

February 9, 2006 CME Minutes

1. Curriculum Renewal

Dr. Terry Wolpaw, Associate Dean for Curricular Affairs, presented the new **USMLE Step 1 Requirements Policy** to gather input from CME members. Dr. Wolpaw described the policy as very much a collaborative effort by both University and College Program principals. **Why a revision of current policy?** 1) The whole clerkship situation has changed. The new curriculum will consist of the considerably longer 16-week blocks. In the new curriculum, all students will take the USMLE Step 1 after completion of basic science and the ensuing Board study period and prior to beginning their clinical rotations or research. 2) The USMLE Step 1 is already much more clinical than in years past. Some medical schools have their students take the exam after completion of their clerkships. The USMLE Step 1 is 100% clinical cases. The basic science occurs in the context of a clinical case. The new USMLE Step 1 policy was designed to be flexible and student-friendly. The policy presented applies to both the current Year I and Year II classes as well as subsequent classes.

For ease in accessing the official version of the USMLE Step 1 requirements policy posted on the CME Web site, the complete policy, with revisions reflecting CME feedback from this February 9 meeting as well as one additional change subsequently passed by the CME at its March 9 meeting, follows:

Case Western Reserve University School of Medicine University and College Programs

USMLE Step 1 Requirements

1. In Year II, all students in the University and College Programs will take the USMLE Step 1 at the end of the board study period, prior to beginning clinical rotations or research block.
 - a) Students who pass the examination proceed normally through their schedule.
 - b) Students who do not pass Step 1 may finish the specific core rotation (basic core or research block) in which they are engaged when they receive their score and then either:
 - Take a one-month board study elective, retake the exam, and then take elective or advanced core rotations for which they have fulfilled the pre-requisites until the next opportunity to begin a core rotation, or
 - In consultation with their adviser, complete the remaining basic core(s), take a one-month board study elective prior to retaking the examination, and then proceed with elective or advanced core rotations until results are known.
2. University and College Program students may petition to delay sitting for Step 1. This request must be reviewed and approved for University students by their Society Dean and Vice Dean for Education, and for College students by their Physician Adviser and Associate Dean for Student Affairs. These delays will be approved only when there is a compelling reason to delay the examination. Students must take the USMLE Step 1 within 8 weeks of completing the first basic core. Students in the University program may not take the research block until they have taken the examination.

3. University Program students are required to take the examination prior to beginning the research block.
 - a) University Program students who learn that they failed the examination during the first research block may take at least one basic core prior to retaking the exam, which will make them eligible for elective or advanced core rotations after retaking the examination.
 - b) University Program students who learn that they failed the examination during a basic core rotation are required to retake the exam prior to beginning the research block.
4. All students (University and College) who do not pass on their first attempt are required to retake the exam within 8 weeks of completing the second basic core rotation.
5. Students who do not pass on their second attempt may complete the rotation they are doing when they receive their score report but then must cease all future rotations until they take the examination. Students in the University Program will meet with the Committee on Students (CoS) and students in the College Program with the Medical Student Promotions and Review Committee (MSPRC).¹ After taking the exam for the third time, students may begin a clinical rotation while awaiting the results.
6. Students who do not pass the examination on their third attempt will be referred to the Committee on Students (University) or the Medical Student Promotions and Review Committee (College) with a formal recommendation for dismissal.

¹Selected text represents a later revision passed at the March 9, 2006 CME meeting. For specifics of this revision see [March 9, 2006 CME Minutes](#) on this Web site.

During **discussion**, the following points were made:

Dr. Smith noted that students cannot choose when they take the USMLE Step 1 a second time. Some students who do not pass the exam need to take a special course, such as the four-week course offered in Kansas City that has its own schedule. Dr. Wolpaw felt that the 6 weeks of study time and elective time would be flexible enough to accommodate scheduling requirements. Dr. Fishleder added that a student could take a vacation month if more time were desired.

Variations on wording were suggested for the last policy item (no. 6), which deals with referral to the Committee on Students and recommendation for dismissal for students who do not pass the USMLE Step 1 on their third attempt. Item number 6 above reflects the revised wording that was voted upon, not the original wording.

Dr. Fishleder moved to change the original wording pertaining to students not passing the USMLE Step 1 on their third attempt as follows and also to approve the new USMLE Step 1 Requirements policy as amended (appears in detail earlier in the minutes):

Students who do not pass the examination on their third attempt will be referred to the Committee on Students for the University Program or to the Medical Student Promotions and Review Committee for the College Program with a formal recommendation for dismissal.

Both Dr. Brunengraber and Dr. Previs seconded the motion.

The motion passed:

6 in favor

0 opposed

1 abstention

Dr. Brunengraber raised the question of what happens when an MSTP (Medical Scientist Training Program) student fails the USMLE Step 1. Dr. Wolpaw felt that this was up to the student's program director. Currently, there is no rule. All MSTP students go immediately into their Ph.D. work for four years. The new policy was formulated for medical students entering their clerkships. **It was requested that Dr. Cliff Harding bring a policy statement to the CME regarding MSTP students not passing the USMLE Step 1.**

The policy with the revisions noted above was approved by the CME and will be forwarded for consideration by the Faculty Council.

2. Flexible Program Council Update

Dr. Kent Smith, Flexible Program Coordinator, mentioned that Case received many requests, upwards of 100 this year, from students outside the university wishing to enroll in Type B electives, such as Pediatrics at Rainbow, Dermatology, Anesthesia, Family Medicine, Orthopedics, ENT, Radiation Oncology, Ob/Gyn, Neurology and medical subspecialties such as hematology/oncology. As the Cleveland Clinic schedules visiting students for their own elective sites—this listing of popular electives pertains to UH/VA and Metro sites. Dr. Smith also mentioned that Ms. Antoinette Nethery noted that Case received many requests from students about Complementary and Alternative Medicine electives.

3. Library Update

Mrs. Virginia Saha, Director of the Cleveland Health Sciences Library, mentioned that she has been working with Dr. Tom Nosek and Dr. David Kaelber on medical informatics for Block 1, which will include not only the literature searching but also patient records conforming to HIPPA regulations and genomics. There will be four two-to-three hour blocks of afternoon time in Block 1 for medical informatics instruction. Two of those will be on using library resources, including search techniques which will be based on cases. It is expected that the medical informatics learning objectives will be incorporated throughout the new curriculum. The addition of more electronic resources is planned. A new trial was added this month for *Faculty of 1000 Biology*, “a new online research service,” distributed by BioMed Central, that “highlights and reviews the most interesting papers published in the biological sciences, based on the recommendations of a faculty of well over 1000 selected leading researchers.” Case School of Medicine Dean Ralph Horwitz is among the reviewers. Cell Press journals are now part of the OhioLINK Electronic Journal Center. Mrs. Saha has recently completed negotiations for online Case access to the *Journal of the American Medical Association*. When questioned by a discussant who had trouble accessing *Science*, Mrs. Saha explained that there are many different ways to access each journal. All are IP-authenticated, which means you either

have to be on campus or use VPN authentication. The only remaining password access is to the *AMA Archives* journals.

4. **CCLCM Curriculum Steering Council Update**

Dr. Andrew Fishleder, Cleveland Clinic Lerner College of Medicine Curriculum Steering Council Chair, highlighted the Year I **Basic & Translational Research Block Course Review** as presented to the Curriculum Steering Council by course leader, Tom Hamilton, Ph.D. This is the second year that this summer course has been officially reviewed before the CSC. The course has three components: 1) **Fundamentals of Molecular Medicine**, 2) **Journal Club**, and 3) **Research Lab** rotation. Overall feedback was very positive with some suggestions for improvement.

The **Fundamentals of Molecular Medicine** consists of 1) **Problem Solving sessions** utilizing a case-based, Problem-Based Learning approach to cell and molecular biology and biochemistry, and 2) **Focused Topic sessions** emphasizing research techniques through seminars and demonstrations. **Recommendations** include revising problem set questions to strengthen clinical correlation, reviewing alternative biochemistry texts to the Devlin book, strengthening Focused Topic sessions by placing greater emphasis on clinical application and linking topics with journal club presentations, and streamlining bioinformatics sessions to provide necessary background information and to teach how to perform searches.

Journal Club sessions were highly rated in terms of organization, coordination with the weekly theme, and fostering development of skills used to critique basic science articles. The major criticism by students, however, was the implementation of a monitoring system for student participation. While students felt this led to an artificial environment with comments motivated by the necessity to speak rather than the desire to share insightful contributions, faculty valued the significant improvement in student participation. The monitoring system will be revised for the coming year with more focus on providing feedback to students as pertains to their understanding of the material and strengthening student participation skills in a group setting.

The **Research Lab** rotations were well received by the students and considered valuable. In response to student feedback, recommendations were made pertaining to conflicts regarding timing of activities and deadlines. Research preceptors for the coming year will be identified as early as possible once the final class is set. The formal mid-block assessment will be replaced by an informal contact between research preceptor, physician adviser, and student. End-of block faculty assessments will be delayed to include the student's presentation.

The Curriculum Steering Council expressed appreciation for Dr. Hamilton's leadership, which led to significant improvements in the organization and content of the course this past year, and approved the minor changes suggested to enhance the course for the coming year.