Pre-Clerkship Phase: Academic Year 1 of the Curriculum

45 Weeks of instruction, experiential and self-directed study (53 credits Hours)

| | 19 weeks of instructio /21 o | | (17 weeks | | <u>Sp</u> uctior /23 c | Summer (9 weeks of instruction and self- directed study/9 credits) | | | | | | | |
|--------|--|----------------|---------------|---------|------------------------------|--|------------|-------------------------|-------------------------|---------------------------|-----------|----------|------|
| | August Sept | Oct | Nov | D | ec | Jan | Feb | | Mar | Apr | May | June | July |
| | Medical Biochemistry | | | Inte | egrate | ed Content | | Career and Professional | | | | | |
| Ρ | and Cellular Function | | egration of | | | | | | Development Experiences | | | | |
| r | Integration of | - | | | | Foundation | | | Nervous Sys | stem | | CCMD 815 | |
| 0 | Biochem/Genetics/ PALM 801 Cell biology (7 credits) | | | | | Immunolo | | | | (7 credits) Public Health | | | |
| t | CCMD 801 | (/ | r creatis) | | | Immunity | , Intectio | | B 812 | icrobiology) 1 | CCMD 8 | | |
| е | (8 credits) | | | | | | | | redits) | | (2 credit | | |
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| n a | | | | | A | | Medica | | armacology 1 | L | | | |
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| | | | | | Ň | | i | | redits) | | | | |
| D | | | | | | Physica | l Diagnos | | d Clinical Int | egration 2 | | | |
| e | | | | | | | İ | | DCI 2 ID 812 | | | | |
| v | | | | | | | į | | redits) | | | | |
| e | Physical Diagnosis | and Clinical I | Integration 1 | | | | | | rosciences ar | nd Human | | | |
| I | | PDCI 1 | | | | | | | Behavio | | | | |
| ο | CC | CMD 811 | | | | | | | CCMD 81 | .3 | | | |
| р | (5 | credits) | | | | | | | (7 credit | s) | | | |
| m | | al Developm | nent | | | Health Ca | re | | | | | | |
| е | | MD 802 | | | | Ethics | | | | | | | |
| n | (1 | L credit) | | | | CCMD 81 | | | | | | | |
| t | | | | | | (2 credits | >/ | Droh | olem-Based L | earning 1 | | | |
| | | | | | | | | FIUL | (PBL) | | | | |
| | | | | | | | | | CCMD 80 | 3 | | | |
| | | | | | | | | | (1 credit | | | | |

*Students must earn passing grades for all academic year 1 courses prior to enrolling in any courses in the academic year 2 of the curriculum

Pre-Clerkship Phase: Academic Year 2 of the Curriculum

33 weeks of instruction, experiential and self-directed study (38 credit hours)

| | <u>(</u> 22 w | eeks of ir | nstruction a | Fall and self-directe | ed study/29 | | <u>Spring</u> (11 weeks of self-directed study/9 credit hour | | | | | |
|------|--|------------|--------------|------------------------------------|-------------|-----|---|------------------------------|--|---|---|--|
| Augu | st | Sep | ot | Oct | Νον |)ec | Jan | Feb | Mar | April | | |
| | | | | ed Content | | | Conten | t (Cont) | NBME Comp Exam CCMD 824 | | | |
| Hem | | | | Muscu/ Derm | Endo | GI | В | Reproduction/ Development | Foundational Science Integration | (3 credits) USMLE Step 1 Prep CCMD 825 (6 credits) | | |
| | Immunity, Infection and Disease (Microbiology) MICB *820 (4 credits) | | | | | | | | | cro 3 820 | | |
| | <u> </u> | Mechani | | nan Disease (P | athology) | | A K | Pa | i h | - | | |
| | | | I PAI | ath M 820 credits) | 011 | | | | PALN | | | |
| | : | İ | | harmacology | | | | | Pha | + arm | - | |
| | | | P PC | Harm DL 820 redits) | | | | | | 1 820 | | |
| | | | Phy PS | siology 10 820 | | | | | | 010gy 1820 | | |
| | Physical Diagnosis and Clinical Integration 3 | | | | | | | | PD | СI З | - | |
| | | , | P CCN | DCI 3 MD 821 credits) | | | | | CCM | D 821 | | |
| | 1 | i | - | sed Learning 2 | | i | <u> </u> : | | | | - | |
| | | | CCM | РВL) ИР 823 | | | | | | | | |
| | | | (3 0 | credits) | ! | į | i | | | | | |

*Students must earn passing grades for all courses in the pre-clerkship phase of the curriculum prior to enrolling in any clerkship or clinical rotations

Below is one example of how one student's curriculum may be organized across the academic years 3 and 4 of the curriculum; clerkships/rotations may be taken in a variety of orders. Required clerkships/rotations and clinical electives rotations are scheduled for either 2, 4, 6 or 8 week blocks.

- Students who graduate in May must complete MED 830, SURG 830, BMP 830, PEDI 830, FMED 830, NEURO 830 and OBST 830 prior to August 30th of the fourth-year of the curriculum, allowing enough time to figure final clerkship narratives into the Medical Student Performance Evaluation (MSPE)- a required component of residency application
- Students may request 2 weeks of surgical electives during SURG 830 surgery clerkship
- Students may not take Step 2 CK or the CPX exam until passing grades are earned for MED 830, SURG 830, BMP 830, PEDI 830, FMED 830, NEURO 830 and OBST 830
- Students who elect to delay the start of third year (block 1), may enter the third year only in blocks 2, 3 or 5
- CCMD 841 (Electives) that are designated as a "research" elective is limited to 4 weeks and must be approved by the Committee on Academic and Professional Standards (CAPS)
- CCMD 841 (Electives) that are designated as online or remote are limited to 6 weeks
- CCMD 841 (Electives) are limited to 12 credits for the same specialty
- CCMD 841 (Electives) that are designated as a Global Health rotation is limited to 4 weeks, unless in the Global Health Track, which has a limit of 8 weeks
- CCMD 842 SubI Hospital Care and CCMD 848 Rural/Community-based Care must be completed in 4 consecutive weeks

| | | | 4 | • | - | | Academic Ye ial and self-dire | | | | | | | | |
|---------------------------------|------|------------------------------------|---------------------------|-------|---|-----|-------------------------------------|-----|-----------------------|-----|---|-----|---------|--|--|
| Γ | | | | Summe | r/Fall | | | | | | Spring | | Summer | | |
| Γ | May | June | July | Aug | Sept | Oct | Nov | Dec | | Jan | Feb | Mar | Apr | | |
| | Bloc | Block 1 Block 2 Block 3 Block 4 | | | | | | | | | Block 5 Block 6 | | | | |
| B o t c a m p | MED | Medicine 0 830 edits) | SURG SURG (8 credit | 6 830 | Psychiatry BMP 830 (6 credits) Neurol NEURO (2 cre | 830 | Pediatric PEDI 830 (8 credits |) | B R E A K | FM | / Medicine ED 830 credits) | OBS | redits) | | |

*Eastern Campus- Family Medicine and Pediatrics are integrated into a 16 weeks module

| | | | <u>Summer/F</u> | all | | | <u>Sun</u> | Summer | | | | | |
|---|---|--|---|--|------------|--|------------|-----------------------|--|---|---|----------|-----|
| May | June | July | Aug | Sept | Oct | Nov | | Dec | Jan | Feb | Mar | Apr | May |
| Electives CCMD 841 (4 credits) "Away Rotation" | USMLE Step 2 CK CCMD 845 (2 credits) Anesth Clerkship CCMD 843 (2 credits) | Electives CCMD 841 (4 credits) | Subl Hospital Care CCMD 842 (4 credits) CPX Exam CCMD 847 (1 credit) | Critical Care and ICU CCMD 844 (2 credits) Electives CCMD 841 (2 credits) | Interviews | Interviews Electives CCMD 84 (2 credits | 5 1 | B R E A K | Rural Care CCMD 848 (4 credits) | Electives CCMD 841 (4 credits) | Electives CCMD 841 (4 credits) | Vacation | |

Total curriculum includes 160 weeks of instruction/self-directed learning and 174 credit hours

Curricular Threads: The curriculum committee defines a curricular thread as a relatively new content area (e.g., ultrasound) or content that has been identified as a curriculum weakness based on assessment data (e.g., internal examinations and NBME examinations). A thread director is assigned to each thread to ensure that the content is integrated both horizontally and vertically into the curriculum. The thread director's role requires "investigative" work. Using our online curriculum mapping tools, thread directors search the curriculum for learning opportunities that target thread content. Thread directors then contact course/clerkship/rotation directors directly by email or face-to-face meetings to discuss how to enhance existing or develop new opportunities to target students' skills and knowledge related to the thread. Thread directors also help document where and when students learn the thread content, which ascertains how our curriculum targets the thread and opportunities for future improvement. Course/clerkship/rotation directors often coordinate and consult with thread directors when developing new and innovative educational experiences.

Thread

Director (email)

Pathways to Care in Culturally Rich Appalachian Populations:

Students are expected to demonstrate respect and responsiveness to all patient populations. Students are also expected to identify prevention efforts and treatment barriers (e.g., low socioeconomic status and healthcare access) to improve the system and maximize quality healthcare for all individual patients and populations.

Health Informatics and Artificial Intelligence Applications TBD

Students are expected to grasp the transformative potential of health informatics and artificial intelligence (AI) applications within the healthcare system. Students must be able to interface with and contribute to electronic health records (EHRs) to enhance patient care by providing seamless access to patient history, reducing errors, and facilitating coordinated treatment plans. AI's role and application serves to assist the healthcare team to diagnose diseases through pattern recognition, conduct predictive analytics to anticipate patient outcomes, and personalize treatment plans based on vast datasets. Equally important, students must identify ethical considerations, data security, and patient privacy issues linked to these technologies. By integrating health informatics and AI into their education, medical students will be prepared to leverage these tools to enhance healthcare delivery and improve patient outcomes.

Isabela Negrin, MD (isabela.negrin@hsc.wvu.edu)

Health Literacy and Patient Advocacy:

Students are expected to demonstrate the ability to evaluate and mobilize resources, interpret extant and emerging policies, and identify forces in the healthcare system that influence disparities in health, access to healthcare and promotion of optimal healthcare. Students are also expected to communicate effectively and demonstrate caring and respectful behaviors with patients and families across a broad range of health literacy, socioeconomic and cultural backgrounds.

Nutrition:

Students are expected to identify the effects of nutrition, health behaviors, and preventive measures on health status and disease of individuals and populations.

Oral Health:

Students are expected to identify the effects of oral health and preventive measures on health status and disease of individuals and populations.

Pain Management and Addiction:

Students are expected to identify ethical considerations of an impaired physician who has an addiction. Students are taught how to recognize the signs of addiction and are given specific direction on available resources that can help. Students must also identify patients at risk of addiction and identify resources for appropriate treatment.

Safety Science:

Richard Brant, MD (rbrant@hsc.wvu.edu)

Students are expected to define the roles of healthcare professionals and demonstrate how interprofessional collaboration improves patient safety, patient-centered outcomes, and system performance. Students must also be able to recognize system limitations and failures, and identify ways to report patient safety concerns and potential solutions in a timely manner.

Laura Davisson, MD (<u>ldavisson@hsc.wvu.edu</u>)

Louise Veselicky, DDS (lveselicky@hsc.wvu.edu)

Allison Tadros, MD (atadros@hsc.wvu.edu)

Telemedicine:

Students are expected to know when and why to use of electronic communications technology to provide care at a distance, including patient portals, eConsults, video visits, and remote patient monitoring.

Ultrasound:

Jenna Sizemore, MD (jsizemore2@hsc.wvu.edu)

Dilip Chandran, MD (dilap.chandran1@hsc.wvu.edu)

Joe Minardi, MD (jminardi@hsc.wvu.edu)

Students are expected to select, perform and interpret appropriate diagnostic tests, ultra-sonographic imaging and standard imaging studies to formulate a complete and accurate differential diagnosis.

Curriculum Tracks:

A curriculum track (i.e., parallel curriculum): is a set of educational experiences and assessments for a subset of students that are based on specific objectives in addition to the medical education program objectives required of all students a part of the "core curriculum."

Tracks

Track Description and Online Site

Culinary and Lifestyle Medicine Track:

https://medicine.hsc.wvu.edu/culinary/

The goal of the Culinary and Lifestyle Medicine Track program is to increase the number of physicians who have an understanding, appreciation and skill development in nutrition, food science and preparation and lifestyle management issues to be able to education patients in ways to prevent certain chronic medical diseases. The CLM track is an interdisciplinary program with faculty and students from the School of Medicine and the Davis College of Agriculture, Natural Resources Division of Animal and Nutritional Sciences.

Global Health Track:

The goal of the Global Health Track is to provide additional training and experience in global health to WVU students throughout their four years of medical school and to attract excellent students to WVU School of Medicine who have a special interest in global health.

Rural Track

https://medicine.hsc.wvu.edu/rural/

The goal of the Rural Track program is to increase the number of primary care physicians who enter and remain in practice in rural West Virginia.

Accelerated Program: An accelerated MD program is a medical school program that allows students to earn their MD degree in less time than the traditional four year curriculum.

Mountaineer Accelerated Track to Enter Residency (MATTER):

The purpose of the Mountaineer Accelerated Track to Enter Residency (MATTER) is to present an accelerated pathway toward residency for medical students who have committed to a core specialty at West Virginia University School of Medicine.

https://medicine.hsc.wvu.edu/md-admissions/programs/mountaineer-acceleratedtrack-to-enter-residency/