscopy system has also been a winner, with students able to capture microscopic images off the server, and paste them directly into their notes, in essence creating their own, personalized atlas. Initially, there were a few problems operating with

such large files (>1 Gigabyte) in a wireless environment, but most of the technical issues have now been solved, and the platform seems to be working well. Pathology is being taught alongside normal histology for the first time, and the students appreciate being able to make side-by-side comparisons.

All lectures are being podcast, which is the natural electronic evolution of the student notetaking service. The traditional student notetaking service has disappeared. Students are able to review the audio synced with the slides shown in lecture, as a means of review. It has made the lectures a more effective medium for transfer of information and subsequent clarification of details.

The new curriculum is off to an excellent start, student and faculty morale are high, and we hope that we can continue to make improvements as the modules proceed, finishing the first year with the Sexuality and Reproductive Medicine module in May.

Upcoming Faculty Development Workshops

International Association of Medical Science Educators (IAMSE)

“LEARNER CENTERED STRATEGIES FOR THE LECTURE HALL”

Webcast Seminars: October 17, 24, November 7, 14, 21; 12:00 noon—1:00 p.m. CST; various campus locations.

For additional information visit <http://www.kumc.edu/som/facdev/iamse> or the IAMSE website: www.IAMSE.org

Writing Workshop “EFFECTIVE PROFESSIONAL WRITING: CRAFTING CLEAR SENTENCES”

November 1, 2006; 12:00 noon—1:00 p.m.; Clendening Auditorium

Martha Montello, Ph.D., Associate Professor, Department of History and Philosophy of Medicine

Director, Writing Consult Center, School of Medicine