

# Action Agenda Discussion Panel: Medical Schools

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**LCME**

**Medical Schools Objectives Project**

**ACGME**

**Outcome Project**



## School of Medicine

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### Educational Objectives of the Curriculum

In the spring and summer of 1998, the Medical School Objectives Committee, department chairmen and Curriculum Committee at New York Medical College adopted the following educational objectives for the program leading to the M.D. degree. The resulting objectives are very similar to those adopted by the Medical School Objectives Project of the Association of American Medical Colleges and describe the knowledge, skills, values and attitudes believed necessary for the practice of medicine in the 21st century. It is expected that the Curriculum Committee will review and revise the curriculum to assure that these objectives are being met.



### **Graduates must be Altruistic and Demonstrate:**

- Knowledge of the theories and principles that govern ethical decision-making, and of the major ethical dilemmas in medicine, particularly those that arise at the beginning and end of life and those that arise from the rapid expansion of knowledge of genetics.
- Compassionate treatment of patients, and respect for their privacy and dignity.
- Honesty and integrity in all interactions with patients' families, colleagues and others with whom physicians must interact in their professional lives.
- An understanding of, and respect for, the roles of other healthcare professionals, and of the need to collaborate with others in caring for individual patients and in promoting the health of defined populations.

# Medical School Objective Project (MSOP)

Graduates must be:

- Knowledgeable
- Skillful
- Dutiful
- Altruistic

## *Example: Knowledgeable*

“An understanding of the scientific method in establishing the efficacy of traditional and non-traditional therapies.”

## *Example: Skillful*

“Ability to communicate effectively, both orally and in writing, with patients, families, colleagues and others.”

## *Example: Dutiful*

“Ability to retrieve from electronic databases or other resources, manage, and utilize biomedical information for solving problems and making decisions that are relevant to the care of individuals and populations.”

## *Example: Altruistic*

“An understanding of the threats to medical professionalism posed by the conflicts of interest inherent in various financial and organizational arrangements for the practice of medicine.”

# AAMC/LCME Hot Topics



# Selected Hot Topics

- Alternative Medicine
- Cost Containment
- Doctor/Patient Relationship
- Health Care Systems
- Home Health Care
- International Health
- Literature & Medicine

# Selected Hot Topics (Cont.)

- Medical Humanities
- Medical Informatics
- Medical Jurisprudence
- Medical Socioeconomics
- Multicultural Medicine
- Patient Health Education
- Practice Management

# Selected Hot Topics (Cont)

- Quality Improvement/Assurance
- Risk management
- Technology Assessment
- Utilization Review & QA

# Special Theme Objectives

- Cultural Diversity
- Evidence-based Medicine
- Genetics/Proteomics
- Palliative Care
- Nutrition
- Pain Management
- Population Health
- Economic Issues
- Legal/ethical Issues

# General Professional Competencies

- Problem-solving Skills
- Cooperation with Colleagues
- Research Skills
- Paper Presentation Skills
- Self-directed Learning Skills
- Use of Information Resources
- Ability to Work Independently
- Efficiency, Time Management
- Ability to Work Under Pressure

# AAMC Graduation Objectives

- Course objectives have clear and measurable educational goals
- Course integrated/coordinated with overall curriculum
- Course objectives & examination content match
- Sufficient illustration of clinical relevance
- Timely feedback on performance both formative and summative
- Course developed or sharpened problem solving skills and self-directed learning

## General Competencies

### Minimum Program Requirements Language

*Approved by the ACGME, September 28, 1999*

#### Educational Program

The residency program must require its residents to obtain competencies in the 6 areas below to the level expected of a new practitioner. Toward this end, programs must define the specific knowledge, skills, and attitudes required and provide educational experiences as needed in order for their residents to demonstrate:

- a. **Patient Care** that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health
- b. **Medical Knowledge** about established and evolving biomedical, clinical, and cognate (e.g. epidemiological and social-behavioral) sciences and the application of this knowledge to patient care
- c. **Practice-Based Learning and Improvement** that involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence, and improvements in patient care
- d. **Interpersonal and Communication Skills** that result in effective information exchange and teaming with patients, their families, and other health professionals
- e. **Professionalism**, as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population
- f. **Systems-Based Practice**, as manifested by actions that demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value

# General Competencies: Education

- Patient Care
- Medical Knowledge
- Practice-based Learning and Improvement
- Interpersonal and Communication Skills
- Professionalism
- Systems-based Practice

# General Competencies: Evaluation

- Record Review
- Chart Stimulated Recall
- Checklist
- Global Rating
- Standardized Patients
- OSCE
- Simulations and Models

# General Competencies: Evaluation (Cont.)

- 360° Global Rating
- Portfolios
- Exam MCQ
- Exam Oral
- Procedure or Case Logs
- Patient Surveys

Some Observations...

