The Medical Student Education Committee of the Quillen College of Medicine met on Tuesday, January 10, 2012 at 4:15 p.m. in the Academic Affairs Conference Room, Stanton-Gerber Hall.

Voting Members Present:
Ken Olive, MD
Caroline Abercrombie, MD
Rich Feit, MD
Dave Johnson, PhD
Ramsey McGowen, PhD
Paul Monaco, PhD
Dawn Tuell, MD
Jamie Reagan, M3
Jessica White, M2
Jeremy Brooks, M1

Ex officio / Non-Voting & Others Present:
Reid Blackwelder, MD
Tom Ecay, PhD
Joe Florence, MD
Tom Kwasiroch, PhD
Tiffany Lasky, MD
Theresa Lura, MD
Penny Smith, EdD
Cindy Lybrand, MEd
Cathy Peeples, MPH
Lisa Myers, BA

1. Approval of Minutes

The minutes from the 11-15-11 meeting were approved as distributed.

2. Topics

   a. Proposed Nutrition M1 & M2 Elective

Dr. Tom Ecay

A group of second year medical students requested from the Office of Academic Affairs additional and focused learning opportunities in the area of medical nutrition. A survey of M1&2 returned 21 positive responses indicating interest in a one-credit, 5-6 session elective course on nutrition. Interested students ranked their top 5 of 14 possible topics to be covered in the proposed course; the top weighted rankings are as follows, beginning with the highest ranked topic.

Obesity
Nutritional assessment and management
Diabetes
What constitutes a healthy diet?
Nutrition in childhood/adolescence
Nutritional supplements
Maternal/fetal nutrition in pregnancy
Cardiovascular disease and hypertension
Dr. James Thigpen from Pharmacy Practice, Gatton College of Pharmacy, has indicated that some second year pharmacy students would be interested in the course as well.

**EXCERPT:**

| Course Director: | Tom Ecay, PhD  
|------------------|------------------|
|                  | Professor of Physiology  
|                  | 439-2046  
| Instructor(s):   | TBD  
| Objectives:      | At the conclusion of this rotation, the student should be able to:  
|                  | Identify the components and composition of a healthy diet at different stages of the human lifespan  
|                  | Explain how diet and physical activity contribute to health and wellbeing  
|                  | Perform a patient nutritional assessment  
|                  | Explain the role of different health care professionals in the nutritional management of medical problems  
|                  | Apply nutritional strategies to treat, manage and prevent common medical problems (obesity, diabetes, cardiovascular disease and hypertension, pregnancy/lactation)  
|                  | Discuss the role of nutrition in management of obesity  
|                  | Use nutritional supplementation appropriately in clinical setting  
| Course Description: | Six workshops will be conducted in a small group interactive setting. Students will complete one or two of the online Nutrition in Medicine modules in advance of the workshop. Students will be required to complete the online quiz for each module. The workshops will involve presentation of a case related to the topic followed by an interactive discussion emphasizing the nutritional principles covered in the online modules. Students will be encouraged to develop learning topics from one or more clinical case for presentation to the group at a subsequent meeting. Discussion will be facilitated by one or more faculty members with appropriate expertise.  
| Other resources: | Medical Nutrition Handbook  
|                  | Textbook: Medical Nutrition and Disease: A Case-Based Approach, 4th Edition  
| Grading Policy:  | ☐ Graded ☒ Pass/Fail [12 Contact Hours; 1 Credit Hour]  

Discussion regarded:

- Final preparation for the course, including determining interprofessional teaching faculty, in order to offer it this – Spring 2012 – semester
- Being an enrichment activity like The Healer’s Art & Medical Spanish; also being part of the response to increase nutrition content in the curriculum
- Function of interprofessional health management teams
- Future student evaluation of course

On a motion by Dr. Blackwelder and seconded by Dr. Monaco, the objectives and the elective itself were approved. Updates re teaching faculty and any other specifics will be brought back to MSEC at the February meeting.
b. Proposed Senior Electives & Selectives: 1) Internal Medicine – Palliative Medicine Elective, 2) Psychiatry – Ambulatory Elective/Selective, 3) Pediatrics – Medical Genetics Selective

**EXCERPTS (Titles link to full proposals on MSEC web site):**

### Internal Medicine
**Palliative Medicine**

| **Location(s):** | JCMC Regional Cancer Center  
| ETSU Physicians & Associates  
| Wellmont-Holston Valley Medical Center  
| Amedisys Hospice and home visits |

| **Instructor(s):** | Robert Enck, MD  
| Patrick McMillan, MD  
| Steven J Baumrucker, MD |

| **Responsible Faculty:** | Robert Enck, MD  
| 423-439-6362  
| enck@etsu.edu |

**Goal:**
To understand the role of palliative medicine in managing all symptoms, including pain and existential suffering, in patients with chronic diseases. Palliative medicine management encompasses all aspects of chronic disease from the early diagnosis to end of life, including malignant as well as nonmalignant diseases.

**Objectives:**
At the conclusion of this rotation, the student should be able to:

- Develop a skill set in the understanding and use of both opioids and nonopoids in palliative medicine.
- Interact in the interprofessional meetings regarding patient and family issues while providing solutions.

### Pediatrics
**Medical Genetics**

| **Location(s):** | Johnson City Medical Center and  
| ETSU Physicians and Associates, Pediatric Clinic |

| **Instructor(s):** | Apostolos Psychogios, MD |

| **Responsible Faculty:** | Apostolos Psychogios, MD (423) 439-8758 <psychogios@etsu.edu> |

**Goal:**
To develop a comprehensive understanding of the medical genetics specialty as it applies to the current and future practice of medicine in the post whole genome project era.

**Objectives:**
At the conclusion of this rotation, the student should be able to:

- a. demonstrate the application of basic science principles to clinical genetics
- b. develop well-rounded and in-depth clinical knowledge in medical genetics
- c. demonstrate the skills necessary to perform a complete and accurate history and genetic physical examination
- d. demonstrate the ability to formulate a genetic differential diagnosis
- e. demonstrate the appropriate application of diagnostic studies including laboratory genetic testing, diagnostic imaging, & other testing
- f. demonstrate the ability to process the genetic information gathered on a patient into a diagnostic and therapeutic plan
- g. work effectively within a team to provide patient-centered care
- h. provide care with compassion and respect for all patients
- i. develop the skills to effectively use information technology and other resources to obtain information from the medical literature for optimum patient care
j. practice evidence-based medicine  
k. demonstrate proficiency with interviewing and counseling patients and families  
l. exhibit respect, compassion, humility, altruism, duty, and honesty with patients, staff, faculty, fellow students, & themselves  
m. be a patient advocate

<table>
<thead>
<tr>
<th>Psychiatry &amp; Behavioral Sciences</th>
<th>Outpatient Psychiatry</th>
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<tr>
<td><strong>Location(s):</strong> Psychiatry Clinic, Bldg. 52 - VA Campus</td>
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| **Instructor(s):** Jay Griffith, MD  
Thomas Stoss, MD |
| **Responsible Faculty:** Jay Griffith, MD (423) 943-3373 <Jay.Griffith@va.gov>  
Thomas Stoss, MD (423) 926-1171 ext.7741 <Thomas.Stoss@va.gov> |
| **Goal:** To enable students to increase their awareness of the models, levels of care and practices in outpatient psychiatry and to develop a comprehensive knowledge of the range of treatment options in psychiatry. This experience will provide the opportunity to meet and evaluate patients on an inpatient setting and then continue following them on an outpatient basis |
| **Objectives:** At the conclusion of this rotation, the student should be able to:  
1. Identify the role of outpatient psychiatry in the treatment of psychiatric disorders and management of patients with mental illness. (QCOM Objective: 1a-g; Objective 6a-f)  
2. Discuss the special diagnostic and treatment considerations relevant in outpatient psychiatric practice. (QCOM Objective: 2 a,c,d,h; Objective 4 a-e; Objective 5 a-h)  
3. Write a brief report on a selected topic relevant to outpatient treatment of patients with mental illness. (QCOM Objective: 3a-d)  
4. Demonstrate professionalism and patient centeredness in psychiatric care of patients (QCOM Objective 5 a-h) |

Discussion regarded review of descriptions, plus:

- Dr. Baumrucker and Enck’s palliative medicine expertise and experience; also, mention of the Interprofessional End-of-Life Clinical Care graduate seminar elective  
- Dr. Psychogios, a new faculty member in Pediatrics, being a dynamic teacher who will also be involved in the M1 Genetics course  
- Ambulatory Psychiatry being reconstructed to become more hands-on and to include the continuity of spending time with patients before and after they are discharged from an inpatient unit

*The proposed Senior Electives and Selectives were approved as submitted.*

Discussion continued in regard to adding M4 Elective offerings:

- Effort is underway to identify options and resources that will allow students away for an increasing number of residency interviews to work toward Elective credit  
- Approximately half of current seniors have taken or are scheduled to take the Medical Humanities elective (see update re this course to follow)
• An M4, primarily online version of the Nutrition elective is being considered; Dr. Olive and Cathy Peeples will update the committee at the February meeting
• Members supported course work being accomplished during the senior year as opposed to an option of cumulative, M1-4 Elective credit
• Suggestions included increased use of online modules/materials and writing a senior thesis; also, allowing for course credit outside QCOM, like in the MD/MPH program
• Agreed that new offerings must be meaningful educational experiences and that on-campus faculty will take primary responsibility
• Faculty and student ideas are welcome; proposed Electives’ goals, objectives and other components are subject to MSEC approval, and those implemented will be routinely evaluated

  c. Medical Humanities Elective: 2011-2012 Update

Responsible Faculty: Dr. Lura

MSEC approved: January 2011
Class of 2011: 8 students; Class of 2012: 29 students enrolled

• Originally designed to provide a credit option for students with a dense interview schedule; several members of Class of 2011 used the course to complete graduation requirements while moving to residency program location

• Enrolled seniors are reminded that this is a new elective and are asked what works well, what needs improvement or for other suggestions:
  
  - Comments have been positive, have expressed personal and professional benefits
  - Only recommended change regarded adding items to reading or film list; with course objectives and educational value taken into consideration, lists are frequently revised
  - Given the choice, all students chose email communication instead of meeting in person
  - One paragraph write-up is required on each book or film, but most students have written 1-2 pages that are thoughtful, insightful and sometimes deeply personal

  • Minor problems:

  - Official limit of 5 students per elective period not enough to meet demand during interview months
  - Students underestimating the amount of time that reading/viewing will take during a busy interview schedule
  - Based on demand, need to recruit additional faculty to review and give feedback on students’ reflections; Drs. Reid Blackwelder and Howard Herrell have expressed an interest
d. Review and Rebuttal of LCME Site Team Findings

Dr. Olive

ED-33. There must be integrated institutional responsibility in a medical education program for the overall design, management, and evaluation of a coherent and coordinated curriculum.

Team finding: The College of Medicine lacks an effective system for the coordination and integration of curricular content; monitoring of content to identify omissions and unplanned redundancies; and review of the stated objectives of each individual course and clerkship to ensure congruence with the school’s educational objectives.

- Dr. Bagnell and Dr. Olive were very surprised the site visit team deemed Quillen to be noncompliant related to ED-33
- MSEC members who met with the site visitors were shocked by the finding and believe it to be an erroneous interpretation; Quillen response provides evidence of compliance with all components of the standard as defined in the annotations
- The finding and detailed draft response to LCME were distributed to MSEC members for additional input

ED-46. A medical education program must collect and use a variety of outcome data, including national norms of accomplishment, to demonstrate the extent to which its educational objectives are being met.

Team finding: The College of Medicine collects a variety of educational program data. These data have not systematically been used to evaluate the extent to which commencement objectives are being met.

- This finding with draft response to LCME was also distributed to and reviewed by MSEC members
- Quillen does use a variety of outcome data on student performance including national norms of accomplishment; draft response included a list of the data collected and examples of how it is used to assess the degree to which commencement objectives are being met
- Documented “evidence of attainment” corresponds to Quillen Commencement Objectives revised in March 2010 to be consistent with ACGME core competencies
- Outcome data has been routinely reviewed by MSEC &/or MSEC working groups
- Committee will determine best method for future, more systematic review and use of data, including in relation to achievement of the new commencement objectives and in regard to overall program effectiveness

e. Residency Questionnaire – Program Director Report 2011 (Class of 2010)

After reviewing global data from this report in November, members asked to see the original report which included directors’ comments. Most comments were positive; some raised concern, but there were no themes that merited action.
1. Administering Web-Based NBME Subject Exams [Quick Guide]

Topic of the NBME policy was brought to MSEC following a faculty member’s complaint about the requirements for proctoring and staffing subject exams.

- Policy was reviewed and discussed; as was students’ online test-taking experience so far this academic year
- From policy: A Chief Proctor manages the specifics of the test administration; a Technical Support Coordinator assures that the test administration system requirements are met; in addition, there must be one proctor for every 20 to 25 examinees, plus additional staff to relieve proctors, if necessary
- Cathy Peeples, Quillen Chief Proctor, addressed the policy; she also reported her and Daniel McLellan / others’ proactive preparation for the exams and that there have been very few problems
- MSEC supports Quillen’s use of NMBE exams; also that they are web-based

>> Information item >> Dr. McGowen spoke briefly about a faculty Writing Group that would like to put together an interesting article, possibly for publication this summer, regarding innovative and creative aspects of our curriculum, e.g., M2 integrated grand rounds, cadaver cases, elective initiatives.

3. Recent documents / topics {Linked or on file in Academic Affairs – contact myers@etsu.edu}

  2) IM – Palliative Medicine Elective, 3) Psychiatry – Ambulatory Elective/Selective, 4) Pediatrics – Medical Genetics Selective

- Medical Humanities Elective: 2011-2012 Update + Sample of Medical Student Reflections and Reading & Film Lists

- LCME findings and Quillen’s draft responses re: ED-33 & ED-46

- Residency Questionnaire – Class of 2010 Program Director Summary Report

4. Announcements

The next meeting will be on February 7, 2012.

5. Adjournment

The meeting adjourned at 5:44 p.m.