

Pre-clerkship Curriculum Reform at HMS

The Program in Medical Education (PME) convened faculty and administrative leaders in the New Pathway MD Program for an annual Medical Education Retreat held in June. The focus of the 2012 retreat was on a proposed review of the Fundamentals of Medicine pre-clerkship curriculum. In 2006, a New Integrated Curriculum was introduced, but it focused primarily on Year III of the MD curriculum—the Principal Clinical Experience (PCE).



Since 2006, our faculty have continued to be engaged in task forces to evaluate the way we teach introductory clinical skills and to reconsider our approach to classroom learning in large and small groups and in laboratory settings. To teach clinical skills, a more integrated Year-I-II course that combines Patient-Doctor I and II and that adds longitudinal ambulatory experiences has been proposed. In large and small group teaching sessions, i.e., lectures and tutorials, more interactive approaches that foster critical thinking have been piloted, and new, experimental teaching spaces have been designed and brought on-line (“classrooms of the future” in TMEC). At the same time, generational changes in the way students learn, engage with faculty and course content, and rely on digital resources have altered the learning environment and create an imperative to consider innovative approaches.

Newly renovated, high-tech classrooms in TMEC



Despite the initiatives of the last decade at HMS, the ever-changing learning environment stimulates us to ask many important questions about what we teach, how to organize the material, what teaching methods to employ, who should be teaching and what skills do they need, and how to better integrate the pre-clerkship basic sciences with the clinical medicine of the clerkship years.

Interactive large group teaching technologies, such as audience response, are being evaluated



To consider these and many other challenging questions, we have formed a new Task Force to review and redesign the Fundamentals of Medicine pre-clerkship curriculum. This important Task Force will undertake a comprehensive, wide-ranging reassessment, unfettered by any preconceived tenets or disciplinary boundaries, of what we should teach in the pre-clerkship curriculum; where and when we should teach it; how we should teach it and assess students; and who should teach it. The Task Force will chart a course for teaching the pre-clerkship fundamentals of medicine to first- and second-year New Pathway program students for the next decade.

The *Task Force on Redesign of the Pre-clerkship Curriculum* will be chaired by Richard Schwartzstein and co-chaired by Melanie Hoenig. We anticipate that the work of the Task Force will be carried out over a 4-year timeframe, with the goal of implementing curriculum changes in AY15. A progress report will be reviewed at the Annual Medical Education Leadership Retreat in June 2013; curriculum planning and course redesign will occur throughout AY14; and, for the incoming class of 2018, implementation of a new Year-I curriculum will begin in August 2014 (AY15) and a new Year-II curriculum in August 2015 (AY16).

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Credits to the Center for Educational Technology, the iCommons Group and support from the HMS Academy Office for Educational Research

Who's Who in the Harvard Medical School Academy



[Christian Arbelaez, MD](#)

I am currently the Assistant Residency Director of the Harvard Affiliated Emergency Medicine Residency Program and teach students and residents in the emergency department of the BWH. I have led the design and implementation of several clinical and educational innovative programs including a large-scale NIH-funded clinical trial evaluating rapid HIV testing in the ED, a hospital-wide development guidelines for the care of the critically-ill mechanically ventilated patient, and a comprehensive core competency assessment program for the EM residency program. Currently, I have developed PGY specific promotional

criteria and have implemented a promotions committee that will begin to use the EM milestones. I also have several educational EM residency development projects in Colombia.

Debra Boyer, MD



I am an Assistant Professor of Pediatrics at Harvard Medical School and work as a Pediatric Pulmonologist at Boston Children's Hospital. I serve as the Pediatric Pulmonary Fellowship Director as well as an Associate Program Director for the Boston Combined Residency Program in Pediatrics. I have served as the Fellowship Board Member on the APPD Board of Directors and currently am working with the American Board of Pediatrics on the Subspecialty Clinical Training and Certification Task Force. I also am a faculty member for the Harvard Macy Program for Educators in the Health Professions. My research interests in medical education involve studying the terms service and education as understood by trainees and program directors and their influence on curricular development. In addition, I have worked to develop a pediatric pulmonary fellowship Boot Camp and am working to develop assessment tools for this project. My clinical interests are in general pediatric pulmonology, lung transplantation and pulmonary GVHD.

Stephen Calderwood, MD



I am the Morton N. Swartz, M.D. Academy Professor of Medicine at Harvard Medical School and the Director of Undergraduate Medical Education and the Principal Clinical Experience at the Massachusetts General Hospital. I am also the Vice Chair of the Department of Medicine at the MGH, overseeing the education of students, residents, fellows, and post-graduate education in the department. I serve at the MGH on the Undergraduate Medical Education Committee and on the Executive Committee on Teaching and Education, and at HMS on the PCE Executive Committee and the Curriculum Cabinet. In 2012, I received the William Silen Lifetime Achievement in Mentoring Award from Harvard Medical School.

S. Jean Emans, MD



I am a Professor of Pediatrics at Harvard Medical School, Chief of the Division of Adolescent/Young Adult Medicine and Director of the Office of Faculty Development at Boston Children's Hospital. I enjoy many educational and teaching activities as part of my two roles. In faculty development, our Office is responsible for multiple seminars, fostering the Teaching Academy at Children's, and working with the other teaching hospitals and HMS on the Effective Mentoring and the Leadership courses. In my Division, as PI of one of seven Leadership Education in Adolescent Health (LEAH) training grants in the U.S. funded by the Maternal and Child Health Bureau, I oversee the intraprofessional training of fellows in medicine, nursing, psychology, nutrition, and social work. I have been particularly fortunate to work with Harvard Macy Program Educator Elizabeth Armstrong to develop teaching workshops for our fellows and faculty. I also direct two HMS postgraduate courses in Adolescent Medicine and Pediatric and Adolescent Gynecology. My special interests are in adolescent gynecology and reproductive health and in medical education and models of mentoring.

Emily Hayden, MD



I am an Instructor in Surgery in the Department of Emergency Medicine at Massachusetts General Hospital (MGH). Following residency training, I pursued a fellowship in medical simulation at MGH and HMS. During this time, I taught preclinical medical students in the HMS Gilbert Program in Medical Simulation. Concurrently with the fellowship, I completed a Master's in Health Profession Education (MHPE) at the University of Illinois at Chicago. Since the completion of my simulation fellowship in 2008, I have been teaching and leading simulation programs at MGH Learning Laboratory (simulation center) and HMS Gilbert Program, covering undergraduate, graduate and continuing medical education. My current roles in simulation are the Associate Director of Curricular Integration at the Gilbert Program, as well as the Director of Simulation Faculty Development in the Department of Emergency Medicine at MGH. I have presented on simulation locally, nationally, and internationally. My scholarly work has focused on clinical reasoning, the development and maintenance of expertise, and the simulation environment. I have been teaching in the medical sciences since I was a sophomore in college, and I find that my most enjoyable teaching experiences are with the small group debriefing sessions in the simulation laboratory. These debriefing sessions create rich learning environments that are more student-driven, where the students' engagement in the case creates the discussion.

Anjala Tess, MD



I am an Assistant Professor of Medicine at Harvard Medical School, Associate Program Director of the Internal Medicine Residency Program in the Department of Medicine at Beth Israel Deaconess Medical Center (BIDMC) and Director of Quality and Safety Education for GME at BIDMC. As a hospitalist I teach residents and students, and take care of patients on the inpatient medicine wards. My main area of academic interest is in educating trainees and faculty about quality improvement and patient safety. Together with our Patient Safety Core Faculty, I run our Stoneman QI rotation which gives residents the opportunity to develop QI projects and analyze real adverse events, and direct our student elective in safety and quality. If you are working on QI or Safety education at your institution please email me! I would love to swap stories.

Why I Teach

I teach because every day a student asks me a question to which I don't know the answer.

I teach because it rejuvenates my excitement about the brain and nervous system.

I teach because becoming a better teacher makes me a better doctor.

I teach because neuroanatomy is hard to learn.

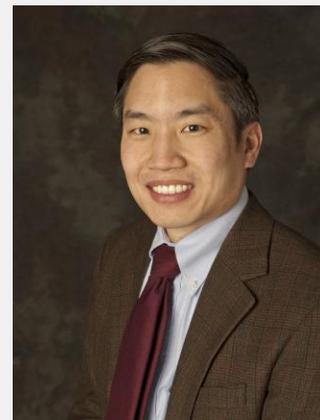
I teach because great research ideas come out of discussions with students.

I teach because I remember my own professors from medical school.

I teach because students are my future colleagues.

I teach because it is part of my job.

Bernard S. Chang, MD, MMSc is an Associate Professor of Neurology at Harvard Medical School and the 2012 Recipient of the S. Robert Stone Award for Excellence in Teaching



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Challenges in child and adolescent psychiatric education. Beresin EV, Balon R, Coverdale JH, Roberts LW. Acad Psychiatry. 2012 Nov 1;36(6):429-32. doi: 10.1176/appi.ap.12090164. No abstract available. PMID: 23154685

Resident and attending physician attitudes regarding an audience response system. Kung JW, Slanetz PJ, Chen PH, Lee KS, Donohoe K, Eisenberg RL. J Am Coll Radiol. 2012 Nov;9(11):828-31. doi: 10.1016/j.jacr.2012.06.004.

Contact Us

(617) 432-5401

academy@hms.harvard.edu

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