



PURSuing YOUR PASSION WITH EXCELLENCE IN TEACHING



GOALS FOR THE ACADEMY

- Provide a platform for the continuous recognition of excellence in teaching
- Stimulate interest and visibility in teaching
- Provide an interdisciplinary support network for medical educators
- Develop a pool of knowledge and skills that will lead to innovation in teaching/learning
- Promote scholarship of teaching and learning

MESSAGE FROM THE DEAN

The Academy of Medical Educators continues to inspire, enhance and recognize teaching at the Marshall University Joan C. Edwards School of Medicine, providing a forum for continuously advancing the core educational mission of our school.

To date, 42 members have successfully completed the Academy – 27 Master Educators (faculty) and 15 Teaching Scholars (residents). In addition, the scope of the Academy has grown: by incorporating faculty candidates from the College of Health Professions, it has added an important interdisciplinary dimension; by collaborating with the College of Education and Human Services, it is drawing on expanded resources in the areas of educational theory and innovative educational applications.

On behalf of the School of Medicine, I congratulate the graduates of the Academy and commend them for their commitment to maximally effective teaching. Applications will be accepted in October for the next class; if you have not yet participated, I strongly encourage you to apply.

Charles H. McKown, Jr., M.D.
Vice President and Dean

ACADEMY 2011

Abstracts



Preparedness of Third-Year Medical Students for Clerkships after Exposure to a Systems-Based Curriculum

Kelli J. Williams* and Mary Kathryn Gould*, Department of Dietetics, Marshall University; Aaron M. McGuffin, Office of Medical Education, Marshall University Joan C. Edwards School of Medicine

Background

Research indicates a systems-based model for medical education may improve students' performance in clerkships. This pedagogical method was recently introduced at Marshall University School of Medicine. This study assessed medical students' and clerkship directors' perceptions of preparedness for third-year clerkships after the transition from a traditional to a systems-based medical education curriculum.

Methods

To accomplish this, a mixed method approach was utilized. Students who had just completed their third-year clerkship were surveyed, via Survey Monkey, regarding preparedness collectively and in specific content areas. In addition, clerkship directors (CD) were interviewed.

Results

Student surveys revealed they were most prepared to behave ethically and deal with ethical dilemmas and least prepared with the electronic health record and radiologic interpretation. Students perceived themselves most prepared for their family medicine, pediatric and internal medicine rotations and least prepared for their surgery and obstetrics and gynecology rotations. Clerkship mini-board scores were highest for the pediatric and lowest for the surgery clerkships, accurately reflecting their perceived preparedness. Interviews with CDs noted the most improvement in history taking and physical examination skills, although some CDs perceived no improvement in any areas.

Conclusion

Overall, there was minimal agreement between the students' perceptions of their preparedness for clerkships with those of the CDs. CDs indicated it is difficult to assess changes in students' abilities because of many variables that may contribute to improvements. The recent addition of a clinical skills lab and changes in teaching personnel may have contributed as well. Students' perceptions of their preparedness for a particular clerkship seemed to parallel their performance on their mini-board examinations. However, these data are based on only one student class. Further class analysis, longitudinal follow-up of the students' USMLE performances, and information from the AAMC Graduation Questionnaire may provide stronger evidence for the impact of the systems-based curriculum change.

*Academy candidates



Four members of the Academy presented at the 2009 Generalist in Medical Education meeting with the mentoring of session moderator Cathy Lazarus, MD, of the Chicago Medical School at Rosalind Franklin University of Medicine and Science. Shown here with Dr. Lazarus (third from left) and Dr. Darshana Shah are Drs. Waseem Ostwani, Shadi Obeidat, William Nitardy and Yousef Darrat, MD.

Perceptions of Cardiovascular Fellows of Effective Methods of Learning to Read Completed Echocardiograms

Tina Sias, MD, Department of Cardiology, Marshall University
Joan C. Edwards School of Medicine

Background

Learning to read echocardiograms is a program requirement of an Adult Cardiovascular Fellowship Program (ACFP). As cardiologists use many different methods of teaching echocardiography reading, the purpose of this survey was to evaluate the cardiovascular fellows' perspectives on the best way to learn to read completed echocardiograms.

Methods

This study involved completion of confidential survey(s) by cardiovascular fellows. A signed consent was required to participate. No fellow was required to participate nor penalized for lack of participation. Participating fellows completed a survey regarding perceptions of the most effective method of learning to read completed echocardiograms.

Results

Eleven cardiovascular fellows, from different levels of training, completed the survey. 70% of the participants perceived the most effective method for learning to read completed echocardiograms was for the fellow to read the echo prior to reading with the attending and then review the study with the attending. However, 30% of the participants perceived the most effective method was that the cardiovascular fellow and attending should independently read the echocardiogram study and then discuss findings together.

Discussion

Recently the National Board of Echocardiography has stated fellows receive "credit" for reading an echocardiogram, for purposes of exam certification, by "pre-reading" the echo prior to the attending's review. This survey demonstrated that fellows' perceptions of the best way to learn completed echocardiograms agreed with this requirement. Other methods of learning to read echos were also listed as somewhat effective.

A limitation of this study is that it did not consider other methods of learning, which are a contributing factor to the overall learning process. Another limitation of this study, due to size of the ACFP, is the small number of participants. Future surveys of fellows may be warranted to further assess the best way for learning to read echocardiograms.

ACADEMY SPEAKERS BUREAU

The Academy of Medical Educators offers a Speakers Bureau to help departments meet faculty development needs. The Speakers Bureau Catalog can be accessed through the Faculty Development website, <http://musom.marshall.edu/fdp>. Each presentation is targeted at a topic that is important to the development of effective educators. To schedule a presentation, please contact us Academy@marshall.edu. When making a request, please provide the following:

Desired presentation date
Alternate presentation date
Location
Desired time
Alternate time
Audience size

MASTER EDUCATOR

Self Reflection

"My experience in the Academy of Medical Educators was particularly beneficial in two respects. First, it provided a forum in which to share ideas with others who share my goal of improving teaching ability. Second, it provided the structure I needed in which to conduct a research project."

Dilip Nair, MD

"There is no doubt that the academy has introduced me to new aspects of teaching that I was not aware of. It has guided me and enlightened my path to become a better educator. I also benefited from participating in research in medical education which has opened new doors for me and has broadened my understanding of the process of learning. I definitely recommend the academy to anyone who is interested in teaching as an art."

Yousef Darrat, MD

"My academy experience was very good. We had a series of very well chosen lectures. These lectures went through a broad aspect in medical education going from basic up to the top. The speakers were excellent. This added another aspect in learning from such a good group of teachers. Our group contained a wide variety of different specialties; this also made it a rich environment. Lastly, being able to choose a project, having superior help in building it and getting to the point to be able to present it in a big conference; this was special experience."

Waseem Ostwani, MD

INVITED GUEST SPEAKERS FOR THE ACADEMY

Carol S. Hodgson, PhD

*Associate Dean, Educational
Development & Research
Director, Educational Development
& Research Office
Associate Professor of Medicine
University of Colorado-Denver*

Judy A. Shea, PhD

*Professor of Medicine -
Clinician Educator
Associate Dean for Medical
Education Research
Director of Evaluation and Assessment
Penn State School of Medicine*

Sheila W. Chauvin, MEd, PhD

*Director, Office of Medical Education
Research and Development
Director, Academy for the
Advancement of Educational
Scholarship
Professor, Department of Internal
Medicine and School of Public Health
Louisiana State University School
of Medicine*

Larry D. Gruppen, PhD

*Josiah Macy, Jr., Professor of
Medical Education
Chair, Department of
Medical Education
University of Michigan
Medical School*

Linda C. Perkowski, PhD, MS

*Associate Dean for Curriculum
and Evaluation
University of Minnesota
Medical School*

Sonia J. Crandall, PhD, MS

*Professor, Family and
Community Medicine
Affiliate, The Maya Angelou
Center for Health Equity
Wake Forest University
School of Medicine*

Comparison of Outcomes of Rural and Traditional Tracks at the Marshall University Family Medicine Residency Program

Stephen M. Petrany, MD, Department of Family and Community Health,
Marshall University Joan C. Edwards School of Medicine

Background

The Marshall University Family Medicine Residency (MUFMR) developed West Virginia's (WV) first "Rural Residency Program" in 1994. A new curriculum was established with the learning experiences of the novel rural track and the traditional track being distinguished by one variable, the location of the ambulatory continuity practice site for resident participants. This paper will assess the impact of the rural track curriculum on the family medicine residency and compare rural track graduates with those of the traditional track.

Methods

Various characteristics and potential outcome measures have been retrospectively collected for all residency graduates entering the program from 1984 through 2006.

Results

Since the initiation of the rural track, a total of 12 residents entered the special track while 95 residents entered the traditional curriculum. Practicing in a rural area upon graduation was seen in a substantially higher percentage of the rural track residents (83%) compared to the traditional residents (41%). A WV location for practice upon graduation was observed in 75% of the rural track residents and 60% of their traditional counterparts. The average increase in in-training exam scores during training was higher for rural track residents. Board certification rates were high for both groups (rural 100% and traditional 98%). Comparison to the group of 68 family medicine residents for the period 10 years prior to the rural track curriculum showed WV practice rates to be higher for program graduates since the start of the rural residency track (70% versus 50%).

Conclusions

Development of the MUFMR rural residency track has been associated with a substantial increase in graduates practicing in the state of WV. Rural track participants were more likely to practice in rural areas and the state of WV upon graduation. Rural track residents appear to advance academically at least as well as their traditional counterparts.

ACADEMY WELCOMES ADJUNCT FACULTY

The Academy welcomes Drs. Linda Spatig and Edna Meisel from the College of Education, whose expertise will take Academy scholars to a higher level of learning.

Improving the Feedback Process & Medical Student Performance: An Exploratory Study

Nesreen BenHamed*, MD, Department of Internal Medicine; Joan C. Viksjo, EdM, Office of Medical Education; Wesam Bolkhair, MD, Department of Internal Medicine; Kelly Schrapp, MS3, Marshall University
Joan C. Edwards School of Medicine

Introduction

One salient conceptual issue with far-reaching patient care consequences concerns the feedback process between clerkship directors and third-year medical students. Despite its huge importance in empowering student learning and in developing physician competencies, the feedback system remains one of the most understudied areas of medical education and underutilized tools by attending physicians.

Objective

To report our experience with enhancing the quality of feedback given by faculty to medical students in order to improve students' performance.

Methods

This is an initial investigation comparing current feedback encounter cards with a newly designed feedback card containing more specific evaluation requirements. An anonymous and voluntary survey was administered to third-year medical students at the midpoint and at the end of their first rotation, asking students to evaluate both feedback systems.

Results

Preliminary analysis shows that with the use of the new cards, there are slight increases (2%) in the accuracy of evaluation performance, and an increase (2%) in adding specific comments about students' performance. Also, it was found that there is an increase (1%) in students' performance as per student self-evaluation. As expected, positive comments increased by 2% with the current cards system. Overall satisfaction with both systems was equal.

Conclusion

The current encounter cards are efficient and can be further improved by using the new feedback cards. Research will continue into the next three clinical rotations in order to assess any further improvements in this important learning and training tool.

*Academy candidate

Department of Surgery Intern Handbook

Stephen R. Eaton*, MD, and David A. Denning, MD, Department of Surgery, Marshall University
Joan C. Edwards School of Medicine

Background

New residents starting in July have quite a bit of anxiety about beginning residency. As a part of many residency programs, interns are given a variety of handouts and written information. There are many common problems that upper level residents take for granted. I developed a new resident handbook that compiled information for incoming interns to help make their transition from medical student to resident easier. It was also my goal to have something that the new interns would be able to carry in their pocket to reference for common things they encounter.

Methods

This handbook was developed by talking to third- and fourth-year medical students regarding information that they thought would be important to them in starting residency. Also, I spoke with surgical residents at all levels (PGY1-PGY5) and asked them what information they believed would be important in starting residency.

Results

A handbook has been developed and I plan to ask the new incoming residents in 2011 a series of questions after using this handbook and inquire if it was helpful. They will be asked about the ease of use and the average number of times per day they refer to the handbook as a new resident.

Conclusion

I believe that one of the most difficult times in training of young surgeons is the transition from medical student to intern. I believe that a resident handbook with the information that I have compiled will be very helpful in making interns in surgery and other residencies more comfortable with this very difficult time. Also, I believe this will be a valuable reference tool for upper-level residents as well.

*Academy candidate

POST ACADEMY IMPACT

SCHOLARLY PROJECTS IMPLEMENTED IN JCESOM CLASSROOMS OR CURRICULUM			
Name	Academy Class	Scholarly Project	Implementation
Darshana Shah, PhD	2005	Development of a Fourth Year Elective in Academic Medicine	Academic medicine fourth-year elective
Paulette Wehner, MD	2005	EKG Curriculum: A Four-Year Approach	Essentials of EKG fourth-year elective (one-week course)
Mitch Charles, MD	2006	Residency Survival Skills: A Unique Fourth-Year Elective	Residency survival skills fourth-year elective (one-week course)
Eduardo Pino, MD	2007	Self-Perception of Preparedness: Resident as a Teacher	"Resident as a Teacher" weeklong course
Chuck Clements, MD	2007	Wilderness Medicine Study	Wilderness study fourth-year elective
Anne Zappacosta, MD	2008	Teaching Medical Students Patient Medication Compliance During a Third-Year Medical Student Rotation in Psychiatry	Implemented in MS-III clerkship for several years
Tracy LeGrow, PsyD	2008	Multidisciplinary Teaming and Impact on the Professional Identity of Faculty in Medical Education	Implemented multidisciplinary approach in clerkship; now all faculty members participate
SCHOLARLY PRESENTATIONS - REGIONAL AND NATIONAL			
Name	Academy Class	Academy Project	Meeting
Paulette Wehner, MD	2005	EKG Curriculum A Four-Year Approach	Platform presentation at SGEA, AAMC, 2005
Mitch Charles, MD	2006	Residency Survival Skills: Unique Fourth-Year Elective	Platform Presentation Southeastern SAEM Annual Meeting, 2006
William Triest, MD	2007	The "Triad" Model of Mentoring: Fourth-Year Student as a Lecturer in Pathology	Poster presentation at International Association of Medical Science Educators (IAMSE) meeting, 2006
Todd Green, PhD	2007	Correlation Between Performance in Physiology and Performance on NBME Step 1	Poster presentation at IAMSE 2006
Bobby Miller, MD	2007	The Impact of an ILP on Resident Education and Professional Development	Generalist in Medical Education, Washington, DC, 2007
Vincent Sollars, PhD	2008	Faculty Learning Style and Student Satisfaction	Poster presentation at IAMSE, 2008
Shadi Obeidat, MD	2010	Evaluation of Teaching Methods and Chest X-Ray Interpretation Skills of Senior Medical Students	Generalist in Medical Education annual meeting, 2009
Waseem Ostwani, MD	2010	Pilot Pediatric Electrocardiogram Curriculum for First-Year Pediatric Residents	Platform presentation at Generalist in Medical Education annual meeting, 2009
Yousef Darrat, MD	2010	Do the Erroneous Reports of Computer Electrocardiogram Influence Analysis by Medical Trainees?	Generalist in Medical Education annual meeting, 2009
William Nitardy, MD	2010	Measuring Effectiveness of Medical Grand Rounds	Breakfast Roundtable Generalist in Medical Education annual meeting, 2009

POST ACADEMY IMPACT

LEADERSHIP POSITIONS		
Name	Academy Class	Leadership Positions
Darshana Shah, PhD	2005	Associate Dean, Faculty Affairs & Professional Development
Paulette Wehner, MD	2005	Senior Associate Dean, Graduate Medical Education
Todd Green, PhD	2006	Director, Graduate Studies
William Triest, MD	2007	National Director, Pathology & Laboratory Medicine Service VHA Office of Patient Care Services
Bobby Miller, MD	2007	Associate Chair, Medical Education
Tracy LeGrow, PsyD	2008	Assistant Dean, Academic Affairs
Hisham Keblawi, MD	2006	Department of Ob/Gyn, Clerkship Director
ACADEMIC ADVANCEMENT		
Name	Academy Class	Academic Postions
Chuck Giangarra, MD	2008	Professor-2009
Dilip Nair, MD	2009	Professor-2010
Chuck Clements, MD	2007	Professor-2009
Bobby Miller, MD	2007	Associate Professor-2010
Hisham Keblawi, MD*	2006	Assistant Professor-2009
Farid Mozaffari, MD*	2006	Assistant Professor-2009
William Nitardy, MD*	2009	Assistant Professor-2010
*Participated while a resident		

“TO INSTRUCT IS AN EASY MATTER BUT
TO EDUCATE REQUIRES INGENUITY, ENERGY
AND PERSEVERANCE WITHOUT END.”

FRANCES WARDE

MASTER EDUCATOR

Self Reflection

“Being a part of the Academy of Medical Educators was an excellent experience. The variety of programs offered through the Academy diversified and strengthened my skill set in teaching, planning research and evaluation. I left the Academy with an increased knowledge base in areas of educational research and presentations.

However, as important as the intellectual experience was, so was that of the interactions with my colleagues. I had the opportunity to learn from the experiences of individuals in various medical and scientific specialties. Their feedback and point of view helped and has shaped the educator that I have become.

As a result of the Academy I have started research that I was able to present at the ‘Generalist in Medicine’ Conference. The emphasis of research at the Academy led to this invaluable experience and has created an interesting research project that I plan to continue in my new role at the university.

There is no doubt that I would not have acquired the knowledge on my own that was supplied through the Academy of Medical Educators. I strongly recommend it to any one at the medical school that desires increased knowledge or an improved skill set in medical education.”

William Nitardy, MD

ACADEMY CANDIDATES CLASS OF 2012



Candidates for the Academy's Class of 2012 gather with Dean Charles McKown, Jr., MD., and Dr. Darshana Shah.

Shown here, from left, are: Sarah Price, Obstetrics and Gynecology; Dana Eilen, Cardiology; Nizar Nouredine, Cardiology; Doreen Griswold, Pathology; Elsa Mangiarua, Pharmacology, Physiology and Toxicology; Sydnee McElroy, Family Medicine; Adrienne Mays, Family Medicine; Penny Kroll, Physical Therapy; Charles McKown; Mohammad Ebraheem, Pediatrics; Wesam Bolkhair, Internal Medicine; Arun Manoharan, Internal Medicine; Hiran Hedayat, Surgery; and Darshana Shah.

GRADUATES OF THE ACADEMY

MASTER EDUCATORS

Nesreen BenHamed, MD
Betts A. Carpenter, MD
Mitch Charles, MD
Chuck Clements, MD
Brenda Dawley, MD
David Denning, MD
Mehiar O. El-Hamdani, MD
Joe Evans, MD
Adam Franks, MD
Chuck Giangarra, MD
Mary Kathryn Gould, EdD, RD, LD
Todd Green, Ph.D
Tracy L. LeGrow, PsyD

Gerald McKinney, MD
Bobby L. Miller, MD
Dilip Nair, MD
Stephen Petrany, MD
Eduardo Pino, MD
Vern Reichenbecher, Ph.D
Darshana Shah, Ph.D
Tina Sias, MD
Vincent Sollars, PhD
William E. Triest, MD
Paulette Wehner, MD
Kelli Williams, PhD, RD, LD
Mumtaz Zaman, MD
Anne Zappacosta, MD

TEACHING SCHOLARS

Samar Abu-Sultaneh, MD
Mehdi Ak-Hevan, MD
Ben Allen, MD
Yousef Darrat, MD
Stephen Eaton, MD
Karima Zwawi, MD
Hisham Keblawi, MD
Farid Mazaffari, MD
Rafael Molina, MD
Ben Mossavi, MD
William Nitardy, MD
Shadi Obeidat, MD
Waseem Ostwani, M.D
Sarah Rinehart, MD
Matthew Weimer, MD



MARSHALL UNIVERSITY JOAN C. EDWARDS SCHOOL OF MEDICINE

ACADEMY *of*
MEDICAL EDUCATORS

For more information, please contact:

Darshana Shah Ph.D., Associate Dean Faculty Affairs & Professional Development

Phone: 304-691-8639 • Fax: 304-691-8640 • Email: shah@marshall.edu