

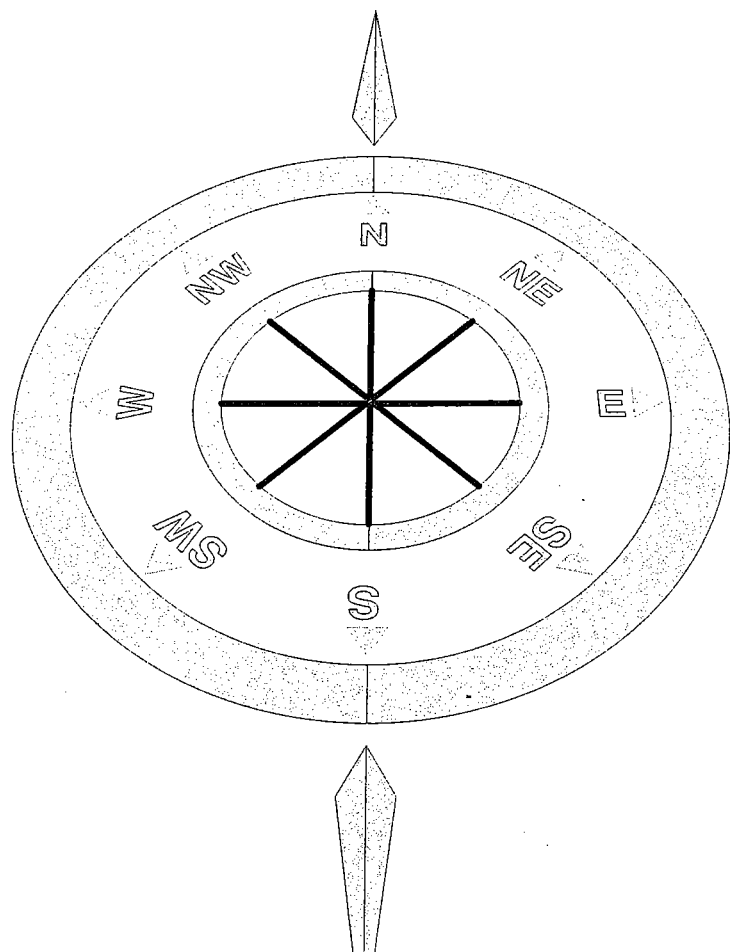
# The Nineteenth Annual Conference For Generalists in Medical Education

November 1-2, 1998

Hotel Inter-Continental

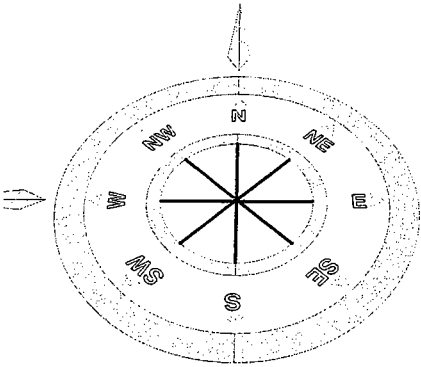
New Orleans

*Maintaining  
a Moral Compass:  
Challenges  
for  
Generalists*



# Generalists in Medical Education

## Who Are We?



The Generalists in Medical Education are committed to improving medical education. We teach, conduct research, and provide educational support services in all areas of pre-doctoral, post-doctoral, and continuing medical education.

### **What are our roles as educators?**

In addition to teaching, our area of expertise and interest include: curriculum design and instructional development; testing and evaluation; faculty development; student support; educational research; grant writing; educational leadership; and organizational development.

### **Why does our group exist?**

We come together as a group to exchange skills, knowledge, and ideas to improve medical education and to enhance our professional growth.

### **What can we do for you?**

At the annual conference we offer opportunities to develop specific skills to enhance professional effectiveness, to understand the latest initiatives and innovations in medical education, and to explore solutions to educational problems. Conference sessions are interactive and informal. We encourage networking throughout the year, which is facilitated by an annually revised membership directory.

### **How can I become a member?**

There are no annual membership dues. Registration at our annual conference provides you the opportunity to: 1) attend all sessions, associated meals, and a reception, 2) vote at the annual business meeting, 3) obtain an updated membership directory, and 4) receive a subscription to *Teaching and Learning in Medicine*. We coordinate the timing of our annual meeting with the annual meeting of the Association of American Medical Colleges (AAMC) which is typically held in late October or early November. Every other year both meetings are held in Washington, D.C.

Look for us on the Internet at <http://www.utmb.edu/meo/generalists/>

To be included on our mailing list, send your name and address to:

Louis Grosso  
American Board of Internal Medicine  
510 Walnut Street, Suite 1700  
Philadelphia, PA 19106  
E-mail: [lgrosso@abim.org](mailto:lgrosso@abim.org)

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*Maintaining*

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*a Moral Compass:*

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*Challenges for Generalists*

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## Conference Sessions

**Descriptive:** These sessions feature several presenters providing overviews of projects, programs or strategies in a common area. A session typically includes three or four presentations followed by discussion and exchange. A moderator introduces speakers and facilitates discussion.

**Panel Discussion:** These sessions feature several individuals responding to questions and presenting their ideas regarding a specific issue or topic. A panel typically has representation from a cross-section of perspectives and/or institutions. A moderator helps to facilitate panel comments and audience participation.

**Problem-Solving:** These sessions are designed for intensive discussion focused on a particular issue, theme or problem. The presenter provides stimulus material and organizes small-group interaction on the topic. At the end of the small-group sessions, the groups share their ideas and develop a summary statement.

**Roundtables:** Special Topic Roundtables provide an informal opportunity for sharing experiences and ideas. Leaders briefly introduce the topic and then facilitate discussion among participants.

**Skills Acquisition:** In these sessions, presenters teach particular skills or techniques. Specific learning objectives provide the Generalist with increased competence in an area of medical education. Typical topics include consulting, measurement, evaluation, research, data analysis, curriculum and instructional design, or faculty development.

## *Message from the Chair*

Welcome to the 1998 Conference of the Generalists in Medical Education! Our focus this year is on professionalism and our roles and responsibilities in "maintaining a moral compass." How do we define "professional behavior"? Are traditional notions of professionalism changing as medical care is changing? In what ways do we teach, assess, and model professional traits and behaviors? These and other conceptual and practical issues will be discussed candidly during the interactive sessions. With New Orleans as the backdrop, enjoy this time with old and new colleagues as you gain new information, skills and insights as a medical educator.

- Ellen G. Whiting, 1998 Chair

## *1998 Steering Committee*

Ellen Whiting, Chair	Northeastern Ohio Universities College of Medicine
Linda Perkowski, Past Chair	University of Southern California School of Medicine
John Shatzer, Chair Elect	Johns Hopkins University School of Medicine
Louis Grosso, Membership	American Board of Internal Medicine
Carol Hasbrouck, Treasurer	Riverside Methodist Hospitals
Sheila Chauvin, Program	Tulane University Medical School
Diane Heestand, Program	University of Arkansas for Medical Sciences
Amy Blue	Medical University of South Carolina
Elizabeth Kachur	Medical Education Development
Linda Lee	Duke University School of Medicine
Brownie Anderson, Liaison	Association of American Medical Colleges

## *Acknowledgments*

We wish to thank the administrations of Tulane University Medical School and the University of Arkansas for Medical Sciences for their support in the development of this conference. In particular we wish to acknowledge the efforts of Ruth Allen, Anna Moses, Mildred Savidge, and Deborah Rhoades of the Office of Educational Development at the University of Arkansas for Medical Sciences and Bruce Bowdish of the Office of Educational Research and Services of Tulane University Medical School.

# Program at a Glance

Saturday, October 31, 1998						
6:00 p.m.-8:00 p.m.		Registration in Le Foyer				
Sunday, November 1, 1998						
7:00 a.m.		Registration in LeFoyer			Breakfast in the Pontalba Room	
8:00 a.m.		Welcome and Overview				
8:30 a.m.-9:20 a.m.		Roundtable Sessions			Pontalba Room	
Table 1 Future of the Generalists in Medical Education	Table 2 Incorporating Evidence-Based Medicine into the Medical Curriculum	Table 3 Has the Pendulum Swung Too Far? Professional Behavior and Attitudes of Medical Students	Table 4 Applying Systems Theory Concepts to Medical Curricula	Table 5 Curriculum Revision in the Clinical Years of the Curriculum	Table 6 Maintaining a Moral Compass Must Include Cultural Competency	Table 7 Consortia for Health Professions Training in Community-Based Settings
9:30 a.m.-11:30 a.m.		Concurrent Sessions				
Vieux A		Vieux B		Oak	Magnolia	
Descriptive Session		Problem Solving		Problem Solving	Skill Acquisition	
Developing and Integrating Skills and Procedures Learning into a PBL Curriculum	Through the Generalists Looking Glass: Increasing Relevance through Contextual Learning in the Year 1 Medical School Curriculum	Medical Ethics Grand Rounds: A Content Analysis	Professional Development of Medical Students: A Differential Diagnosis	Evidence-Based Medical Education: A Strategy for the 21 <sup>st</sup> Century	Integrating Student Learning Objectives with Community Service Objectives: The Service Learning Protocol for Health Professions Schools	
11:30 a.m.		Luncheon and Panel Discussion in the Pontalba Room				
1:15 p.m.-3:15 p.m.		Concurrent Sessions				
Vieux A		Vieux B		Oak	Magnolia	
Panel Discussion		Problem Solving		Skills Acquisition	Skills Acquisition	
Collaborative Reflection: The Story of a National Initiative in Medical Education	The Development of a Professional: Working with Housestaff and Medical Students		Strategies for Evaluating Community Faculty Development Programs		Promoting Professional Behavior of Medical Students and Resident Physicians	
3:30 p.m.-5:30 p.m.		Concurrent Sessions				
Vieux A		Vieux B		Oak	Magnolia	
Descriptive Session		Panel Discussion		Problem Solving	Problem Solving	
Assessing the Need for Educational Technology within a Statewide Medical Education Consortium: Preliminary Survey Results and Future Directions	Promoting Curricular Changes at a Research-Oriented, Tertiary Care, Tri-Campus Medical School: Successes, Failures, and Lessons Learned	A Program to Facilitate Educator Faculty Research Productivity	Computers in Medical Education: From Paper to Keyboard	Preparing Students for their Future Clinical Roles: Match or Mismatch between Expectations	Evaluation of Preceptors and the Feedback Process: Challenges of Quality Control in Decentralized Medical Education	
5:30 p.m.-6:30 p.m.		Task Force Meetings				
Vieux A		Vieux B		Magnolia		
Information Technology for Generalists		Orientation to Medical Education		Professional Development and Resources		
7:00 p.m.-9:00 p.m.		Reception in Les Continents				
Monday, November 2, 1998						
7:00 a.m.		Breakfast in the Pontalba Room				
8:00 a.m.-8:50 a.m.		Roundtable Sessions in the Pontalba Room				
Table 1 A Model for Competency-Based Interdisciplinary Education in a Biomedical Graduate Curriculum	Table 2 Professional Self-Development: What Really Counts	Table 3 Relationship Between Physician-Patient Interactions and Clinical Teaching	Table 4 How Do Educators Get Promoted in Medical Schools? A Discussion of Policies and Procedures at Your School	Table 5 Integrating Meaningful Written Paper Assignments into the Medical School Curriculum	Table 6 Facilitating the Clinical Context for Problem-Based Learning: Promotion of Patient-Centered Learning	
9:00 a.m.-9:30 a.m.		Business Meeting in the Pontalba Room				
9:30 a.m.-11:30 a.m.		Concurrent Sessions				
Vieux A		Vieux B		Oak	Magnolia	
Descriptive Session		Panel Discussion		Problem Solving	Skills Acquisition	
Taking the Blinders Off: Why Is Empowerment Evaluation Important?	Rushing to Judgement: A Crash Program of Modified Peer Review of All Courses and Clerkships in the Undergraduate Medical Education Program	A Statewide Approach to Community-Based Medical Education: Application and Challenges		The Compass Points toward the Community	Defining and Assessing Professionalism in Medical Education	

## Luncheon Panel

11:30 a.m. in the Pontalba Room

### *Setting the Compass on Professionalism: Perspectives*



**Barbara Barzansky** is Director of the Department of Medical School Services at the AMA and Assistant Secretary of the Liaison Committee on Medical Education. She received a Ph.D. in biology from the University of California at Irvine and a master's degree in health professions education from the University of Illinois at Chicago.



**Linda L. Blank** is Vice President for Clinical Competence and Communications at the American Board of Internal Medicine. She serves as an *ex-officio* representative to the Residency Review Committee for Internal Medicine, provides ABIM staff liaison for the Federated Council for Internal Medicine, and works with other major organizations in internal medicine involved in graduate medical education.



**Deborah Danoff** is Assistant Vice president in the Division of Medical Education at the AAMC. She received her medical degree from McGill University where she served as Associate Dean for Undergraduate Medical Education and Student Affairs. At the AAMC, she has responsibility for initiatives related to the practice of medicine including professionalism, and teaching and learning about cultural competence.



**David Stern** is an assistant professor at the University of Michigan Health System, Division of General Medicine. Dr. Stern received his medical degree from Vanderbilt Medical School. He served as a fellow in Ambulatory Care and Research at Stanford and the Palo Alto VAMC and received his Ph.D. from Stanford University School of Education. Dr. Stern's primary research interest is in the development of professional character of physicians.

### *Description of Session*

Setting the Compass on Professionalism is the responsibility of all Generalists in Medical Education. Barbara Barzansky, Linda Blank, and Deborah Danoff represent three associations very active in fostering professionalism; each will report on the efforts of her association. The three then will join moderator David Stern and members of the Generalists in discussing several case scenarios that demonstrate the use of principles of professionalism in medical and educational contexts.

## *Program Schedule*

*Saturday, October 31, 1998*

**6:00-8:00 p.m. Registration**      *Le Foyer*

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*Sunday, November 1, 1998*

**7:00 a.m. Registration**      *Le Foyer*

**7:00 a.m. Breakfast**      *Pontalba Room*

**8:00 a.m. Welcome & Overview**      *Pontalba Room*

**8:30-9:20 a.m. Roundtable Sessions**      *Pontalba Room*

**Table 1** Future of the Generalists in Medical Education

**Table 2** Incorporating Evidence-Based Medicine into the Medical Curriculum

**Table 3** Has the Pendulum Swung Too Far? Professional Behavior and Attitudes of Medical Students

**Table 4** Applying Systems Theory Concepts to Medical Curricula

**Table 5** Curriculum Revision in the Clinical Years of the Curriculum

**Table 6** Maintaining a Moral Compass Must Include Cultural Competency

**Table 7** Consortia for Health Professions Training in Community-Based Settings

**9:30-11:30 a.m. Concurrent Sessions**

*Descriptive Session*      *Vieux A*

**Teaching Methods**  
**Moderator: Barry Linger**

Developing and Integrating Skills and Procedures Learning into a PBL Curriculum

Through the Generalist's Looking Glass: Increasing Relevance Through Contextual Learning in the Year 1 Medical School Curriculum

Medical Ethics Grand Rounds: A Content Analysis

**Problem Solving Session**      *Vieux B*

Professional Development of Medical Students: A Differential Diagnosis

**Problem Solving Session**      *Oak*

Evidence-Based Medical Education: A Strategy for the 21<sup>st</sup> Century

**Skills Acquisition Session**      *Magnolia*

Integrating Student Learning Objectives with Community Service Objectives: The Service Learning Protocol for Health Professions Schools

**11:30 a.m. Luncheon & Panel Discussion**      *Cabildo Pontalba Room*

**1:15-3:15 p.m. Concurrent Sessions**

**Panel Discussion**      *Vieux A*

Collaborative Reflection: The Story of a National Initiative in Medical Education

**Problem Solving Session**      *Vieux B*

The Development of a Professional: Working with Housestaff and Medical Students

**Skills Acquisition Session**      *Oak*

Strategies for Evaluating Community Faculty Development Programs

**Skills Acquisition Session**      *Magnolia*

Promoting Professional Behavior of Medical Students and Resident Physicians

**3:30-5:30 p.m. Concurrent Sessions**

**Descriptive Session** *Vieux A*

**Issues in Medical Education (Lagniappe)**

**Moderator: Carol Hasbrouck**

Assessing the Need for Educational Technology within a Statewide Medical Education Consortium: Preliminary Survey Results and Future Directions

Promoting Curricular Changes at a Research-Oriented, Tertiary Care, Tri-Campus Medical School: Successes, Failures, and Lessons Learned

A Program to Facilitate Educator Faculty Research Productivity

**Panel Discussion** *Vieux B*

Computers in Medical Education: From Paper to Pencil to the Keyboard

**Problem Solving Session** *Oak*

Preparing Students for their Future Clinical Roles: Match or Mismatch between Expectations

**Problem Solving Session** *Magnolia*

Evaluation of Preceptors and the Feedback Process: Challenges of Quality Control in Decentralized Medical Education

**5:30-6:30 p.m. Task Force Meetings**

Information Technology for Generalists  
John Shatzer, Coordinator *Vieux A*

Orientation to Medical Education  
Amy Blue, Coordinator *Vieux B*

Professional Development and Resources  
Linda Perkowski, Coordinator *Magnolia*

**7:00-9:00 p.m. Reception** *Les Continents*

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*Monday, November 2, 1998*

**7:00 a.m. Breakfast** *Pontalba Room*

**8:00-8:50 a.m. Roundtable** *Pontalba Room*

**Sessions**

**Table 1** A Model for Competency-Based Interdisciplinary Education in a Biomedical Graduate Curriculum

**Table 2** Professional Self-Development: What Really Counts

**Table 3** Relationship Between Physician-Patient Interactions and Clinical Teaching

**Table 4** How Do Educators Get Promoted in Medical Schools? A Discussion of Policies and Procedures at Your School

**Table 5** Integrating Meaningful Written Paper Assignments into the Medical School Curriculum

**Table 6** Facilitating the Clinical Context for Problem-Based Learning: Promotion of Patient-Centered Learning

**9:00-9:30 a.m. Business Meeting** *Pontalba Room*

**9:30-11:30 a.m. Concurrent Sessions**

**Descriptive Session** *Vieux A*

**Evaluation**

**Moderator: Linda Lee**

Taking the Blinders Off: Why Is Empowerment Evaluation Important?

Rushing to Judgement: A Crash Program of Modified Peer Review of All Courses and Clerkships in the Undergraduate Medical Education Program

**Panel Discussion** *Vieux B*

A Statewide Consortial Approach to Community-Based Medical Education: Application and Challenges

**Problem Solving Session** *Oak*

The Compass Points toward the Community

**Skills Acquisition Session** *Magnolia*

Defining and Assessing Professionalism in Medical Education



## Presentation Descriptions

Sunday, November 1, 1998

### Roundtable Sessions

8:30-9:20 a.m.

Pontalba Room

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#### Future of the Generalists in Medical Education

*John Shatzer*, Johns Hopkins University School of Medicine

The chair-elect of the Generalists in Medical Education invites observations, comments, criticisms, hopes, and aspirations related to the future of our organization.

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#### Incorporating Evidence-Based Medicine into the Medical Curriculum

*Dennis Baker*, Ohio University College of Osteopathic Medicine

*Sebastian Diaz*, Ohio University College of Osteopathic Medicine

Medical training institutions are in the process of incorporating evidence-based medicine (EBM) into the curriculum. The two facilitators will share an EBM journal club module they developed and implemented that incorporated PBL methodologies. Participants will respond to the content of the module and its implementation method. Participants will be asked to share their curriculum development and faculty development experiences with regard to EBM.

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#### Has the Pendulum Swung Too Far? Professional Behavior and Attitudes of Medical Students

*Leesa M. DiBartola*, The George Washington University Medical Center

Participants will identify the salient themes concerning the professional behavior and attitudes of students and will discuss guidelines for protocols, expectations, and accountability.

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#### Applying Systems Theory Concepts to Medical Curricula

*Mary Wurm Schaar*, The Western Pennsylvania Hospital  
*Judith Shipengrover*, SUNY at Buffalo School of Medicine and Biomedical Sciences

Participants will be introduced to the application of basic systems theory concepts to medical curricula. Employing systems concepts can foster the transition of curriculum work from an often reactive and seemingly chaotic activity to a proactive, coherent endeavor. Effective as well as ineffective strategies for responding to curriculum initiatives will be discussed.

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#### Curriculum Revision in the Clinical Years of the Curriculum

*Imogene Smith*, Medical University of South Carolina  
*Amy V. Blue*, Medical University of South Carolina  
*Steve Haist*, University of Kentucky College of Medicine

Medical school curriculum revisions have focused primarily on the basic science years of the curriculum; revision of the clinical years has not been widely described. This roundtable discussion will focus on curricular changes and innovations in the clinical years, as well as the barriers and successes institutions have encountered during the change process.

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#### Maintaining a Moral Compass Must Include Cultural Competency

*Charlene Diennes*, Northeastern Ohio Universities College of Medicine

The complexion of the US is changing and access to quality health care is disproportionate to people of color. This discussion will challenge medical educators with a moral compass to develop curricula to teach students, residents, and faculty the importance of culturally competent care and to teach them how to deliver it.

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## **Consortia for Health Professions Training in Community-Based Settings**

*Jerome A. Paulson*, The George Washington University Medical Center

*Karen Shaw*, The George Washington University Medical Center

The authors developed a database containing limited information on approximately 100 collaborative community-based educational consortia. Using in-depth interviews of the CEOs of some of those organizations, a more detailed database of 20 consortia was developed. The discussion will focus on a number of topics, such as problems associated with formation and operation of consortia and plans for long-term funding.

## *Concurrent Sessions*

9:30-11:30 a.m.

### **Descriptive Session**

Vieux A

#### *Teaching Methods*

*Moderator: Barry Linger*

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### **Developing and Integrating Skills and Procedures Learning into a PBL Curriculum**

*Graham Bullock*, Dalhousie University Faculty of Medicine

*D. Bruce Holmes*, Dalhousie University Faculty of Medicine

We require students to be properly taught and evaluated on the high priority skills and procedures along the medical education continuum. As resources seemingly diminish within traditional clinical settings, innovative approaches are required. This presentation will describe one such innovation and emphasize how it was developed and integrated into the curriculum.

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### **Through the Generalist's Looking Glass: Increasing Relevance Through Contextual Learning in the Year 1 Medical School Curriculum**

*Denise Ferrier*, Allegheny University of Health Sciences

*Barry Mann*, Allegheny University of Health Sciences

*Burton Landau*, Allegheny University of Health Sciences

Clinical relevance and contextual learning in the first year curriculum at MCP\*Hahnemann SOM are emphasized by linking learning objectives of traditional courses to one or another of 12 clinical symptoms commonly seen in a generalist physician's office. Generalist physicians provide the clinical context for each symptom-based module.

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### **Medical Ethics Grand Rounds: A Content Analysis**

*David W. Musick*, University of Kentucky College of Medicine

Medical educators emphasize the importance of instruction in ethics and professionalism, but the content of such instruction does not include topics of direct relevance to medical students and resident physicians. A content analysis of one ethics education "grand rounds" program confirms the need to expand the topical relevance of ethics instruction.

### **Problem Solving Session**

Vieux B

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### **Professional Development of Medical Students: A Differential Diagnosis**

*Ellen G. Whiting*, Northeastern Ohio Universities College of Medicine

*LuAnn Coldwell*, Northeastern Ohio Universities College of Medicine

There is no debate about professional development being critical to medical education and clinical competency. Yet unlike "cognitive" knowledge, professionalism is less well defined and evaluated. A differential diagnosis will combine our expectations and outline the obstacles in order to guide our students on a clear path of professional development.

## **Problem Solving Session Oak**

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### **Evidence-Based Medical Education: A Strategy for the 21<sup>st</sup> Century**

*Elizabeth Krajec Kachur*, Medical Education  
Development

*Susan V. Watson*, New Jersey Medical School

Similar to medicine, medical education has to become more evidence-based. This session will review what educational evidence is and how it can be collected. Furthermore, "evidence" will be compared with other factors that influence academic decision-making.

## **Skills Acquisition Session Magnolia**

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### **Integrating Student Learning Objectives with Community Service Objectives: The Service Learning Protocol for Health Professions Schools**

*Kate Cauley*, Wright State University

*Carla Clasen*, Wright State University

*Mark Clasen*, Wright State University

*Bill Mase*, Wright State University

Health professions education has a long history of community service through clinical training in hospitals serving indigent patients. As students move to community-based sites, faculty are supported through Service Learning, a teaching methodology which works to integrate learning and service objectives, extending the service delivery system while preparing health care providers of tomorrow.

## *Concurrent Sessions*

1:15-3:15 p.m.

## **Panel Discussion Vieux A**

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### **Collaborative Reflection: The Story of a National Initiative in Medical Education**

*Stewart Mennin*, University of New Mexico School of  
Medicine

*Sharon Krackov*, Cornell Medical School

*John Shatzer*, Johns Hopkins University School of  
Medicine

*Summers Kalishman*, University of New Mexico School  
of Medicine

Panelists will address the conference theme, "Maintaining a Moral Compass: Challenges for Generalists," from the perspective of representative participants in a recently completed eight-school, national initiative to change medical education curricula. The presenters will discuss and analyze approaches undertaken by the eight schools to achieve the initiatives' goals, and the process and outcome of their collaborations, including a submitted supplement to *Academic Medicine*.

## **Problem Solving Session Vieux B**

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### **The Development of a Professional: Working with Housestaff and Medical Students**

*Karen Szauter*, The University of Texas Medical Branch

*Marcia Levetown*, The University of Texas Medical  
Branch

*Eugene Boisauvin*, The University of Texas Medical  
Branch

*James Wilterding*, The University of Texas Medical  
Branch

Attention to the professional development of our students and housestaff is critical if the profession of medicine is to remain one of honor. This session will use a problem-based learning format to address issues of professionalism and offer participants an opportunity to enhance their practical and teaching skills in this area.

## Skills Acquisition Session

Oak

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### Strategies for Evaluating Community Faculty Development Programs

*Constance D. Baldwin*, The University of Texas Medical Branch

*Harold G. Levine*, The University of Texas Medical Branch

*Virginia N. Niebuhr*, The University of Texas Medical Branch

*Robert Bulik*, The University of Texas Medical Branch

This session will address the evaluation of community faculty development programs: purposes, audiences, evaluation questions, and methods. After discussing strategies and methods, three small groups will develop evaluation plans to address evaluation questions which are appropriate for assessment of a community faculty development program, and share their results.

## Skills Acquisition Session

Magnolia

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### Promoting Professional Behavior of Medical Students and Resident Physicians

*Louise Arnold*, University of Missouri, Kansas City School of Medicine

*Barbara Barzansky*, American Medical Association

*Timothy R. Hansen*, Chicago Medical School

*Ruth Hoppe*, Michigan State University College of Human Medicine

*Loretta S. Loftus*, University of Missouri, Kansas City School of Medicine

Short didactic presentations, related case studies, and subsequent discussion to resolve issues embedded in the cases will enable participants to improve their educational program's ability to nurture professionalism among learners and prevent, mitigate, and correct learners' nonprofessional behavior.

## Concurrent Sessions

3:30-5:30 p.m.

### Descriptive Session

Vieux A

#### *Issues in Medical Education (Lagniappe)*

*Moderator: Carol Hasbrouck*

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#### Assessing the Need for Educational Technology within a Statewide Medical Education Consortium: Preliminary Survey Results and Future Directions

*Joseph J. Brocato*, College of Osteopathic Medicine, Michigan State University

*Jonathan D. Rohrer*, College of Osteopathic Medicine, Michigan State University

*Karen V. Busch*, College of Osteopathic Medicine, Michigan State University

In this presentation, the planning process for faculty development in computer-based educational technology across a statewide consortium of 16 community-based hospitals will be described. Additionally, the results from the first phase of a consortium-wide faculty educational technology needs assessment survey will be disseminated.

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#### Promoting Curricular Changes at a Research-Oriented, Tertiary Care, Tri-Campus Medical School: Successes, Failures, and Lessons Learned

*Bill Weaver*, University of Alabama School of Medicine

*Dennis W. Boulware*, University of Alabama School of Medicine

*Chris Lorish*, University of Alabama School of Medicine

When a medical school's reputation is based on its success in external funding and highly subspecialized clinical care, enhancing the position of the undergraduate medical education program calls for approaches that differ substantially from those where education is the most rewarded mission. Both our successes and our failures will be described.

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### **A Program to Facilitate Educator Faculty Research Productivity**

*Amy V. Blud*, Medical University of South Carolina  
College of Medicine

*Carol Elam*, University of Kentucky College of Medicine

*Lois Margaret Nora*, University of Kentucky College of Medicine

This presentation consists of a case study of a faculty development program designed to introduce inexperienced educator faculty to the conduct of medical education research and scholarship. Descriptive information about the seven-session program will be presented, as well as, recommendations to other institutions interested in developing a similar program.

### **Panel Discussion Vieux B**

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### **Computers in Medical Education: From Paper to Pencil to the Keyboard**

*Amy J. Fitzgerald*, University of Arkansas for Medical Sciences

*Robert Hopkins*, University of Arkansas for Medical Sciences

*Lee Bairnsfather*, Louisiana State University Medical School at Shreveport

*Linda Deloney*, University of Arkansas for Medical Sciences

The prevalence of computers and new technology and the explosion of the Internet and the World Wide Web provide many new opportunities for medical educators. In this panel discussion, we will demonstrate a computerized course examination, Web-based applications in a basic science course, a Web-based faculty evaluation tool, and electronic-mail student journals.

### **Problem Solving Session Oak**

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### **Preparing Students for their Future Clinical Roles: Match or Mismatch between Expectations**

*Susan M. Labuda Schrop*, Northeastern Ohio Universities College of Medicine

*Ellen G. Whiting*, Northeastern Ohio Universities College of Medicine

*Brian F. Pendleton*, The University of Akron

The medical education system has role expectations for medical students—some explicit, but some that are ambiguous and poorly communicated to students. This session will define the role of the medical student, how role expectations are communicated and reinforced, and how the role of medical students compares to their future roles as residents and clinicians.

### **Problem Solving Session Magnolia**

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### **Evaluation of Preceptors and the Feedback Process: Challenges of Quality Control in Decentralized Medical Education**

*Jennifer L. Peel*, The University of Texas Medical Branch

This session is designed to encourage participants to “brainstorm” about goals, obstacles, and strategies for evaluating and providing feedback to community preceptors. This is an extremely pertinent topic to Generalists given the multitude of community-based programs around the country. More and more medical schools are shifting away from the tertiary care hospital and toward a more decentralized educational experience. At the same time, many on-campus faculty express concerns about the quality and variability of experiences the students are having at the off-campus sites.

Monday, November 2, 1998

## *Roundtable Sessions*

8:00-8:50 a.m.

Pontalba Room

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### **A Model for Competency-Based Interdisciplinary Education in a Biomedical Graduate Curriculum**

*Carol-Ann Courneya*, University of British Columbia

The design for, and recent implementation of, a novel competency-based graduate course will be reviewed. Competencies included hypothesis generation, matching experimental techniques to hypotheses, enquiry strategies, articulation of scientific concepts, and awareness of professional, ethical, and safety concepts. Graduate students engaged in the pilot run. Qualitative and quantitative student evaluation will be reviewed and form the basis for continued, improved design leading toward development of a model for competency-based graduate courses.

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### **Professional Self-Development: What Really Counts**

*Diane L. Parry*, Ohio University College of Osteopathic Medicine

The effects of appropriate self-development should increase the learner's ability to assess his or her own knowledge and/or performance and then seek the necessary resources from which to make decisions. Valid self-development is a competency that can be taught and formalized, but rarely exists in these terms. Participants in this session will further their understanding of critical components of the self-development process involved in fostering professionalism.

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### **Relationship between Physician-Patient Interactions and Clinical Teaching**

*H. Liesel Copeland*, Cleveland Clinic Foundation  
*Mariana Hewson*, Cleveland Clinic Foundation

This session will explore the theoretical relationship between clinical teaching and patient relations including results from an exploratory study. A deeper empirically based understanding of the isomorphism between physician-patient and clinical teaching interactions may aid medical educators in teaching the skills of both clinical teaching and patient communication.

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### **How Do Educators Get Promoted in Medical Schools? A Discussion of Policies and Procedures at Your School**

*Ann Frye*, University of Texas Medical Branch  
*Jennifer Peel*, University of Texas Medical Branch

Promotion policies for medical school educators vary widely among institutions. This session will provide an opportunity for educators with personal knowledge of how educators are promoted in some institutions to share their knowledge with educators seeking promotion or who are designing policies and procedures for the promotion process.

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### **Integrating Meaningful Written Paper Assignments into the Medical School Curriculum**

*Dennis Baker*, Ohio University College of Osteopathic Medicine  
*Cheryl Riley*, Ohio University College of Osteopathic Medicine

Writing papers is a learning activity that is met with mixed reactions from teachers and students in the medical school setting. We will share our experiences associated with the creation and administration of a case-based paper assignment as part of a family medicine clerkship. Participants will be asked to share their experiences with written paper assignments and to brainstorm how research can be conducted on this type of curriculum activity.

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### **Facilitating the Clinical Context for Problem-Based Learning: Promotion of Patient-Centered Learning**

*David W. Brewer*, Southern Illinois University School of Medicine

A unit in an existing Problem-Based Learning curriculum was modified to address students' learning outcomes perceived to be deficient in behavioral sciences, medical ethics, psychosocial concerns, and professionalism. A program modification will be described. This modification entailed re-formatting the patient problems and requiring new student tasks, resulting in a more patient-centered curriculum.

### *Concurrent Sessions*

9:30-11:30 a.m.

### **Descriptive Sessions**

Vieux A

#### *Evaluation*

*Moderator: Linda Lee*

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### **Taking the Blinders Off: Why is Empowerment Evaluation Important?**

*Brian F. Pendleton*, The University of Akron  
*Susan Thomas Frank*, Community Partnership  
*Margo Erme*, Northeastern Ohio Universities College of Medicine

The boundaries for "health" continue an expansion into "prevention" themes. Students are increasingly being required to become familiar with dimensions of community health and well being. New paradigms for program evaluation are needed. This descriptive session introduces the participant to "empowerment evaluation," describing its development, credibility, effectiveness, and "how-to."

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### **Rushing to Judgement: A Crash Program of Modified Peer Review of All Courses and Clerkships in the Undergraduate Medical Education Program**

*John A. Caldwell*, University of Alabama School of Medicine

*Julie Walsh*, University of Alabama School of Medicine

*Chris Lorish*, University of Alabama School of Medicine

*Theresa Logan*, University of Alabama School of Medicine

Continuous curriculum assessment is especially vital for institutions with programs conducted at several sites. An initial quality assessment program lacked the timeliness and standardization desired. A new program has been developed and implemented that includes self-study, peer review, and departmental discussion.

### **Panel Discussion**

Vieux B

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### **A Statewide Consortial Approach to Community-Based Medical Education: Application and Challenges**

*Karen V. Busch*, Michigan State University College of Osteopathic Medicine

*Johnathan Rohrer*, Michigan State University College of Osteopathic Medicine

*Judith Lyles*, Michigan State University College of Osteopathic Medicine

*Joseph Brocato*, Michigan State University College of Osteopathic Medicine

This session will 1) describe the consortial model of community-based medical education at Michigan State University College of Osteopathic Medicine and its uses in curriculum, evaluation, faculty development, and administration; and 2) provide participants an opportunity to discuss resolutions to their own medical education challenges by applying consortial organization models.

## **Problem Solving Session**

**Oak**

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### **The Compass Points toward the Community**

*Mark E. Unverzagt*, University of New Mexico School of Medicine

*Summers Kalishman*, University of New Mexico School of Medicine

*Martha McGrew*, University of New Mexico School of Medicine

There are many barriers to successful implementation of a population focus within the biomedically driven clinical teaching and service model for medical and residency education. Alternative models from one institution's perspective, including service learning, will be presented as an antidote to the common dilemma of limited interest for inclusion of community/population medicine in health professions education. Participants in the problem solving session will be asked to provide their insights, alternative approaches, and critical perspectives on the approaches and models presented.

## **Skills Acquisition Session**

**Magnolia**

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### **Defining and Assessing Professionalism in Medical Education**

*Sheila W. Chauvin*, Tulane University School of Medicine

*Cathy Lazarus*, Tulane University School of Medicine

Participants will observe videotaped vignettes targeting important elements of professionalism. Using observation data, participants will complete a performance-based assessment rubric and discuss their assessments in small groups. Discussions will be used to highlight assessment and implementation issues often associated with performance-based assessment, particularly for areas such as professionalism.

*Join us for a reception  
of*

# **The Nineteenth Annual Conference for Generalists in Medical Education**

Sunday, November 1, 1998

7:00-9:00 p.m.

Les Continents Room

Hotel Inter-Continental

*Meet your colleagues  
and enjoy hors d'oeuvres and wine*



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*Notes*

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<b>D:</b> Descriptive	<b>RT:</b> Roundtable Session	
<b>PD:</b> Panel Discussion	<b>SA:</b> Skills Acquisition	
<b>PS:</b> Problem Solving		

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# *Generalist Reviewers*

Kimberly Anderson, Michigan State University  
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Dennis Baker, Ohio University College of Osteopathic Medicine  
Rebecca Baranowski, American Board of Internal Medicine  
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