



**INTERNAL MEDICINE CLERKSHIP
REVIEW**

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HOW REVIEW WAS CONDUCTED

- Data collected from the Clerkship Directors on the 3 campuses
 - Clerkship Information Form and Appendices
 - Interviews with Clerkship Directors
- James Jackson compiled data for the review on student outcomes, student/preceptor/clerkship evaluations
- Reviewed previous MEC review of the clerkship
- A report compiled for each campus to be distributed and discussed with the CD
- Review team discussed findings and the lead reviewer composed the final summary report



BIRMINGHAM IM CLERKSHIP OVERVIEW

- 8-week clerkship divided into two 4-week blocks performed at University Hospital and the VA Medical Center
 - Students on inpatient teams with 2 students, 2 interns, 1 senior resident, attending physician, pharmacist, and social worker
- Outpatient experience added July 2012
 - Students complete total of 16 hours at Baptist Princeton/Montclair Hospital general IM clinics
- Teaching sessions are a combination of interprofessional simulations, traditional didactics, and “Professor Rounds”
- Students take call from 7am-7pm every 4th-5th day.



TUSCALOOSA IM CLERKSHIP OVERVIEW

- 8-week clerkship divided into two 4-week blocks
 - Students spend one block composed of 3 weeks on the inpatient service staffed by the core IM faculty and a family medicine intern and 1 week in the faculty IM clinic
 - In the other block, they work for 3 weeks on the inpatient service staffed by adjunct private practice IM faculty and an upper level FM resident and 1 week in a private general IM clinic
- Teaching sessions are a combination of traditional didactics, daily morning reports, PBL sessions, and an interactive physical exam tutorial
- Students take “short call” to 7pm during their inpatient weeks



HUNTSVILLE IM CLERKSHIP OVERVIEW

- Students spend all 8 weeks on the inpatient service at Huntsville Hospital
 - They are placed in 4 teams each of which has an upper level resident, intern, faculty preceptor, and sometimes an acting intern and a pharmacy student
- There is no outpatient component to the clerkship
- Teaching sessions are a combination of morning reports (3 days/week), traditional didactics, Grand Rounds, test review sessions, Physical Exam Rounds, and workshops on exam/procedure skills
- Students take call weekdays from 12-7:30pm and have 3 weekend calls and 2 overnight calls



STUDENT OUTCOMES ON THE 3 CAMPUSES

- Students on all 3 campuses perform at the mean on the NBME shelf exam
- They also perform similarly well on the IM senior OSCE stations
- 2013 (to date): 36% honors on Birmingham, 30% honors in Huntsville, 29% honors in Tuscaloosa
- Significantly higher percentage of students from Birmingham go into medicine than students from other campuses
 - In the past 5 years, 12.5% of Bham students, 3.7% of Huntsville students, and 2.6% of Tuscaloosa students



SHARED STRENGTHS

- All 3 clerkships are consistently rated highly by the students
 - The Birmingham and Huntsville campuses routinely win or are nominated for the Argus Award for best clerkship.
- Students consistently rate all 3 clerkships high in the areas of:
 - Organization of the clerkship
 - Quality of faculty teaching
 - Quality and variety of teaching sessions
- The clerkship directors on all 3 campuses are very proactive in soliciting feedback and making changes in response to that feedback



BIRMINGHAM IM CLERKSHIP STRENGTHS

- Interprofessional simulations that allow them to teach/evaluate communication skills and introduce ethical and professionalism issues as well as teach fundamentals of medical management
- Students rate the clerkship high for patient variety and volume
- Educational sessions include a variety of different types of teaching modes
 - Clerkship directors are actively looking at how they can engage their learners the best
- Students consistently rate the quality of faculty and resident teaching very highly



BHAM IM CLERKSHIP AREAS FOR IMPROVEMENT

- Students not receiving formal feedback from the preceptors they work with in the outpatient setting
- Outpatient experience has gotten mixed reviews with students rating the experience more poorly if they have not had continuity with the clinic preceptor/resident over the course of their 16 hours
- Historically, students have commented they do not get consistent mid-block feedback (need feedback at 2 week point of each block)
- Patient logs have historically not been tracked



TUSCALOOSA IM CLERKSHIP STRENGTHS

- Have an outpatient experience that is rated highly by the students
- Students rate the Monday-Friday morning report sessions very highly – the clerkship director uses these sessions creatively to include discussions of professionalism and add EKG/xray teaching to the clerkship
 - Students also enjoy the PBL sessions and the interactive PE tutorial
- Have a unique, student-designed service learning rotation with Hospice of West Alabama
- They identify weaker students early on in the rotation and assign a faculty mentor to meet with the student, develop a plan for catching up, and monitor the student's progress
- Great communication with the residents and faculty regarding clerkship objectives, assessment methods, and expectations for students
- Patient logs closely tracked during the rotation to ensure students are getting required encounters



TUSCALOOSA IM CLERKSHIP AREAS FOR IMPROVEMENT

- No direct observation of student history and physicals on the rotation and this is a perceived weakness of the clerkship in student evaluations
 - Students also requested more feedback on presentations, noting some attending physicians do this consistently and some do not
- Inpatient volume varies and has been low at times (they have made changes recently which has improved this)
- Students need feedback at the mid-block point; currently only getting formal feedback at the mid-clerkship point and have already completed a block by that point



HUNTSVILLE IM CLERKSHIP STRENGTHS

- Have worked hard to ensure timely feedback for the students on the rotation
- Students rate the morning report conferences and other case-based conferences very highly
- Students enjoy the procedure workshop held during the first week of the rotation
- There is great communication among the departmental faculty about how the students are performing
 - They make the decision about whether a student gets honors or not after a group discussion at the end of the clerkship
- Students consistently rate the quality of faculty teaching very highly



HUNTSVILLE IM CLERKSHIP AREAS FOR IMPROVEMENT

- There is no outpatient rotation; both Birmingham and Tuscaloosa have outpatient rotations
 - This is a comparability issue as well as a perceived weakness of the clerkship by the students
- There are no formal professionalism, ethics, or cultural competency educational sessions
 - Topics addressed in some of the campus Dean's Hour conferences but this is a separate curriculum from the IM clerkship
- Historically, student patient logs have not been tracked
- There is an expectation that the students will have several observed H&Ps, but this is not consistently occurring and is a perceived weakness of the clerkship by the students



SHARED AREAS FOR IMPROVEMENT

- Use of online SIMPLE cases varies from campus to campus and could be better utilized to supplement the required patient encounter experiences
- Each campus could improve some element of feedback to students
 - More direct observation of skills
 - More timely feedback
 - More feedback in outpatient setting



POTENTIAL BIGGEST CONCERNS

- Huntsville is the only campus still requiring overnight call
- Need to ensure students on all three campuses have direct observation of their skills and are given feedback on their clinical skills, documentation, and presentations
- Birmingham students have the opportunity to participate in interprofessional simulations, but Tuscaloosa and Huntsville students do not
- Huntsville has no outpatient rotation



SUGGESTIONS OF THE REVIEW TEAM

- Direct observation is an LCME issue and needs to be priority
 - Birmingham uses simulation to help accomplish this, but also needs to make sure that the faculty who are evaluating the students have observed their skills and are giving the students feedback
 - Huntsville asks this to be done by inpatient attendings and residents once/week but it is not being consistently done
 - Perhaps breaking the observations down into smaller sections (history component or exam component or communication of plan component) would make it easier to consistently complete
 - Tuscaloosa could potentially add this in a similar format in either inpatient or clinic rotations



CONT'D

- Huntsville might need to consider eliminating overnight call if this will be perceived as a significant difference by the LCME
 - There have also been occasional issues with students staying longer than 16 hours due to required afternoon didactics after the night call.
- Huntsville should explore ways to provide an outpatient rotation.
 - Tuscaloosa and Huntsville could offer models on implementing an outpatient rotation in private offices, faculty clinics, and residency teaching clinics.



CONT'D

- Birmingham and Tuscaloosa need to ensure students are getting feedback mid-way through each of their 4-week blocks so students have the opportunity to improve their final evaluations
 - Perhaps putting the responsibility with the student to approach their attending and solicit feedback
 - Clerkship directors would still need to track and document that this is occurring
- It is obvious the students rate very highly the interactive teaching sessions on the three campuses
 - Consider converting more of the traditional didactic sessions into more interactive formats
 - Share what sessions have worked well among the campuses



NEXT STEPS

- The individual campus reports as well as the overall summary report will be shared with the clerkship directors (if has not already occurred)
- Will facilitate a meeting of all 3 campuses in order to discuss the summary report and share “Best Practices” and successes of the individual campuses

Questions??

