



— The Generalists in —  
**Medical Education**  
Collaborate - Innovate - Disseminate

## 40<sup>th</sup> ANNUAL CONFERENCE

COLLABORATION AND REFLECTION:

NEW PERSPECTIVES AND INNOVATIONS IN HEALTH PROFESSIONS EDUCATION



RENAISSANCE PHOENIX DOWNTOWN HOTEL  
PHOENIX, AZ  
NOVEMBER 7-8, 2019

Website: <https://thegeneralists.org>

 #TGME19; @GeneralistMedEd

## TABLE OF CONTENTS

2019 TGME ANNUAL CONFERENCE HOTEL INFORMATION .....	3
MESSAGE FROM THE CHAIR .....	4
ABOUT THE GENERALISTS IN MEDICAL EDUCATION .....	5
JAMIE SHUMWAY SERVANT LEADERSHIP AWARD .....	6
2019 CONFERENCE SESSION TYPES .....	7
2019 EVALUATION FORMS.....	7
STEERING COMMITTEE & PROGRAM CHAIRS: 1981-2019 .....	8
2019 STEERING COMMITTEE .....	9
2019 PROPOSAL REVIEWERS .....	10
2019 KEYNOTE SPEAKER .....	11
2019 KEYNOTE SPONSOR.....	11
2019 CONFERENCE AGENDA.....	12
THURSDAY, NOVEMBER 7, 2019 .....	12
FRIDAY, NOVEMBER 8, 2019 .....	18
2019 CONFERENCE SESSION ABSTRACTS.....	21
COMMON INTEREST ROUNDTABLE .....	21
DESCRIPTIVE SESSIONS .....	21
IGNITE SESSIONS .....	25
PANEL SESSIONS.....	26
PROBLEM SOLVING SESSIONS.....	26
SKILL ACQUISITION SESSIONS .....	27
IAMSE.....	28
NOTES.....	29

## 2019 TGME ANNUAL CONFERENCE HOTEL INFORMATION

### Renaissance Phoenix Downtown Hotel

Phoenix, AZ

602-333-0000

<https://www.marriott.com/hotels/travel/phxbd-renaissance-phoenix-downtown-hotel/>



The Renaissance Phoenix Downtown Hotel boasts an ideal location near an incredible array of attractions, including the:

- Arizona Science Center (0.2 miles)
- Arizona Theater Company – The State Theater (0.2 miles)
- Orpheum Theater (0.2 miles)
- Phoenix Symphony (0.2 miles)
- Arizona Diamondbacks – MLB at Chase Field (0.8 miles)
- Phoenix Convention Center (0.3 miles)
- Phoenix Suns – NBA at Talking Stick Resort Arena (0.3 miles)
- Phoenix Art Museum (1 mile)

This hotel offers:

- Complimentary Wi-Fi in hotel lobby
- Fitness Center
- Rooftop Pool
- Dining options – Dust Cutter signature restaurant, Marston’s Café, and Starbucks
- Airport – No shuttle service from hotel.

## MESSAGE FROM THE CHAIR



Welcome to TGME 2019 - Collaboration and Reflection: New Perspectives and Innovations in Health Professions Education.

It would be an understatement to say I am thrilled that you have chosen to invest your precious time and money to be in Phoenix with The Generalists! We will do everything in our power to ensure that your attendance here is rewarded with personal and professional growth.

In healthcare professions education, as in much of life, it is always pertinent to start with a quote from Lee Shulman:

*Teachers must be in communities where they can actively and passionately investigate their own teaching, where they can consistently reflect on their own practice and its consequences, where they can engage collaboratively with one another, to investigate, discuss, explore and learn from one another about what happens when chance occurs in their teaching and thereby, where they can, as members of the community, generate a base of knowledge that goes beyond what any one of them could learn in the isolation which now characterizes their classrooms.*

Shulman LS. *Communities of learners & communities of teachers*. (1997). Mandel Institute monograph; [www.mandelfoundation.org.il/english/SiteCollectionDocuments/publications/monograph3Shulman\\_B.pdf](http://www.mandelfoundation.org.il/english/SiteCollectionDocuments/publications/monograph3Shulman_B.pdf).

The Generalists is an ideal place for educators in all healthcare professions to, “*investigate, discuss, explore and learn from one another.*” That is exactly what this conference is intended to accomplish. We hope that you find the scheduled sessions and the other conference activities to be fruitful and helpful to you in building out your own community.

In that vein, please joining me in thanking the 2019 Conference Program Co-chairs, Komal Kochhar and Tasha Wyatt for assembling an outstanding collection of discussions, presentations, and workshops. They have done a brilliant job of selecting and organizing the proposals into a coherent and meaningful program for you! Although the work of a program chair often goes unnoticed or underappreciated, what Komal and Tasha have done to provide you with an unparalleled experience is truly remarkable.

TGME is a member-driven and member-serving organization, so our success can only be determined by your engagement in this year’s conference. Please make yourself known to me or other Steering Committee members so that we can include you in the development and production of future TGME Conferences.

Thank you for coming! Please enjoy yourself and take full advantage of this opportunity to, “*actively and passionately investigate [your] own teaching.*”

Hugh A. Stoddard, M.Ed., Ph.D.  
Assistant Dean for Medical Education Research  
Professor of Medicine  
Emory University School of Medicine

## ABOUT THE GENERALISTS IN MEDICAL EDUCATION

### Who are we?

The Generalists in Medical Education welcome basic scientists, clinicians, and other medical educators interested in interprofessional healthcare education to collaboratively exchange skills, knowledge, and ideas which promote innovation and research.

### Why does our group exist?

The mission of The Generalists in Medical Education is to exchange skills, knowledge, and ideas to improve health professions education.

### Why should you engage with The Generalists in Medical Education?

- To collaboratively seek solutions to educational challenges
- To enhance your network of health professions educators

### What does the annual conference offer?

- To explore the latest initiatives and innovations in health professions education
- To promote and share scholarship on a national platform
- To enhance professional effectiveness through interactive and information sessions
- To provide peer mentorship in health professions education

### How can you become a member?

By attending the annual conference! There are no membership dues. We keep you on our member list for several years even if you don't attend future meetings, but we certainly hope to see you annually.

### How can you connect with us?

Website: <https://thegeneralists.org>

Twitter: #TGME19; @GeneralistMedEd



— The Generalists in —  
**Medical Education**  
Collaborate - Innovate - Disseminate



## JAMIE SHUMWAY SERVANT LEADERSHIP AWARD

*“The servant-leader is servant first.  
It begins with the natural feeling that one wants to serve, to serve first.  
Then conscious choice brings one to aspire to lead.  
That person is sharply different from one who is leader first.  
The difference manifests itself in the care taken by the servant-first  
to make sure that other people’s highest priority needs are being served.”*

Robert K. Greenleaf

Servant Leadership: A Journey into the Nature of Legitimate Power & Greatness

Year	Recipient
1997	Carol Hasbrouck & Terry Mast
1998	T. Lee Willoughby
1999	M. Brownell Anderson
2001	Lou Grosso
2005	Linda Perkowski
2007	David J. Solomon
2010	Jamie Shumway
2011	Ann Frye
2012	Julie Covarrubias
2013	Elza Mylona
2014	Sonya Crandall
2015	Dennis Baker & Ellen Whiting
2016	Susan Labuda Schrop
2017	Scott Cottrell
2018	Larry Hurtubise

## 2019 CONFERENCE SESSION TYPES

### Common Interest Roundtables

An informal opportunity for sharing experiences and ideas around special topics. Leaders briefly introduce their topic and then facilitate discussion among participants.

### Descriptive

Presenters provide overviews or results of projects, programs, or strategies in a common area. A session typically includes three to five presentations followed by discussion and exchange of ideas. A moderator introduces the speakers and facilitates the discussion.

### Ignite [New]

Presenters quickly report a thought provoking idea or story to the audience that might merit further exploration. Presenters share visually compelling presentations accompanied by rich narratives or story-telling. Each presenter has 20 slides which will advance automatically every 15 seconds for a total of 5 minutes. The presenter will talk along with the images.

### Panel Discussion

Several individuals respond to questions and present their ideas regarding a specific issue or topic. A panel typically has representation from a cross-section of perspectives and/or institutions. A moderator facilitates panel comments and audience participation.

### Problem Solving

Designed for intensive discussion focused on a particular theme or problem. The presenter provides stimulus material and organizes small-group interaction on the topic. After discussion, the small groups share ideas and develop a summary statement.

### Skills Acquisition

Presenters teach particular skills or techniques to allow participants to gain increased competence in an area of medical education. Typical topics include consulting, measurement, evaluation, research, data analysis, curriculum and instructional design, and faculty development.

## 2019 EVALUATION FORMS

Just a reminder, there will be evaluation forms placed on each table in every room. Please help us by completing and submitting your evaluation forms after every session. Thank you in advance!

## STEERING COMMITTEE & PROGRAM CHAIRS: 1981-2019

Year	Steering Committee Chair	Program Chair
1981	Larry Sachs, Cherry McPherson	Terry Mast and Bill Anderson
1982	Terry Mast	Jayne Middleton
1983	Lynn Curry	John Markus and Emil Petrusa
1984	Jayne Middleton	Gwendie Camp
1985	John Markus	Julie Nyquist
1986	Gwendie Camp	Judy Calhoun and Joceylyn Ten Haker
1987	Carol Hasbrouck	Dennis Baker and Mary Pat Mann
1988	Jim Pearson	Phyllis Blumberg and Franklin Medio
1989	Judy Calhoun	John Norcini, Judy Shea, and Lou Grosso
1990	Phyllis Blumberg	Carol Hasbrouck, Larry Sachs, and Ajay Bhardwaj
1991	Emil Petrusa	Susan Labuda Schrop, Ellen Whiting, and Lee Willoughby
1992	Jocelyn Ten Haken	Robert Bridgham
1993	Mary Pat Mann	Linda Perkowski
1994	Lee Willoughby	Phil Fulkerson
1995	Sue Fosson	Lloyd Lewis
1996	Linda Perkowski	Candice Rettie
1997	Ellen Whiting	Dennis Baker
1998	Ellen Whiting	Diane Heestand and Sheila Chauvin
1999	John Shatzer	Maria Clay, Heidi Lane, and Steve Willis
2000	Diane Heestand	Julie Walsh and Bill Weaver
2001	Amy Blue	Barry Linger (program canceled)
2002	Phil Fulkerson	Carol Hodgson
2003	Ann Frye	Tim Van Susteren
2004	John Ullian	John Ullian and the Steering Committee
2005	Lou Grosso	Carol Hasbrouck and Sara Calvey
2006	Sheila Chauvin	Susan Labuda Schrop
2007	Dennis Baker	Scott Cottrell
2008	Cathy Lazarus	Elza Mylona
2009	James Shumway	Scott Cottrell
2010	Sonia Crandall	Nicole Borges
2011	Terry Stratton	Carol Thrush, Linda Deloney, and Steven Boone
2012	Elza Mylona	Machelle Linsenmeyer
2013	Susan Labuda Schrop	Agatha Parks-Savage
2014	Scott Cottrell	Carrie Calloway
2015	Larry Hurtubise	Elissa Hall
2016	Machelle Linsenmeyer	Anna Marie Counts
2017	John Luk	Melissa Hansen
2018	Elissa Hall	Carrie Bowler and Dan Richards
2019	Hugh Stoddard	Komal Kochhar and Tasha Wyatt



## 2019 STEERING COMMITTEE

Committee Member	Affiliated School/University
<b>Hugh Stoddard</b> , Chair	Emory University School of Medicine
<b>Nagaraj Gabbur</b> , Chair Elect	SUNY Downstate Medical Center
<b>Elissa Hall</b> , Past Chair	Mayo Clinic College of Medicine and Science
<b>Komal Kochhar</b> , Program Co-Chair	Indiana University School of Medicine
<b>Tasha Wyatt</b> , Program Co-Chair	Medical College of Georgia
<b>Larry Hurtubise</b> , Webmaster	The Ohio State University
<b>Carol Hasbrouck</b> , Treasurer	The Ohio State University
<b>Terry Stratton</b> , Evaluations Chair	University of Kentucky College of Medicine
<b>Elissa Hall</b> , Membership	Mayo Clinic College of Medicine and Science
<b>Peter DeJong</b> , Member-at-Large	Leiden University Medical Center
<b>John Szarek</b> , Member-at-Large	Geisinger Commonwealth School of Medicine
<b>Robert Treat</b> , Member-at-Large	Medical College of Wisconsin

## 2019 PROPOSAL REVIEWERS

<b>Jean Bailey</b> Virginia Commonwealth School of Medicine	<b>Laurie Belknap</b> Grays Harbor County Public Hospital	<b>Heather Billings</b> Mayo Clinic College of Medicine and Science	<b>Carrie Bowler</b> Mayo Clinic College of Medicine and Science
<b>Era Buck</b> University of Texas Medical Branch	<b>Belinda Chen</b> Johns Hopkins Medicine	<b>Katherine Cornelius</b> Mayo Clinic College of Medicine and Science	<b>Julie B Covarrubias</b> University of Alabama at Birmingham
<b>Heather Dayag</b> Brigham Women's Hospital Harvard Medical School	<b>Peter De Jong</b> IAMSE	<b>Michael Dekhtyar</b> American Medical Association	<b>Lori DeShetler</b> The University of Toledo
<b>Gia Digiacobbe</b> Kaiser Permanente School of Medicine	<b>Nagaraj Gabbur</b> Zucker Hofstra School of Medicine/Northwell Health	<b>Becca Gas</b> Mayo Clinic College of Medicine and Science	<b>Elissa Hall</b> Mayo Clinic College of Medicine and Science
<b>Melissa Hansen</b> The University of Toledo	<b>Carol S. Hasbrouck</b> The University of Toledo and The Ohio State University	<b>Jennifer Holtz</b> UA Little Rock	<b>Larry Hurtubise</b> The Ohio State University College of Medicine
<b>Nadia Ismail</b> Baylor College of Medicine	<b>Tipsuda Jusanto-Bahri</b> Touro University College of Medicine	<b>Kristina Kaljo</b> Medical College of Wisconsin	<b>Douglas Koch</b> Philadelphia College of Osteopathic Medicine
<b>Anna Lama</b> West Virginia University School of Medicine	<b>Rachel Lewin</b> University of California Los Angeles	<b>Barry Linger</b> University of Texas Rio Grande Valley	<b>Machelle Linsenmeyer</b> West Virginia School of Osteopathic Medicine
<b>Liz Lorbeer</b> Western Michigan University	<b>John Luk</b> The University of Texas at Austin Dell Medical School	<b>Stephanie Mann</b> University of Toledo	<b>Sarah McBrien</b> University of Nebraska Medical Center
<b>Jennifer Mendez</b> Wayne State University School of Medicine	<b>Anne Messman</b> Wayne State University School of Medicine	<b>Sarah Morley</b> University of New Mexico	<b>Vasan Nagaswami</b> Cooper Medical School of Rowan University
<b>Gustavo Patino</b> Oakland University William Beaumont School of Medicine	<b>Claire Pearson</b> Wayne State University School of Medicine	<b>Susan M. Perlis</b> Cooper Medical School of Rowan University	<b>Ellapulli Prakash</b> Mercer Medicine
<b>Sara Rabie</b> St. George's University	<b>Jacqueline Rogers</b> Consultant	<b>Michael Rowland</b> University of Kentucky College of Medicine	<b>Iris Saltiel</b> American University of Antigua College of Medicine
<b>Angela Sargent</b> Mayo Clinic College of Medicine and Science	<b>Amy Seegmiller Renner</b> Mayo Clinic College of Medicine and Science	<b>Lonika Sood</b> Washington State University	<b>Hugh Stoddard</b> Emory University School of Medicine
<b>Terry D. Stratton</b> University of Kentucky College of Medicine	<b>Sathyanarayan Sudhanthar</b> Michigan State University College of Human Medicine	<b>John L. Szarek</b> Geisinger Commonwealth School of Medicine	<b>Robert Treat</b> Medical College of Wisconsin
<b>Greg Turner</b> Florida State University	<b>Virginia Uhley</b> Oakland University William Beaumont School of Medicine	<b>David Way</b> The Ohio State University College of Medicine	

## 2019 KEYNOTE SPEAKER



Judy A. Shea, Ph.D. is Professor in the Division of General Internal Medicine, Department of Medicine, University of Pennsylvania; Associate Dean of Assessment and Director of the Office of Evaluation and Assessment in the Academic Programs Office, School of Medicine. Dr. Shea serves dual roles, working with faculty and fellows to design and evaluate research projects, and directing the evaluation of the medical school curriculum and faculty. Much of her work focuses on evaluating the psychometric properties of curriculum evaluation tools and developing measures to assess components of health such as health literacy, patient satisfaction and health-related quality of life. She teaches and mentors trainees regularly on methodology and measurement principles. Dr. Shea has published over 300 peer-reviewed articles, many with junior colleagues.

## 2019 KEYNOTE SPONSOR

**THE KEYNOTE SPEAKER IS SPONSORED BY THE JACK L. MAATSCH VISITING SCHOLAR IN MEDICAL EDUCATION FUND.**

The purpose of the Jack L. Maatsch Visiting Scholar in Medical Education Fund is to stimulate and support interaction around ideas and projects in medical education, with primary focus on the development and assessment of clinical competence related to the full span of professional training. The program accomplishes this through support of visiting scholars to the Office of Medical Research and Development in the Michigan State University College of Human Medicine and periodic sponsored presentations at national medical education conferences. Distinguished visiting scholars will provide a broader perspective from which faculty, students, and others may view their work, providing insights and experiences from other outstanding centers of medical education research and development.

2019 CONFERENCE AGENDA  
THURSDAY, NOVEMBER 7, 2019

6:30 am – 5:00 pm	Registration	
6:45 am – 7:45 am	Breakfast	
7:45 am – 8:00 am	Welcome	
8:00 am – 9:30 am	Concurrent Sessions - 1	
Salon 6 (Level 2)	Problem Solving	<p><b>The Cultivation of Cognitive Curiosity: Key for Learning, Clinical Competence, Engagement, and Well-Being in the Healthcare Profession</b>  <i>Vijay Rajput, Nova Southeastern University, Dr. Kiran C. Patel College of Allopathic Medicine</i>  <i>Anuradha Lele Mookerjee, Cooper Medical School of Rowan University, Camden, NJ</i>  <i>Daniel Griffin and Paula Wales, Nova Southeastern University, Dr. Kiran Patel College of Allopathic Medicine</i></p>
Salon 7 (Level 2)	Skill Acquisition	<p><b>Optimizing Medical Simulation to Build Clinical Reasoning Skills in the Pre-Clinical Curriculum</b>  <i>John Giannini, Dianne Walker, and Dennis Baker</i>  <i>Alabama College of Osteopathic Medicine</i></p>
Salon 8 (Level 2)	Descriptive – [Transitions]	<p><b>Holistic Admissions</b>  <i>Sarah McBrien, University of Nebraska Medical Center College of Allied Health Professions</i></p> <p><b>The Social Transition to Professional School: A Network Analysis of First-Year Medical Students</b>  <i>Terry Stratton and Lillian R. Sims</i>  <i>University of Kentucky</i></p> <p><b>Easing the Transition to Residency by Equipping Rising Fourth Year Medical Students with Skills Necessary for Success</b>  <i>Melissa Hansen, Cristina Alvarado, Pam Brewster, Mohamad Moussa, Coral Matus, and Shirley Bodi</i>  <i>The University of Toledo</i></p> <p><b>Building a Medical Education Outcomes Center</b>  <i>Jacqueline Gauer, Emily Melcher, and Mark E. Rosenberg</i>  <i>University of Minnesota</i></p> <p><b>Perception of Trust and Empathy towards Physicians among Families Experiencing Developmental Disabilities</b>  <i>Brigid Jacob, Omar Afify, Ragda Izar, Marissa Ray, Hanna Tran, Sharon Milberger, and Jennifer Mendez</i>  <i>Wayne State University School of Medicine</i></p>
9:30 am – 9:45 am	Break	

9:45 am – 11:15 am	<b>Concurrent Sessions - 2</b>	
Salon 6 (Level 2)	Panel	<p><b>Journal Editors Panel: How to Avoid Common Mistakes in Submitting and Revising Manuscripts</b>  <i>David Way, The Ohio State University College of Medicine</i>  <i>Anna Cianciolo, Southern Illinois University School of Medicine</i>  <i>Scott Cottrell, West Virginia University School of Medicine</i>  <i>Sonia Crandall, Wake Forest School of Medicine</i>  <i>Peter GM de Jong, Leiden University Medical Center</i>  <i>Elizabeth McClain, Arkansas Colleges of Health Education</i>  <i>Hugh A. Stoddard, Emory University School of Medicine</i>  <i>Larry Hurtubise, The Ohio State University</i></p>
Salon 7 (Level 2)	Skill Acquisition	<p><b>Innovative Approaches in LGBT-Inclusive Medical Education</b>  <i>Marcine Pickron-Davis and Douglas J. Koch</i>  <i>Philadelphia College of Osteopathic Medicine</i></p>
Salon 8 (Level 2)	Descriptive – [Interprofessional Education]	<p><b>Reciprocal Relationship between Identities as Physicians and Teachers in an Integrated Undergraduate Medical Curriculum</b>  <i>Binbin Zheng, Brian Mavis, Stacey Pylman, Randi Stanulis, and Scot Stanulis</i>  <i>College of Human Medicine, Michigan State University</i></p> <p><b>Teaching an Interdisciplinary Approach for Care of Patients Living In Poverty (5)</b>  <i>Chirag Patel, Khawlah Al-muhanna, Lisa Raiz, Jacqueline Loversidge, Donald Bennett, and Deborah Larsen</i>  <i>The Ohio State University</i></p> <p><b>An Interprofessional Case Pilot for Electronic Health Record Teaching in the Health Sciences</b>  <i>Camilla Curren, Marcia Nahikian-Nelms, Sarah Varekojis, James McAuley, Georgianna Sergakis, Tiffin Barthelmas, Andrea Avery, Erin Thomas, Erika Kemp, Angela Butwin, Kristin Nelson, Deborah Lan, and Laura Begue</i>  <i>The Ohio State University</i></p> <p><b>Does Preceding Assessment Data Help Identify Students Who Are Entrustable In Interprofessional Collaboration?</b>  <i>Kelly Lockeman and Alan Dow</i>  <i>Virginia Commonwealth University School of Medicine</i></p> <p><b>Bridging the Gap: Identifying Needs to Integrate Behavioral Health and OB-GYN</b>  <i>Abbey Kruper, Kristina Kaljo, and Robert Treat</i>  <i>Medical College of Wisconsin</i></p>
11:15 am – 12:45 pm	<b>Lunch and Keynote</b>	
Pueblo (Level 1)	<p><b>Standard Setting for Competency-Based Assessment: The Sum of the Parts or Some of the Parts?</b>  <i>Judy Shea, Ph.D., Perelman School of Medicine at University of Pennsylvania</i></p>	

12:45 pm – 1:45 pm	<b>Concurrent Sessions - 3</b>	
<b>Salon 6 (Level 2)</b>	<b>Panel</b>	<p><b>Virtual Communities in Medical Education: Current Needs and Future Possibilities</b>  <i>Brian Mavis, Michigan State University College of Human Medicine</i>  <i>Gary Beck Dallaghan, University of North Carolina</i>  <i>Kristina Dzara, Harvard University</i>  <i>Jason Frank, Royal College of Physicians and Surgeons of Canada</i>  <i>Binbin Zheng, Michigan State University College of Human Medicine</i></p>
<b>Salon 7 (Level 2)</b>	<b>Skill Acquisition</b>	<p><b>Self-Reflection: An Introduction to Coaching for Lifelong Learning</b>  <i>Jennifer Caputo-Seidler, Shanu Gupta, and Candice Mateja</i>  <i>University of South Florida</i></p>
<b>Salon 8 (Level 2)</b>	<b>Ignite – [Curricular Assessment]</b>	<p><b>Developing a Learning Strategies Curriculum, its Messy Business!</b>  <i>Allana Roach, Joanne Buckland, Mondel George, Kiku Tupper, Marsha Nicholson-Ramdeen, Cherisse Cletus-Mahabir, Roxann Lewis-Roberts, and Sara Rabie</i>  <i>St. George's University</i></p> <p><b>Using Viva-Voce to Examine Cognitive Processes Underlying Responses to Multiple-Choice Items to Reclassify 'Borderline-Scores' In High-Stakes In-House Summative Assessments</b>  <i>Elapulli Prakash</i>  <i>Mercer University School of Medicine</i></p> <p><b>Situating Competencies at the Core of the Curriculum</b>  <i>Sheryl Pfeil, Maureen Cavalcanti, Camilla Curren, and Allison Heacock</i>  <i>Ohio State University College of Medicine</i></p> <p><b>Building an Alliance for Change: A Data Informed Approach for Curriculum Management</b>  <i>Elissa Hall, David Jones, Kelley Sandvik, Jennifer Sayward, Victoria Staifer, and Aaron Pendl</i>  <i>Mayo Clinic College of Medicine and Science</i></p>
1:45 pm – 2:00 pm	<b>Break</b>	



2:00 pm – 3:30 pm	<b>Concurrent Sessions - 4</b>	
Salon 6 (Level 2)	<b>Problem Solving</b>	<p><b>Looking Into the Blackbox: Role and Structure Issues in Curriculum Support in Medical Education</b>  <i>Michelle Yoon, Medical Education Consultant</i>  <i>Dina M. Kurzweil, Uniformed Services University of the Health Sciences</i></p>
Salon 7 (Level 2)	<b>Skill Acquisition</b>	<p><b>Join the Micro-Resistance against Microaggression</b>  <i>Zareen Zaidi, University of Florida</i>  <i>Tasha R. Wyatt, Medical College of Georgia at Augusta University</i>  <i>Gary Beck Dallaghan, University of North Carolina School of Medicine</i></p>
Salon 8 (Level 2)	<b>Descriptive – [Affective]</b>	<p><b>Self-Regulated Learning: Understanding Students' Use of Learning Strategies in Their Transition to Medical School</b>  <i>Binbin Zheng and Amy Ward</i>  <i>Michigan State University College of Human Medicine</i></p> <p><b>An Appreciative Inquiry into the Learning Environments of Two Clerkships</b>  <i>Candace Chow, Boyd Richards, Chanta'l Babcock, Lisa Wilson, Luke Buchmann, Brigitte Smith, Tiffany Weber, and Sara M. Lamb</i>  <i>University of Utah School of Medicine</i></p> <p><b>Use of Reflective Writing and Self-Assessment Practices in a Medical School Anatomy Course to Develop Emotional Intelligence, Wellness and Team-building Skills</b>  <i>Jeff Fritz and Teresa Patitucci</i>  <i>Medical College of Wisconsin</i></p> <p><b>Can Self-Regulated Learning Theory Guide Learning Task Design?</b>  <i>Michael Allen, Felise Milan, Sandra Oza, Shera Schlair, and Todd Cassese</i>  <i>The Albert Einstein College of Medicine</i></p> <p><b>Examining the Attitudes, Beliefs, and Knowledge of Health Professions Students about Opioids</b>  <i>Lori DeShetler, Deloris Lakia, Coral Matus, Alyssa Olmi, and Isabella Nassif</i>  <i>The University of Toledo</i></p>
3:30 pm – 3:45 pm	<b>Break</b>	

3:45 pm – 5:15 pm	Concurrent Sessions -5	
Salon 6 (Level 2)	Problem Solving	<p><b>Building Bridges: Helping Educators Develop Identity and Connect to Community</b>  <i>Justin Triemstra, Michigan State University College of Human Medicine</i>  <i>Rachel Stork Poepelman and Larry Hurtubise, The Ohio State University</i>  <i>H. Barrett Fromme, The University of Chicago</i></p>
Salon 7 (Level 2)	Skill Acquisition	<p><b>Engaging in Difficult Conversations in Health Professions Education</b>  <i>Colleen Colbert, Laura Greenwald, and Allison Prelosky-Leeson</i>  <i>Cleveland Clinic Lerner College of Medicine</i></p>
Salon 8 (Level 2)	Descriptive – [Clinical Skills]	<p><b>H&amp;P 360: Advancing the Traditional History and Physical to Address Chronic Diseases and Social Determinants</b>  <i>Rupinder Hayer and Kevin Heckman, American Medical Association</i>  <i>Brent Williams, University of Michigan Medical School</i>  <i>Stephany Sanchez, University of California Davis, School of Medicine</i>  <i>Eric Johnson, University of North Dakota School of Medicine &amp; Health Sciences</i>  <i>David Henderson and Lynn Kosowicz</i>  <i>University of Connecticut School of Medicine</i></p> <p><b>Implementation of a Progress Clinical Skills Examination Program in a New Medical School Curriculum</b>  <i>Heather Laird-Fick, David Solomon, Ling Wang, Chi Chang, Carol Parker, and Robert Malinowski</i>  <i>Michigan State University College of Human Medicine</i></p> <p><b>Building the Foundation for a Culture of Patient Safety in Pre-clinical Healthcare Students</b>  <i>Eugenie Lehembre-Shiah, Sabrina Ghalili, and Robin Ovitsh</i>  <i>State University of New York Downstate</i></p> <p><b>Improving Medical Education through Falls Prevention Assessments at Extended Care Facilities</b>  <i>Luke Wesemann, Hashem Boalbanat, Jennifer Mendez, Jacob Vandell, Molly Pantelic, Kierstin Utter, and Omar Afify</i>  <i>Wayne State University School of Medicine</i></p> <p><b>Getting Comfortable with Disability: A Simulated Clinical Experience</b>  <i>Allison Macerollo, Susan Haverkamp, Ann Robinson, Todd Lash, and Jessica Prokup</i>  <i>The Ohio State University College of Medicine</i></p>
5:15 pm – 5:30 pm	Break	

5:30 pm – 6:30 pm	<b>Concurrent Sessions - 6</b>	
<b>Salon 6 (Level 2)</b>	<b>Panel</b>	<p><b>Megatrends in Medical Education Revisited: A 10 Year Update on Where We Are</b>  <i>David Way, Michael Barrie, Jason Bischof, Mark Conroy, *Douglas Danforth, Geremiha Emerson, *Carol Hasbrouck, Maya Iyer, *Andrew M. King, *Nicholas E. Kman, *Cynthia Leung, Simiao Li-Sauerwine, Christine Luo, Matthew Malone, *Jennifer Mitzman, Michael Prats, Christopher San Miguel, and *Dawn Watson</i>  <i>The Ohio State University College of Medicine</i>  *Panelists who will be present at the meeting.</p>
<b>Salon 7 (Level 2)</b>	<b>Skill Acquisition</b>	<p><b>Applying an Asset-Based Approach to the Development of Innovative and Sustainable Interprofessional Education Programs</b>  <i>Jennifer Bailey and Dawn Leberknight</i>  <i>South Carolina Area Health Education Consortium, Medical University of South Carolina</i></p>
<b>Salon 8 (Level 2)</b>	<b>Ignite – [New Perspectives]</b>	<p><b>Is There a Transformational Book for Educators?</b>  <i>Deb Hagen-Moe and Carrie Bowler</i>  <i>Mayo Clinic College of Medicine and Science</i></p> <p><b>Illuminating Darkness: The Study of UiM Physicians</b>  <i>Tasha R. Wyatt, Medical College of Georgia at Augusta University</i></p> <p><b>Humans of ATX: A Home Visit and Narrative Medicine Curriculum</b>  <i>Aliza Norwood and Brandon Allport</i>  <i>Dell Medical School at UT Austin</i></p> <p><b>Too Much of a Good Thing...And Still Not Enough: Guiding Faculty to IPE Resources</b>  <i>Heather Billings and Becca Gas</i>  <i>Mayo Clinic College of Medicine and Science</i></p>
6:30 pm – 9:00 pm	<b>Reception and Servant Leadership Award Presentation</b>	
<b>Skyline (Level 5)</b>		

## FRIDAY, NOVEMBER 8, 2019

<b>6:45 am – 8:00 am</b>	<b>Breakfast and Registration</b>	
<b>7:00 am – 8:00 am</b>	<b>Common Interest Roundtables</b>	
<b>Pueblo (Level 1)</b>	<b>Roundtable 1</b>	<b>A Clinician's Journey in Developing a Professional Identity as an Effective Teacher</b> <i>Randi Stanulis, Sath Sudhanthar Stacey Pylman, and Amy Ward</i> <i>Michigan State University, College of Human Medicine</i>
	<b>Roundtable 2</b>	<b>Medical Education: Utilizing Non-Physician Educators</b> <i>Cindy Gosse and Carrie Bowler</i> <i>Mayo Clinic College of Medicine and Science</i>
	<b>Roundtable 3</b>	<b>Clinical Immersion for Basic Science Educators: Helping Refocus, Emphasize and Contextualize the Basic Sciences</b> <i>Andrew Binks, Virginia Tech Carilion School of Medicine</i> <i>Paul Standley, College of Medicine, Phoenix, University of Arizona</i> <i>Judith Rowen, Carle Illinois College of Medicine</i>
	<b>Roundtable 4</b>	<b>A Competency-based Approach to Faculty Development</b> <i>Jean Bailey, Elizabeth Ripley, Kenneth Warren Foster, Katherine Henderson, and Lauren Powell</i> <i>Virginia Commonwealth University School of Medicine</i>
	<b>Roundtable 5</b>	<b>Self-Directed and Life-Long Learning: How Do You “Check The Box”?</b> <i>Bobbi Ann White, Kathleen Jones, Angie Hairrell, and Danielle Dickey</i> <i>Texas A&amp;M College of Medicine</i>
<b>8:00 am – 8:15 am</b>	<b>Break</b>	

8:15 am – 9:45 am	<b>Concurrent Sessions - 7</b>	
Salon 6 (Level 2)	<b>Skill Acquisition</b>	<b>Creating OSCE Stations to Help Bystanders become Upstanders</b> <i>Elizabeth Kachur, Medical Education Development, Global Consulting</i> <i>Lisa Altshuler, NYU Langone Health</i>
Salon 7 (Level 2)	<b>Skill Acquisition</b>	<b>Fearless Feedback: Cultivating Skills of Observation, Specificity, and Compassion for Effective Formative Feedback Conversations</b> <i>Belinda Fu, Mayutica Institute, University of Washington</i> <i>J.M.Monica van de Ridder, Michigan State University College of Human Medicine</i>
Salon 8 (Level 2)	<b>Descriptive – [Character]</b>	<b>Traditional to Transformational: Integrating Character, Competence, Caring into a New Faculty Teaching Academy</b> <i>Kristina Kaljo, Karen Marcdante, Bruce Campbell, Robert Treat, Beth Krippendorf, Bipin Thapa, Cheryl Maurana, and Alexandra Harrington</i> <i>Medical College of Wisconsin</i>  <b>Analysis of Medical Student Trait Affect Stability across Time</b> <i>Robert Treat, Kristina Kaljo, Amy Prunuske, Jeff Fritz, Craig Hanke, Molly Falk-Steinmetz, and William J. Hueston</i> <i>Medical College of Wisconsin</i>  <b>Medical Ethics Education Utilizing Small-Group Learning with Continuity of Faculty and Students to Develop Medical Students' Character</b> <i>Kurt Pfeifer, Arthur Derse, Catherine Ferguson, Michael Lund, and Martin Muntz</i> <i>Medical College of Wisconsin</i>  <b>Speak-Up in Challenging Clinical Education Environments</b> <i>Kristina Kaljo, Martin Muntz, Cassidy Berns, and Michael Lund</i> <i>Medical College of Wisconsin</i>  <b>The Metacognitive Habits of Pathology Trainees</b> <i>Carrie Bowler and Deborah Hagen Moe</i> <i>Mayo Clinic College of Medicine and Science</i>
9:45 am – 10:00 am	<b>Break</b>	

10:00 am – 11:30 am		Concurrent Sessions - 8
Pueblo (Level 1)	Problem Solving	<p><b>Career Transitions for Senior Medical Educators: How should Generalists Plan and Prepare for Future Roles?</b>  <i>Carol Elam, University of Kentucky</i>  <i>Beth Nelson, Dell Medical School at UT Austin</i>  <i>Sonia Crandall, Wake Forest School of Medicine</i>  <i>Sheila Crow, University of Miami</i></p>
Salon 6 (Level 2)	Skill Acquisition	<p><b>Faculty Development on the Fly - The Snippet Model **</b>  <i>*Heather Billings and Carrie Bowler</i>  <i>Mayo Clinic College of Medicine and Science</i>  <i>Cecile Foshee, Cleveland Clinic</i>  <i>Faye Haggard, University of Nebraska Medical Center</i>  <i>Deborah Simpson, Aurora UW Medical Group</i>  <i>*Cindy Gosse and Deb Hagen Moe</i>  <i>Mayo Clinic College of Medicine and Science</i>  <i>*Panelists who will be present at the meeting.</i>  <i>**Attendees are invited to bring a laptop or iPad in order to access and interact with materials shared during this workshop.</i></p>
Salon 7 (Level 2)	Problem Solving	<p><b>Turning on a Dime: Rethinking Primary Care Experiences for the Millennial Generation</b>  <i>Aliza Norwood, Brandon Allport, and Nicholas Phelps</i>  <i>Dell Medical School at UT Austin</i></p>
Salon 8 (Level 2)	Descriptive – [Assessment]	<p><b>Are More Heads Better Than One for Improving the Quality of Students' Narrative Feedback to Educator</b>  <i>Jorie Colbert-Getz, John Peterson, Rachel Bonnett, and Candace Chow</i>  <i>University of Utah School of Medicine</i></p> <p><b>Exploring the Impact of a Medical Specialty Speed Dating Event in a Cohort of Medical Students</b>  <i>Palavi Vaidya and Stephanie Pannell</i>  <i>University of Toledo College of Medicine</i></p> <p><b>The Role of Collaboration and Reflection in Developing Physician's Identity as Small Group Teachers</b>  <i>Stacey Pylman, PhD, Randi Stanulis, PhD, Binbin Zheng, PhD, Brian Mavis, PhD, and Scot Stanulis, BS</i>  <i>Michigan State University</i></p>
11:30 am – 12:30 pm	TGME Business Meeting (All are encouraged to attend)	
Pueblo (Level 1)		
12:30 pm – 1:30 pm	TGME Steering Committee Meeting	
Salon 5 (Level 2)		



## 2019 CONFERENCE SESSION ABSTRACTS

### COMMON INTEREST ROUNDTABLE

#### A Clinician's Journey in Developing a Professional Identity as an Effective Teacher

By studying his own teaching through targeted professional development and inquiry, one clinician-educator gained agency and purpose. Professional identity is often connected to a sense of agency and commitment to the role. His role as teacher is now more fulfilling to his professional identity.

#### Medical Education: Utilizing Non-Physician Educators

Are you a medical educator? Discussion will emphasize nonphysician medical education roles, responsibilities, career paths and how these roles evolve. Discussions will include how organizations are utilizing the strengths and talents of nonphysician educators to create and enhance medical education.

#### Clinical Immersion for Basic Science Educators: Helping Refocus, Emphasize and Contextualize the Basic Sciences

Most basic science content in medical education is organized and delivered by non-clinician educators with limited clinical exposure. We propose to develop a *clinical immersion program* to improve selection, contextualization and integration of basic science content by non-clinician educators.

#### A Competency-based Approach to Faculty Development

Faculty developers at one School of Medicine broadened their approach to faculty development offerings using a competency-based approach for planning, marketing, delivery, and evaluation. This project outlines the process they took to restructure their programming.

#### Self-Directed and Life-Long Learning: How Do You "Check The Box"?

The Self-Directed Learning element for medical school accreditation (LCME Standard 6.3) requires students to self-assess learning needs, independently identify those needs, analyze and synthesize relevant information, and appraise information and sources.<sup>1</sup> Participants will share creative strategies to address and assess students' metacognitive development in self-directed and life-long learning.

### DESCRIPTIVE SESSIONS

#### Holistic Admissions

Holistic admissions equally considers applicants' personal attributes *and* academic skills. We intended to measure something other than academic skill by implementing the AdMISSION Bio, an assessment of eight noncognitive variables proven to be predictors of success in professional school.

#### The Social Transition to Professional School: A Network Analysis of First-Year Medical Students

First-year medical students' peer networks ranged in size from 3 to 88 classmates (*mean* = 27.0, *SD* = 16.8), and did not differ by gender. Network size was less related to class attendance ( $r_s = .28, p = .005$ ) than to time spent on campus ( $r_s = .47, p < .001$ ).

#### Easing the Transition to Residency by Equipping Rising Fourth Year Medical Students with Skills Necessary for Success

A transitional course serves as an early intervention, helping to alleviate anxiety even before students enter their fourth year. Course was designed to prepare M4s for Acting Internships and residency through activities that cover diagnostic reasoning skills, clinical skills and technical skills.

### [Building a Medical Education Outcomes Center](#)

The quantity of data available across the medical education continuum continues to expand, but these data often languish unaccessed and underutilized. This session will describe the development of the Medical Education Outcomes Center ([outcomes.med.umn.edu](http://outcomes.med.umn.edu)), which provides an innovative, flexible model for integrating, managing, delivering, and analyzing medical education data.

### [Perception of Trust and Empathy towards Physicians among Families Experiencing Developmental Disabilities](#)

Patients and families experiencing developmental disabilities lack trust in physicians.[1] To improve medical students' interpersonal skills and patient trust, a service learning model was created to foster interactions between future physicians and families with developmental disabilities.

### [Reciprocal Relationship between Identities as Physicians and Teachers in an Integrated Undergraduate Medical Curriculum](#)

This study examined the reciprocal relationship between clinician educators' dual identities as physicians and teachers in an integrated curriculum. Using semi-structured interviews, this study found that educators' clinical and academic roles positively reinforced each other in many ways, including transferring knowledge and skills, refreshing career energy, and bringing personal fulfillment.

### [Teaching an Interdisciplinary Approach for Care of Patients Living In Poverty](#)

With a growing interest of interprofessional education in healthcare, we describe a longitudinal course taken by students in various health professions schools. Specifically, the students learn about care of patients living in poverty and the usefulness of a collaborative approach to healthcare.

### [An Interprofessional Case Pilot for Electronic Health Record Teaching in the Health Sciences](#)

Although the electronic health record (EHR) is a ubiquitous factor in the medical environment, few health professions learners are taught EHR skills required in their profession. This study developed a case that allowed multiple disciplines to interact, using the EHR to generate profession-specific documentation pertinent to the same patient case.

### [Does Preceding Assessment Data Help Identify Students Who Are Entrustable In Interprofessional Collaboration?](#)

Decisions about entrustment should be made using assessments that demonstrate evidence of validity across contexts and time. This study explores the utility of measures that may be used to assess medical students' ability to collaborate as a member of an interprofessional team (EPA 9).

### [Bridging the Gap: Identifying Needs to Integrate Behavioral Health and OB-GYN](#)

A women's integrative behavioral health curriculum was designed and implemented to address gaps in Ob/Gyn resident knowledge and clinical skills. This study identifies the need to promote a deep understanding of how mental health concerns should be assessed and managed to improve care of women and promote treatment outcomes.

### [Self-Regulated Learning: Understanding Students' Use of Learning Strategies in Their Transition to Medical School](#)

This study seeks to understand how medical students develop self-regulated learning strategies in their first year of medical school. The results indicated significant changes in how students plan, monitor, and reflect on their learning. Personal reflection and peer influence were identified as two significant contributors to strategy development.

### [An Appreciative Inquiry into the Learning Environments of Two Clerkships](#)

Invested in creating an exceptional learning environment, we utilized appreciative inquiry to explore two clerkship settings. Interviews revealed that while teaching and learning successes exist, these come with challenges, which could be addressed with specific changes. We discuss how the findings fit within various conceptual frameworks on learning environments.

### [Use of Reflective Writing and Self-Assessment Practices in a Medical School Anatomy Course to Develop Emotional Intelligence, Wellness and Team-building Skills](#)

First-year medical students reflected upon their experiences in a clinical human anatomy course. Then they self-assessed their reflections to develop a personal goal related to well-being, team-building or emotional intelligence. The objective was to assist in professional identity formation during the first 6 months of the medical school experience.

### [Can Self-Regulated Learning Theory Guide Learning Task Design?](#)

The benefits students derive from utilizing the steps Self-Regulated Learning (SRL) Theory are extensive (Duffy et al., 2004; Zimmerman & Kitsantas, 1996). The degree to which students innately employ these steps and whether learning formats influence the specific steps utilized is less clear. This retrospective study examined how students utilized and valued components of the SRL Theory when completing mandatory online modules for a systems-based course.

### [Examining the Attitudes, Beliefs, and Knowledge of Health Professions Students about Opioids](#)

Provider education is vital in management of the opioid epidemic. We aim to assess the attitudes, beliefs & knowledge of students who will be future prescribers, to assist in designing interdisciplinary curriculum to improve future prescriber knowledge & better prepare for responsible prescribing.

### [H&P 360: Advancing the Traditional History and Physical to Address Chronic Diseases and Social Determinants](#)

The traditional history and physical was developed years ago when diagnosis and management of biomedical conditions were the primary focus. Members of the American Medical Association's Accelerating Change in Medical Education Consortium developed and tested a modified version to use in all contexts.

### [Implementation of a Progress Clinical Skills Examination Program in a New Medical School Curriculum](#)

We assessed growth in clinical skills over the first two years of a new medical curriculum with early clinical experiences via a Progress Clinical Skills Examination. Case variability made it difficult to assess longitudinal growth, but cross-sectional comparisons indicated students' clinical skills grew rapidly during the first year.

### [Building the Foundation for a Culture of Patient Safety in Pre-clinical Healthcare Students](#)

Despite a heightened focus on patient safety of late, an intractable cause of medical error has been the punitive culture that pervades healthcare settings. Such a culture has undermined efforts to improve error reporting by hindering open communication.[i] In a 2002 study where 315 healthcare providers were asked how likely they were to report incidents to a superior, doctors were found to be the least likely to report an error.[ii] Fear of blame and punishment remains a major reason behind lack of reporting amongst medical staff.

### [Improving Medical Education through Falls Prevention Assessments at Extended Care Facilities](#)

To address challenges of falls in older adults as well as gaps in medical education, the redesigned team and empathy-focused curriculum includes a longitudinal falls prevention project in which students stay at a care facility overnight to observe geriatric care and assess fall risk at the facility

### [Getting Comfortable with Disability: A Simulated Clinical Experience](#)

Prior work with standardized encounters demonstrates medical students are uncomfortable and less effective with standardized patients with disabilities, compared to those without. Approximately 66% of students report having some didactic training on disability while 81% report having no clinical training in disabilities. People with intellectual and developmental disabilities (IDD) and physical disabilities receive poorer healthcare than people without disabilities (PWOD). It is noted that discomfort and weakened performance in medical students can be and have been addressed through interventions. At our institution we developed a clinical skills session to address this lack of clinical training related to persons with intellectual and physical disabilities.

### [Traditional to Transformational: Integrating Character, Competence, Caring into a New Faculty Teaching Academy](#)

We created a one-year faculty development program aimed at fostering skills for medical educators focused on Character, Caring, and Competence. The program consists of unique required and elective course work and a culminating capstone project to integrate new knowledge. Herein, we present results from our inaugural year.

### [Analysis of Medical Student Trait Affect Stability across Time](#)

Two-hundred and five medical students completed self-reported measurements of medical student trait affect which yielded an evolving, interconnected array of emotional elements between the first and second year of medical school. The magnitude of trait affect and its stability was moderated by time across the one year span.

### [Medical Ethics Education Utilizing Small-Group Learning with Continuity of Faculty and Students to Develop Medical Students' Character](#)

Training in medical ethics is recognized as a key curricular component in medical education, yet the methods used for teaching this can be highly variable. Small-group learning with consistency of student and faculty participants may provide a more effective model for teaching medical ethics.

### [Speak-Up in Challenging Clinical Education Environments](#)

Unprofessional behaviors go unreported in academic medicine, for fear of retaliation and a lack of knowledge how to intervene. Those who witness inappropriate behavior and do not or cannot act are "bystanders". The SUCCEED Workshop was designed to foster a collegial and safe learning environment across the medical education continuum.

### [The Metacognitive Habits of Pathology Trainees](#)

This action research study sought to understand the current state of the metacognitive habits utilized by trainees within the Department of Laboratory Medicine and Pathology's (DLMP) Graduate Medical Education (GME) programs.

### [Description of a Novel Medical Student Designed and Developed 4-Year Leadership Curriculum](#)

Leadership In Medicine (LIM) is a para-curricular, student run program that spans all four years of medical school. LIM's purpose is to provide immersive leadership opportunities in the areas of Academic Medicine, Executive Medicine, Community Medicine and Health Policy. Leadership development is measured using the Emotional and Social Competency Inventory model.

### [Are More Heads Better Than One for Improving the Quality of Students' Narrative Feedback to Educator](#)

The accuracy of student evaluations of teachers has been questioned, but is still an important metric for accreditation. Focusing on the quality of comments instead of ratings may help with accuracy. This study suggests constructing feedback in a group results in more actionable feedback, but may not impact unprofessional comments.

### [Exploring the Impact of a Medical Specialty Speed Dating Event in a Cohort of Medical Students](#)

Career decision making is a frightening process for many medical students. Many factors such as lifestyle, salary, personality, clerkships experiences, mentors, and biases towards specialties shape a medical student's decision making. Approximately 14% of medical students know which specialty they would like to pursue before beginning medical school. Along with 41-45% of students who decide before third year clerkships begin. Almost 69% of students change their minds during medical school. Due to the volatility of a students' choice, it is important for physicians and faculty members to understand these factors. The purpose of this study is to analyze how an annual speed dating program (group of 3-4 medical students were able to rotate and hear from 25-30 physicians in different medical specialties) implemented at the University of Toledo College of Medicine (UTCOM) impacts a medical student's career choices.

### [A Validity Study of the mini-CEX for Direct Observation during Mandatory Clinical Clerkships](#)

To explore the dependability and construct validity of the mini clinical evaluation exercise (mini-CEX) for direct observations with repeated measurements during clinical clerkships.

### [The Role of Collaboration and Reflection in Developing Physician's Identity as Small Group Teachers](#)

To achieve excellence in teaching and maximize medical student learning, clinician educators need deliberate mechanisms to make sense of themselves as teachers. This study looks at how clinician educators see themselves in their roles as educators and how collaboration and reflection influence their identity formation.

## IGNITE SESSIONS

### [Developing a Learning Strategies Curriculum, its Messy Business!](#)

Exposing the scaffolding used to encourage reflection and effective use of resources in Basic Sciences: Presenting a student-friendly learning strategies curriculum designed to enhance and develop medical students' performance. Developing a student-friendly learning strategies curriculum to encourage self-reflection and guide effective use of resources to enhance performance and development.

### [Using Viva-Voce to Examine Cognitive Processes Underlying Responses to Multiple-Choice Items to Reclassify 'Borderline-Scores' In High-Stakes In-House Summative Assessments](#)

I propose methodological triangulation using *viva-voce* to examine the cognitive processes underlying responses to selected items in a high-stakes summative assessment using a set of multiple-choice items with a single-best response to assess knowledge. Its purpose is to enhance validity evidence for interpretations of test scores, and confidence in the resulting pass/fail judgments.

### [Situating Competencies at the Core of the Curriculum](#)

A large public medical college revised its curriculum using the Physician Competency Reference Set (PCRS). This required scaffolded expectations for learners based on developmentally appropriate benchmarks as they progress through the competencies. We are seeking to promote inquiry on teaching and assessing learner success for three of the competencies.

### [Building an Alliance for Change: A Data Informed Approach for Curriculum Management](#)

A long time ago in a galaxy far away an alliance was built, a force awakened, and a system transformed. Today's dynamic health professions education curricular environment requires similar measures. Learn a how one institution built an interprofessional alliance, transformed curriculum management and created a new hope with data visualization

### [Is There a Transformational Book for Educators?](#)

Highlighting, re-reading content, and cramming for exams are commonly favored study habits, but are they the most effective? This session will discuss what we learned about metacognitive learning strategies and how we shared this new knowledge using microlearning snippets.

### [Illuminating Darkness: The Study of UiM Physicians](#)

Medical schools across the country are actively recruiting students considered under-represented in medicine (UiM), yet little is known about UiM physicians' experiences in creating a professional identity.<sup>1</sup> This Ignite presentation explores the potential in using post-colonial theory as a means to study the professional identity of UiM physicians.

### [Humans of ATX: A Home Visit and Narrative Medicine Curriculum](#)

In our fast-paced clinical environments we may miss opportunities to teach about the root causes of disease, and patients risk being dehumanized. In this talk, we discuss how a home visit narrative medicine curriculum can highlight the social determinants of health and build empathy in learners.

### [Too Much of a Good Thing...And Still Not Enough: Guiding Faculty to IPE Resources](#)

We created a Pipeline to Interprofessional Education and Resources (PIPER) through which educators can identify the right IPE resources for their learners and learning environment. The PIPER project addresses the limited awareness and utilization of tens of thousands of high quality and valuable open access IPE materials among our faculty. We believe this model will be relevant for other institutions as well.

## PANEL SESSIONS

### [Journal Editors Panel: How to Avoid Common Mistakes in Submitting and Revising Manuscripts](#)

The journal editor's panel provides guidance to the medical educator audience engaged in publishing their scholarly work. The editors will present the top 10 common mistakes that authors make when submitting and revising manuscripts for publication and offer some suggestions as to how to avoid them.

### [Virtual Communities in Medical Education: Current Needs and Future Possibilities](#)

Panelists experienced with listservs, blogs, podcasts and Twitter will examine opportunities for information dissemination, collaboration, advocacy, networking, crowdsourced content development and learning from shared experience afforded by their platforms. Discussion will address current needs and consider future possibilities for strengthening virtual medical education communities.

### [Megatrends in Medical Education Revisited: A 10-Year Update on Where We Are](#)

The Megatrends theme for the 2008 Fernalists Conference was intended to help educators distinguish between passing fads and meaningful trends that have sustained impact. Since it has been 1 years, the authors thought it would be a good time to evaluate the original megatrends and revise projections for the future.

## PROBLEM SOLVING SESSIONS

### [The Cultivation of Cognitive Curiosity: Key for Learning, Clinical Competence, Engagement, and Well-Being in the Healthcare Profession](#)

The learners and faculty are encouraged to enhance the practice of curiosity in the healthcare profession. Curiosity is a key competency that can improve clinical care, promote education, develop inter-professional collaborative practice and nurture well-being.

### [Looking Into the Blackbox: Role and Structure Issues in Curriculum Support in Medical Education](#)

This session, aimed at participants in curriculum support roles, will explore common structural and institutional issues, including interpersonal dynamic and trust challenges. It will tap new perspectives and innovations for those in health professions education curriculum support. Participants will identify, discuss, and propose potential solutions relevant to their institution.

### [Building Bridges: Helping Educators Develop Identity and Connect to Community](#)

A strong medical educator (ME) identity is associated with many benefits: improved career satisfaction and educator performance, decreased professional isolation and less attrition. This workshop will explore supporting professional identity formation of ME through interactive group problem-solving.



### Career Transitions for Senior Medical Educators: How should Generalists Plan and Prepare for Future Roles?

Individuals who have worked for decades in medical education are confronting decisions regarding their work lives. We will examine career development theories and consider professional identity, re-tooling skills, and psychological transitions that inform decisions regarding career transitions.

### Turning on a Dime: Rethinking Primary Care Experiences for the Millennial Generation

In this workshop, we review the learning theory that underpins our educational philosophy and how it applies to the millennial generation. Participants will work together to create a modifiable framework to create multimodal didactics that are both engaging and effective.

## SKILL ACQUISITION SESSIONS

### Optimizing Medical Simulation to Build Clinical Reasoning Skills in the Pre-Clinical Curriculum

This skill acquisition session will describe the development of a set of high-fidelity simulation activities that utilize key features, gleaned from extensive research in this area, for optimizing the educational value of such activities for the acquisition of clinical reasoning and related skills.

### Innovative Approaches in LGBT-Inclusive Medical Education

This session introduces one medical school's approach to preparing clinicians to be culturally responsive healthcare providers for LGBT patients. The presenters will share examples of collaborative techniques that has transformed conventional medical school curriculum.

### Self-Reflection: An Introduction to Coaching for Lifelong Learning

Self-reflection is a vital tool in the acquisition, maintenance, and remediation of learned material. As stewards of knowledge and assessors of performance, faculty can also become coaches to their learners. Participants will learn a self-reflection exercise to assess learner strengths and limitations and identify opportunities for coaching.

### Join the Micro-Resistance against Microaggression

National data from the Association of American Medical Colleges (AAMC) reports that as of 2013-2014, women comprise approximately half of matriculants to medical school, but only represent 21% of full professors and 16% of deans. Additionally, only 4% of American physicians identify as African-American, Latino, Native American, Native Alaskan, and Native Hawaiian - ethnic communities that considered by the AAMC to be underrepresented in medicine (UIM). Reasons for low representation in these groups include on-going negative experiences related to individuals' gender and race, negative psychological sequelae secondary to mistreatment, and lack of role models within the profession. At present, the medical community has openly acknowledged the importance of role models in academic medicine, but very little effort has been directed to addressing the negative psychological sequelae UIM physicians report, and the effect that on-going microaggressions have on their careers.

### Engaging in Difficult Conversations in Health Professions Education

In this interactive workshop, participants will learn specific strategies to enable them to successfully initiate and engage in difficult conversations with their learners about topics that may be uncomfortable for many faculty members. Using case scenarios, participants will have a chance to practice feedback to address various problematic learner behaviors.

### Applying an Asset-Based Approach to the Development of Innovation and Sustainable IEP

Developing an interprofessional curriculum for health professions students can be daunting. In this session, we will share our experiences in the development of an interprofessional longitudinal program utilizing an asset-based approach<sup>1</sup>.

Presenters will guide participants in the skills needed to develop an asset-based innovative and sustainable interprofessional education program.

#### Creating OSCE Stations to Help Bystanders become Upstanders

Health professionals must overcome their Bystander tendencies when observing unprofessional or unsafe behaviors in others. They have to become Upstanders, speak up and take effective and efficient actions. This workshop will help educators create OSCE stations that can address such training needs.

#### Fearless Feedback: Cultivating Skills of Observation, Specificity, and Compassion for Effective Formative Feedback Conversations

Many educators struggle with giving effective feedback, and many learners hesitate to ask for feedback, leading to frustration within the teaching relationship. Through improv-based interactive learning exercises, workshop participants will heighten observation and articulation skills, and learn to create safe environments for giving and eliciting specific, actionable, and empathic feedback.

#### Faculty Development on the Fly - The Snippet Model

The aim of this session is to provide educators and faculty developers with an innovative and feasible model, skill set and practical tools to transform their current programming into easily consumable and flexible faculty development.

## IAMSE



The International Association of Medical Science Educators (IAMSE) was founded in 1997 based on the guiding principle that all who teach the sciences fundamental to medical practice should have access to the most current information and skills needed to excel as educators. Through IAMSE, medical science educators have a trustworthy source of information and mutual support, and can belong to an organization dedicated to their professional development. The ultimate beneficiaries of our combined efforts are the subsequent generations of health care providers around the globe – our students – who are trained in both the art and science of modern medicine. With members in over 40 countries, including basic science and clinical faculty as well as members representing faculty from several other health care disciplines, the organization is international in scope and interdisciplinary in nature. IAMSE offers several professional development opportunities as the Annual Association Meeting, Web Seminars, IAMSE Manuals, the IAMSE Medical Educator Fellowship and the online peer-reviewed journal *Medical Science Educator*. For more details see [www.iamse.org](http://www.iamse.org).

