

MSPE Appendix: Medical School Information

Official Name/Location of the Medical School

The **Joe R. and Teresa Lozano Long School of Medicine**, formally known as The University of Texas School of Medicine (SOM) at San Antonio, is located in the South Texas Medical Center in San Antonio, Texas.

Medical Education Program

The **CIRCLE** (Curricular Integration: Researchers, Clinicians, Leaders, Educators) curriculum was a sweeping curricular reform implemented in July 2012 and represents the integrated four-year medical education program that:

- completely links course/clerkship objectives and student academic performance to measurable “Objectives and Competencies of the Medical Education Program” that are based on broad domains of medical knowledge, clinical skills, and professionalism;
- integrates the preclinical curriculum in an organ-system fashion;
- emphasizes acquisition of formal knowledge and clinical skills in a systematic and incremental manner that emphasizes thematic relationships over rote memorization;
- enhances critical thinking and self-directed learning skills;
- introduces clinical experiences very early in the medical education program; and
- mandates central oversight of the entire medical education program.



The minimum credit hours are 174.65 hours, which most students complete within a four-year period.

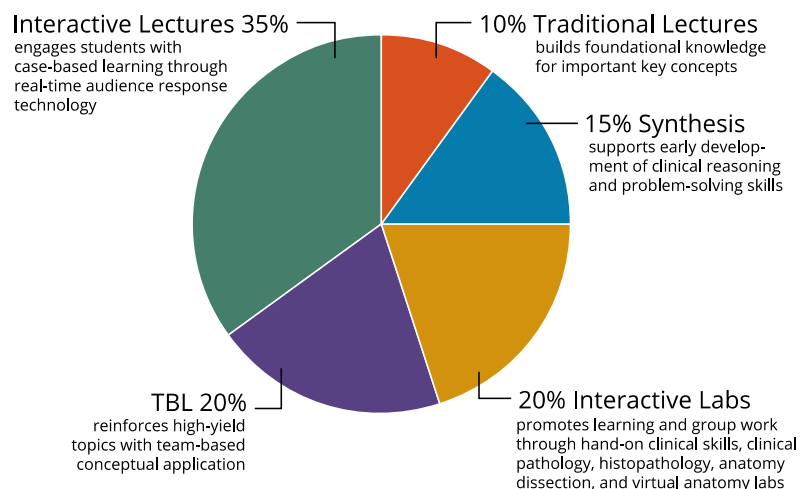
Preclinical Curriculum

The preclinical curriculum is taught in ten sequential learning modules and three longitudinal modules, beginning in July of the first academic year and ending in February of the second academic year.

Preclinical Learning Activities

Preclinical learning modules consist of weekly thematic content taught in a case-based format through diverse educational activities. Weekly learning activities consist of: traditional lectures; interactive lectures; interactive labs (clinical skills, clinical pathology, histopathology, anatomy dissection, and virtual anatomy labs); team-based learning sessions; synthesis sessions.

Traditional Lectures (10%): A minimal amount of traditional lectures deliver important background for key topics presented in the modules, and they provide foundational and conceptual knowledge that complements other educational activities within the modules.



Interactive Lectures (35%): Interactive lectures are designed to engage students in thoughtful discourse through integration of case-based learning and real-time question/audience response technology platform.

Interactive Labs (20%): Interactive labs include clinical skills, clinical pathology, histopathology, anatomy dissection, and virtual anatomy lab sessions in a small-group format with faculty facilitation.

Team-Based Learning (TBL) Sessions (20%): TBL sessions utilize the three-step cycle of pre-class preparation, in-class readiness assurance testing, and application exercises to reinforce high-yield topics and concepts.

Synthesis Small-Group Sessions (15%): The Synthesis Case Curriculum provides clinical application of weekly module content, enhances vertical and horizontal integration of curricular material, fosters early development of clinical reasoning and clinical problem-solving skills, and serves as a platform to assess altruism competencies and communication skills.

Longitudinal Preclinical Modules

The three longitudinal modules include Language of Medicine which is mostly taught in the first semester, in addition to Clinical Skills and Medicine, Behavior, and Society which occur in parallel with the sequential learning modules over a 19-month period.

Language of Medicine (LOM)

The LOM module serves as the common denominator of knowledge necessary for students to discuss systemic anatomy in the integrated modules that follow. Basic anatomical structure, conceptual anatomical principles, and development of the human body are learned with a strong emphasis on supervised laboratory cadaver dissection, reinforced by integrated clinical relevance and applied radiographic imaging. Regions of the body addressed in LOM include: head and neck, thorax, abdomen, pelvis, and perineum. Extremities are integrated into the Musculoskeletal/Dermatology module during the chronological second year of medical school. Professionalism, ethical considerations of dissection, and the importance of communication and teamwork are additionally emphasized in this module. LOM is taught through foundational lectures, small group instruction, peer teaching, prosection, dissection, clinical application demonstrations by specialists, and digital anatomic software. Assessment methods include multiple choice examinations, laboratory practical examinations, dissection, teaching observation, and online tutorials. The topics addressed in the LOM module are coordinated with the physical examination skills that students learn in the Clinical Skills module.

Medicine, Behavior and Society (MBS)

The MBS module is a six-week course taught in one-week blocks throughout the preclinical curriculum. Major course themes include: professionalism; religion and spirituality; physical and mental health; resiliency and self-care; cultural competence; motor, language, cognitive, social, and emotional development; moral development; development across the life span; aging and death; human sexuality; healthcare systems, access, and disparities; and research ethics.

Clinical Skills (CS)

In the CS module, students begin to see patients early in the first semester of medical school, and students learn to perform a complete history and physical examination by the end of the first semester of medical school. Beginning in second semester of medical school with the organ-system modules, history-taking and advanced physical examination skills are vertically integrated with classic pathophysiology learned during weekly sessions, and students practice generating differential diagnoses for etiologies of common clinical presentations. Students also meet one-on-one with their longitudinal preceptors on a regular basis throughout the preclinical medical education program, allowing them to progress from shadowing to interviewing and examining patients under the direct supervision of their preceptors. The CS module threads coursework throughout the entire preclinical curriculum. Using standardized and real patients, students learn medical history taking and physical examination techniques. In addition, through didactic sessions, simulations, small-group sessions and labs, students master

medical and clinical knowledge, professional skills, and communication and interpersonal skills necessary for fostering positive doctor-patient relationships.

Sequential Preclinical Modules

The first semester begins with two foundational modules followed by eight sequential organ-system modules throughout the preclinical curriculum. The organ-system modules integrate anatomy, physiology, pathophysiology, pathology, histology, and clinical skills instruction for a comprehensive, cohesive curriculum.

Preclinical Curriculum Grading System

The SOM uses a letter grading system for all preclinical modules. Grade composition across all preclinical modules adheres to common guidelines and principles. Letter grades in all preclinical modules are designed to ensure competency in key domains of medical knowledge/clinical skills, teamwork, and accountability. A final letter grade in a module is based on student performance in each of these key domains independent of one another. In order to pass a module, students must pass every component. In order to receive an A grade in a module, students must demonstrate excellence/perform A level work in every component. Students receive B or C grades when they pass all components but do not meet A level benchmarks in any one component. Such students are assigned B or C grades based on total points generated in a module.

Foundational Modules

<i>Molecules to Medicine</i>	<i>9 weeks</i>
<i>Attack and Defense</i>	<i>9 weeks</i>

Organ-System Modules

<i>Hematology</i>	<i>3 weeks</i>
<i>Respiratory Health</i>	<i>4 weeks</i>
<i>Circulation</i>	<i>5 weeks</i>
<i>Renal and Male Reproductive</i>	<i>5 weeks</i>
<i>Mind, Brain, and Behavior</i>	<i>9 weeks</i>
<i>Endocrine and Female Reproductive</i>	<i>7 weeks</i>
<i>Digestive Health and Nutrition</i>	<i>7 weeks</i>
<i>Musculoskeletal and Dermatology</i>	<i>7.5 weeks</i>

Clinical Curriculum

The clinical curriculum begins in March of the second academic year and ends at graduation. The clinical curriculum allows flexibility in schedules for students to customize educational plans that suit their long-term career goals. A longitudinal “Team Care” educational experience threads curricular themes that are common across all clerkships. Monthly Team Care curriculum include topics such as: quality improvement and patient safety, physician wellness, transitions of care, social determinants of health, patient-centered care, and the socioeconomics of medicine. The entire clinical curriculum includes 48 weeks of clerkships, eight weeks of “selectives” (four weeks of inpatient sub-internship and four weeks of ambulatory care which focuses on systems of practice), 20 weeks of “electives”, and four weeks of didactics which prepare students for their internships.

Clinical Curriculum Grading System

The SOM uses a letter grading system for all clerkships except for the Emergency Medicine Clerkship. The SOM uses a pass/fail grading system for all other courses in the clinical curriculum. The Emergency Medicine Clerkship was a new clerkship for academic year 2014-2015 and relied on the NBME Advanced Emergency Medicine Subject Test as its end-of-clerkship examination. For this reason, the SOM Curriculum Committee approved a pass/fail grading system for the Emergency Medicine Clerkship until further analysis determines the impact of scores from this advanced examination on the final grade. In all clerkships, the same assessment tool is used at the end of rotations to convey student performance in the broad domains of medical knowledge, clinical skills, and professionalism. The domains on this assessment tool contribute to the final grade in fairly similar proportions across all clerkships. In order to receive an A grade in a clerkship, students must achieve a final grade score of $\geq 90/100$ points, AND ≥ 50 th percentile compared to national scores on the NBME subject test, AND a final average of ≥ 3.0 (80%) on the standardized evaluations, AND passing standards in the altruism/professionalism domain on the standardized evaluations. Students can fail a clerkship based on poor academic/clinical performance, on poor NBME subject test performance (below 5th percentile compared to national scores), or on lapses in professionalism.

Curriculum Overview

MS-1												
MBS	Molecules to Medicine		MBS	Attack and Defense			Hematology	MBS	Respiratory Health		Circulation	Renal and Male Reproductive
Clinical Skills												
Language of Medicine												

MS-2														
MBS	Mind, Brain, and Behavior		MBS	Endocrine and Female Reproductive		Digestive Health and Nutrition		MBS	Musculoskeletal and Dermatology		Elective*	Elective*	Elective*	Elective*
Clinical Skills														
Language of Medicine														

MS-3													
Medicine **		Surgery**		Emergency Medicine**	Neurology**			Family Medicine**		Obstetrics and Gynecology**	Pediatrics**		Psychiatry**
Team Care Longitudinal Curriculum													

MS-4												
Inpatient Selective***	Ambulatory Selective***	Elective*	Elective*	Elective*	Elective*		Elective*	Elective*	Didactics	Elective*		
Longitudinal Elective*												

- Preclinical Foundational Modules
- Preclinical Organ-System Modules
- Preclinical Longitudinal Modules
- Clinical Clerkships
- Clinical Team Care Longitudinal Curriculum
- Clinical Foundational Coursework
- Elective

*Students must complete a total of five four-week elective blocks (clinical or research) during the clinical curriculum, in addition to four weeks of mandatory fourth-year didactics

**Clinical clerkships may be taken in any order beginning in March of the second academic year and must be completed by the end of the third academic year

***Clinical selectives (four weeks of inpatient sub-internship, four weeks of ambulatory care) may be completed at any time during the fourth academic year

Examination Requirements

Objective Structured Clinical Examination (OSCE) Requirements

Students participate in two mandatory, summative OSCEs during the CS longitudinal module; however, students do not have to pass these OSCEs to pass the module. Students participate in mandatory but formative OSCEs in the Surgery, Medicine, and Family Medicine Clerkships. Students participate in a mandatory but formative internal clinical skills examination at the end of the clerkships in preparation for the USMLE Step 2 CS.

United States Medical Licensing Examination (USMLE) Requirements

Students must pass the USMLE Step 1, USMLE Step 2 CK, and USMLE Step 2 CS in order to graduate from this medical school. The preclinical curriculum ends with the expectation that students achieve a targeted passing score on the NBME Comprehensive Basic Science Examination (CBSE) before they progress to the clinical curriculum. Students who have three failures of the USMLE Step 1, USMLE Step 2 CK, or USMLE Step 2 CS meet criteria for dismissal from this medical school.

Medical School Performance Evaluation

Grade Point Average (GPA) Calculations

A GPA is calculated at two points in the medical education program—one at the completion of the preclinical modules and the other at the completion of the clerkships. Of note, the grading system in the new medical education program also attempts to minimize grade inflation that was problematic in the previous medical school curriculum. There are significantly fewer students who receive A grades, especially in the preclinical modules, as compared to previous academic years. Only students who achieve excellence in all broad domains of medical knowledge, clinical skills, and professionalism receive A grades in the new medical education program.

Recommendation Tiers

Recommendation tiers are calculated based on each student's preclinical GPA (40%), clinical GPA (40%), and EPA performance (20%), resulting in a comprehensive assessment based on comparable metrics spanning across the entire medical education program. Recommendation tiers do not take into account extracurricular involvement, volunteer work, professional experience, honors, or recognitions.

Academic Transcripts

The medical school and the registrar's office are in compliance with the AAMC's "Guidelines for Medical Schools Regarding Academic Transcripts."

Medical Student Performance Evaluation (MSPE) Composition

One dean in the Office of Undergraduate Medical Education meets individually with each fourth-year medical student to make certain his/her academic performance matches the specialty career path. This dean and one program coordinator prepare the MSPEs for the entire class so there is consistency in the preparation and presentation of the MSPEs. In general, the narrative comments from the clerkships are edited for grammar, but not for content. Students are permitted to review their MSPEs prior to submission to ERAS on October 1 and may request revisions for content accuracy and grammar.