Renovation of BSEB. The Basic Sciences Education Building was first opened in late 1969, and provided up-to-date, modern educational facilities and laboratories. Over 6,000 medical students have passed through its portals in the intervening years and the BSEB has served the College of Medicine well. But educational needs and methods change – more small group discussion sessions and student-centered interactive sessions, significantly fewer hands-on laboratory sessions, a revolution in technology since the opening of the building, greater awareness of the impact of the educational environment on students, and a need to expand the capacity of the facilities. In 2004-05, I set a goal for complete renovation of the BSEB to meet our changing needs and the needs of our students. A task force composed of students, faculty, and administration was charged to examine the facility and develop a series of options. Architectural renderings passed through several iterations as faculty and students began to see their concepts turned into design sketches. By summer 2007, architectural plans were complete and we identified how the renovation would be funded. The demolition phase began in mid-December 2007 – the first and second floors were literally gutted to make way for the changes. Construction began in January 2008 as students were displaced to temporary modules and facilities set up in the Nicholson Tower through an agreement between the College of Medicine and the University Hospitals Authority & Trust.

When second year students returned and new first year students arrived this August, they were greeted by what can only be described as a dramatic renovation of the Basic Sciences Education Building. There is a much warmer and inviting environment which has been opened up by the design and accented by wood flooring. A beautiful new wood paneled student lounge is located on the second floor. Student modules are now located on the inner courtyard where natural light flows in; students have individual locked cabinets for their personal belongings; a sink, refrigerator and microwave are provided as amenities, and ample study space is available with ergonomically designed chairs in contrast to the dilapidated swivel chairs previously used. There are now 10 modules which can accommodate up to 20 students on each floor, allowing for expansion of class size. Near each module is a separate group discussion room that can be arranged in various configurations allowing for much more effective small group discussions between students and faculty. Two new smaller lecture rooms have been added to accommodate additional educational needs. The facility is equipped throughout with many LCD flat screen monitors that are used for educational purposes, and annunciator screens are located in hallways on both floors detailing class schedules, interest group meetings, and a variety of other information of

Dean's Message continued on page 2
New Dean for Student Affairs

Phebe Tucker, M.D., Professor of Psychiatry and Behavioral Sciences, has been appointed the new Associate Dean for Student Affairs in the College of Medicine. The Office of Student Affairs provides central guidance and direction of student services. Dr. Tucker has nearly twenty years experience in academia and has been a highly valued member of the faculty since 1989. She previously served as course director for the first and second year Human Behavior courses and as director of the third year psychiatry clerkship at the Oklahoma City campus. Active in community outreach, Dr. Tucker served as liaison between our faculty and community psychiatrists in meeting the continued mental health needs of disaster victims of the 1995 bombing of the Oklahoma City federal building. We welcome Dr. Tucker to this new role.

New Dean for Medical Education

In July, Chris Candler, M.D. rejoined the College of Medicine as Associate Professor of Medicine and Associate Dean for Medical Education. Dr. Candler was a member of our faculty from 1997 to 2004 and was responsible for developing the College of Medicine’s Office of Educational Development and Support (OEDS). He left the College to join the Association of American Medical Colleges as the Editor-in-Chief of MedEdPORTAL. In his work with the AAMC, he was responsible for assisting with educational endeavors at medical schools across the country. One of Dr. Candler’s main priorities is to work with faculty to plan and develop Curriculum 2010, the new systems-based curriculum. We welcome Dr. Candler back to the College.

Dean’s Message continued from page 1

use to students and visitors. Wi-Fi access is available throughout the building. Students and faculty are enthusiastic about the changes and the new environment, and I am extremely proud of what we have been able to accomplish. Now, our basic educational facilities are modern, well-equipped, technologically sophisticated, inviting, and comparable to the best in other medical schools.

I wish to express deep appreciation to some of the key individuals involved in bringing this important project to successful completion: Senior Associate Dean Dr. Robert Roswell, former Associate Dean for Student Affairs Dr. James Schmidt, former Associate Dean for Academic Affairs Dr. Nancy Hall, Associate Dean for Administration & Finance Anne Barnes, Dr. Sheila Crow and her staff in the Office of Educational Development and Support especially Pam Lawson, Studio Architecture, and Lippert Brothers Construction. Well done!

Curriculum 2010 and Academic Affairs. Beginning in the spring of 2007, the College of Medicine faculty began an in depth review of the medical school curriculum to assess what changes were needed and how the curriculum should be structured going forward. This involved approximately 135 faculty and students from both the Oklahoma City campus and the Tulsa campus. Led by Dr. Nancy Hall, this effort has become known as Curriculum 2010, reflecting the plan to introduce the significant changes envisioned beginning in the fall of 2010.

Extensive discussion among course directors and students led to a desire to transform the first two years of the curriculum into an organ-system approach rather than continuing the traditional discipline-based approach. This will allow sequential courses rather than parallel courses, reducing competition for attention, study and examination effort. Extensive redesign of the basic sciences portions of the curriculum is underway with major attention to integration of disciplines. The process has generated enthusiasm as well as some anxiety (to be expected whenever change is introduced) among faculty and students. The clinical continuum (third and fourth years) is also being reexamined for areas where improvements can be made and better integration can occur. The Neurology clerkship is being expanded to four weeks instead of the current two weeks (over 75 percent of U.S. medical schools require 4 weeks of neurology). The Curriculum Coordinating Committee is taking a much greater role in overseeing the interface between the basic sciences and the clinical sciences, which is appropriate and in line with current LCME standards. With Dr. Hall’s recent retirement, the Curriculum 2010 organizational effort will now be led by Chris Candler, M.D., Associate Dean for Medical Education. Dr. Candler returned to the College is July of this year to take this important position, after spending four years working with the Association of American Medical Colleges on a range of educational initiatives. To all of the faculty who are spending time on this essential project to address keeping our curriculum contemporary and designed for the best possible educational outcomes for our students, I offer my sincere gratitude and that of the entire College for your time, energy, creativity and dedication.

M. Dewayne Andrews, M.D.
Vice President for Health Affairs
Executive Dean, College of Medicine
USMLE, or United States Medical Licensing Exam, is a recurring series of assessments facing medical students and early residents as they move toward licensure as a physician. Exam steps begin by assessing basic science knowledge relevant to the practice of medicine (Step 1), and progress to evaluating students’ growing clinical assessment and management skills.

Step 1, a computer-based exam taken at the end of the second year of medical school, must be passed for students to begin clinical clerkships in the third year at OUCOM. Students have up to 3 attempts to pass Step 1 at OU. Preliminary results for the Class of 2009 (both campuses) are approximately 90.5% pass rate for first-time test-takers, with no national comparisons yet available. For students taking Step 1 for the first time in 2007, 92% passed, compared with 94% in U.S. and Canadian medical schools. On second attempt, 82% of our students who failed subsequently passed.

Steps 2CK (Clinical Knowledge) and 2CS (Clinical Skills) are generally taken during the fourth year. Although passing Step 2CK and 2CS is not required for graduation from medical school in Oklahoma, passing scores are required for residents to have a temporary license in Oklahoma. Therefore, for a resident to begin working, they must pass Steps 1, 2CK and 2CS.

For the last academic year 2007-2008, 95% of University of Oklahoma medical students in Oklahoma City passed the computer-based Step 2CK, compared with 96% nationally. Of those on our campus who repeated, 100% passed on the second attempt. Our students’ mean score was 228, compared with 226 nationally.

Step 2CS differs from other steps in that students interview and examine standardized patients, writing focused notes to summarize their findings. Students are assessed on how well they perform on integrated clinical encounters, on their communication and interpersonal skills, and on their spoken English proficiency. For the latest reports available for students taking Step 2CS for the first time from July 2006 to June 2007, 96% of our students passed compared with 97% nationally. Our students’ passing rates for the components were 96% for the Integrated Clinical Encounter, 100% for Communication & Interpersonal Skills, and 100% for Spoken English Proficiency. For OU students repeating, 75% passed on second attempt.

Step 3 is taken during the internship year, and successful completion is required for a medical license in the United States. The latest summaries available for first-time Step 3 takers from May 2005 to December 2007 showed 95% of our students passing on first attempt, compared with 97% nationally. On repeat testing, 80% of our students passed.

All in all, almost all OU students pass USMLE and become licensed physicians. Many tools are available to assist students in preparing for USMLE. Students having questions about these teaching aids may contact Phebe Tucker, M.D. or Chris Candler, M.D., at 271-2316, or the Office of Educational Development and Support (OEDS). Most clerkships in the College of Medicine in Oklahoma City and Tulsa are conducting OSCEs (Objective Structured Clinical Examinations) to help prepare students for USMLE. Importantly, a series of OSCEs are held at the end of the third year, with feedback and guidance provided by Rhonda Sparks, M.D., Director of the Clinical Skills Education and Testing Center, and Sheila Crow, Ph.D., Director of OEDS.

<table>
<thead>
<tr>
<th>Exam Year</th>
<th>OU Pass Rate</th>
<th>National Pass Rate</th>
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<tbody>
<tr>
<td>2008 (n=156)</td>
<td>90.45% (prelim.)</td>
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<tr>
<td>2007 (n=146)</td>
<td>92%</td>
<td>94%</td>
</tr>
<tr>
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<tr>
<td>2003 (n=145)</td>
<td>88%</td>
<td>92%</td>
</tr>
<tr>
<td>2002 (n=145)</td>
<td>88%</td>
<td>91%</td>
</tr>
</tbody>
</table>

USMLE Step 1 Results (First Time Takers): A Seven-Year Comparison

The College of Medicine Admissions has experienced a transition in leadership. Dr. Nancy K. Hall has retired after 30 years of dedicated service to the university. Her role in admissions will be filled by Dr. Sherri Baker, Assistant Dean of Admissions. Dr. Frank Wilson, III, has also stepped aside after many years of service as the Chairman of the Admissions Board. Dr. Ron Squires has been appointed the new Chairman.

The Office of Admissions has begun the application cycle for 2008-2009. We currently have over 1,200 initial applications filed with AMCAS with an application deadline of October 15th and a complete file deadline of November 1st. We will begin interviewing applicants in October and continue with interviews through February. Our final Admissions Board meeting is scheduled for February 22, 2009.
Office of Graduate Medical Education Implements Fully Integrated Residency Management System

There is a new way of doing program management for residency programs on the Oklahoma City campus. Beginning April 2008, the Office of GME partnered with MedHub, a national leader in residency data management systems, to provide an integrated system for managing key components of residency training. This new management system fully integrates several essential components that previously required significant effort on the part of program directors, program coordinators, and residency staff.

The MedHub system provides a web based database tool that improves communication and collaboration between programs, the Office of GME, and partner institutions. It does so by bringing a common system for creating master rotation schedules, monitoring duty hours, performing evaluations, logging procedures and cases, creating resident learning portfolios, and creating reports that aid both programs and institution in self assessment and reporting to oversight bodies. The system provides rules, flags, error checks and algorithms built in to ensure a streamlined workflow process and to maintain the integrity of the data from the resident to the hospital. By integrating these functions, many redundancies have been eliminated. Each entity that uses MedHub has a customized web interface that provides information pertinent to their needs and allows the user access to the tools they need to do their job.

One example of improved efficiency is in the area of evaluation. In the past, residency coordinators were required to distribute multiple forms to multiple residents, faculty, and other evaluators, remind them of deadlines, collect information, collate that information, and attempt to synthesize data into meaningful reports. With MedHub, evaluations are tied to schedules and either e-mailed or sent to the resident’s or faculty’s home webpage. If not completed in a specified period, reminders are automatically sent. Once completed, the data is collated in an anonymous fashion and reports provided to relevant individuals. Residents get feedback on their performance, faculty get feedback on their performance, and the program director get synthesized feedback on individuals and the program without spending hours collating and analyzing information.

At the institutional level, the Office of GME now has a way of overseeing critical functions at any time, in any program, and generating necessary reports without having to add work to busy program staff. Best of all, we have found that the system is very customizable, intuitive, and user friendly. Overall the transition has gone very well and feedback from programs has so far been excellent. In today’s world, systems that actually integrate work and make life easier are welcome, but rare. We truly say that MedHub has been one of those rare finds.

Teaching and Learning Workshops
College of Medicine Faculty Lunchtime Series 2008-2009

Blended / Hybrid Courses
Kent Johnson, Ph.D. - Thursday, October 9, 2008
BSEB 2nd Floor Conference Room

One Minute Preceptor
Sheila M. Crow, Ph.D. - Tuesday, November 11, 2008
BSEB 2nd Floor Conference Room

Constructing the Learning-Centered Syllabus
Sheila M. Crow, Ph.D. - Tuesday, January 20, 2009
BSEB 2nd Floor Conference Room

Small Group Facilitation Skills
Kent Johnson, Ph.D. - Thursday, February 26, 2009
BSEB 2nd Floor Conference Room

Socratic Teaching
Jerry B. Vannatta, M.D. - Tuesday, April 21, 2009
BSEB 2nd Floor Conference Room

Documentation of Teaching
Valerie Williams, Ph.D. - Tuesday, June 2, 2009
BSEB 2nd Floor Conference Room

All presentations are from 12:00 - 1:15 p.m.

The workshops are designed for medical educators. Some reading and preparation may be required in advance of each workshop. Enrollment is limited.

For more information, go to: https://hippocrates.ouhsc.edu/curric/faculty/workshops

To sign up for a workshop, call 271-9333 or email sheila-crow@ouhsc.edu

Jointly sponsored by the Office of Educational Development & Support, the College of Medicine Office of Faculty Affairs, and the OUHSC Faculty Development & Interdisciplinary Programs

Medical Education News

a publication of the Office of Educational Development and Support

OU College of Medicine

The Office of Educational Development and Support provides faculty support for curriculum development and promotes best evidence medical education to ensure that the College of Medicine remains on the forefront of medical education.

The mission of the Office is to enhance the medical education program within the College of Medicine through effective curriculum development, educational support services, educational research, and the facilitation of teaching activities.