Curriculum Redesign: Organ System-Based Alignment and Integration of Pathology, Pharmacology, and Medicine Content: An Opportunity for a Meaningful Curriculum Reboot

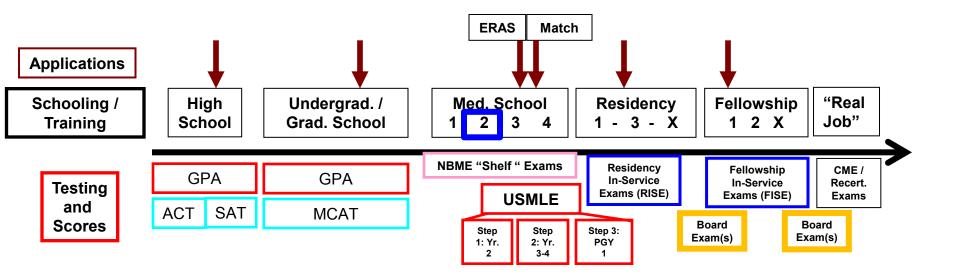
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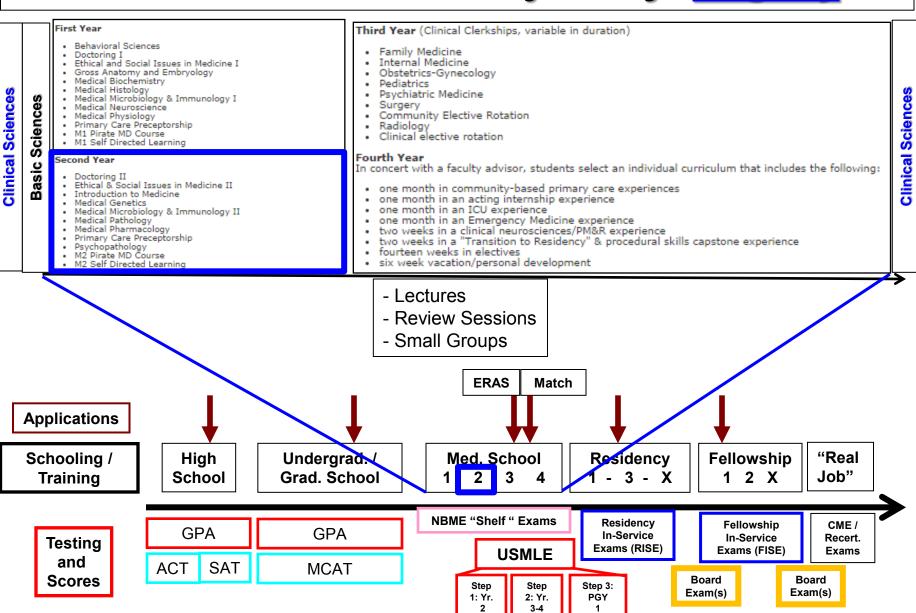
Legacy Curriculum

New Curriculum

Medical Education Trajectory: Legacy



Medical Education Trajectory: Legacy



Legacy Curriculum

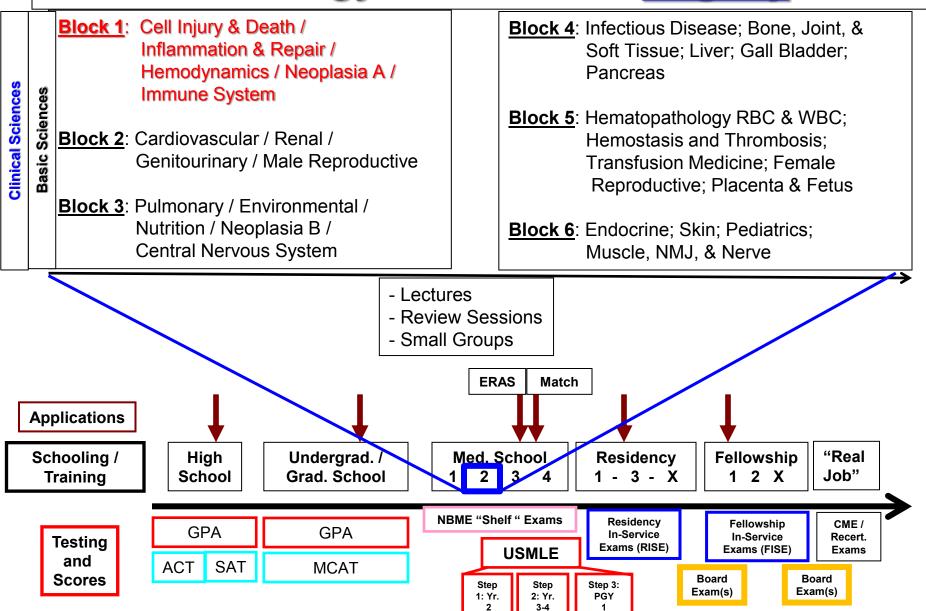
First Year

- Behavioral Sciences
- Doctoring I, including Primary Care Preceptorship
- Ethical and Social Issues in Medicine I
- Gross Anatomy and Embryology
- Medical Biochemistry
- Medical Histology
- Medical Microbiology & Immunology I
- Medical Neuroscience
- Medical Physiology
- Foundations of Medicine I

Second Year

- Doctoring II, including Primary Care Preceptorship
- Ethical & Social Issues in Medicine II
- Introduction to Medicine
- Medical Genetics
- Medical Microbiology & Immunology II
- Medical Pathology
- Medical Pharmacology
- Psychopathology
- · Foundations of Medicine II

Pathology Curriculum: Legacy



Rationale: Why Change?

Medical School Perspective

 Other Medical Schools: have condensed "basic science" portion of curriculum and expanded "clerkship" portion

Medical Student Perspective

 More Elective Clerkship Opportunities: opportunity to explore to optimize specialty / residency choice

Other Considerations

Medical Student Concerns

- Overlap
- Inconsistency
- Malalignment

Guiding Principles in Alignment of Content

- Parsing and Separation of Basic Science Topics to Block 3: Basic science concepts will be taught in "Block 3" while "Block 4" will comprise an integrated organ system motif.
- Order of Content by Discipline: Pathology will introduce pathophysiology topics, Pharmacology will introduce relevant medications, and then Medicine will highlight key concepts and diseases using a case-based approach.
- <u>Redundancy</u>: Redundancy other than planned / intentional redundancy will be <u>minimized or eliminated</u>.
- <u>Competing Issues Subordinated</u>: Competing issues including
 <u>faculty schedules</u> and the <u>coordination of pharmacology content</u>
 <u>with nursing student schedules</u> are considered secondary to a
 cohesive schedule that fits within the defined schedule with
 periodic examinations.
- <u>Preservation of Study Day</u>: The day prior to each examination will be reserved for study.

Guiding Principles in Alignment of Content

- Assessment: More Frequently: Assessments of lecture content will be increased from one-per-block test to a <u>weekly quiz or</u> <u>examination</u>.
- <u>Liaison Committee on Medical Education (LCME) Accreditation:</u>
 Position curriculum to <u>meet LCME accreditation criteria</u>.

Data: Critical Review of Legacy M2 Curriculum Content

Second Year Curriculum Optimization: A Student's Perspective of <u>Gaps</u>, <u>Overlap</u>, and <u>Planned</u>

<u>Redundancy</u>

Nicholena Etxegoien, MS4, and Kevin Harris, MS4, Brody School of Medicine

Brody Medical Eduction Day, 04/12/2017

An exhaustive review of Pathology, Pharmacology, and Medicine content presented in the legacy curriculum was undertaken by student members of the Curriculum Subcommittee

New Curriculum

Block 3

Pathology & Pharmacology Introductory Content – Taught During Year 1:

- Pathology: Cell Injury & Death / Inflammation & Repair / Hemodynamics / Neoplasia I & II / Immune System / Environment / Nutrition
- Pharmacology: General Principles, Pharmacodynamics, Autonomic Nervous System, Autacoids

Other Basic Science / Foundational Content Shifted to Block 3:

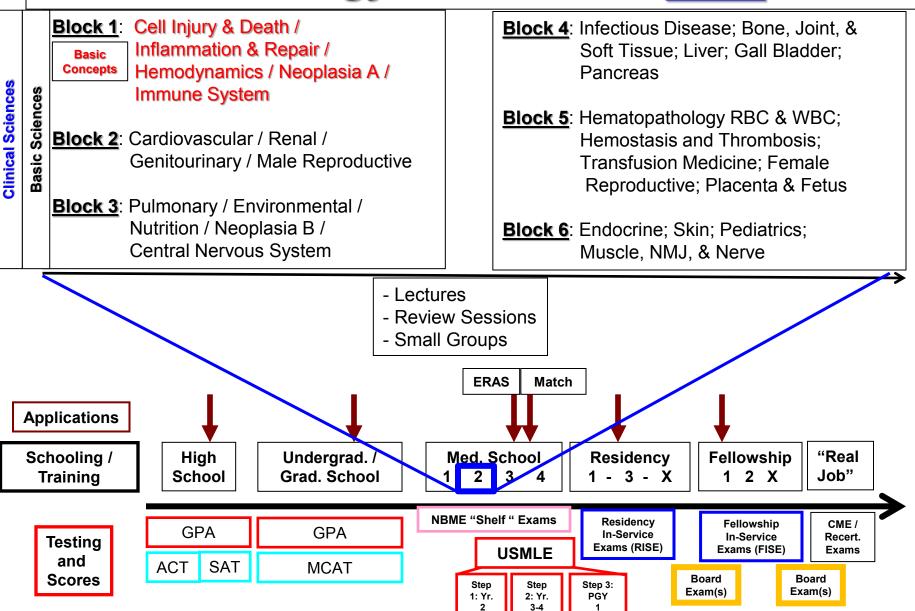
- Medical Microbiology and Immunology II
 Ethics
- Medical Genetics Biostats

Block 4

Pathology / Pharmacology / Medicine: Integrated Organ System Content – Taught during Year 2:

- <u>Section 1</u>: Review (Pathology, Pharmacology) / Cardiovascular / Renal
- Section 2: Pulmonary / Rheumatology
- Section 3: Neurology / Infectious Disease
- <u>Section 4</u>: Gastrointestinal / Nutrition / Pediatric
- <u>Section 5</u>: Hematology, Coagulation & Thrombosis, Transfusion Medicine / Dermatology
- <u>Section 6</u>: Endocrine / Female Reproductive System, Fetal-Maternal, Placenta / Male Reproductive System / Laboratory Medicine

Pathology Curriculum - NEW



Block 4: Cardiovascular / Renal Section

Cardiovascular Sections of Integrated Curriculum

	Monday	Tuesday	Wednesday	Thursday	Friday		Monday	Tuesday	Wednesday	Thursday	Friday
	08-13-18	08-14-18	08-15-18	08-16-18	08-17-18		08-20-18	08-21-18	08-22-18	08-23-18	08-24-18
8.00	8:00-8:50 2S04 Pharm 4 Anti-Thrombotics 2	8:00-8:50 2S04 Pharm 5 Diuretics 1	8:00-8:50 2S04 Pharm 6 Diuretics 2	8:00-8:50 2S04 Pharm 7 Cardiac Ischemia-Angina	8:00-8:50 2S04 Pharm 8 Cardiac Ischemia-Infarct	8:00 8:30	QUIZ 2	Pharm 9	Pharm 10	Pharm 11	8:00-8:50 2S04 Pharm 12
9:00	9:00-9:50 2S04 Path – Cardio 2	9:00-9:50 2S04 Path – Cardio 4	9:00-9:50 2S04 Path – Cardio 5	9:00-9:50 2S04 Path – Cardio 6	9:00-9:50 2S04 Med – Cardio 2	9:00		Congestive Heart Fail 1 9:00-9:50 2S04 Med – Cardio 3	9:00-9:50 2S04 Med – Cardio 4	Hypertension 1 9:00-9:50 2S04 Med – Renal 2	Hypertension 2 9:00-9:50 2S04 Med – Renal 4
	BVD: Vasculitis	Valvular Heart Disease	Atherosclerosis & Lipids	Coronary Artery Disease & Myocardial Infarct	Valve	9:30	Evaluation of Renal Disease	Coronary Artery Heart Disease	CASES	Diagnostic Approaches	Acid/Base
10:00	10:00-10:50 2S04 Path – Cardio 3	10.00-11:20 2S04 Psych 4	10:00-11:30 6 rooms Ethics 10	10:00-10:50 2S04 Path – Cardio 7	10:00-10:50 2S04 Path – Cardio 9						
10:30	BVD: Arterio and Arteriolosclerosis, Dissection, Connective	Definitions/Classifications		Myocarditis; Cardiomyopathies	Heart Failure, Cardiac Neoplasms, Pericardial Disease	10:00	Psych 6	10:00-10:50 2S04 Path – Cardio 10	10:00-11:30 6 rooms Ethics 11	10:00-10:50 2S04 Med – Renal 3	10:00-10:50 2S04 Med – Renal 5
3434	Tissue Disease, Aneurysm, Hypertension					10:30	Mental Status Exam	Congenital Heart Disease 11:00-11:50 2S04			Acute Disease 11:00-12:20 2S04
11:00	11.00-11:50 2S04 Psych 3			11:00-11:50 Labs Path – Cardio 8	11:00-11:50 2S04 Psych 5	11.00	11:30-12:20 Labs	Psych 7		Path – Renal 2	Psych 8
11:30	Models & Mechanisms 2		1	LAB 1	Interviewing	11:30	Path - Cardio 11	Testing In PCP Setting Rating Scales		Histology & Mechanisms Of Renal Disease	Neurocognitive Disorders
12:00	LUNCH	LUNCH	LUNCH	Noon-12:50 FoM 2 LUNCH Career & Academic		12:00		LUNCH	LUNCH	LUNCH	
12:30	LUNAT	LUNGI	Contai	Development Small Groups	Student Organizations	12:30	LUNCH			1:00-4:00	LUNCH
1:00			1:00-5:00 Med – Cardio 1	1:00-3:00 FoM PBL 1	ran	1:00				FoM PBL 2	
1:30		1.30-3.30	Sim Lab	Small Groups		1:30		1:30-3:30 2S04	1:30-3:00 Med	Small Groups	
2:00	2:00-5:00 Hold for Autopsy	Doc2 2 Physical Diagnosis Rotation (PDR)	3 Rooms - (40 min per student group)			2:00		Doc2 3 PDR	Case-Based Study Cardiovascular		
2:30	Experience	Totalion (1 Dis)				2:30	2:30-5:00 Hold for Autopsy				
3:00						3:00	Experience				
3:30						3:30					
4:00						4:00					
4:30			1			4:30	1				

Pathology

Pharmacology

Medicine

Psychiatry

Doctoring

Foundations of Medicine

Time Shift

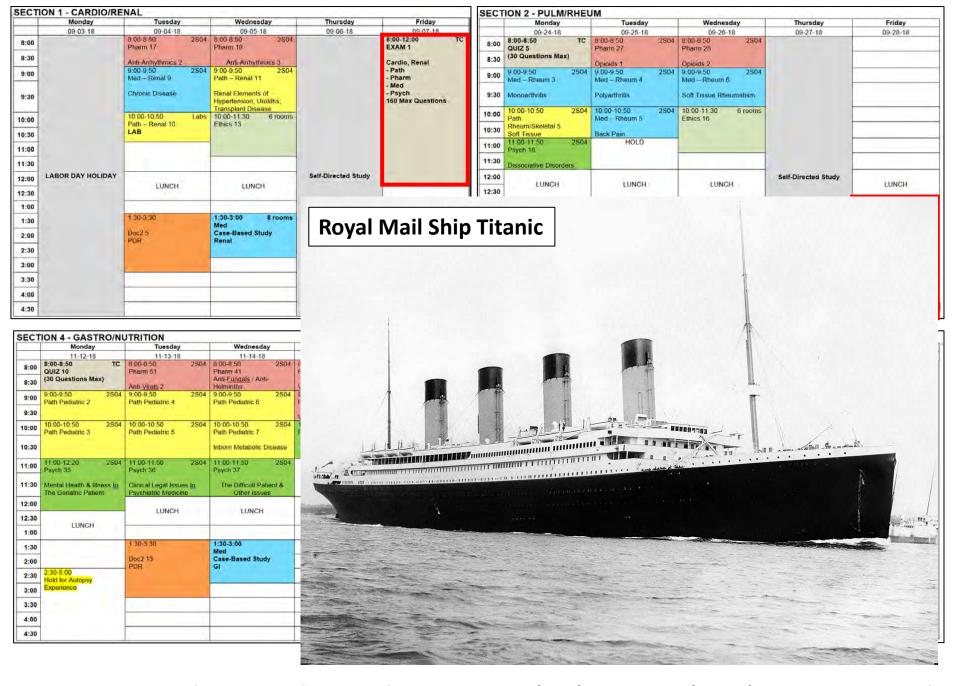
Into Clerkships >2 Months Earlier

How??

Spring 2016-2017

	Monday	Tuesday	Wednesday	Thursday	Friday	March 6	March 10, 2017 Monday	Tourish or	Wednesday	Thursday	Eddoor		
	27-Feb	28-Feb	1-Mar	2-Mar			Monday 6-Mar	Tuesday 7-Mar	Wednesday 8-Mar	Thursday 9-Mar	Friday 10-Mar		
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8:30	Cancer Orugs 3	Cancer Drugs 4	Immunomodulators 1	Immunomodulators 2	Review	8:00					8:30-12:30		
9:00		9:00-9:50 2504		9:00-9:50 2504	9:00-9:50 2504	8:30					EXAM		
9:30		Genetics 7 Cytogenetics 2	Path - Female Repro 8 Tubes/Ovary 2	Genetics 8 Prenatal Diagnosis 1	Genetics Review	9:00			9:00-11:00 TC EXAM		Pharmacology/Pathology		
O con	10:00-10:50 2504	10:00-10:50 2504	10:00-10:50 2504	10:00-10;50 '2504	10:00-10:50 2504	9:30			Gimmigs				
0:00	Path - Female Repro 6	emale Repro 6 Path – Female Repro 7	Path Female Repro 9	Genetics 9	Path – Female Repro 10 Placenta	Path - Female Repro 10	Path - Female Repro 10	10:00					
0:30	Uterus	Tubes/Ovary 1	Laboratory 7E67,7E69,7E71,7E73	Prenatal Diagnosis 2		10:30							
	11:00-11:50 2504					11:00							
1:00	Medicine - Review	LUNCH	LUNCH	LUNCH	LUNCH				TUNCH				
1:30			20,500		0	11:30							
2:00	1007575-0					12:00	READING DAY	READING DAY		READING DAY			
2:30	LUNCH					12:30							
1:00						1:00			1:00-4:00 TC EXAM				
1:30		1:30-3:00 Doctoring II				1:80			Internal Medicine				
2:00		2504				2:00							
2:30		EKG Lecture	SELF-DIRECTED STUDY	SELF-DIRECTED STUDY	SELF-DIRECTED STUDY	2:30 2:30							
3:00	SELF-DIRECTED STUDY					3:00							
8:30		and the state of the state				3:30							
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4:30						4:30							

21, 2017 Monday	Tuesday	Wednesday	Thursday	Friday		- April 28, 2017 Monday	Tuesday	Wednesday	Thursday	Friday	May 1 - 3	May 5, 2017		7 2000	1 100	-
17-Apr	18-Apr	19-Apr	20-Apr	21-Apr		24-Apr	25-Apr	25-Apr	27-Apr	28-Apr		Monday 2-May	Tuesday 3-May	Wednesday	Thursday 4-May	5
	9:00-9:50 7504 Genetics 18 Practical Covenues	h00-9:50 250 Medicine Review	100-9-50 2504 emilica Botomo	SELF-DIRECTED STUDY	8:00 8:30 9:	CXAM Generalic	E-SD-12-90 10 CXAM Internal Medicine	SELF-DIRECTED STUDY	SELF-DIRECTED STUDY	Examination	2:00 2:30 9:00 9:30	SHU-OMECTED STUDY	SEU-ORRECTED STUDY	ESB Room EXAM Pathology Shelf Exam		9:00 ECU Comme
STUDENT HOUDAY	SELF-DIRECTED STUDY	SELF-DIRECTED STUDY	SELF-DIRECTED STUDY		10:30 11:00 11:30					10.3 11.9 11.3	10:00 10:30 11:30 11:30	30 90 30				
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	1:30:3:30 Doctoring II POR Make-tail SELF-DIRECTED STUDY SELF-DIRECTED STUDY 5	SELF-DIRECTED STUDY	1:00 1:30 2:00 2:30 3:00	SELF-DIRECTED STUDY	SELF-DIRECTED STUDY	SELF-DIRECTED STUDY	Y SELF-DIRECTED STUDY	SELF-DIRECTED STUDY	1:50 2:00 2:30 8:00 8:30	SELF-DIRECTED STVDY	SELF-DIRECTED STUDY)—1).——————————————————————————————————	•		
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(F.G.O. Stuart (1843-1923), en.wikipedia.org/wiki/RMS_Titanic#/media/File:RMS_Titanic_3.jpg)

Assessment: Changes & Challenges



** Quality Improvement Implementation **

Assessment

- Legacy Curriculum
 - ExamSoft E-Testing: 2014-2015 Academic Year
 - Assessment
 - Pharmacology & Pathology Examination: 2014 –
 2017 = X 3 Years
 - Seamless: Virtually no problems
 - Medicine, Psychiatry, Microbiology, Genetics Examinations: Separate

New Curriculum

- ExamSoft
- Assessment
 - Quizzes: Single quiz, all subject areas
 - Examinations: Single Examination
- USMLE Step 1 Environment

Assessment

- New Curriculum
 - "If it can go wrong"
 - Non-Standard Students: Not able to access assessment
 - Blending: Wrong quiz added: Block 3 vs. 4
 - <u>Duration</u>: Wrong time assigned
 - Secure Review: Not turned on
 - Linked Questions with Shared Vignette: Not linked
 - Questions: Non-standard, grammatical and stylistic non-conformity

We Need an Intervention!!

Ad Hoc Committee: Quality Improvement (Master Class)

Course Directors

N = 3 (M2 & M1)

Medical Students

N = 4 (M2)

Curriculum Directors

- N = 2 (M2 & M1)
- Faculty Administrators
- N = 5

Test Administrate

N = 1

Admin. Assistant

N = 1

Dr. Luan Lawson



(ecu.edu/csdhs/ecuem/fac/lawsonj

Environment

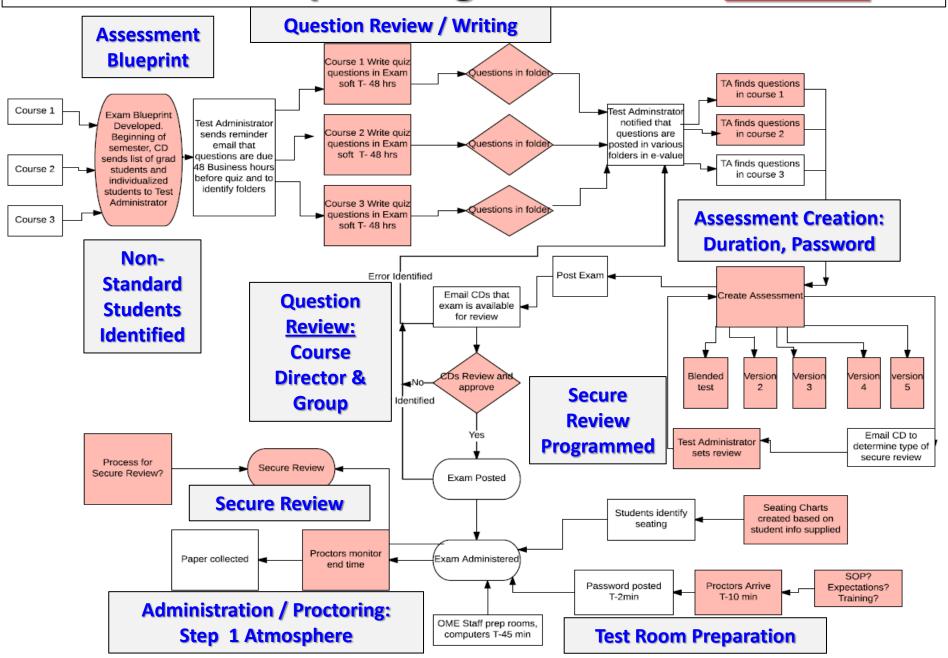
People

Content

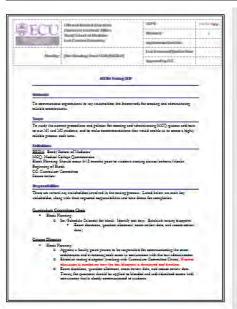
Equipment & Software

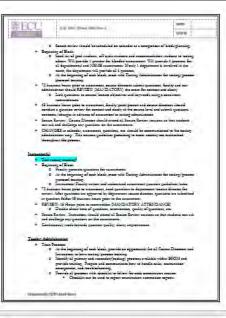
Policies & Procedures

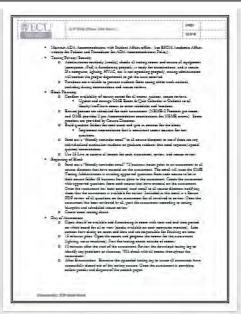
Standard Operating Procedure: <u>DRAFT</u>

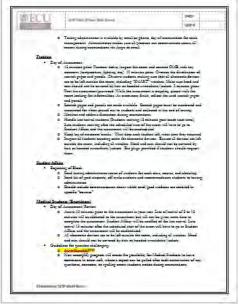


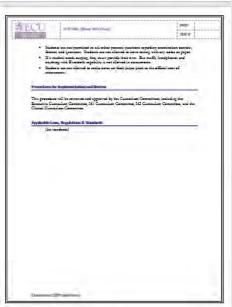
Standard Operating Procedure: <u>DRAFT</u>

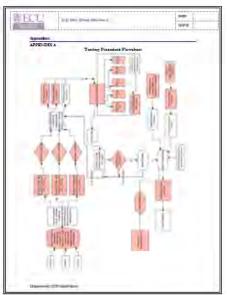


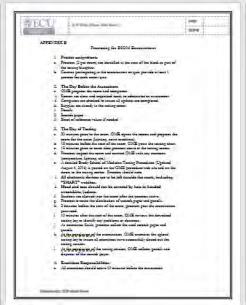


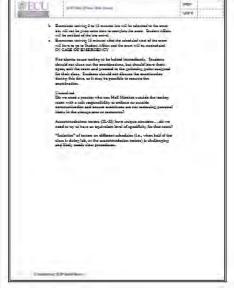












Recommendations Presentedd to Curriculum Committees:

Assessment Questions

- Recommendation #1: Assessments not employing essay or free text should only use single best answer formats that require test-takers to select the single best response.
 - This avoids the use of true/false (C-type, K-type, and X-type) questions]
- Recommendation #2: <u>Item analysis</u> should be performed after each exam. The following analyses should be performed and reviewed in the context of the entire exam:
 - Analysis of item difficulty
 - Analysis of item discrimination
 - Analysis of item options

Feedback Meetings: Student Representatives and Course and **Curriculum Directors**

Post-Examination Feedback Meetings

Themes For Continuous Quality Improvement: Needs Identified By Students During Feedback

Course Organization	Quizzes & Examinations	Content Alignment / Integration	Educational Technology / Communication
Standardization: Baseline expectations, across and within courses	Consistent Delivery of A Quality Assessment Experience: Similar to Step 1 items	Although <u>alignment</u> <u>efforts appreciated</u> , work towards more <u>functional</u> <u>integration needed</u>	Course Information (Lectures, Documents, etc.): Should be available electronically for preview/review ASAP
Course Director Role: present and engaged at each course session	Assessment: * Questions aligned with course and session objectives	Path.: Focus on disease ★ Pharm.: focus on therapies; Med.: ↑ focus on clinical presentations and DDx	Expectations of Course Directors: Clearly communicated to faculty and students, especially when changes occur
Objectives and Key Words for Sessions: Clearly communicated at outset and assessed at completion	<u>Distribution:</u> Equitable distribution of quiz items relative to lecture hours and relative "Step 1" importance	Session Level Integration: Within a given exam block instructors should be aware of the content presented by others; aligned with First Aid	Tools: Increased demand for user-friendly educational tools (ex. readable ppt. slides/presenter's notes)

Feedback: Survey

Survey

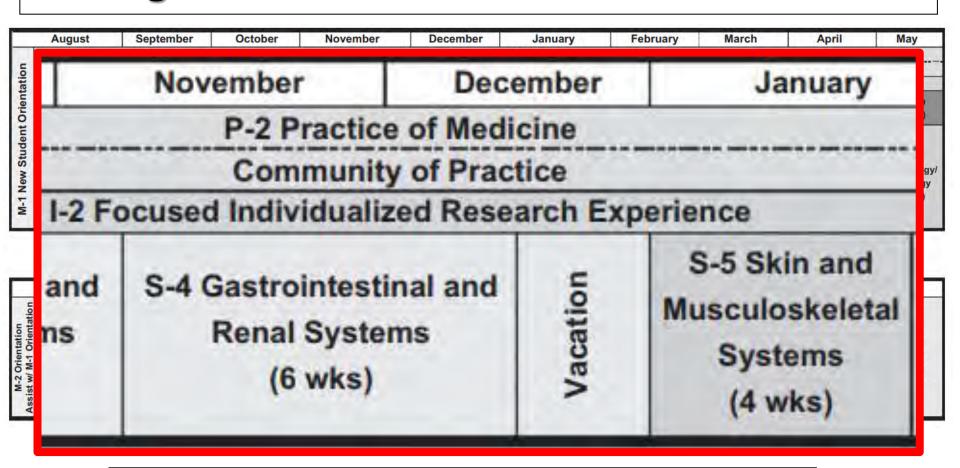
- Whom?
 - M2s: Experimental Group
 - Status-Post maiden voyage of curriculum
 - M3s and M4s: Control Group
 - Legacy curriculum
- Survey Tool
 - Draft Developed
 - Trialed on M4s
 - Consultation Pending
 - Dr. Carroll
 - Dr. Charles
 - Others

Interim Summary / Conclusions

Changes: Overview

- "Block 3" at End of M1 Year: Basic Pathology and Pharmacology Topics now taught at end of M1 Year along with Genetics, Ethics, and completion of Microbiology Course: frees up M2 "year" for alignment of organ system topics but adds bulk to M1 year.
- "Block 4" during M2 "Year": Alignment and Integration of topics by Organ System in Pathology, Pharmacology, and Medicine along with Psychiatry.
- <u>Reduction in Basic Science Concept Redundancy/Overlap and Dissonance during the M2 Year</u>: e.g. <u>elimination of different definitions</u> (e.g. "hypertension") or <u>redundant</u> (X3) <u>explanations</u> of (e.g. Graves disease) in Pathology, Pharmacology, and Medicine.
- <u>Sequence of Topic Presentation in M2 Year</u>: <u>Pathology</u> teaches <u>pathophysiology</u>; <u>Pharmacology</u> teaches <u>pharmacologic concepts</u> and <u>current medications</u>; and <u>Medicine</u> uses a <u>case-based approach</u> to illustrate key concepts and topics
- <u>Single Integrated Examination</u>: Questions from all courses vs. legacy curriculum with multiple examinations (e.g. separate Medicine, Pathology-Pharmacology, Psychiatry, and Microbiology examinations) spread over 2-3 or more days: <u>USMLE atmosphere</u>
- Examination or Quiz EVERY Week vs. Examination every 4-6 weeks
- Single Study Day Prior to M2 Examinations free of classes vs. 1 to multiple study days
 prior to examinations in legacy curriculum
- Elimination of Review Sessions: Materials available on Blackboard
- <u>M2 Students Finish Classes in Early February and Take Step 1 in March</u> vs. finish classes in early May and take Step 1 in June in legacy curriculum
- <u>Students Begin M3 Clerkships in Early April</u> rather than late June: Allows for <u>additional</u> <u>electives</u> and <u>avoids overlap</u> of new M3 students <u>with new residents</u>

"Integrated Curriculum: Univ. Central Florida



Adv Physiol Educ 38: 199–209, 2014;
doi:10.1152/advan.00055.2014.

A Personal View

Faculty reflections on the process of building an integrated preclerkship curriculum: a new school perspective

Mohammed K. Khalil and Jonathan D. Kibble

Department of Medical Education, College of Medicine, University of Central Florida, Orlando, Florida

Submitted 6 May 2014; accepted in final form 4 June 2014

Step 1 Study and Transition to Clerkships

Curriculum	Complete	Step 1 Study and	M3 Clerkship
	Classes	Exam	Orientation
Legacy Curriculum :	<u>05/05</u> , 2017	<u>05/08 – 06/16</u> , 2017	<u>06/19</u> , 2017
2016-2017			
New Curriculum :	<u>02/09</u> , 2018	<u>02/12 – 04/06</u> , 2018	<u>04/09</u> , 2018
2017-2018			

To-Do List

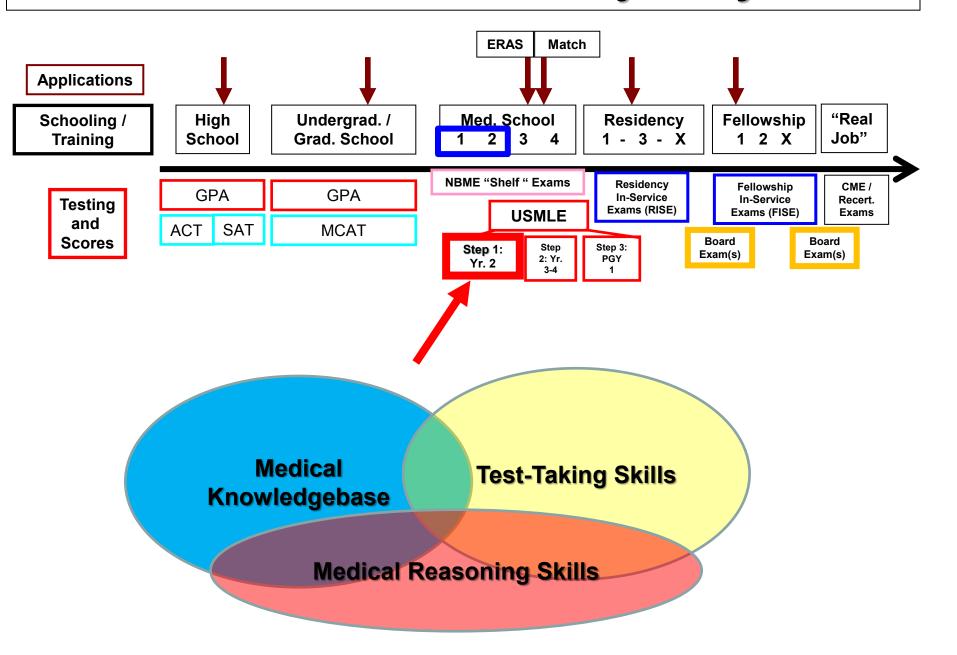
To-Do List

- Integration at Session Level (in addition to Program and Course Level)
 - Objectives and Key Words
 - Definitions
 - Shared tables and diagrams: Incorporation of First Aid for Step 1 content as possible

Assessment

- Standardization of question writing
- Elimination of overlap of questions asking essentially the same thing: e.g. Pathology and Medicine
- Increase "Tertiary"-type / medical reasoning questions
- Add integrated questions with combined: Pathology / Pharmacology, and Medicine content

Medical Education Trajectory



Cases of the Week

	Monday	Tuesday	Wednesday	Thursday	Friday
	08-27-18	08-28-18	08-29-18	08-30-18	08-31-18
8:00	8:00-8:50 TC QUIZ 3	8:00-8:50 2S04 Pharm 13	8:00-8:50 2S04 Pharm 14	8:00-8:50 2S04 Pharm 15	8:00-8:50 2S0 ² Pharm 16
8:30	(30 Questions Max)	Hypertension 3	Hypertension 4	Local Anesthetics	Anti-Arrhythmics 1
9:00	9:00-9:50 2S04 Med – Renal 6	9:00-9:50 2S04 Path – Renal 4		9:00-9:50 2S04 Med – Renal 7	9:00-9:50 2S04 Med – Renal 8
9:30	Hypertension	Glomerular Disease - Nephritic	Tubulointerstitial Disease	Glomerular	Non-Glomerular
10:00	10:00-10:50 2S04 Path – Renal 3	10:00-10:50 2S04 Path – Renal 5	10:00-11:30 6 rooms Ethics 12	10:00-10:50 2S04 Path – Renal 7	10:00-10:50 2S04 Path – Renal 9
10:30	Glomerular Disease - Nephrotic	RPGN & Systemic Disease Affecting Kidneys		Neoplasia and Cysts	Renal Vascular Disease
11:00	11:00-12:20 2S04 Psych 9	11:00-12:20 2S04 Psych 10		11:00-11:50 2S04 Path – Renal 8	11:00-11:50 2S04 Psych 11
11:30	Schizophrenia Spectrum &	Bipolar and Related		Urinary Tract: Ureter, Bladder, Urethra	Depressive Disorders
12:00	Other Psychotic Disorders	Disorders	LUNCH	LUNCH	LUNCH
12:30	LUNCH	LUNCH			
1:00			1:00-4:00 SL Pharm Sim LAB	1:00-4:00 FoM PBL 3	
1:30	/	1:30-3:30 2S04	(With Pre-Reading and On-Line Quiz)	Small Groups	
2:00		Doc2 4 PDR	2 Rooms - (40 min per student group)		
2:30	Hold for Autopsy Experience				
3:00					
3:30					
4:00					
4:30					

Is This Experience / Ordeal Worth Publishing?

Evidence-Based
Medical Student Education

Academic Pathology





(Peter Kragel, M.D., CustomInk.com)

Academic Medicine

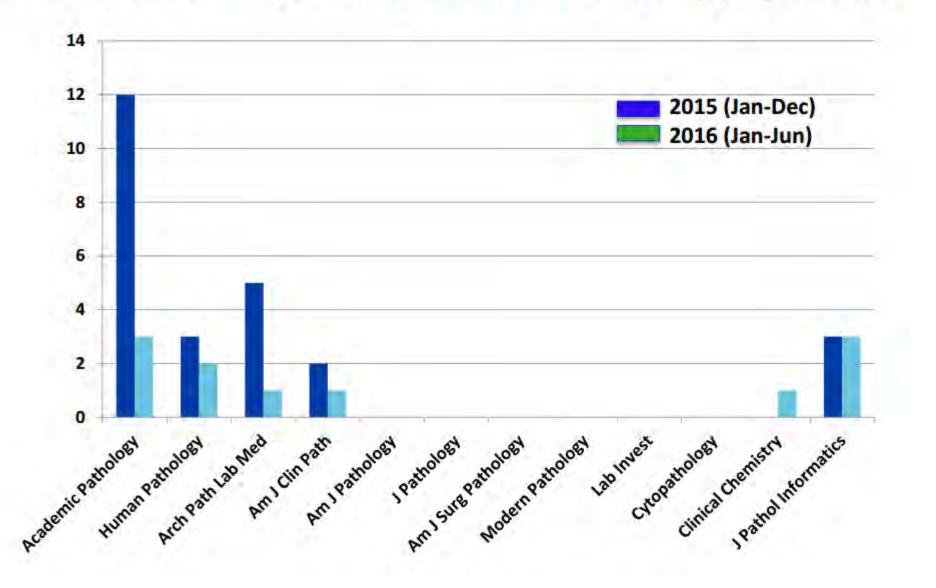


Purposes of Educational Scholarship

- Disseminate knowledge about innovations in education*
 - Scholarship of discovery (research)
 - Scholarship of integration (across disciplines)
 - Scholarship of application (from research to practice)
 - Scholarship of teaching and learning
- A mechanism for career advancement of clinician:teacher
 - Need to have parallel alignment of P&T Committees
- A mechanism for education, career development, and CV building for <u>students</u> and <u>residents</u>

^{*}Boyer EL. Scholarship reconsidered – Priorities of the Professoriate. Princeton, NJ, 1990

Educational Scholarship in the "Pathology" journals



(Crawford J., Publishing Educational Scholarship Papers, APC 2016, UMEDS Session)



Editor-in-Chief:

Anii V. Parwani,

Columbus, OH, USA

Liron Pantanowitz, Pittsburgh, PA, USA OPEN ACCESS HTML format

For entire Editorial Board visit: www.jpathinformatics.org/editorialboard.asp

Research Article

Pathology Informatics Essentials for Residents: A flexible informatics curriculum linked to Accreditation Council for Graduate Medical Education milestones

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