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O&A is published six times a year by the OEA. We welcome your feedback and ideas for future articles. Please direct your comments to Ann Maderer, phone 617-636-2191, email [ann.maderer@tufts.edu](mailto:ann.maderer@tufts.edu).

## Innovations in Education 2009

On behalf of Dean Rosenblatt, we are delighted to announce the awardees for the sixth annual Innovations in Education Intramural Grants program. After much deliberation, the Selection Committee chose five proposals from an outstanding pool of 15 submissions. The awardees address areas of curricular need noted in the Educational Strategic Plan, including innovative approaches to simulation-based training, education in ethics and professionalism, faculty development, clinical skills training, and strategies for enhancing cultural competency. An overview of the program is described on page six.



View from the Clinical Skills and Simulation Center (CSSC) monitor room. Dr. Jesse Rideout (left) and Tufts University president Lawrence Bacow (center) at the CSSC open house last fall. Dr. Rideout is the Director of Simulation Education at TUSM and recipient of a 2009 Innovations in Education Grant.

Below are the names of the awardees and brief descriptions of their projects:

### **Carol Fleishman, MS, CAS and Debra Rothenberg, MD, PhD**

Maine Medical Center

*Developing and Assessing Cultural Awareness and Competence in Medical Students*

The goal of this program is to provide first year medical students with the knowledge, attitudes and skills of culturally competent care. Students will learn about specific cultural groups found in Maine and will practice skills that can be used in any clinical situation where a provider is trying to grasp a patient's perspective. The curriculum will be presented during the Scientific Foundations of Social and Behavioral Medicine course, held at the end of the students' first year. Objective Structured Clinical Encounters (OSCEs) will be developed to  
*(continued on page two)*

*(Innovation in Education Grant Awardees, continued from page one)*

observe students' ability to act professionally, communicate effectively, and do a physical exam with patients from a variety of different cultures including people who have limited English proficiency, are deaf or hearing-impaired, are blind or have limited sight, or have mobility disabilities. Once developed these OSCEs can be disseminated to all students.

### **Priya Garg, MD**

Floating Hospital for Children/Tufts Medical Center

*Transition to Internship (TIP): Improving 4th year Medical Students' Verbal Presentation Skills*

The goal of this project is to implement a 4<sup>th</sup> year medical student curriculum at Tufts University School of Medicine aimed at improving students' verbal presentation skills. Fourth year medical students enrolled in a Pediatric Sub-internship at the Floating Hospital will be given a four week curriculum that will focus on using diagnostic reasoning and problem representations to improve oral presentation skills. An Oral Case Presentation Feedback tool, developed in conjunction with the University of Maryland, will be used for outcomes evaluation of the students' verbal presentations after exposure to the curriculum. The ultimate goal is to develop a facilitator guide that will allow other disciplines and institutions to administer this curriculum to their fourth year students resulting in improved verbal presentation skills of students before finishing medical school.

### **Sarah Goff, MD and John O'Reilly, MD**

Baystate Medical Center

*Enhancing Third-Year TUSM Students' Ethics and Professionalism Curriculum Through the Use of Video Vignettes*

Baystate Medical Center has an existing professionalism and ethics curriculum integrated across the third year clerkship. This study will expand the existing curriculum by developing video vignettes pertaining to existing professionalism and ethics topics. In addition, an instructor's toolkit to aid curriculum implementation at interested Tufts third-year clerkship sites will be developed. *(continued on page three)*

## Faculty Medical Education Journal Club

**How undergraduate clinical learning climates differ: a multi-method case study.** Boor, K., Scheele, F., van der Vleuten, C., Teunissen, P., den Breejen, E., and Scherpbier, A. (2008). Medical Education. 42: 1029-1036

**Interactive lecturing for meaningful learning in large groups.** Gulpinar, M.A. and Yegen, B.C. (2005). Medical Teacher. 27:7, 590-594.

**Learning Styles and Approaches: Implication for Medical Education.\***

Newble, D.I. and Entwistle, N.J. (1986). Medical Education. 20: 162-175.

Summaries and links to articles may be found here:

<http://www.tufts.edu/med/about/offices/oea/facultydevelopment/journalclub.html>

\*If you would like a copy of this article, please contact Sharon Freeman, [sharon.freeman@tufts.edu](mailto:sharon.freeman@tufts.edu).

## OEA on TUSK

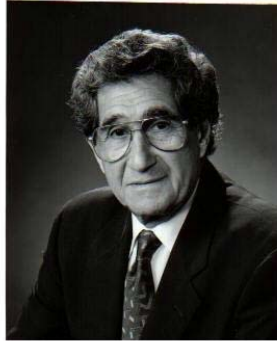
We are pleased to announce the launching of our OEA TUSK website: <http://tusk.tufts.edu/view/url/M2044C/741788>. You will also find a link on the TUSK home page, under the left sidebar called "Useful Links." The OEA TUSK website is a link between the external (public) OEA website and TUSK. Here you will find internal documents, announcements, and other information relevant to the TUSM community. This site is a work in progress, and we will be adding more information over time. Special thanks go to Mark Bailey of the TUSK office for all of his work on this site!



OEA TUSK screen shot

## Norman S. Stearns, MD, Grant to Promote Education in Ethics and Professionalism

We are delighted to announce the awardees for the first annual Norman S. Stearns, MD, Grant to Promote Education in Ethics and Professionalism. This grant is designed to support teaching and learning innovations developed by TUSM faculty that will enhance student and resident education in Ethics and Professionalism. After much deliberation, the Selection Committee chose two outstanding proposals:



Dr. Norman S. Stearns  
Director of Interschool Relations

**Ezra Gabbay, MD and Klemens Meyer, MD**  
Department of Medicine, Tufts Medical Center  
*A Systematic Approach to Learning End of Life Decision Making*

The purpose of the project is to introduce end of life decision-making as a clinical skill to be taught and learned in a systematic and multidimensional way, into the Tufts University School of Medicine (TUSM) curriculum. The project will consist of two components. The first is a TUSK-based online learning module through which students will progress in a stepwise manner through the diagnostic, prognostic, therapeutic, legal and psychosocial problems of hypothetical patients for whom decisions about withholding or withdrawing treatment are considered. They will construct a plan of action to address all these issues, for which they will receive feedback and evaluation. The second component is a pilot of a 4<sup>th</sup> year elective course in the form of a seminar, exploring end of life issues through discussion and independent research.

**Rosalie Phillips, MPH**  
Tufts Health Care Institute and TUSM  
*Applied Learning Exercises to Teach Professionalism in Practice*

This project will develop, pilot, evaluate and refine Applied Learning Exercises ("AppLEs") to help medical students and residents apply and reflect on professional behaviors and issues in the course of their work with patients, practices, and hospitals. The instructional design will enable faculty to assess and document levels of professional behavior among their students and residents. The AppLEs will complement THCI's online learning modules on Professionalism and will be developed and tested in collaboration with Tufts clerkship and program directors in Family Medicine, Internal Medicine, Surgery and Psychiatry.

## Innovations in Education Grant Awardees

(continued from page two)

**Jesse Rideout, MD and David Greenblatt, MD**  
Tufts Medical Center and TUSM  
*High Fidelity Small-group Simulation Instruction of Autonomic Pharmacology Course For 2nd Year Medical Students*

A series of clinical scenarios will be developed by faculty in the Departments of Pharmacology and Experimental Therapeutics, Emergency Medicine and Medicine. The scenarios will integrate basic science pharmacology concepts (during the Introduction to Pharmacology Course) with clinical presentations and management by way of simulated patients using high-fidelity manikins. These scenarios will emphasize concepts in autonomic pharmacology. The program will enhance student learning about the physiological changes that occur when the human body is exposed to therapeutic drugs or toxicological poisons. The program will showcase collaboration between basic scientists and clinicians and emphasize "translational education" giving pre-clerkship students the opportunity to provide care and manage simulated patients to illustrate basic science concepts.

**Jenny Skolfield, MS and Robert Trowbridge, MD**  
Maine Medical Center  
*Novel Delivery of a Faculty Development Program: The Web-based Objective Structured Teaching Encounter*

The goal of this project is to develop and implement a web-based Objective Structured Teaching Encounter (OSTE) as a faculty development opportunity for the Tufts community. Similar to the Objective Structured Clinical Encounter, the OSTE enables clinical teachers to receive specific and objective feedback on their teaching skills after participating in online teaching sessions with standardized medical students. By developing the program to be accessible over the internet, the OSTE will be made readily available to faculty members regardless of practice location.

# Faculty Focus: Joe Rencic, MD

Dr. Rencic is currently site Medicine Clerkship director and Internal Medicine associate program director at Tufts Medical Center. In addition, he has participated in PBL for the last three years in the fall session, and is a faculty advisor of the Internal Medicine interest group.



Joe Rencic, MD

***Residents are primary educators of Tufts Medical Students. How do you prepare your residents to excel in that role?***

Residents are the most important teachers that students have because students have more contact with them than any other teacher in the hospital. Therefore, it is very important to prepare residents for their teaching. To that end, I have developed, with my colleagues Drs. Laura Snyderman and Dan Chandler, a longitudinal residents-as-teacher curriculum. We conduct workshop for incoming interns and rising second-years to prepare them for their teaching roles. In addition, we hold two-hour workshops each year which focus on basic teaching skills, e.g. feedback, evaluation, teaching at the bedside, and giving a small group presentation. The unique aspect of our program is that we directly observe residents on work rounds and give them formative feedback on their

performance. I think we are one of the few institutions in the country that observe residents teaching *in vivo*.

Another key piece of preparing residents to teach is formative feedback. Students deserve the credit for this, since they fill out evaluation forms regarding the teaching of every intern, resident, and attending with whom they have worked for an extended period.

***What do you see as the major recent advances in medical education?***

A major recent advance in medical education is the use of high-fidelity simulated educational models for teaching students techniques – ranging from as basic as hearing a murmur to running a code. In addition, our understanding of the diagnostic process of clinical reasoning continues to grow through creative experimental strategies. As researchers continue to gain insight, these data will be integrated into new curricular models which will promote greater expertise in students.

***Why did you choose General Internal Medicine?***

I always felt that I wanted to care for the whole patient and not limit myself to one organ or category of disease. In addition, though you won't see it on ER or Grey's Anatomy, practicing preventative medicine is one of the most critical roles of the generalist, and I have a sense of satisfaction (albeit indirect and long term) that through my diligence, a patient may avoid a heart attack or colon cancer. I also love the continuity of care which allows me to get to know my patients. One of the nicest experiences I had occurred when several of my patients gave me gifts for my recently born baby. It made me realize how much these patients value having a primary care physician. Finally, general internal medicine has a history of dedication to teaching, and I wanted to be part of this tradition.

# Student Spotlight:

## Carol Ilzarbe

*You are involved in an innovative project to teach biomedical science at Pine Minor College. Please describe the project, including the overall goals of the project and how you got interested in the project.*

During my fourth year of medical school, I enrolled in a new teaching elective, *Pathways to Health*, where TUSM students and Sackler and Friedman School graduate students, taught a patho-physiology course to senior and junior Biology majors at Pine Manor College. Pine Manor, a small liberal arts college for women, was ranked #1 in 2007 for campus diversity among B.A. liberal arts colleges by US News & World Report, with approximately 80% of their student-body composed of predominately African-American and Hispanic women.

As a medical student with a keen interest in education, but limited by a strenuous schedule, I utilized most of my free time exploring new teaching opportunities. I dabbled in tutoring here and there and taught anatomy to high school students and students enrolled in our pre-matriculation program, but this teaching elective was different. Not only was I now equipped with an armamentarium of medical knowledge, but I was also allowed to design and teach my own curriculum to intelligent, hard-working minority women I could relate to and have the chance to potentially influence their future career paths.

In this course, one medical school student, graduate student, and nutrition student, were assembled into a group and subsequently assigned to cover one of six diseases that disproportionately affect African-American and Hispanic women (e.g. obesity, asthma, breast cancer, metabolic syndrome, heart disease and osteoporosis). With the help of faculty members (Susan Bear, Richard Glickman- Simon & Laura Liscum), we were expected to prepare syllabus material on our disease topic including: introductory material that covered the public health problem and normal physiology, a 'classic' basic science article, information on a critical laboratory technique, and a synopsis of therapeutic and nutritional strategies. Each topic needed to be covered in three 75-minute sessions led by the Tufts student team and the Pine Manor course director and a Tufts course facilitator attending every session, would evaluate our teaching skills. I was assigned the topic of breast cancer and had the privilege

of working with Lara Ulfers from the Friedman school and Geoffrey Kilili from the Sackler school. Our project goals were many. Generally, we wanted to reinforce our knowledge through teaching, strengthen our communication skills, and enhance our cultural competence by interacting closely with a diverse population of undergraduates. We hoped to further our understanding of breast cancer through the integration of our different educational backgrounds, and hoped to stimulate our racially and ethnically diverse undergraduate students to pursue graduate level biomedical education.



Carol Ilzarbe (with son Lucas) starts residency in June

More specifically, we aimed to:

- Discuss who is at risk for breast cancer and determine characteristics related to risk
  - Understand and recognize the functional anatomy of the breast tissue
  - Discuss the roles of different genes and mutations in the development of cancer cells
  - Discuss the effect of hormones and pregnancy on breast development
  - Understand the clinical characteristics and work-up of breast cancer
  - Recognize the different types of breast cancer including the pathology and prognosis associated with the more prevalent types
- (continued on page six)*

*(Carol Ilzarbe, continued from page five)*

- Understand the differences between the stages and treatment of breast cancer
- Discuss the various levels of breast cancer prevention including the importance of diet and lifestyle

***How do you think the project will influence your future career?***

In retrospect, my involvement with this project served to not only reaffirm my passion for teaching, but also to provide incredible insight into the “behind the scenes” design of a graduate school level course. I always thought that when I became a resident, I would place extra attention to the amount of teaching I did on the wards. After all, isn’t the art of being a good resident and being a good teacher almost synonymous? But this experience brought me one step further. When I completed my elective, I realized I would not be happy unless my future career path largely included the opportunity to mentor motivated students.

***What are your career plans?***

As such, my career plans now include completing a pediatric residency with a neonatology fellowship and becoming a dean of students at a major medical school.

***What did this experience teach you?***

This experience has taught me skills that I hope to continue building upon- namely, to better identify areas where clinical medicine can be more clearly explained with the addition of basic science and/or nutritional viewpoints and the importance of knowing your audience. It is absolutely imperative to know the knowledge base of your students and realize how their own educational and cultural backgrounds influence their knowledge of human diseases.

**In the May issue of the O&A newsletter:**

- Millennium Conference
- OSCE exams
- Zucker and Aisner Teaching Prize Winners

## Overview of the TUSM Innovations in Education Intramural Grant Program

The Innovations in Education Intramural Grant Program, started in 2004, aims to: (1) enhance the curriculum and mission of the school; (2) provide faculty with experience in applying for grant funding while giving feedback on their submissions (both content and process).

The program is administered by the Office of Educational Affairs, with assistance from the Office of Information Technology, and funded by the Dean’s Office. All faculty, including those at affiliated teaching hospitals, are eligible to apply. Letters of intent and applications are reviewed by a Selection Committee using a method designed to mimic external educational grant mechanisms.

Between 2004-2009, 68 proposals were submitted and 29 grants were awarded (3-6 grants per year) for 12-18 months periods. Award size ranged from \$2,322-\$25,000 (average \$13,850) for a total of \$401,652 or \$66,942/year. The grants’ principal investigators represent seven different institutions (including four teaching hospitals, Masters of Public Health Program and Sackler School for Graduate Biomedical Sciences) and 19 departments. Eleven grants were awarded to multidisciplinary teams. Of the grants awarded between 2004-2006, 12 out of 13 have resulted in sustained programmatic modification.

The program has effectively engaged a broad range of faculty across departments and institutions and has promoted productive multidisciplinary professional relationships and collaboration.

## October Clinical Skills Interclerkships

Tufts Clinical Skills Interclerkships (CSI) are coming up on Friday, October 16 at Baystate and Wednesday, October 21 at TUSM. The CSI is an opportunity for third-year medical students to work with Standardized Patients (SPs) in small groups and receive feedback from faculty, their peers and the SPs. In particular, faculty provide feedback to students performing interviews and physical examinations in order to support and reinforce their communication and Physical Exam skills. If you would like to participate in the CSI as a faculty preceptor, please contact Ann Maderer, [ann.maderer@tufts.edu](mailto:ann.maderer@tufts.edu), 617-636-2191.