Curriculum and Instruction Committee
Meeting Minutes
Thursday March 17, 2016

Attendees
Carolyn Klatt, MLIS
Steve Williams, MD
David Baxter, MD
Susan Cline, PhD
Edward Klatt, MD
Ed Grimsley, MD
John Buckholtz, MD
Blanca Lopez, MD
Tina Thompson, PhD, Chair
Marshall Angle, PhD
Roberta Weintraut, MD
Jeff Ignatoff, MD
Bob Visalli, PhD
Dominique Broccoli, PhD
Joshua Masdon, MSI
Roy Russ, PhD
Kristjan Thompson, PhD

Absent
David Parish, MD
Mahesh Patel, MD
Jacob Beltz, MSIII
Zachary McGalliard, MSI
Curran Dalal, MSIV
Grady Carter, MD
Jean Sumner, MD
Robert Weintraut, MD
Carol Pryby, MD
Joshua Masdon MSI
Kirby Chisholm, MSIII
Butch Wolff, MD
Roy Russ, PhD
Robert Donner, MD
Alice House, MD
Michael Smith, PhD

Guest
William F Bina MD, MPH, FAAFP

Call to order
Dr. Tina Thompson, Chair of the CIC Committee, called the meeting to order at 4:30 PM.

Approval of Minutes
The minutes from the February 18th meeting were presented for approval of the committee.
*The minutes were approved by acclamation.*

Old Business

I. Internal Medicine Accelerated Track Curriculum Final Proposal Overview

1. Dr. T. Thompson stated that the proposal was sent to committee members a week prior to the meeting, therefore, she would not be projecting it on the screen, however, that she had the proposal if anyone wanted her to project something.
2. Dr. D. Nepal took the floor to give an overview of the proposal. He stated the CIC Committee introduced the overview of the Internal Medicine Accelerated Track back in November 2015 and that important feedback was received and those things were worked on. The packets that were sent out to committee members addressed many of the questions presented in a previous committee meeting. Dr. Nepal pointed out that the IM–ACT curriculum is based on the FM-ACT curriculum on most parts.

- The Community Medicine, ACT I and ACT II rotations are exactly as the FM-ACT curriculum. Therefore, it was decided by the committee not to make any changes to those rotations, so that there is one standard curriculum across the board.
- He also pointed out the differences from the FM-ACT curriculum and summarized the reasoning behind it. The IM rotation is split into three parts of the ACT II and third year of the medical school curriculum. There were two reasons for the split: the first being so that students could have the long-term exposure of the rotation during the year and second was because IM needs to be first during the ACT II, which begins before the regular medical school curriculum and to avoid having everything done at the beginning of the year. Overall, the split in the rotation will give students exposure of the other clinical medicine rotations and allow them to maximize their use of the IM rotation.
- The evaluations of the IM-ACT rotation will be based on the first and second parts of the rotation. The third part will be a separate standard SUB-I evaluation, the same as how the fourth year students get their SUB-I evaluations done.
- The Family Medicine rotation will be reduced from eight weeks to four weeks which is done on a four week basis nationally. In an effort to ensure that there is a good foundation for students in IM, the Psychiatry rotation will also be reduced from six weeks to four weeks. Another change was the introduction of the SUB-I which is not currently a part of the curriculum. The ICU and ER SUB-I rotations will also be added to help mentally prepare students. These changes are primarily based on feedback from students at the Savannah campus.

Dr. Lopez asked if the students will have a shelf exam for the Psychiatry and if they do not pass the exam, do they not graduate. Dr. Nepal stated that for any rotation students would have to pass meet whatever the current third year LCME requirements are to graduate. If students fail they would have to retake those exams and pass. Overall, the handling of failed self-exams will be handled based on student feedback. Dr. Thompson also pointed out that Psychiatry is being introduced early in year two and continuing in the two Internal Medicine rotations during the ACT program. Dr. S. Williams stated that he had some concerns with the placement of the Psychiatry rotation. Dr. K. Thompson posed the question of where will students do their Community Medicine rotation during IM-ACT I and II weeks of rotation. Dr. T. Thompson stated that the CM learning objectives have been incorporated in both ACT I and II of the IM rotation. Dr. Grimsley also stated that he had the same concerns as Dr. Williams on the placement of the Psychiatry rotation. Dr. Lopez asked if the SUB-I and Psychiatry rotation could be swapped. Overall, the consensus was that if PSY is in the middle of the year it would put students out of cycle and would not line up with the academic calendar.
Dr. Bina applauded everyone for their hard work. A motion was made for approval, the proposal passed.

New Business

II. Recommendation from the Fourth Year Committee

1. Dr. S. Williams presented the fact that the current curriculum calendar for the fourth year students requires 17 weeks of clinical activity, which has created some frustration for the clerkship coordinators with regards to finding a one week or three week rotations for students. As a result of their frustration the coordinators developed a new proposal that there continues to be 17 weeks of clinical activity, which will include the one week of CPEX as a week of curricular activity. This week will be used for Boards study or other elective time, which will reduce the amount of electives time to 16 weeks. This will keep students on a two to four week block schedule and make scheduling easier for the fourth year students. Dr. Williams pointed out that this change would not require an academic calendar change. Dr. T. Thompson stated that to be fair students would either do a reading elective or take off the time when they had to do the CPEX. A motion was made for approval and passed.

III. Curriculum Revision Updates - Foundation Block Committees

- Dr. E. Klatt stated that the committee has been fine tuning what they have completed. He stated that all modules have been filled in with the topics and objectives with the original plan. They also have a number of draft cases to align with their objectives. Overall, they are making a good bit of progress.

- Dr. T. Thompson stated that her committee have all their topics arranged by weeks. Also, that they would be meeting the following week and deciding where their cases are going.

- Dr. Mike Smith was not available to give an update for the Assessment Committee.

There were no campuses specific curricular issues. Dr. Klatt stated that the BMP is continuing to do their standard curriculum review with the Phases. Dr. Lopez had nothing to report for Clinical Skills their sub-committee meeting was postponed to the end of March. Dr. D. Parrish was absent. Dr. D. Baxter had nothing to report. Dr. S. Williams stated that the Year 4 meeting was going to be held on March 10, 2016 and that an agenda would be sent out within the week.

Adjournment: There being no further business to discuss, the meeting was adjourned.

Minutes recorded by Karla Riley