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Preface

The Office of Curriculum is pleased to provide this manual to assist course directors in the development and implementation of curricula for the M.D. degree program at JHUSOM. 

Section I outlines the offices and personnel available to support the curriculum and course directors. 

Section II outlines expected standards and policies for the curriculum as determined by the JHUSOM Educational Policy and Curriculum Committee, as well as our system of continuous quality improvement. 

It is our hope that bringing the policies and resources into one document will facilitate the success and quality of the Genes to Society Curriculum. 

Please feel free to send suggestions to us at officeofcurriculum@jhmi.edu.

Highlights ~ New Items or Changes

Paperless Initiative

This is the last year that handouts will be printed for Year 2 GTS, and no handouts will be printed for Year 1. Year 2 leaders should encourage students NOT to opt in for printing. Harry Goldberg has produced tutorials for the many free programs that facilitate note taking on PDFs (http://oac.med.jhmi.edu/ittutorial). Faculty must submit handouts at least one week in advance and NOT CHANGE them after submission. Handouts will be posted on BB and on a SOM DropBox folder that students can access but not modify. Notify the coordinator if there are specific handouts that require paper copies (E.G. worksheets that the students will need to write on).
Electronic lectures

The Pedagogy Working Group has produced a short how-to document to encourage best practices for electronic lectures (See Appendix)

Assignment Deadlines

We will post due dates on Oasis to provide a uniform place for students to check deadlines and assignment due dates. These will be posted by Sherrie or Terri, but make them aware of any such due dates (besides exams) for assignments in your section.

Small group narrative feedback

One of our LCME citations addresses the lack of narrative feedback in the preclinical courses. In GTS students will be provided with narrative feedback whenever a small group leader meets a sufficient number of times to make individualized observations on most of the students. This will be provided through an E*value form that each small group leader must complete on all students in their group within one week of course completion. These focus on communication and professionalism, including whether they were prepared for the session. We will notify you if your section will need to do this but you will need to make sure your small group leaders are aware and comply.

Exams

Students who show up late for exams disturb the students who have started, and may require repeating any special instructions that the rest of the class received. This became egregious last year, with some students arriving hours late. Therefore, any student who arrives more than 15 minutes late for an exam will need to take a makeup exam and will receive an incomplete. Report these students to the Office of Curriculum (N. Hueppchen or H. Fessler).

Year 1 and 2, and TIME Course program evaluations

Rather than requesting optional evaluations for 2% extra credit, which mostly the near-failing and strongly opinionated students complete, we will now require evaluations from a rotating sample of 25% of the class. Other students will always have the option of submitting an evaluation if they choose. This will reduce the overall burden of surveys and produce more representative opinions. There will be no extra credit for completing the evaluation.

Early warning system

We are putting in place a tripartite early warning system to alert us to students that are having difficulty with academics, teamwork, or professionalism. The elements include:

1. A spreadsheet compiling all course section grades on all students over the first 2 years, with a dashboard indicating when there have been multiple near-failures.
2. The narrative feedback from small groups described above.
3. A spreadsheet of missed deadlines and assignment due dates. This is covered by a new accountability policy, attached.

Early warning flags will lead to notification of a student’s College Advisor, who can meet and determine the source of the problem and work toward a solution. The source may vary widely with any individual students strengths, weaknesses, and immediate social circumstances. The emphasis is on helping the student, not punishing them.
The mission of the Johns Hopkins School of Medicine is to prepare physicians to practice compassionate clinical medicine of the highest standard and to identify and solve fundamental questions in the mechanisms, prevention and treatment of disease, in health care delivery and in the basic sciences.

The aim of the pre doctoral curriculum of the School of Medicine is to produce leaders in Medicine who will take the foundation of a broad education in Medicine to improve health through patient care, research, and education. As a measure of their competence, every graduate of the Johns Hopkins University School of Medicine will:

The Science and Practice of Medicine
- Apply scientific principles and a multidisciplinary body of scientific knowledge to the diagnosis, management, and prevention of clinical problems.
- Understand the variation in the expression of health and disease through critical evaluation of biomedical research.

Clinical Competence
- Obtain a sufficient level of medical knowledge to understand the basic facts, concepts, and principles essential to competent medical practice.
- Exhibit the highest level of effective and efficient performance in data gathering, organization, interpretation and clinical decision-making in the prevention, diagnosis, and management of disease.

The Social Context of Medicine
- Understand and respond to factors that influence the social, behavioral, and economical factors in health, disease and medical care.

Communication
- Demonstrate effective and compassionate interpersonal communication skill toward patients and families necessary to form and sustain effective medical care.
- Present information and ideas in an organized and clear manner to educate or inform patients, families, colleagues and community.

Professionalism
- Display the personal attributes of compassion, honesty and integrity in relationship with patients, families, and the medical community.
- Adhere to the highest ethical standards of judgment and conduct as it applies to the health care milieu.
- Demonstrate a critical self-appraisal in his/her knowledge and practice of medicine, as well as receive and give constructive appraisal to/from patients, families, colleagues and other healthcare professionals.

Lifelong Learning
- Understand the limits of personal knowledge and experience and will demonstrate the intellectual curiosity to actively pursue the acquisition of new knowledge and skills necessary to refine and improve his/her medical practice or to contribute to the scientific body of medical knowledge.

The SOM Educational Program Objectives are mapped to the eight AAMC Competencies for Physicians: Patient Care (PC), Medical Knowledge (MK), Interpersonal and Communication Skills (ICS), Professionalism (P), Practice-Based Learning and Improvement (PBLI), Interprofessional Collaboration (IPC), and Personal and Professional Development (PPD).
Directory of Curricular Support Personnel

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Email</th>
<th>Voicemail</th>
<th>(curricular responsibilities)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ziegelstein, Roy</td>
<td>Vice Dean for Education</td>
<td><a href="mailto:rziegel@jhmi.edu">rziegel@jhmi.edu</a></td>
<td>410-955-8401</td>
<td>Chairs EPCC</td>
</tr>
<tr>
<td>Joyce Hoebing</td>
<td>Administrator for the Office of Education</td>
<td><a href="mailto:jhoebin1@jhmi.edu">jhoebin1@jhmi.edu</a></td>
<td>443-287-7120</td>
<td>Administrator for the Vice Dean; coordinates budgets for the curriculum</td>
</tr>
<tr>
<td>Foy, Mary</td>
<td>Associate Dean Registrar</td>
<td><a href="mailto:mfoy@jhmi.edu">mfoy@jhmi.edu</a></td>
<td>410-955-3080</td>
<td>Student enrollment and credentialing; maintenance of student records</td>
</tr>
<tr>
<td>Koenig, Thomas</td>
<td>Associate Dean Student Affairs</td>
<td><a href="mailto:tkoenig2@jhmi.edu">tkoenig2@jhmi.edu</a></td>
<td>410-955-3416</td>
<td>Student Affairs</td>
</tr>
<tr>
<td>Lipsett, Pamela</td>
<td>Chair, SAPE Committee</td>
<td><a href="mailto:plipsett@jhmi.edu">plipsett@jhmi.edu</a></td>
<td>410-955-3739</td>
<td>Internal review of courses q. 2 years</td>
</tr>
<tr>
<td>Hunt, Elizabeth</td>
<td>Director, Simulation Center</td>
<td><a href="mailto:ehunt@jhmi.edu">ehunt@jhmi.edu</a></td>
<td>410-614-0847</td>
<td>Simulation Center</td>
</tr>
<tr>
<td>Jung, Jules</td>
<td>Associate Director Simulation Center</td>
<td><a href="mailto:jjung@jhmi.edu">jjung@jhmi.edu</a></td>
<td></td>
<td>Liaison for Medical Student curricular activities in the Simulation Center</td>
</tr>
<tr>
<td>Goode, Victoria</td>
<td>Welch Library Liaison for SOM</td>
<td><a href="mailto:vgoode1@jhmi.edu">vgoode1@jhmi.edu</a></td>
<td>410-502-7574</td>
<td>Library support for course work; information training</td>
</tr>
</tbody>
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Office of Curriculum Staff:

<table>
<thead>
<tr>
<th>Name</th>
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<tr>
<td>Hueppchen, Nancy</td>
<td>Associate Dean for Undergraduate Medical Education</td>
<td><a href="mailto:nhueppc1@jhmi.edu">nhueppc1@jhmi.edu</a></td>
<td>410-502-6105</td>
<td>Oversight of the medical student experience, content coordination and workload, LCME standards</td>
</tr>
<tr>
<td>Fessler, Henry</td>
<td>Assistant Dean for Undergraduate Medical Education</td>
<td><a href="mailto:hfessler@jhmi.eud">hfessler@jhmi.eud</a></td>
<td></td>
<td>Implementation, monitor content, coordination and workload, LCME standards, special projects</td>
</tr>
<tr>
<td>Kulo, Violet</td>
<td>Instructional Design</td>
<td><a href="mailto:vkulo1@jhmi.edu">vkulo1@jhmi.edu</a></td>
<td>410-614-3746</td>
<td>Educational technology, course evaluation reports, Implementation of online testing</td>
</tr>
<tr>
<td>Hennel, Terri</td>
<td>Sr. Program Administrator</td>
<td><a href="mailto:thennel1@jhmi.edu">thennel1@jhmi.edu</a></td>
<td>410-614-3684</td>
<td>OOC coordination, Year 2 coordinator</td>
</tr>
<tr>
<td>Fornoff, Sherrie</td>
<td>Administrator</td>
<td><a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></td>
<td>410-502-6075</td>
<td>OASIS support; Year 1 and TIME coordinator</td>
</tr>
<tr>
<td>Hellman, Joseph</td>
<td>Administrative Coordinator</td>
<td><a href="mailto:Jhellma3@jhmi.edu">Jhellma3@jhmi.edu</a></td>
<td>410-614-0986</td>
<td>Assistant to Dr. Hueppchen, Dr. Fessler and the OOC</td>
</tr>
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Office of Assessment and Evaluation:

<table>
<thead>
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<tbody>
<tr>
<td>Shatzer, John</td>
<td>Interim Director, Office of Assessment and Evaluation</td>
<td><a href="mailto:jshatzer@jhmi.edu">jshatzer@jhmi.edu</a></td>
<td>410-955-5289</td>
<td>Provide analysis of test construction and performance, item formatting, test reliability and measurement strategies</td>
</tr>
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### Office of Information Technology Staff:

<table>
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<tr>
<th>Name</th>
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<th>Responsibilities</th>
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<tbody>
<tr>
<td>Spencer, Lorraine</td>
<td>Director, OIT</td>
<td><a href="mailto:lspencer@jhmi.edu">lspencer@jhmi.edu</a></td>
<td>410-955-7932</td>
<td>Management and creation of databases and applications</td>
</tr>
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### Office of Academic Computing Staff:

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
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<th>Responsibilities</th>
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<tbody>
<tr>
<td>Goldberg, Harry</td>
<td>Director, Office of Academic Computing</td>
<td><a href="mailto:goldberg@jhmi.edu">goldberg@jhmi.edu</a></td>
<td>C:410-935-6878</td>
<td>Blackboard, Online Testing, computing support in Armstrong</td>
</tr>
<tr>
<td>Dodd, Mark</td>
<td>OAC staff</td>
<td><a href="mailto:mdodd@jhmi.edu">mdodd@jhmi.edu</a></td>
<td>410-303-3015</td>
<td>IT and Academic Computing support</td>
</tr>
<tr>
<td>Kerfoot, Susan</td>
<td>OAC staff</td>
<td><a href="mailto:smroz@jhmi.edu">smroz@jhmi.edu</a></td>
<td>410-955-2359</td>
<td>Blackboard and Academic Computing support</td>
</tr>
<tr>
<td>John Steele</td>
<td>Multimedia Coordinator</td>
<td><a href="mailto:jsteel12@jhmi.edu">jsteel12@jhmi.edu</a></td>
<td></td>
<td>AV support AMEB room scheduling</td>
</tr>
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### Colleges Advisory System:

<table>
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<th>Responsibilities</th>
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<tbody>
<tr>
<td>Shochet, Rob</td>
<td>Director, Colleges Advisory Program</td>
<td><a href="mailto:rshoche1@jhmi.edu">rshoche1@jhmi.edu</a></td>
<td>410-502-3737</td>
<td>Colleges Advisory System, and Director of Clinical Foundations</td>
</tr>
<tr>
<td>Frosch, Emily</td>
<td>Associate Director, Colleges Advisory Program</td>
<td><a href="mailto:efrosch@jhmi.edu">efrosch@jhmi.edu</a></td>
<td></td>
<td>Associate Director, CAP and Clinical Foundations of Medicine</td>
</tr>
<tr>
<td>Shultz, Susan</td>
<td>Administrator, Colleges Advisory Program &amp; Clinical Foundations</td>
<td><a href="mailto:sshultz1@jhmi.edu">sshultz1@jhmi.edu</a></td>
<td>410-502-3737</td>
<td>Administration of Colleges and course coordination for Clinical Foundations of Medicine</td>
</tr>
</tbody>
</table>

### Office of Student Research:

<table>
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<tr>
<th>Name</th>
<th>Position</th>
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<th>Responsibilities</th>
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<tbody>
<tr>
<td>Beach, Mary Catherine</td>
<td>Director, Scholarly Concentrations</td>
<td><a href="mailto:mcbeach@jhmi.edu">mcbeach@jhmi.edu</a></td>
<td></td>
<td>Directs Scholarly Concentration Course</td>
</tr>
<tr>
<td>Massa, Michele</td>
<td>Academic Coordinator</td>
<td><a href="mailto:mmassa1@jhmi.edu">mmassa1@jhmi.edu</a></td>
<td>410-614-7056</td>
<td>Coordinator for Scholarly Concentrations</td>
</tr>
</tbody>
</table>

### Institute for Educational Excellence:

<table>
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<tr>
<th>Name</th>
<th>Position</th>
<th>Email</th>
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<th>Responsibilities</th>
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</thead>
<tbody>
<tr>
<td>Cofrancesco, Joseph</td>
<td>Director, IEE</td>
<td><a href="mailto:joeco@jhmi.edu">joeco@jhmi.edu</a></td>
<td>443-287-4435</td>
<td>Director, IEE</td>
</tr>
<tr>
<td>Westman, Michael</td>
<td>Administrative Coordinator</td>
<td><a href="mailto:mwestman@jhmi.edu">mwestman@jhmi.edu</a></td>
<td>443-287-4435</td>
<td>Administrator for IEE</td>
</tr>
</tbody>
</table>

### Armstrong Staff and Support:

<table>
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<tr>
<th>Name</th>
<th>Position</th>
<th>Email</th>
<th>Phone</th>
<th>Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hughes, Doug</td>
<td>Armstrong Building Manager</td>
<td><a href="mailto:dhughe22@jhmi.edu">dhughe22@jhmi.edu</a></td>
<td></td>
<td>Maintenance of Armstrong; facilities support; configures rooms</td>
</tr>
<tr>
<td>Armstrong Wenz Cafe</td>
<td>Manager</td>
<td><a href="mailto:wenzcafe@gmail.com">wenzcafe@gmail.com</a></td>
<td>410-955-1466</td>
<td>Open 6:30 am to 6:00 pm Catering Available</td>
</tr>
</tbody>
</table>
A. The Educational Policy and Curriculum Committee (EPCC)

Established by the Dean of the Medical Faculty, the EPCC is a standing committee of the School of Medicine and the institutional body responsible for the overall design, management, and evaluation of a coherent and coordinated medical school curriculum associated with the MD degree and other related educational priorities.

EPCC examines a wide range of issues including, but not limited to, these aspects of the medical school curriculum:

- sequencing of the various segments of the curriculum both within and across the academic periods of study (horizontal and vertical integration);
- methods of pedagogy and student evaluation;
- evaluation of course and program effectiveness;
- content and workload in each discipline to identify omissions and unwanted redundancies; and,
- stated objectives of individual courses and clerkships.

The EPCC is also responsible for approving any substantive changes to the medical school curriculum as well as plans for implementation of said changes. No substantive changes can be made to the curriculum without this approval.

In addition the EPCC closely monitors the school’s maintenance of LCME accreditation. These standards are available at www.lcme.org. Click on “Accreditation Standards.”

The bylaws and minutes of the EPCC are located at: http://www.hopkinsmedicine.org/som/offices/curriculum/epcc.html

The EPCC has several subcommittees which report regularly to the EPCC and serve to address the issues noted above. Course and section directors may be involved in several of these committees. They include:

- **Curriculum Planning Committees:**
  - Scientific Foundations Committee (Se-Jin Lee, Chair)
  - GTS Course Committee (Henry Fessler, Chair)
  - GTS Integration Committee: meets monthly (Nancy Hueppchen, Chair)
  - Horizontal Strands Committees (Gail Geller and Joann Bodurtha, Chairs)
  - Clinical Skills/Clerkship Directors Committee: meets monthly (Nancy Hueppchen, Chair)
- **Student Assessment and Program Evaluation Committee** (Pamela Lipsett, Chair)
- **Year 1, Year 2, and Year 3, and 4 Promotion Committees** (Thomas Koenig, Chair)
- **Grade Appeals Committee** (Thomas Koenig, Chair)

The organizational chart for the EPCC is on the next page.
Educational Policy and Curriculum Committee
Organizational Structure

Dean/CEO

Educational Policy and Curriculum Committee (EPCC)
Chair: Vice Dean for Education

SUBCOMMITTEES OF THE EPCC

Agenda/Executive Committee
Chair: Vice Dean for Education

Clinical Skills Committee
Chair: Associate Dean for UME

Genes to Society Integration Committee
Chair: Associate Dean for UME

Clinical Clerkship Directors Committee
Chair: Associate Dean for UME

Foundations Curriculum Committee
Chair: Director, Scientific Foundations

Student Assessment and Program Evaluation (SAPE) Committee
Chair: Faculty appointed by Vice Dean

Genes to Society Oversight Committee
Chair: Director, Genes to Society

Education Technology Committee
Chair: Faculty appointed by Vice Dean
C. Office of the Registrar

The Registrar's Office is the repository for all academic records for School of Medicine medical and graduate students. It is also the official record-keeping office of appointment records for postdoctoral fellows, house staff, faculty, trainees and observers. The office also manages health, dental, life, disability, dependent care account and retirement benefits for the students, fellows, house staff and trainees.

The office is responsible for student scheduling, transcript maintenance and preparation, medical licensure processing and certifications among a variety of other academic support services.

The Registrar sets and posts the academic calendar.
http://www.hopkinsmedicine.org/som/students/academics/calendar.html

The office notifies course directors/coordinators of student enrollment in courses, and all grades are reported to the Registrar.

Major student activities coordinated through the Registrar's Office include student orientation and the SOM graduation/convocation ceremony.

Faculty who are contacted by students outside of JHUSOM for elective work should refer students to the Registrar’s office to ensure compliance with the Visiting Student Policies of JHUSOM. More information is available at:
http://www.hopkinsmedicine.org/som/students/policies/visitors.html.
**D. Office of Curriculum**

**Mission.** The mission of the Office of Curriculum is to deliver the highest quality Doctor of Medicine curriculum for the Johns Hopkins University School of Medicine. We advocate for teaching and learning that will produce graduates who will achieve the knowledge, skills and professional values to effectively address modern societal health care needs. By providing centralized management of the curriculum, the office will track formal curricular events, manage use of the Armstrong building resources (excepting college, and academic computing spaces), provide program evaluation and continuous quality improvement of the curriculum, support faculty development and innovation, and maintain Educational Program LCME standards. We value excellence, teamwork and professionalism, and effective and fair use of our shared resources.

**Services Provided:**
- OASIS® software population and support
- Course coordination for Year 1 and Year 2 courses and Translational Science Intersessions
- Posting lecture materials and handouts on Blackboard and Dropbox, and obtaining printed handouts for courses when needed
- Setting up Attendance Tracker for individual events
- Creation of exams in Questionmark and maintenance of item bank
- Teaching faculty development
- Curriculum development consultation
- Staffing and Administration of the GTS Integration Committee (subcommittee of EPCC)
- Maintain and update the Genes to Society Curriculum website at: [http://www.hopkinsmedicine.org/som/curriculum/genes_to_society](http://www.hopkinsmedicine.org/som/curriculum/genes_to_society)
- Coordinate LCME Self-Study; maintain LCME website at: [http://restricted.hopkinsmedicine.org/LCME/](http://restricted.hopkinsmedicine.org/LCME/)

Located in Armstrong suite 331
Contact: Joe Hellman, Administrative Coordinator; 410-614-0986 or officeofcurriculum@jhmi.edu

**************************************************************************************************

**E. Office of Assessment and Evaluation**

**Mission.** The mission of the Office of Assessment and Evaluation is to enhance the Johns Hopkins University medical school curriculum through student assessment and program evaluation.

**Services Provided:**
- Program evaluation of Genes-to-Society curriculum
- Management of the course evaluation process
  - Course satisfaction is evaluated in a two-step process. (1) Immediately after a course ends, students complete a course evaluation via Blackboard or E-value. Click here for more information on the course evaluation process. (2) Every 3-4 years each course undergoes an intensive review by the Student Assessment and Program Evaluation Committee (SAPE). Click here for more information on the SAPE course review process
- Psychometric analysis of scores from all internally developed examinations and standardized patient examinations
- Faculty development on areas related to assessment and evaluation (e.g. standard setting for passing scores, item writing, validity, reliability, etc.)
- Management of the Student Outcomes Research Data Warehouse (SORD)
- Statistical consulting and research study collaboration for medical education scholarship
F. The Office of Academic Computing

Mission. The mission of the Office of Academic Computing is to improve medical and graduate education through the prudent use of technology. This unit supplies core technology and services, including curriculum support to faculty and students, and operation of student computing facilities and classroom equipment.

Services Provided to Faculty:

- Software Services
- Armstrong AV support
- Purchasing a Computer
- Wireless Support Service
- Connecting Services

Specific to the Curriculum, OAC is charged with oversight of Blackboard Learning Management Software, Dropbox for curriculum materials, and Online Testing Services.

The OAC has created short tutorials on using Educational Technology for learning. These online tutorials are available at the OAC website at: [http://oac.med.jhmi.edu/ittutorial/](http://oac.med.jhmi.edu/ittutorial/)
G. Simulation Center

The Johns Hopkins Medicine Simulation Center is a state-of-the-art medical training facility that incorporates five types of simulation including:

- Standardized Patients and Teaching Associates
- Human patient simulation
- Virtual reality
- Partial task trainers
- Computerized simulation

The Simulation Center is used extensively in the *Clinical Foundations, Transitions to the Wards, most of the Required Clinical Clerkships* and TRIPLE.

The Simulation Center is located on the 8th floor of the Johns Hopkins Outpatient Center. School of Medicine activities receive scheduling priority. If you are considering designing a simulation for your course, please contact the Simulation Center staff to discuss. In general the process is as follows:

New courses:

1. You have an idea for a new simulation-based educational module or program
2. Email simcenter@jhmi.edu to begin the application process and obtain necessary forms
3. Complete a Simulation Center Activity Planning Form to describe your new simulation-based educational activity. **No simulation center activities will be planned or scheduled without this form being completed in its entirety.** Please note that it is NOT appropriate to delegate completion of this form to coordinators or other administrative staff, as it contains information about educational content that is vital for simulation center accreditation. Email the completed form to simcenter@jhmi.edu.
4. Simulation center space requests for School of Medicine courses are due on April 15 preceding the academic year in which space is requested. For example, an activity taking place in July 2016 (part of AY 15-16) would have been requested by April 15, 2015 (the April preceding AY 15-16). Ad hoc requests after the deadline will only be considered after all other requests are fulfilled, and in all likelihood will not be accommodated.
5. Your request will be reviewed by the JHMSC team and, if it's possible to move forward, will be assigned to a JHMSC staff member to coordinate. Please note that the simulation center currently operates with critical space and resource limitations that have necessitated limiting new curricula, and it may not be possible to accommodate all requests.
6. The scheduling coordinator will review and reserve your space requests.
7. Your JHMSC staff coordinator will contact you regarding questions about needed equipment, staff support, etc., and will help you refine your curriculum as needed to ensure success.
8. Your course will generally be implemented in the academic year AFTER the planning process – again, requests for SOM are due on 4/15 of the year preceding the academic year in which you want to implement your course, so plan early.
9. JHMSC staff will stay in touch with you for quality assurance, and may request course evaluation data, assessment data, and discussion regarding how to optimize the session for upcoming groups. This is a crucial part of the simulation center accreditation process, and cooperation is required for ongoing simulation center usage.

Existing courses:

1. Schedule requests are due on April 15th of the year before the academic year in question. For example, AY 16-17 requests will be due on April 15, 2016.
2. If date changes or modifications are needed, email simcenter@jhmi.edu with an explanation of requested dates. Reattach the most current version of your activity planning form. (If you don’t have an activity planning form, you will be required to complete one before any dates are scheduled)

3. JHMSC staff will respond within 5 business days to your request. If there are calendar conflicts, these will be discussed with all stakeholders and JHMSC staff will make every effort to reach mutually satisfactory solutions for all parties.

4. Please note that there is a current moratorium on expansions of simulation-based curricula for existing courses – this is due to space and resource constraints during the move of the simulation center to its new location, and will be temporary.

Have a question about your dates? General questions about what services we provide to you? Wondering about something simulation related? Email simcenter@jhmi.edu. The question/request will be transferred to the correct staff member to answer.

Further information about staff and planning an educational event in the Simulation Center can be obtained from the website at: http://www.hopkinsmedicine.org/simulation_center/

Section II: Design and Structure of Courses

The Genes to Society Curriculum http://www.hopkinsmedicine.org/som/curriculum/genes_to_society/

The Genes to Society (GTS) curriculum is the result of a 5-year curriculum development process that included over 100 faculty, administrative staff and students. The curriculum development process addressed a variety of forces advocating for change in the way we prepare physicians in the 21st century. The new curriculum begins with a grounding in what we’ve learned from the Human Genome Project about human variability, risk and the ability to modulate disease presentation and outcomes. We have also brought in a wealth of knowledge in the social and behavioral sciences, as well as public health and policy content, with an aim toward improving societal health outcomes. Students will experience an integrative approach to health from the first week of medical school. Other innovations include a strong career preparation course with a scholarly project, a longitudinal clerkship, translational science courses, transition courses at milestones in the curriculum, and improved assessment and evaluation.

To meet the educational objectives for the institution, which are listed at the beginning of this manual, the curriculum architecture consists of vertical courses, such as “Anatomy”, “Clinical Foundations”, and “Foundations of Public Health” which are time-limited, and Horizontal Strands, which weave throughout the 4-year curriculum. Students are expected to demonstrate achievement in competencies both in vertical courses and horizontal strands.

The Horizontal Strands are divided into those pertaining to Biomedical topics and those to Social and Behavioral topics. Topics and their leadership are as follows:

Biomedical Strands (led by Joann Bodurtha):

- Anatomy (Jonathan Perry)
- Embryology (Se-Jin Lee)
- Genomics/Proteomics (Joann Bodurtha)
- Imaging (Donna Magid)
- Informatics (Harold Lehmann)
- Neoplasia (Richard Ambinder)
- Pathology (Mike Borowitz)
• Pharmacology (Phil Cole)
• Therapeutics (Brent Petty)

Social and Behavioral Strands (led by Gail Geller):

• Communication (Mary Catherine Beach)
• Cultural Competence (Daniel Teraguchi)
• Epidemiology (Steve Sozio, Raquel Greer)
• Ethics & Professionalism (J. Mostwin, G. Geller)
• Health Disparities (April Fitzgerald)
• Health Policy (Eric Bass)
• Life Cycle: Aging (Jessica Colburn)
• Life Cycle: Growth & Development (Anna Maria Wilms Floet)
• Nutrition (Paul Watkins)
• Pain (TBD)
• Patient Safety (Hanan Aboumatar)
## Four Year Schematic of Courses

### Preclerkship Education Exercises

- **TRIPLE**
- **Preclerkship Education Exercises**

### Notes

- **BMB** = Brain, Mnd & Behavior
- **NSS** = Nervous System & Special Sense
- **‡** Half class in TRIPLE at a time

### General Information

- **Preclerkship Education Exercises**
- **TRIPLE**

### Core Blocks

- **Elective, Emed**
- **Med, Surg, Peds, GYN-OB**
- **Adv Clerk**
- **Clerkship**
- **Elective, E-Med**
- **Med, Peds, GYN-OB**
- **NSS**
- **Preclerkship Education Exercises**

### Core Courses

- **Genes to Society**
- **Repro. (18 days)**
- **GI/Liver (18 days)**
- **Pulm (13)**
- **Renal (17)**
- **Neuroanatomy (6)**
- **Cardiac (20 days)**
- **Endocrine (13 days)**

### Summer Break

- **9 weeks**

### All Core Blocks Must Be Completed by October of Year 4.
## Curriculum Course Dates for GTS, 2014-15

### Year 1 Calendar

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<tr>
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<tr>
<td>TIME: Health Care Disparities (HCD)</td>
<td>3</td>
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<td>8/12-8/14</td>
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<tr>
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<td>35</td>
<td>35</td>
<td>8/17-10/5</td>
<td>9/3 Thurs, 9/21 Mon, 10/5 Mon</td>
<td>Labor Day 9/7 Rosh Hashanah 9/14-15 Yom Kippur 9/23</td>
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<tr>
<td>Clinical Foundations</td>
<td>17 wks</td>
<td>17 wks</td>
<td>8/17-12/10</td>
<td>11/30, 12/2, 12/3, 12/9, 12/10</td>
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<td>FPHEEHCS</td>
<td>11 wks</td>
<td>11 wks</td>
<td>9/29-12/14 Epi: 11/17-12/10 Ethics: 12/8-12/11</td>
<td>12/14 Mon</td>
<td>10/6 Tues: Morning Free; FPHEEHCS in afternoon</td>
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<td>Basic Life Support Training Dates:</td>
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<td></td>
<td>8/24 Mon; 9/1 Tues; 9/30 Wed; 10/14 Wed; 10/28 Wed; and 11/6 Fri</td>
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<td>10/6 Tues, 10/8 Thurs</td>
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<td>6pm-8pm</td>
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<td>1</td>
<td>10/7 Wed</td>
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<td>10am-11:30am Orientation</td>
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<td>10/7 Wed</td>
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<tr>
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<td>7+1</td>
<td>10/8-10/19</td>
<td>10/19 Mon</td>
<td>College Olympics 10/16</td>
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<td>Weeks</td>
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<td>SFM: Cell Physiology</td>
<td>9+1</td>
<td>10/20-11/2</td>
<td>11/2 Mon</td>
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<tr>
<td>SFM: Histo/Path</td>
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<td>11/3-11/12</td>
<td>11/12 Thurs Persky Day 11/12</td>
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<tr>
<td>SFM: Genetics</td>
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<td>11/20 Fri</td>
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<tr>
<td>SFM: Pharm</td>
<td>7+1</td>
<td>11/23-12/7</td>
<td>12/7 Mon (+paper) Thanksgiving 11/25 Wed - 11/29 Sun</td>
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<tr>
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<td>11/23-12/7</td>
<td>12/7 Mon</td>
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<tr>
<td>Epidemiology</td>
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<td>12/8-12/14</td>
<td>12/14 Mon Epi orientation 12/7 (after the exam)</td>
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<td>12/14 Mon</td>
<td>No Exam</td>
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<tr>
<td>TIME: Obesity, Nutrition, &amp; Behavior Change</td>
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<td>12/15-12/18</td>
<td>No Exam 8am-1pm</td>
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<td>Scholarly Concentrations</td>
<td>3</td>
<td>12/15-12/17</td>
<td>No Exam 2pm-5pm</td>
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<tr>
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<td>1</td>
<td>12/18 Fri</td>
<td>No Exam 10:30am-12pm</td>
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<tr>
<td>Longitudinal Ambulatory Clerkship(LAC)</td>
<td>22 wks</td>
<td>1/5-6/3</td>
<td>5/31, 6/2, 6/3* LAC Orientation 1/5 Tues</td>
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<tr>
<td>GTS: Immunology</td>
<td>12+1</td>
<td>1/4-1/21</td>
<td>1/21 Thurs MLK Holiday 1/18</td>
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<tr>
<td>GTS Micro/ID</td>
<td>19+1</td>
<td>1/22-2/18</td>
<td>2/18 Thurs Medical Student Research Day 2/5 Fri (12pm-5pm) Snow Day 2/12 Fri</td>
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<tr>
<td>Integrative Medicine</td>
<td>1</td>
<td>1/25 Mon</td>
<td>No Exam</td>
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<tr>
<td>Course</td>
<td>Credits</td>
<td>Credits</td>
<td>Start Date</td>
<td>End Date</td>
<td>Events/Notes</td>
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<tr>
<td>GTS: Dermatology</td>
<td>3</td>
<td>3</td>
<td>2/19-2/23</td>
<td>2/26 Fri Online Exam</td>
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<tr>
<td>TIME: Global Health</td>
<td>3</td>
<td>3</td>
<td>2/24-2/26</td>
<td>No Exam</td>
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<tr>
<td>Scholarly Concentrations</td>
<td>3</td>
<td>3</td>
<td>2/24-2/26</td>
<td>No Exam</td>
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<tr>
<td>CAP</td>
<td>1</td>
<td>1</td>
<td>2/25 Thurs</td>
<td>No Exam</td>
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<tr>
<td>GTS: Heme-Onc</td>
<td>16+1</td>
<td>16+1</td>
<td>2/29-3/22</td>
<td>3/22 Tues Match Day 3/18</td>
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<td>3</td>
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<td>3/23-3/25</td>
<td>No Exam</td>
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<tr>
<td>Spring Break</td>
<td></td>
<td></td>
<td>3/26 Sat</td>
<td>4/3 Sun</td>
<td></td>
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<tr>
<td>GTS: NSS (Neuroanatomy)</td>
<td>5+1</td>
<td>5+1</td>
<td>4/4-4/11</td>
<td>4/11 Mon</td>
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<tr>
<td>Integrative Medicine</td>
<td>1</td>
<td>1</td>
<td>4/4 Mon</td>
<td>No Exam</td>
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<tr>
<td>GTS: BMB***</td>
<td>17+1**</td>
<td>17+1**</td>
<td>4/11-5/11</td>
<td>5/11 Wed BMB starts afternoon of NSS exam</td>
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<td>GTS: NSS (GSM)</td>
<td>14+1</td>
<td>14+1</td>
<td>4/12-5/2</td>
<td>5/2 Mon White Coat Ceremony 4/28 Thurs</td>
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<tr>
<td>Integrative Medicine</td>
<td>1</td>
<td>1</td>
<td>5/2 Mon</td>
<td>No Exam</td>
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</tr>
<tr>
<td>GTS: NSS (SSM)</td>
<td>8+1</td>
<td>8+1</td>
<td>5/12-5/24</td>
<td>5/24 Tues Turtle Derby 5/13</td>
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<td>GTS: NSS (MSD)</td>
<td>7+1</td>
<td>7+1</td>
<td>5/25-6/6</td>
<td>6/6 Mon NBME Exam (9am-12pm) Memorial Day 5/30</td>
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*NBME Exam:* 9am-12pm
<table>
<thead>
<tr>
<th>Course</th>
<th>Code</th>
<th>Lab</th>
<th>Start Date</th>
<th>Exam Type</th>
<th>Exam Date</th>
<th>Time</th>
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<tr>
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<td>1</td>
<td>1</td>
<td>5/23 Mon</td>
<td>No Exam</td>
<td></td>
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<tr>
<td>GTS (Optional) Cumulative Exam</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5/27 Fri</td>
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</tr>
<tr>
<td>LAC Exams</td>
<td></td>
<td></td>
<td>5/31, 6/2, 6/3*</td>
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<tr>
<td><strong>TIME: Pain Care</strong></td>
<td>4</td>
<td>4</td>
<td>6/7-6/10</td>
<td>6/10 Fri</td>
<td>8am-1pm; 6/9 Thurs 8am-12pm</td>
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<tr>
<td><strong>TIME: High Value Care</strong></td>
<td>4</td>
<td>4</td>
<td>6/7-6/10</td>
<td>No Exam</td>
<td>8am-1pm; 6/9 Thurs 8am-12pm</td>
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<tr>
<td>Scholarly Concentrations</td>
<td>2</td>
<td>3</td>
<td>6/7-6/9</td>
<td>No Exam</td>
<td>2pm-5pm; 6/9 Thurs 1pm-3:20pm</td>
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<tr>
<td>CAP</td>
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<td>6/9 Thurs</td>
<td>No Exam</td>
<td>3:30pm-5pm</td>
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*LAC has written exams in AMEB on 5/31 & 6/2. LAC has SP exams on 5/31, 6/2 & 6/3 in SIM Center

**Due to integration with NSS, some BMB days counted are actually only one event occurring along with NSS learning activities.

***BMB course runs concurrently with NSS during the designated period
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<td>Longitudinal Ambulatory Clerkship (LAC)</td>
<td>16 Tues 16 Thurs</td>
<td>16 Tues 16 Thurs</td>
<td>8/20-12/17</td>
<td>12/15, 12/16, 12/17*</td>
<td>LAC Orientation 8/20 Thurs</td>
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<tr>
<td>GTS-Pulmonary</td>
<td>12 + 1</td>
<td>12 + 1</td>
<td>8/17-9/2</td>
<td>9/2 Wed</td>
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<tr>
<td>GTS-Renal</td>
<td>16 + 1</td>
<td>16 + 1</td>
<td>9/3-9/28</td>
<td>9/28 Mon</td>
<td>Labor Day 9/7</td>
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<tr>
<td>TIME: Substance Abuse</td>
<td>4</td>
<td>4</td>
<td>9/29-10/2</td>
<td>10/2 Fri</td>
<td>8am-1pm Rosh Hashanah 9/14-15 Yom Kippur 9/23</td>
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<td>Scholarly Concentrations</td>
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<td>9/29-10/1</td>
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<td>10/5-10/30</td>
<td>10/30 Fri</td>
<td>College Olympics 10/16</td>
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<td>GTS – GI/Liver</td>
<td>17 + 1</td>
<td>17 + 1</td>
<td>11/2-11/25</td>
<td>11/25 Wed</td>
<td>Thanksgiving 11/26 Thurs – 11/30 Mon</td>
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<td>GTS – Endocrine</td>
<td>13 + 1</td>
<td>13 + 1</td>
<td>12/1-12/18</td>
<td>12/18 Fri</td>
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<td>LAC Exams</td>
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<td>12/15, 12/16, 12/17*</td>
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<td>Details</td>
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<tr>
<td>Winter Break: 12/19 Sat - 1/3 Sun</td>
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<tr>
<td>GTS-Repro</td>
<td>16+1 16+1</td>
<td>1/4-1/27 1/27 Wed MLK Holiday 1/18</td>
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<tr>
<td>GTS (Optional) Cumulative Exam</td>
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<td>1/15 Fri</td>
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<tr>
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<td>1/21 Thurs No Exam 2pm-3:30pm</td>
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<tr>
<td>TiME: Patient Safety</td>
<td>3 3</td>
<td>1/28-2/1 Mon 2/1 Mon Take-Home Exam 8am-1pm; 2/1 Mon 11am-5pm</td>
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<td>1/28-2/1 No Exam 2-5 pm; 2/1 Mon 8am-11am</td>
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<tr>
<td>GTS – Musculoskeletal</td>
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<td>Comprehensive Basic Science NBME</td>
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<td>2/6 Saturday NBME (8am-1pm) 8am arrival time; total exam time 4hrs + 30mins Snow Day 2/13 Sat</td>
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<td>Transitions to the Wards</td>
<td>15 15</td>
<td>2/15-3/4 3/4 Fri Match Day 3/18</td>
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<td>2/15-3/4 CAP dates included in TTW course schedule</td>
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<td>Spring Break: 3/5 Sat – 3/20 Sun</td>
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*LAC has written exams in AMEB on 12/15 & 12/17. LAC has SP exams on 12/15, 12/16, & 12/17 in Simulation Center*
<table>
<thead>
<tr>
<th>Course/Section</th>
<th>Inclusive Dates AY15-16</th>
<th>PRECEDE Dates</th>
<th>Exam Date 4 week</th>
<th>Exam Date 8 week</th>
<th>Holidays and Notes</th>
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<td>First Half</td>
<td>8/17-9/11</td>
<td>8/17, 8/18, 8/19</td>
<td>9/11 Fri</td>
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<td>Labor Day 9/7 Rosh Hashanah: 9/14-15 Yom Kippur: 9/23</td>
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<tr>
<td>Second Half</td>
<td>9/14-10/9</td>
<td>9/14, 9/15</td>
<td>10/9 Fri</td>
<td>10/12 Mon</td>
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<tr>
<td>TIME: Metabolism</td>
<td>10/13-10/16</td>
<td></td>
<td>No Exam</td>
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<tr>
<td>TIME: End of Life/Palliative Care</td>
<td>10/13-10/16</td>
<td></td>
<td>10/16 Fri Take-Home Exam</td>
<td>College Olympics 10/16</td>
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<tr>
<td>CAP</td>
<td>10/15 Thurs</td>
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<td>No Exam</td>
<td>3:30pm-5pm</td>
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<tr>
<td>ACC &amp; EMed (4.5 weeks)</td>
<td>8/17-9/15</td>
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<td>9/15 Tues</td>
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<tr>
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<td>9/16-10/16</td>
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<td>10/16 Fri</td>
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<tr>
<td>Quarter 2</td>
<td>10/19-12/18</td>
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<td>First Half</td>
<td>10/19-11/13</td>
<td>10/19,10/20, 10/21</td>
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<td>Thanksgiving: 11/26 Thurs - 11/29 Sun</td>
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<tr>
<td>Second Half</td>
<td>11/16-12/11</td>
<td>11/16, 11/17</td>
<td>12/14 Mon</td>
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<td>CAP</td>
<td>12/17 Thurs</td>
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<td>2pm-3:30pm</td>
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<td>11/17 Tues</td>
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<td>PRECEDE Dates</td>
<td>Exam Date 4 week</td>
<td>Exam Date 8 week</td>
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<td>Second Half</td>
<td>4/18-5/13</td>
<td>4/18, 4/19</td>
<td>5/13 Fri</td>
<td>5/16 Mon</td>
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<tr>
<td>TIME: Cancer</td>
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<td>No Exam</td>
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<tr>
<td>TIME: End of Life/ Palliative Care</td>
<td>5/17-5/20</td>
<td>5/20 Fri Take-Home Exam</td>
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<tr>
<td>CAP</td>
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<td>4/20-5/20</td>
<td>5/20 Fri</td>
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<td>TRIPLE: Session I</td>
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<td>6/20-7/15</td>
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<td>7/15 Fri</td>
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<td>Memorial Day 5/30 Independence Day Observation 7/4</td>
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<td>6/20-7/15</td>
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<td>Period III</td>
<td>7/18-8/12</td>
<td>8/12 Fri</td>
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</tbody>
</table>
# FIRST YEAR CURRICULUM

**GTS Course Director:** [Hank Fessler](hfessler@jhmi.edu) / **Co-Director:** [Mike Borowitz](mborowit@jhmi.edu)

First Year Curriculum Coordinator: Sherrie Fornoff, AMEB 331, Office 410-502-6075, [sfornoff@jhmi.edu](mailto:sfornoff@jhmi.edu)

<table>
<thead>
<tr>
<th>COURSE</th>
<th>DATES</th>
<th>CONTACT</th>
<th>COURSE DIRECTOR</th>
</tr>
</thead>
</table>
| Topics in Interdisciplinary Medicine:         | 8/12-8/14        | Sherrie Fornoff [sfornoff@jhmi.edu](mailto:sfornoff@jhmi.edu) | April Fitzgerald [afitzg10@jhmi.edu](mailto:afitzg10@jhmi.edu)  
Mindi Levin [mlevin@jhu.edu](mailto:mlevin@jhu.edu) |
| Health Care Disparities                       |                  |                                  |                              |
| SFM – Human Anatomy                           | 8/17-10/5        | Arlene Daniel 410-955-1697 / [adaniel@jhmi.edu](mailto:adaniel@jhmi.edu) | Chris Ruff [cruff2@jhmi.edu](mailto:cruff2@jhmi.edu) |
| Clinical Foundations of Medicine              | 8/17-12/10 (M,W,Th 2-5) | Susan Shultz 410-502-3737 / [sshultz@jhmi.edu](mailto:sshultz@jhmi.edu) | Rob Shochet [rshoche1@jhmi.edu](mailto:rshoche1@jhmi.edu) |
| Foundations of Public Health (FPHEHCS):       | 9/29-12/14 (Tu 2-4:30); and Epi 12/8-12/14 | Brenda Zacharko [bzachar1@jhmi.edu](mailto:bzachar1@jhmi.edu) | Director: Eric Bass [ebass@jhsph.edu](mailto:ebass@jhsph.edu)  
Epi: [Steve Sozio](mailto:ssozio@jhmi.edu)  
Raquel Greer [rfcharle@jhmi.edu](mailto:rfcharle@jhmi.edu)  
Ethics: [Jacek Mostwin](mailto:jmostwin@jhmi.edu) |
| (inc. Epi, Ethics, and the Health Care System) |                  |                                  |                              |
| Integrative Medicine                          | 10/7, 12/14, 1/25, 4/4, 5/2, 5/23 | Sherrie Fornoff [sfornoff@jhmi.edu](mailto:sfornoff@jhmi.edu) | Anastasia Rowland-Seymour [arowlan2@jhmi.edu](mailto:arowlan2@jhmi.edu)  
Gail Geller [ggeller@jhmi.edu](mailto:ggeller@jhmi.edu) |
| Scientific Foundations of Medicine (SFM):     | 10/8-12/7        | Sherrie Fornoff [sfornoff@jhmi.edu](mailto:sfornoff@jhmi.edu) | Se-Jin Lee [sjlee@jhmi.edu](mailto:bjlee@jhmi.edu) |
| (inc. macro, cell phys, metab, genetics, pharm, & histo/pathobiology) |                  |                                  |                              |
| Macromolecules                                | 10/8-10/19       | Sherrie Fornoff [sfornoff@jhmi.edu](mailto:sfornoff@jhmi.edu) | Cynthia Wolberger [cwolberg@jhmi.edu](mailto:cwolberg@jhmi.edu) |
| Cell Physiology                               | 10/20-11/2       | Sherrie Fornoff [sfornoff@jhmi.edu](mailto:sfornoff@jhmi.edu) | Miho Iijima [miijima@jhmi.edu](mailto:miijima@jhmi.edu) |
| Metabolism                                    | 11/3-11/12       | Sherrie Fornoff [sfornoff@jhmi.edu](mailto:sfornoff@jhmi.edu) | Mehboob Hussain [mhusa4@jhmi.edu](mailto:mhusa4@jhmi.edu) |
| Genetics                                      | 11/13-11/20      | Sherrie Fornoff [sfornoff@jhmi.edu](mailto:sfornoff@jhmi.edu) | Jeremy Nathans [jnathans@jhmi.edu](mailto:jnathans@jhmi.edu) |
| Pharmacology                                  | 11/23-12/7       | Amy Forcier [alovela1@jhmi.edu](mailto:alovela1@jhmi.edu) | Phil Cole [pcole@jhmi.edu](mailto:pcole@jhmi.edu) |
| Histology / Pathobiology                      | 11/23-12/7       | Sherrie Fornoff [sfornoff@jhmi.edu](mailto:sfornoff@jhmi.edu) | Marc Halushka [mhalush1@jhmi.edu](mailto:mhalush1@jhmi.edu) |
| Epidemiology                                  | 12/8-12/14       | Sherrie Fornoff [sfornoff@jhmi.edu](mailto:sfornoff@jhmi.edu) | Raquel Greer 410-614-0988 / [rfcharle@jhmi.edu](mailto:rfcharle@jhmi.edu)  
Steve Sozio [ssozio@jhmi.edu](mailto:ssozio@jhmi.edu) |
<table>
<thead>
<tr>
<th>Topics in Interdisciplinary Medicine: Obesity, Nutrition &amp; Behavior Change</th>
<th>12/15-12/18</th>
<th>Sherrie Fornoff <a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></th>
<th>Paul Watkins <a href="mailto:Watkins@kennedykrieger.org">Watkins@kennedykrieger.org</a> 443-923-2754</th>
</tr>
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<tbody>
<tr>
<td>Scholarly Concentrations</td>
<td>Afternoons of the Topics in Interdisciplinary Medicine</td>
<td>12/15-12/17; 2/24-2/25; 3/23-3/25; &amp; 6/7-6/9</td>
<td>Michele Massa (410) 614-7056 <a href="mailto:mmassa1@jhmi.edu">mmassa1@jhmi.edu</a></td>
</tr>
<tr>
<td>Longitudinal Clerkships – 1st year</td>
<td>1/5-6/3 (Tu &amp; Th 1:30pm-5pm)</td>
<td>Iris Knox 410-338-3422 / <a href="mailto:iknox1@jhmi.edu">iknox1@jhmi.edu</a></td>
<td>Maura McGuire <a href="mailto:mmcguir1@jhmi.edu">mmcguir1@jhmi.edu</a></td>
</tr>
<tr>
<td>Genes to Society I (GTS)</td>
<td>1/4-3/22</td>
<td>Sherrie Fornoff <a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></td>
<td>Henry Fessler <a href="mailto:hfessler@jhmi.edu">hfessler@jhmi.edu</a></td>
</tr>
<tr>
<td>Immunology</td>
<td>1/4-1/21</td>
<td>Sherrie Fornoff <a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></td>
<td>Jonathan Schneck <a href="mailto:jschnec1@jhmi.edu">jschnec1@jhmi.edu</a></td>
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<tr>
<td>Micro/Infect Disease</td>
<td>1/22-2/18</td>
<td>Sherrie Fornoff <a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></td>
<td>Khalil Ghanem <a href="mailto:kghanem1@jhmi.edu">kghanem1@jhmi.edu</a></td>
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<tr>
<td>Dermatology</td>
<td>2/19-2/23</td>
<td>Marsha Mackey <a href="mailto:mcunnin5@jhmi.edu">mcunnin5@jhmi.edu</a> Sherrie Fornoff <a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></td>
<td>Inbal Braunstein <a href="mailto:ibrauns2@jhmi.edu">ibrauns2@jhmi.edu</a></td>
</tr>
<tr>
<td>Heme/Oncology</td>
<td>2/29-3/22</td>
<td>Sherrie Fornoff <a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></td>
<td>Director: Mike Borowitz <a href="mailto:mborowit@jhmi.edu">mborowit@jhmi.edu</a> Heme: Robert Brodsky <a href="mailto:brodsky@jhmi.edu">brodsky@jhmi.edu</a> Oncology: Richard Ambinder <a href="mailto:rambind1@jhmi.edu">rambind1@jhmi.edu</a></td>
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<tr>
<td>Topics in Interdisciplinary Medicine: Global Health</td>
<td>2/24-2/26</td>
<td>Ana Cervantes <a href="mailto:acervan4@jhmi.edu">acervan4@jhmi.edu</a> Sherrie Fornoff <a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></td>
<td>Bob Bollinger <a href="mailto:rcb@jhmi.edu">rcb@jhmi.edu</a></td>
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<tr>
<td>Topics in Interdisciplinary Medicine: Informatics</td>
<td>3/23-3/25</td>
<td>Sherrie Fornoff <a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></td>
<td>Harold Lehman <a href="mailto:lehmann@jhmi.edu">lehmann@jhmi.edu</a></td>
</tr>
<tr>
<td>Topics in Interdisciplinary Medicine: Disaster Medicine</td>
<td>3/23-3/25</td>
<td>Sherrie Fornoff <a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></td>
<td>Christina Catlett <a href="mailto:ccatlet1@jhmi.edu">ccatlet1@jhmi.edu</a> Lauren Sauer <a href="mailto:lsauer2@jhmi.edu">lsauer2@jhmi.edu</a></td>
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<tr>
<td>Genes to Society II (GTS)</td>
<td>4/4-6/6</td>
<td>Sherrie Fornoff <a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></td>
<td>Henry Fessler <a href="mailto:hfessler@jhmi.edu">hfessler@jhmi.edu</a></td>
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<tr>
<td>Brain, Mind, Behavior (BMB)</td>
<td>4/11-5/11</td>
<td>Sherrie Fornoff <a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></td>
<td>Dean Mackinnon <a href="mailto:dmackin@mail.jhmi.edu">dmackin@mail.jhmi.edu</a></td>
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<td>Nervous System &amp; Special Senses (NSS)</td>
<td>4/4-4/11, 4/12-5/2, 5/12-5/24 &amp; 5/25-6/6</td>
<td>Heather Thomas <a href="mailto:hthoma21@jhmi.edu">hthoma21@jhmi.edu</a> Sherrie Fornoff <a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></td>
<td>Nicoline Schiess <a href="mailto:nschies1@jhmi.edu">nschies1@jhmi.edu</a></td>
</tr>
<tr>
<td>Topics in Interdisciplinary Medicine: Pain Care</td>
<td>6/7-6/10</td>
<td>Sherrie Fornoff <a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></td>
<td>Jennifer Haythornthwaite <a href="mailto:jhaytho1@jhmi.edu">jhaytho1@jhmi.edu</a></td>
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<tr>
<td>Topics in Interdisciplinary Medicine: High Value Care</td>
<td>6/7-6/10</td>
<td>Sherrie Fornoff <a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></td>
<td>Amit Pahwa <a href="mailto:apahwa1@jhmi.edu">apahwa1@jhmi.edu</a></td>
</tr>
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</table>
# Contact Lists for Course/ Section Leaders and Coordinators

## SECOND YEAR CURRICULUM

**GTS Course Director:** Hank Fessler [hfessler@jhmi.edu](mailto:hfessler@jhmi.edu) / **Co-Director:** Mike Borowitz [mborowit@jhmi.edu](mailto:mborowit@jhmi.edu)

**Second Year Curriculum Coordinator:** Terri Hennel, AMEB 331, Office 410-614-3684, [thennel1@jhmi.edu](mailto:thennel1@jhmi.edu)

<table>
<thead>
<tr>
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<tr>
<td>Longitudinal Clerkships - 2nd year</td>
<td>8/20-12/17 (Tu &amp; Th 1:30pm-5pm)</td>
<td>Iris Knox 410-338-3422 / <a href="mailto:iknox1@jhmi.edu">iknox1@jhmi.edu</a></td>
<td>Maura McGuire <a href="mailto:mmguir1@jhmi.edu">mmguir1@jhmi.edu</a></td>
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<tr>
<td>Genes to Society III (GTS) (inc. Pulmonary, Renal, &amp; Cardiovascular)</td>
<td>8/17-10/30</td>
<td>Terri Hennel <a href="mailto:thennel1@jhmi.edu">thennel1@jhmi.edu</a></td>
<td>Henry Fessler <a href="mailto:hfessler@jhmi.edu">hfessler@jhmi.edu</a></td>
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<tr>
<td>Renal</td>
<td>8/17-9/2</td>
<td>Terri Hennel <a href="mailto:thennel1@jhmi.edu">thennel1@jhmi.edu</a></td>
<td>David Hager <a href="mailto:dhager1@jhmi.edu">dhager1@jhmi.edu</a></td>
</tr>
</tbody>
</table>
| Renal                                                                  | 9/3-9/28                  | Terri Hennel [thennel1@jhmi.edu](mailto:thennel1@jhmi.edu) | Steve Sozio [ssazio@jhmi.edu](mailto:ssazio@jhmi.edu)  
Mike Choi [mchoi@jhmi.edu](mailto:mchoi@jhmi.edu)  
Daphne Knicely [dknicel1@jhmi.edu](mailto:dknicel1@jhmi.edu) |
| Cardiovascular                                                         | 10/5-10/30                | Terri Hennel [thennel1@jhmi.edu](mailto:thennel1@jhmi.edu) | Edward Kasper [ekasper@jhmi.edu](mailto:ekasper@jhmi.edu) |
| Topics in Interdisciplinary Medicine: Substance Abuse Care             | 9/29-10/2                 | Terri Hennel [thennel1@jhmi.edu](mailto:thennel1@jhmi.edu) | Dean MacKinnon [dmackin1@jhmi.edu](mailto:dmackin1@jhmi.edu)  
Karin Neufeld [kneufel2@jhmi.edu](mailto:kneufel2@jhmi.edu) |
| Scholarly Concentrations – 2nd year                                   | 9/29-10/1 & 1/28-2/1      | Michelle Massa 410-614-7056 /[mmassa1@jhmi.edu](mailto:mmassa1@jhmi.edu) | Mary Catherine Beach [mcbeach@jhmi.edu](mailto:mcbeach@jhmi.edu) |
| Genes to Society IV (GTS) (inc. GI/Liver, Endocrine, Repro, & Musculoskeletal) | 11/2-2/12                | Terri Hennel [thennel1@jhmi.edu](mailto:thennel1@jhmi.edu) | Henry Fessler [hfessler@jhmi.edu](mailto:hfessler@jhmi.edu) |
| GI/Liver                                                               | 11/2-11/25                | Terri Hennel [thennel1@jhmi.edu](mailto:thennel1@jhmi.edu) | John Clarke [john.clare@jhu.edu](mailto:john.clare@jhu.edu)  
Jamie Hamilton [jpahamilton@jhmi.edu](mailto:jpahamilton@jhmi.edu)  
Robert Anders [rander54@jhmi.edu](mailto:rander54@jhmi.edu) |
| Endocrine                                                              | 12/1-12/18                | Terri Hennel [thennel1@jhmi.edu](mailto:thennel1@jhmi.edu) | Aniket Sidhaye [asidhay1@jhmi.edu](mailto:asidhay1@jhmi.edu)  
David Cooke [dcooke@jhmi.edu](mailto:dcooke@jhmi.edu) |
| Reproduction                                                           | 1/4-1/27                  | Terri Hennel [thennel1@jhmi.edu](mailto:thennel1@jhmi.edu) | Isabel Green [igreen5@jhmi.edu](mailto:igreen5@jhmi.edu)  
Ann Lawler [alawler@jhmi.edu](mailto:alawler@jhmi.edu) |
| Musculoskeletal                                                       | 2/2-2/12                  | Terri Hennel [thennel1@jhmi.edu](mailto:thennel1@jhmi.edu) | Allan Gelber [agelber@jhmi.edu](mailto:agelber@jhmi.edu)  
Ed McCarthy [mccarthy@jhmi.edu](mailto:mccarthy@jhmi.edu) |
### Topics in Interdisciplinary Medicine:

<table>
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<th></th>
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<th>Contact</th>
<th>Course Director</th>
</tr>
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<tr>
<td><strong>Patient Safety</strong></td>
<td>1/28-2/1</td>
<td>Terri Hennel <a href="mailto:thennel1@jhmi.edu">thennel1@jhmi.edu</a></td>
<td>Hanan Aboumatar <a href="mailto:habouma1@jhmi.edu">habouma1@jhmi.edu</a></td>
</tr>
<tr>
<td><strong>Transition to the Wards</strong></td>
<td>2/15-3/4</td>
<td>Terri Hennel <a href="mailto:thennel1@jhmi.edu">thennel1@jhmi.edu</a></td>
<td>Greg Prokopowicz <a href="mailto:gprokop@jhmi.edu">gprokop@jhmi.edu</a> Jules Jung <a href="mailto:jjung@jhmi.edu">jjung@jhmi.edu</a></td>
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### Translational Science Topics in Interdisciplinary Medicine

<table>
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<th>COURSE DIRECTOR</th>
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<tr>
<td><strong>Metabolism</strong></td>
<td>10/13-10/16</td>
<td>Sherrie Fornoff <a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></td>
<td>Steve Gould <a href="mailto:sgould@jhmi.edu">sgould@jhmi.edu</a></td>
</tr>
<tr>
<td><strong>Regenerative Medicine</strong></td>
<td>12/15-12/18</td>
<td>Sherrie Fornoff <a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></td>
<td>Robert Stevens <a href="mailto:rstevens@jhmi.edu">rstevens@jhmi.edu</a></td>
</tr>
<tr>
<td><strong>Immunology</strong></td>
<td>3/1-3/4</td>
<td>Susan Davidson 410-955-3383 / <a href="mailto:Sdavids6@jhmi.edu">Sdavids6@jhmi.edu</a> Sherrie Fornoff <a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></td>
<td>Stephen Desiderio <a href="mailto:sdesider@jhmi.edu">sdesider@jhmi.edu</a></td>
</tr>
<tr>
<td><strong>Cancer</strong></td>
<td>5/17-5/20</td>
<td>Amy Forcier 410-955-1457 / <a href="mailto:alovela1@jhmi.edu">alovela1@jhmi.edu</a> Sherrie Fornoff <a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></td>
<td>Philip Cole <a href="mailto:pcole1@jhmi.edu">pcole1@jhmi.edu</a></td>
</tr>
<tr>
<td><strong>End of Life/Palliative Care</strong></td>
<td>5/17-5/20 &amp; 10/13-10/16</td>
<td>Sherrie Fornoff <a href="mailto:sfornoff@jhmi.edu">sfornoff@jhmi.edu</a></td>
<td>Michael Carducci <a href="mailto:carducci@jhmi.edu">carducci@jhmi.edu</a> Nancy Hutton <a href="mailto:nhutton1@jhmi.edu">nhutton1@jhmi.edu</a></td>
</tr>
</tbody>
</table>

### Required Clinical Rotations

<table>
<thead>
<tr>
<th>COURSE</th>
<th>DATES</th>
<th>CONTACT</th>
<th>COURSE DIRECTOR</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sub-I (Med, Peds, Surg, etc.)</strong></td>
<td>Year-round</td>
<td>Various (Departmental)</td>
<td>Various (Departmental)</td>
</tr>
<tr>
<td><strong>Critical Care Clerkship</strong></td>
<td>Year-round</td>
<td>Various (Departmental)</td>
<td>Henry Fessler <a href="mailto:hfessler@jhmi.edu">hfessler@jhmi.edu</a> Scott Stephens <a href="mailto:rsteph13@jhmi.edu">rsteph13@jhmi.edu</a></td>
</tr>
<tr>
<td><strong>TRIPLE</strong></td>
<td>Quarter 4</td>
<td>Joyce Luckin 410-502-3740 / <a href="mailto:jluckin1@jhmi.edu">jluckin1@jhmi.edu</a></td>
<td>Isabel Green, MD <a href="mailto:igreens5@jhmi.edu">igreens5@jhmi.edu</a></td>
</tr>
</tbody>
</table>

**REVISED 08/10/2015 jeh**
Organizing Your Course

At a minimum, every course in the GTS curriculum must have three well-defined components:

1. Learning objectives
2. Educational strategy (what content and methods will be used to help students achieve the learning objectives)
3. Evaluation plan: How will students be assessed, i.e., how will we know the learning objectives have been met? How will the course and faculty be evaluated?

The Student Assessment and Program Evaluation (SAPE) committee of the EPCC systematically reviews each of the courses and clerkships in the curriculum to ensure that these components are present. The Office of Curriculum staff is happy to work with course directors on refining their course organization. A brief introduction to these elements follows.

Organization has a tremendous impact on the quality of curricular elements and students are very sensitive to level of organization seen in their coursework. To help our course and section leaders, a timeline for course/section development and implementation is included to facilitate timeliness of preparation and optimal use of support staff.

Writing Objectives
Learner objectives focus the curriculum content, and inform learners of what is to be achieved. Assuming that the goal of a curriculum or educational program is the achievement of competence in some area of health care, defining that competence usually includes a description of the requisite knowledge, attitudes and/or skills that the learner will need to acquire. Learner objectives then are categorized into three types: cognitive (knowledge), affective (attitudes) and psychomotor (skills or behaviors), often described as the “KAS” framework. In addition, the LCME requires that the school demonstrate that its courses support achievement of the institutional objectives, and these should be kept in mind when writing objectives. Course directors will be asked to “map” their course objectives to these institutional objectives; it is tremendously helpful if the course objectives are presented to the students in that framework.

Within each type of objective, there is a hierarchy of complexity and achievement. This is most famously described for the cognitive objectives with Bloom’s Taxonomy of objectives. Bloom’s Taxonomy lists six levels of cognitive objectives, which describe not only a level of knowledge obtained, but also imply the steps of learning required to reach that level. There have been multiple revisions of this taxonomy over time; one of the most recent versions uses the following descriptors of mental tasks: to remember, understand, apply, analyze, evaluate, create. For medical education objectives, for instance, remembering factual knowledge (anatomical names for the heart) would be a “low” level cognitive objective, whereas analyzing an electrocardiogram tracing and the underlying pathophysiology of rhythm disorders would be a “higher” level objective. Course directors should write the highest expected level of achievement for the learner, otherwise known as the terminal objective. For each event in the course, the objective may describe an enabling objective for this terminal objective. In the example above, the Cardiovascular Block course for medical students may have as a learning objective that students will be able to interpret electrocardiogram tracings. A lecture objective within this course may be that learners will be able to explain the normal electrophysiology of the heart.
To ensure that objectives are specific and measurable, it helps to have a template structure for writing the objective. One behavioral method is to structure the objective statement so that it answers the question, “Who will do how much/how well of what by when?” The verbs (“will do”) in the objectives describe the behaviors expected of the successful learner and the nouns (“what”) describe the content of the educational program.

**Educational Strategies**

The educational strategy details how learners will achieve the learner objectives for the course, lecture, etc. It usually details 1) content (taken from the nouns in the objectives) and 2) methods. In planning educational methods, educators should think carefully about maintaining congruence between the behaviors in the learning objectives and the learning methods. It is also important to remember that most learning is contextual, and the best curricula will approximate the context in which the learning will be used. As an example, a student may “learn” the pathophysiology of congestive heart failure by attending a lecture, but not recognize that pathophysiology when seeing a patient in clinic. Effective teaching methods often present material in the same context in which the learner will need this learning. Attention to the verbs used in the learner objectives is again helpful here.

General guidelines for choosing methods of instruction are:

1. Instructional methods should be consistent with principles of learning.
2. Instructional methods should be congruent with learner objectives.
3. Multiple instructional methods are better than a single instructional method.
4. Instructional methods can impact the learning environment and have unintended consequences.
5. The choice of methods is often driven by resource limitations.

**Active Learning Strategies**

When designing the GTS curriculum, the GTS Integration Committee agreed that a shift of pedagogy to more active learning methods was critical to the success of the curriculum, and set as a goal, *that 40% or less of formal curricular time would be lecture-based*. Course directors are urged to look at lecture events and consider alternative methods of delivering content. The GTS faculty retreats have offered opportunities to explore other methods and many of these workshops are available online as listed below:

- Advanced Powerpoint (David Newman-Toker)
- Flipping the Classroom (eLecture combined with one of the active learning strategies below—Advice for Creating and Utilizing an eLecture attached)
- Lecturing in the TBL Age (Jon Lorsch)
- Case Method Teaching (Henry Fessler)
- Team Based Learning: Why Do It, How It Works (Pat Thomas, Jacek Motswin, Mike Borowitz)

The OOC staff have created short handouts (available on request) for:

- Use of Clickers
- Preparing a Powerpoint Presentation for optimal learning

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Online tutorials are available at the OAC website at: http://oac.med.jhmi.edu/ittutorial/


In addition, there are frequent faculty development activities in curriculum development (longitudinal and shorter workshops) offered through the Bayview Faculty Development Program (http://www.hopkinsbayview.org/fdp).

**Advice for Creating and Utilizing an E-Lecture as Part of a Flipped Classroom Approach**

**Introduction and Overview**

Electronic lectures (e-lectures) are a valuable component of Genes to Society. They emphasize core material, reduce the number of standard lectures in a course, and promote increased interaction between learners and faculty. E-lectures are under-utilized in the GTS course. In order to be effective, e-lectures *must be accompanied by a post-e-lecture activity* (i.e. small group didactics, flipped-classroom learning, virtual microscopy sessions, etc.). They should not be viewed as a way to decrease faculty requirements for a course since when done properly, faculty are an essential component of the post-lecture activity.

This document outlines a straightforward plan to select, prepare, record and edit material into a top-notch e-lecture that will be a solid platform for knowledge transfer in a long lasting format. Suggestions for post-e-lecture activities are also provided.

**General Guidelines for Creation of E-Lectures**

1. **Topic Selection for Lecture**
   - Choose topic whose general information is unlikely to change in the near future (i.e. core principles)
   - Target existing lectures that are already high quality – based on student feedback, evaluations, content test scores, etc.
   - Target existing lectures that already have associated small group or post-lecture activities
   - Choose a topic that you are excited about
   - Target lectures/topics that are conceptual and not dense recitations of facts
   - Ask your course director for assistance in the selection of topics/lectures

2. **Designing the Post-Lecture Activity – “Flipping the Classroom”**
   - Small group discussions
   - VM sessions
   - Assignment to do in advance of small group session
   - Multiple choice questions to be completed in class (i.e. audience response questions)
• Online discussion forum (students can ask questions or post assignments related to the lecture; students can also comment on each other’s questions/assignments)
• Full class discussions
• Simulation activities
• Computer-based simulations
• Clinico-pathologic Correlations (CPCs)

3. Tips for lecture creation
• Define clear objectives for the lecture and post-lecture activity
• Choose the style of e-lectures: video of actual lecturer with splicing of slides, voiceover of slides, etc.
• Include images, figures, videos, tables; avoid all-word slides when possible
• Don’t use overly complicated figures
• Be succinct! Focus on the main points. Avoid minutiae and personal research interests unless they apply directly to the material being covered.
• Avoid acronyms and alphabet soups of genes/proteins that are beyond the scope of the material
• Know your audience – approach the lecture with the right level of difficulty
• **Target 20 minutes or less for your e-lecture.** If your material won’t fit into 20 minutes, cut non-essential material or divide the topic into multiple e-lectures
• Add pauses or breaks to ask questions, encourage students to think about the material, or transition to a new topic
• When talking over your slides, annotate the slides to focus the viewer’s attention

4. Resources
• Platforms with links to helpful sites:
  i. Powerpoint - [https://support.office.com/en-au/article/Add-narration-to-a-presentation-0b9502c6-5f6c-40ae-b1e7-e47d8741161c](https://support.office.com/en-au/article/Add-narration-to-a-presentation-0b9502c6-5f6c-40ae-b1e7-e47d8741161c)
  iii. Voicethread - [https://jhu.voicethread.com](https://jhu.voicethread.com)

• Useful resources at JHU: OSU, interested students, IEE: [https://improveteaching.med.jhmi.edu](https://improveteaching.med.jhmi.edu)
• Other online guidelines: [http://www.faculty.londondeanery.ac.uk/e-learning/e-learning-in-clinical-teaching-1](http://www.faculty.londondeanery.ac.uk/e-learning/e-learning-in-clinical-teaching-1)
Communicating to Students

Prior to the Course:
We have learned that students appreciate frequent orientations and communications. One week or so prior to the course, send an email welcoming students to the course and directing them to information about textbooks, orientation meetings, etc. Use the communication function in Blackboard for all course-related communication.

All GTS courses must use a Standardized Syllabus Template that includes information that students have requested about courses. This template can be uploaded to Blackboard and also used in printed materials. The template is located in pages that follow.

Orientation Materials

At the beginning of the course, all students should receive the following information (note that the template will prompt you to include this content):

1. Learning Objectives
2. Educational events (usually presented as a calendar or link to OASIS).
3. Learning resources: Textbooks, reserved textbooks, external links on Blackboard, etc.
4. Planned student assessments; when students will get feedback; how the grade for the course will be determined.
5. Policy statements from the EPCC: EPCC has determined that these policies should be distributed to students at the start of every course:
   a. Teacher Learner Conduct (Student Mistreatment) Policy
   b. Attendance Policy* (EPCC approved Attendance Policies for Courses and Clerkships are attached; if courses have stricter attendance policies, they should be publicized at start of courses).
   c. Accountability Policy (attached)
   d. Grading and Remediation Policies (attached)

***[NOTE: The East and West Auditoria, Learning Studio and Teaching Labs have Active Tracker hardware posted at the entrance to the rooms. If an educational event has been entered as required attendance, reports can be generated from the Office of Curriculum. Please notify the Office of Curriculum (officeofcurriculum@jhmi.edu) if you want a curriculum event to have tracking in the Attendance Tracker (should be tagged in OASIS when room reservation made). Attendance for smaller groupings needs to be done on paper, collected and collated by the course coordinators.]

How to Communicate Assignment Deadlines

Deadlines and due dates for assignments need to be communicated to First and Second Year Coordinators for uniform posting on OASIS. Please see the Accountability Policy (attached) to learn how we will help students who have difficulty meeting these deadlines.

Presentations, Notes, and Materials for Students
The EPCC has come to a consensus that beginning with the Class of 2019, handouts will not longer be printed. All materials must be sent to the coordinators no later than 48 hours prior to the lecture or learning event for posting on Blackboard and the curriculum Dropbox with the correct naming convention. For the Class of 2018, the OAC has implemented an “OPT-IN” for printed syllabi. Students are asked to sign up electronically 2 weeks prior to the start of each section whether they OPT-IN for a printed syllabi. The OOC will adjust number of printed syllabi accordingly. Readings may be posted to Blackboard. The Class of 2018 will have the ability to utilize Dropbox to obtain learning materials, if desired.

It is STRONGLY RECOMMENDED that syllabus documents (presentations, lecture notes, workshop handouts) for the section--or at a minimum, for the week--be ready at the start of the course. The GTS Integration Committee has agreed that all courses use a standardized template for this syllabus, which is located below. A brief checklist for what to have ready as you assemble the syllabus is:

- Orientation content described above
- Course-specific policies, e.g. expected laboratory procedures, etc.
- Course specific assessment plans, describing how the grade will be generated.
- Copies of PowerPoint presentations
- Lecture notes with learning objectives, keywords or concepts, and ideally, self-assessment questions for each lecture or event.
- Notification of the following EPCC curriculum policies: Teacher-Learner Conduct, Attendance, Accountability, and Grading and Remediation

The Office of Curriculum will assist in printing materials and making them available in Armstrong, IF THERE IS SUFFICIENT NOTICE. Materials for reproduction should be sent to the coordinators at least 5 business days in advance of distribution.

PLEASE NOTE: There is no high-volume copier in the Armstrong medical education building. Last minute copies of lectures or lecture notes must be brought to the event by the lecturer.

Communicating to Lecturers and Small Group Leaders

Please feel free to share this manual with all lecturers and small group leaders. It may be helpful to give more succinct guidance to lecturers and other faculty prior to the start of the course. At a minimum, these faculty should receive the syllabus and access to Blackboard course materials so that teaching can be consistent and sequential.

Lecturers: PLEASE NOTE THE FOLLOWING:

1. Every lecture should have a faculty disclosure slide
2. Every lecture should have one slide of learning objectives for the lecture
3. No lecture should have more than 50 slides (1 slide per minute)
4. Lecturers should arrive 15 minutes prior to the start of the lecture and identify themselves to the AV coordinator in the control booth.
5. Presentations should be emailed to jsteel12@jhmi.edu the day prior to the event or brought on a USB drive to the lecture.
6. If the lecture has last minute updates, please make sure that the updated lecture is forwarded to the Year 1 or 2 coordinator for posting on Blackboard/Dropbox no later than 48 hours prior to the event.

Please do not use dark backgrounds for lecture slide presentations. White background is always the best choice for students to easily add notes.
Submit all lecture slide presentations in **PowerPoint format** to the course coordinators. Handouts will be printed as 6 slides/page.
- First Year: Sherrie Fornoff ([sfornoff@jhmi.edu](mailto:sfornoff@jhmi.edu))
- Second Year: Terri Hennel ([thennel1@jhmi.edu](mailto:thennel1@jhmi.edu))

**B) To post content yourself on Blackboard (prefer all materials sent to coordinators so these will be simultaneously posted to the curriculum Dropbox)**

- Save lecture Powerpoints in **PDF slide format** with **1 slide/page**.
  - PDF is a universally compatible format.
  - Students will be able to download smaller file sizes and view them on any platform.
  - PDFs are more secure.
- **Save lecture slides** with the file name format:
  
  YYYYMMDD_ProfessorLastName_LectureTitle

  - Use the date the lecture will be presented.
  - This ISO time format allows software to automatically sort lecture files in chronological order.
  - Students will be able to easily search for a given lecture by the date it was presented, the presenter’s last name, or the title of the lecture.

- **Save lecture notes** with the file name format:

  YYYYMMDD_ProfessorLastName_LectureTitle_Notes

  - Use the same lecture title for lecture slides and lecture notes
  - This will ensure that accompanying notes will pair with the appropriate lecture

**Tips for creating quality lecture slides:**

- Please do not use dark backgrounds for lecture slide presentations. White background is always the best choice for students to easily add notes.

- Avoid animations. Instead, create a duplicate slide that builds on information. This will prevent information being covered up by animated objects.

- Provide links to videos, or, if unavailable on the open web, request that OAC post the videos for you ([mdodd@jhmi.edu](mailto:mdodd@jhmi.edu))
Standardized Course/Section Syllabus:

Johns Hopkins University
School of Medicine

Course Title
(Note: each section must have a separate syllabus.)

Course/Session Director: Name
Phone Number (and time[s] you can be reached)
E-mail address

Course Coordinator: (If you have not identified a coordinator within your department, please use: for Year 1 events, Sherrie Fornoff (sfornoff@jhmi.edu) and for Year 2 events, Terri Hennel (thennel1@jhmi.edu).

Small Group Facilitators: Names and email addresses

Class Schedule: Inclusive Dates; link to OASIS

Examination Schedule: Dates and times

Course Description: (Brief description of the course, what students will learn and how this fits in the overall curriculum. This course is about..... It builds on what you learned in..... What you learn here will prepare you for..... The course uses a combination of lecture, readings, small group problem solving, etc.)

Course Learning Objectives:
Enter 6 to 12 major objectives of the course. These should include the required program learning outcomes for the course. Instructors may include other outcomes they feel are important. This is also an opportunity to note if any horizontal strands will be addressed in this course. Where possible, link to the institutional objectives and competencies.

What's New
Note any changes in the course from previous cohort as a result of student feedback or other evaluation.

Required Text and Other Materials
Enter required and/or recommended text(s) and other materials. If no text is required, please indicate this on the syllabus.

Assignments
Enter assignments for course and due dates for each.
Evaluation and Grading

A. **Formative**: How will students know how they are doing in the course?

B. **Summative**: Indicate the basis for computing course grades and the relative weight of each assignment, exam, etc. *Students should have a clear understanding of grading requirements and criteria for letter grades.*

For Example:

Class Discussion (25%) **
Theory Paper (20%)
Mid-term Exam (15%)
Research Project (20%)
Final Exam (20%)

**Grading Scale** (grading scale is determined by the School of Medicine.)

*P* = Student has an average equal to or exceeding 70% and has met all required assignments for the class.

*U* = Student completion of some examinations or assignments is below passing level. These examinations or assignments must be remediated in order to convert to *P*.

*I* = Student has a passing average for the course, but has missed required events, because of illness or emergency. Student should meet with course director to plan remediation.

*F* = Student has failed significant required elements of the course, or has an average score below the passing level for the course. Student should meet with the course director to plan remediation.

**Expectations**

Example: Participation in lectures, discussions, and other activities is an essential part of the instructional process. Students are expected to participate regularly; those who are compelled to miss class meetings should inform their instructors of the reasons for absences. Faculty often include classroom participation in student grading and evaluation. The instructor will clearly communicate expectations and grading policy in the course syllabus.

This course is heavily dependent on participation, if you need to miss classes, you need to let the instructor know ahead of time.

Assignment deadlines will be posted on OASIS and must be strictly adhered to; the Accountability Policy outlines how we will help you develop these important professional habits.

The JHUSOM policy on attendance in the curriculum is posted on Blackboard. Note the following JHUSOM policy:

“Students whose attendance record does not show >80% attendance at the total required sessions for a course block will meet with the course director. If they cannot justify or disprove their absences, they will receive a grade of *U* until they remEDIATE, and a Professionalism Concern Card will be forwarded to the Dean of Student Affairs.”
Weather and Other Emergencies

The School of Medicine follows Johns Hopkins University policy regarding closure due to weather emergencies. Weather and other emergencies are available at the phone numbers and website below, as well as on radio and TV broadcasts (http://www.insidehopkinsmedicine.org/weather.pdf):

- Baltimore 410-516-7781
- Outside Baltimore 800-548-9004
- URL: http://webapps.jhu.edu/emergencynotices

Examinations

A student who must miss an examination should notify the instructor and arrange a makeup examination. Available dates for makeup exams are already scheduled on OASIS.

Any student who arrives more than 15 minutes late for an exam will need to take a makeup exam and will receive an incomplete.

Refer to the SOM Remediation Policy for a full explanation of remediation process for failed examinations. (Attached)

Classroom Accommodations for Students with Disabilities

If you are a student with a documented disability who requires an academic adjustment, auxiliary aid or other similar accommodations, please contact the Office of Student Affairs at 410-955-3416. You must also notify the course director and course coordinator in advance of the start of the course and in advance of any exam or assessment.

Statement of Diversity and Inclusion

Johns Hopkins University is a community committed to sharing values of diversity and inclusion in order to achieve and sustain excellence. We believe excellence is best promoted by being a diverse group of students, faculty, and staff who are committed to creating a climate of mutual respect that is supportive of one another’s success.

Teacher Learner Conduct Policy

The Johns Hopkins University School of Medicine is committed to fostering an environment that promotes academic and professional success in learners and teachers at all levels. The achievement of such success is dependent on an environment free of behaviors which can undermine the important missions of our institution. An atmosphere of mutual respect, collegiality, fairness, and trust is essential. Students should review the JHUSOM Guidelines for Conduct in Teacher/Learner Relationships, located on Blackboard.
**Student Honor Code**

Students are reminded of the honor code developed by the medical student body, introduced in September 1991, is as follows:

As a student at The Johns Hopkins School of Medicine, I pledge:
- To do my own work and be honest in my interactions with peers, faculty, and staff. This applies to my work on examinations, assignments, and papers as well as work in the laboratory.
- To uphold the high standard of conduct in patient care which has always been maintained by the Johns Hopkins medical community.
- To base my interactions with other students on mutual respect and cooperation.
- To act on infractions of the honor code and to maintain the confidentiality of all parties involved.
- To encourage my peers to uphold this honor code.

It is the expectation that Hopkins students live by this code.

**Course Evaluation**

The following statement **must be included on all syllabi exactly as written below:**

Please remember to complete the course evaluation for this course. Evaluations will be required from a rotating sample of 25% of the class. Other students will always have the option of submitting an evaluation if they choose. This will reduce the overall burden of surveys for students. There will be no extra credit for completing the evaluation. If you are in the designated 25%, you will receive an incomplete if the course evaluation is not completed by the time grades are posted for the course.

These evaluations are an important tool in the School of Medicine’s ongoing efforts to improve instructional quality and strengthen its programs. The results of the course evaluations are kept anonymous—your instructor will only receive aggregated data and comments for the entire class.

**Bibliography (required)**

Include list of resources for study.

**Course Outline**

Divide your course into units/sessions/topics: Indicate dates, topics, and assignments for each unit.
Student Accountability Policy

Purpose

1. To provide uniform, transparent expectations for students to complete professional responsibilities and respond to communications in a timely fashion, and to provide a consistent response to the rare events when these expectations are not met.
2. To identify and assist students who have consistent difficulties meeting deadlines or other responsibilities for class assignments, other SOM requirements, or sustaining professional communications.
3. To identify and rectify situations in which expectations such as deadlines and assignments are poorly communicated or excessive.
4. To reduce the burden on the staff and faculty who must track and document compliance with coursework or other time-critical professional duties.

Introduction

Medical practice is rife with deadlines. These include prompt clinical documentation, required training modules, and timely communication with patients and colleagues. Medical school is also rife with deadlines. While many of these may seem flexible or optional, there are several implications when students miss deadlines or delay compliance until the last possible moment. Behind each deadline, there is a coordinator, administrative assistant, or faculty member tracking this item for the entire class, awaiting its completion or an email reply. If multiple students are missing several deadlines, the staff burden is quickly amplified, and steps dependent upon the uncompleted assignment are delayed. For the student, these missed deadlines may reflect difficulties with organization that, lacking remedy, will only become magnified during clinical rotations and graduate training. They also may reflect life events that are impacting the student, but which could be misinterpreted as irresponsibility. Similarly, when a given course generates many missed deadlines, this may reflect faults in the way the assignments are communicated, their sheer number, or conflicts with other curricular events unknown to the course director. Therefore, this policy describes the way in which deadlines will be communicated to the students, the expectations for their compliance and timely responses to coursework-related emails, and the process undertaken when students fail to meet expectations.

Communications to students

Deadlines and due dates for student assignments or other course requirements will be posted on Oasis and communicated to students as announcements on Blackboard, together with emails to the course enrollees using Blackboard. These will be posted and emailed at least one week before they are due. The original notification may be followed up by no more than two Blackboard reminder emails by course coordinators.

Communications from students

It is expected that students will check email at least daily during the workweek, and at least weekly during school breaks. For course-related emails that indicate a response is expected, students should respond within 48 hours of receipt, except as noted below. If more time is needed to formulate a complete response, a reply noting the expected date of the complete response should be sent within the 48-hour time window.
**Process for students who miss deadlines**

1. Within one working day of a missed deadline or assignment, the course director will be notified of students who have not completed the assignment or requirement. The course director is responsible for contacting the student via Blackboard email, with copies to the course coordinator. The student is expected to complete the assignment AND reply to the course director (and all recipients) within one additional working day; if that will not be possible due to circumstances beyond their control, they must promptly email the course director and other recipients to provide an explanation and discuss remedies.

2. If the student has not completed the assignment or provided an explanation within 5 working days of their initial notice from the course director (6 days overdue, exclusive of school breaks), the Assistant or Associate Dean of UME will contact the student to remind them of the deadline. The student must complete the assignment, and respond to the ADUME and course director within one working day.

3. A database will be maintained of students whose missed deadlines have required the intervention of a course director. Any student who has required course director or ADUME intervention three or more times within any two year period or who has not responded to the ADUME in a timely fashion will be referred to their CAP advisor. The advisor will meet with the student to discuss possible reasons and solutions to the problem. The date of the CAP meeting and resolution plan will be reported to the OOC and noted in the student database.

4. The database will be reviewed annually to determine if some courses are generating excessive numbers of missed deadlines. If so, the course requirements will be reviewed and possibly revised.

5. Following a meeting with the CAP advisor, any new missed deadlines will result in the student being referred to the OSA and discussed by the relevant student Promotions Committee. The Associate Dean for Student Affairs or their designee will make recommendations to the Promotions Committee regarding extenuating circumstances or the need for further intervention.
OASIS®

OASIS (online access student information software) is the curriculum mapping and management tool for the GTS curriculum. All faculty and students have access to Oasis through the JHED authentication system.

In order to have best possible information in the system, course/section leaders are asked to send to OOC staff before the start of the academic year:

- A complete schedule of events, and for each educational event
- Start times and end times
- Instructor names
- Learning objectives
- Instructional method
- Assessment method identified
- Keywords
- Tagging with horizontal strands and to the course objectives
- Resources needed

OOC staff will add room locations, and put a link to the Blackboard location for course materials.

To access the curriculum mapping and management tool, OASIS, follow this link: http://oasis.med.jhmi.edu. You use your JHED password to enter OASIS. Please e-mail Sherrie Fornoff (sfornoff@jhmi.edu) if you are unable to log in.

ALL CHANGES TO THE SCHEDULE OF EVENTS AND COURSES SHOULD BE DONE BY S. FORNOFF OR T. HENNELL. If Year 1, 2, or TIME faculty wish to edit objectives, make schedule or faculty changes, please contact one of the OOC coordinators.

Susan Kerfoot (smroz@jhmi.edu) provides technical support to clerkship directors and coordinators for OASIS.

OASIS allows faculty and course directors to see the calendar of events, view individual events (who is teaching, what is the content, etc.) search for content and keywords across the curriculum.

OASIS Instructions

View the Calendar

1. Login to https://oasis.med.jhmi.edu using your JHED password
2. Go to “calendar”
3. Select the date your course begins by scrolling on the calendar icon to the right of the date
4. Make sure you have selected the correct year on the left-hand buttons: GTS 1, GTS 2: otherwise you will see all years together.

PLEASE NOTE: You must be in the same academic year as the course you are trying to view.
Searching Events

1. Login to https://oasis.med.jhmi.edu using your JHED password
2. Courses > Select Course
3. Select the academic year you want and press “reselect year”
4. Choose the appropriate department (All courses in the GTS curriculum are "interdepartmental.")
5. Choose any course
6. Click “Enter Course”
7. Go to Manage > Event-Based Courses > Search Events
8. Choose the fields you wish to search (please be patient - many fields are not fully populated!)

Printing a Range of Weeks

1. Follow steps 1-6 above.
2. Go to Manage > Events-Based Courses > Multi-Week Print.
3. Select the weeks you want to print and enter your e-mail address. A pdf will be e-mailed to you.
4. If you cannot access this, email Sherrie Fornoff or Terri Hennel.
**Blackboard Learn™**

JHUSOM uses Blackboard online course management software to communicate with students, present learning materials, conduct surveys and for some online testing. The online delivery of course materials is done with Blackboard software, which is managed by the Office of Academic Computing. As of July 2009, JHUSOM moved to the Enterprise version of Blackboard which is accessed through JHED authentication.

Regarding student enrollment, the registrar's office will be providing the Office of Academic Computing a course list a few days before the start of a course. This information will be imported by OAC into Blackboard upon receipt. Your course administrator is also able to add and delete students in your course at any time.

For faculty enrollment, please notify the OAC or the OOC of the faculty who should have access to the course. This generally includes lecturers (who may want to link material to content before and after their lecture), and all small group facilitators.

**Blackboard Course Organization**

The Genes to Society Integration Committee has asked that course directors use a standardized organization in setting up the Blackboard courses. This is particularly helpful to students trying to locate necessary information. The left-hand navigation bar for each course should have the following tabs:

- Syllabus
- Goals and Objectives
- Slide Presentations
- Lecture Notes
- Small Group Materials
- Workshop Materials (relevant to GTS sections)
- Readings, References, E-lectures and External Links
- Formative Quizzes

The Office of Academic Computing will create these courses in Blackboard with this structure. Course directors and coordinators should not alter this organization. We have consolidated all of the SFM and GTS courses into five courses: SFM, and GTS 1-4. All other courses in Blackboard are unaffected. If you have concerns about your course/section, please contact Susan Kerfoot in the Office of Academic Computing for assistance.

For additional training or questions regarding Blackboard, contact the Office of Academic Computing.
**Questionmark®**

Course/Section Leaders who wish to create knowledge-based examinations should refer to the section, *Creating Examinations* in this document.

Questionmark® Perception® is the proprietary software used for internal examination purposes in the curriculum. All internal knowledge-based examinations that count towards grade evaluations should be deployed in Questionmark.® Examinations can be administered in AMEB or off-campus per the policy for individual courses. Once students submit an examination, results and immediate feedback are available to the students. The software allows for rapid psychometric analysis and quality control of examinations and also gives students access to an ongoing record of their examination scores.

Course and section directors will be sent the previous year’s examination by Violet Kulo, Ed.D., Instructional Designer in the Office of Curriculum. Course/section leaders should send back any edits, additions, or deletions of items, based on the exam performance from the previous year and any changes to the curriculum. The examination will then be created in Questionmark by Dr. Kulo. Since each step requires time, we ask that course and section leaders comply with timelines as specified in the *Online Testing Policy*.

**E*value™**

E*value is a secure encrypted online evaluation system which has been in use at Johns Hopkins for the past decade, primarily in GME and the clinical clerkships. The system does allow collection of course evaluations, and offsite preceptor evaluations, so is used as well in some small group evaluations in the pre-clerkship courses and in the Longitudinal Clerkship.

The class of 2015 and beyond has an electronic portfolio template in E*Value that is being used to document credentialing, reflective writing in TIME courses, and Longitudinal Clerkship write ups and reflections.

There are multiple programs in E*value that are administered by separate clinical departments, primarily for residency and fellowship trainees.

Terri Hennel is the Medical School administrator for E*value. If a course or course director wishes to use E*value, please contact her at thennel1@jhu.edu.
# Timeline for Course/Section Implementation:

<table>
<thead>
<tr>
<th>Time</th>
<th>Task List</th>
</tr>
</thead>
</table>
| **By August 1 of current Academic Year** | Review course objectives; revise and clarify if necessary. Send edits to Office of Curriculum. Review most recent SAPE or SCRT review for potential improvements to the course. Prepare schedule/list of events for the section. Identify and confirm lecturers. Communicate event schedule to Office of Curriculum with the following for each event:  
  - Title of Event  
  - Event Learning Objectives  
  - Instructor(s) (lecturer or small group leaders)  
  - Educational Method (lecture, small group, VM teaching lab, TBL, etc.)  
  - Optimal location (Teaching Lab, lecture hall, Learning Studio, etc.)  
  - Horizontal Strands that you think might be addressed by this event  
Review last year’s exam: Does it map to current course objectives? Should items be dropped or modified? Can new items be added to improve reliability? |
| **By August** | Clerkship coordinators will reserve AMEB rooms and Simulation Center times and dates for PRECEDE & Clerkships.                                                                                                           |
| **4 weeks prior to start of course** | Confirm lecturers’ schedule. Remind lecturers of required slides: Disclosure and Objectives. Obtain lecture presentations and send to Office of Curriculum for uploading to Blackboard/Dropbox.                                      |
| **4 weeks prior to start of course** | Review Syllabus for accuracy: contacts, objectives, evaluation and grading. Send final syllabus document to Office of Curriculum.                                                                                          |
| **4 weeks prior to start of course** | Strategize with small group and lab leaders how to maximize small groups. Do you need a written Instructors’ Manual for small group leaders? Encourage small group leaders to attend or review lecture content. Plan meetings of small group leaders before or after to prepare for teaching and debrief small groups. |
| **2 weeks prior to start of course** | Although the Paperless Initiative has been implemented for the Class of 2019, any printed materials should be finalized and will be sent to Printer by Office of Curriculum. Once printed, additional handouts will need to be brought by lecturers. |
| **Days prior to start of course** | Start communicating to students (look at OASIS schedule and make sure you are not doing this the night before an exam). Welcome students to the course, and offer contacts, helpful resources, etc. |
| **48 hours prior to learning event** | Last opportunity to add updated presentations or handouts to Blackboard and the curriculum Dropbox. Materials must be sent to the coordinator for labeling with the title convention and uploading. |
| **5 days prior to exam** | Final version of the course/section exam should be sent to Violet Kulo at vykulo1@jhmi.edu. The exam will be tagged and inserted into testing software; a final proof will be sent to course/section leader at least 48 hours prior to exam. If exam is not ready, the previous year’s exam will be used. |
| **Exam day** | Confirm that you or a section leader will be available in the AMEB to answer questions. (Course leaders usually sit in AMEB 327 during exams). |
| **Exam day** | Review results of exam and item analysis when they are returned to you. There are often recommendations about dropping poorly performing items from the exam, which requires a recalculation of the score. Make those decisions as quickly as possible so students will know final scores. |
| **2 weeks after end of course** | Confirm final grades with Office of Curriculum staff, who will prepare grade sheets for the Registrar, and post grades to Blackboard gradebook. |
I. Statement of Philosophy
The Johns Hopkins University School of Medicine is committed to fostering an environment that promotes academic and professional success in learners and teachers at all levels. The achievement of such success is dependent on an environment free of behaviors which can undermine the important missions of our institution. An atmosphere of mutual respect, collegiality, fairness, and trust is essential. Although both teachers and learners bear significant responsibility in creating and maintaining this atmosphere, teachers also bear particular responsibility with respect to their evaluative roles relative to student work and with respect to modeling appropriate professional behaviors. Teachers must be ever mindful of this responsibility in their interactions with their colleagues, their patients, and those whose education has been entrusted to them.

II. Responsibilities in the Teacher/Learner Relationship

A. Responsibilities of teachers (including residents on clinical rotations)

1. Treat all learners with respect and fairness.
2. Treat all learners equally regardless of age, gender, race, ethnicity, national origin, religion, disability, or sexual orientation.
4. Be on time for didactic, investigational, and clinical encounters.
5. Provide timely feedback with constructive suggestions and opportunities for improvement/remediation when needed.

B. Responsibilities of learners

1. Treat all fellow learners and teachers with respect and fairness.
2. Treat all fellow learners and teachers equally regardless of age, gender, race, ethnicity, national origin, religion, disability, or sexual orientation.
3. Commit the time and energy to your studies necessary to achieve the goals and objectives of each course.
4. Be on time for didactic, investigational, and clinical encounters.
5. Communicate concerns/suggestions about the curriculum, didactic methods, teachers, or the learning environment in a respectful, professional manner.

Students are advised to review the complete guidelines in the Student Handbook, School of Medicine catalog or at http://www.hopkinsmedicine.org/som/students/policies/relationships.html.
JHUSOM Attendance Policy²

Scientific Foundations of Medicine
Foundations of Public Health
Genes to Society
Intersessions

Among the goals of the Scientific Foundations of Medicine and the Genes to Society courses are to develop a sense of professionalism, to promote collegiality, to engage students in teaching one another, and to give students experience working in teams where different backgrounds and expertise are represented. Meeting these goals requires each student to be actively engaged, therefore attendance is mandatory at all group learning and teamwork activities. Attendance is also mandatory at all activities that involve patients and/or guests.

Mandatory attendance:

- Small group sessions
- Clinical Correlations
- Events involving interaction with a patient
- Case discussions
- Labs
- Activities in the Simulation Center
- GTS Workshops

Failure to attend at least 80% of these events in a block will result in the student being reported to the course and block directors and the Associate Dean for Student Affairs. Unexcused attendance below 80% will affect the student’s performance in the course and will be considered a breach of the standards of professionalism expected by the School. In blocks where at least five sessions of one type of event occur (e.g., Small Group Discussions), attendance at 80% of these sessions is required in addition to overall attendance at 80% of interactive and patient and guest events.

Excused absences may be granted in cases of illness, religious observance, family emergency, presentations at scientific conferences, or required legal activity (e.g., jury duty) through discussion (in advance whenever feasible) with the section director, course director, and/or Associate Dean for Student Affairs.

² Approved by EPCC, June 4, 2009
Clinical Curriculum Attendance Policy
Approved Clinical Skills Committee January 21, 2010

Approved by the EPCC February 4, 2010

Attendance is required in all required clinical courses. This policy encompasses the following courses, hereafter referred to as required clinical courses:

- Longitudinal Clerkship
- Transition to the Wards
- PRECEDE
- Transition to Residency and Preparation for Life (TRIPLE)
- Basic Clerkships: Emergency Medicine, Medicine, Neurology, OBGYN, Pediatrics, Psychiatry, and Surgery
- Advanced Clerkships:
  - Critical Care
  - Sub-internships in Medicine, Surgery, Pediatrics

Attendance rules are governed by the School of Medicine in the following ways:

1. School Holidays

The School of Medicine publishes an annual calendar that identifies official SOM holidays for students (http://www.hopkinsmedicine.org/som/students/academics/calendar.html). These holidays currently include the following:

- Labor Day (Quarter 1, 1 day)
- Thanksgiving (Quarter 2, 4 days [2 weekdays, 2 weekend days])
- Christmas and New Year (winter break)
- Martin Luther King Day (Quarter 3, 1 day)
- Spring vacation (spring break)
- Memorial Day (Quarter 4, 1 day)
- Independence Day (Summer Quarter, 1 day)

The holidays which occur during the required clinical course time generally fall on a Monday or Friday adjacent to a weekend. These weekend days adjacent to these weekday holidays are NOT considered official school holidays (with the exception of Thanksgiving) and required activities may be scheduled on those weekend days at the discretion of the course or clerkship director. University Commencement and Convocation are NOT considered holidays for required clinical course students. Similarly, Election Day, presidential inauguration, and other public or civic events are not considered holidays for required clinical course students.

2. Excused & Unexcused Absences

There are no given ‘personal days’ allowed in a required clinical course. Clarification on what qualifies as an excused and unexcused absence is as follows:
a). Residency Interviews

The following policy is to address the amount of time that fourth year students can miss from their required clinical courses for residency interviews. The goal is to ensure that students obtain sufficient experience in each of the basic disciplines to meet the objectives of the Hopkins curriculum. Interview days should not be considered the equivalent of PERSONAL days. Students should make every effort to leave as late as possible and return as early as possible when interviewing to minimize time lost from a core clerkship.

1) On 6-9 week clerkships, students will be allowed to miss 3 full days of responsibilities as excused absences for interviews.

2) On 4-4.5 week clerkships, students will be allowed to miss 2 full days of responsibilities as excused absences for interviews.

3) Students must inform course directors of any such absences in advance of the beginning of the clerkship when possible. If students do not contact the course director in advance of any absences, they will be considered unexcused and will impact on the student’s final grade.

4) All students who miss more than the allowed days above will be required to develop a plan for remediation of missed days with the clerkship director. Such remediation is a necessary requirement for successful graduation from the M.D. curriculum.

Comprehensive Clinical Skills Exam (CCSE)

The CCSE is a required educational activity for all graduating medical students. Students are encouraged not to schedule their CCSE during a required clinical course, but this is not always possible. The student is to be excused from required clinical course duties for the duration of the exam (approximately 7-9 hours, since the current 10-case version of the exam runs from about 7AM to 4PM). Students should expect to attend required clinical course educational activities after they have completed the exam.

Other Required Coursework

Certain required courses (e.g., Rational Therapeutics) may occasionally be scheduled concurrently with a required clinical course. If this occurs, scheduled activities for these other courses take priority over all scheduled required clinical course activities. Nevertheless, if such a conflict arises for a particular student, remediation may be required (see below).

Elective Coursework

Under no circumstances will elective coursework supersede required clinical course activities. Students will not be excused from required clinical course duties to attend clinical elective courses (or similar activities, such as research electives or ACLS training), whether such electives are internal or external to Johns Hopkins SOM. This includes elective experiences requiring complex or expensive travel arrangements, such as those conducted overseas. It is the responsibility of the student to ensure that no such conflicts arise. Students should consult the SOM calendar and the Registrar’s office for official start and end dates for each required clinical course.
Personal Reasons (including Religious Holidays)

Students must notify the course or clerkship director as early as possible before the start of the required clinical course regarding any scheduled absence other than those described above, and should expect that they will need to make up missed time. This includes (but is not limited to) any absence for religious holidays, academic events (e.g., presentations at national and scientific meetings, including within Johns Hopkins), and civic responsibilities (e.g., Election Day, jury duty). Although each course or clerkship director has discretion to allow or disallow such absences (except for jury duty and religious holidays, see below*) based on their potential impact on the educational experience, the general rule is “a day for a day” (i.e., each missed day will generally result in one additional day made up at a later time).

Clarifications for specific instances:

1. Since most family events (weddings, family reunions, etc.) are planned for weekends, most of these events could be attended with minimum time lost from the required clinical courses with advance planning. However, some personal events (e.g., graduations) typically occur on weekdays. Family events are excused only when the director has been notified at least 6 weeks prior to the start of the required clinical course, and when students will not miss more than 2 days (8-week clerkship)/1 day (4-week clerkship) or any required activities that would be difficult to remediate.

2. Attending JHU School of Medicine Graduation is excused only if a family member or spouse is graduating.

3. Attendance at a professional meeting for networking or professional development, or to accompany a family member, during a required clinical course is not excused. Students who are funded by the Office of Student Affairs or Office for Student Diversity to attend national student association meetings should follow the 5-step process outlined by the Office for Student Diversity.

*University policy regarding religious holidays states, “Religious holidays are valid reasons to be excused from class. Students who must miss a class or an examination because of a religious holiday must inform the instructor as early as possible in order to be excused from class or to make up any work that is missed.”

Weather and Other Related Emergencies within the Baltimore Area

Weather-related policies are stipulated by the Johns Hopkins University and may be found at the URL below:
http://webapps.jhu.edu/jhuniverse/administration/emergency_weather_security_information/policy_on_university_closings/index.cfm

Weather emergencies are available at the phone numbers and website below, as well as on radio and TV broadcasts (http://www.insidehopkinsmedicine.org/weather.pdf):

Baltimore 410-516-7781

Outside Baltimore 800-548-9004

URL: http://webapps.jhu.edu/emergencynotices

Basic Clerkship students are not considered “Required Attendance Employees” and are excused from attendance at normally-required Clerkship activities if affected by circumstances (e.g., weather) related to University delays or closings. As necessary, remediation plans will be made on a case-by-case basis by the Clerkship Director.
Weather and Other Related Emergencies outside the Baltimore Area

Students who travel during (e.g., on weekends) or in close temporal proximity to (e.g., just before) a required clinical course may be delayed in their return travel plans by inclement weather, flight cancellations, or other similar events outside their control. In such circumstances, safety is the first priority. Once the student’s safety is assured, they should immediately notify people related to the course or clerkship, as appropriate (e.g., course or clerkship director or coordinator, clinical team or preceptor with whom they are rotating, etc.). Students will generally be required to remediate any time or activities upon safe return or at a later date. Students should be advised, however, that extended or repeated travel-related absences will be considered unprofessional behavior and will likely result in grade reductions, failure, or disciplinary action.

Illness or Injury (Personal or Family)

Illnesses or injuries are handled on a case by case basis by course or clerkship directors. In almost all cases, such events cannot be predicted in advance. When either occurs, the student’s first responsibility is to their own personal safety and the safety and well-being of those around them. Once the situation has stabilized sufficiently and it is safe to do so, a student should immediately notify people related to the course or clerkship, as appropriate (e.g., course or clerkship director or coordinator, clinical team or preceptor with whom they are rotating, etc.). Family emergencies (including illness or death of a loved one) should be handled similarly. As necessary, remediation plans will be made on a case-by-case basis by the course or clerkship director.
3. Remediation of Coursework

All absences, even when excused, must be remediated. When it is not feasible to reproduce a clinical or simulated experience, the course or clerkship director will approve an appropriate remediation. It is at the discretion of the course or clerkship director to establish a required remediation plan for the student, regardless of the reason for absence. Note that if a significant component of the educational experience is missed for any reason, it is at the course or clerkship director’s discretion to require remediation or reduce the student’s grade. In some cases, students may need to wait for the next available course or clerkship slot for remediation, potentially delaying promotion or graduation in some circumstances.

4. Consequences of Unexcused Absences

Students who fail to attend required activities (e.g. required clinical course orientation) without advance notice and are unable to offer a reasonable or appropriate justification (as judged by the course or clerkship director) may be subject to grade reductions, failure, or disciplinary action on grounds of lack of professionalism.

Unexcused absences, including failure to notify course and clerkship directors about absences in a timely manner, and failure to remediate when remediation is offered, will impact the evaluation of students in the following ways: (1) generation of a Professional Concern Card to the Associate Dean of Student Affairs and (2) a statement attesting to the absence in the narrative evaluation that is forwarded to the Associate Dean of Student Affairs. This will generally result in grade reductions or failure of the required clinical course or clerkship for failing to meet the professionalism standard. In the case of clinical clerkships, if students plan to miss more than 2 days or any required activities that would be difficult to remediate, they should attempt to reschedule the clerkship. However, due to scheduling constraints within the clerkships, this may not be possible. If it is not possible to reschedule, students must comply with the remediation plan as outlined by the clerkship director.

5. Recourse for Students Who Feel They Have Been Treated Unfairly

Any student who feels unfairly treated with regard to attendance or duty hours policy should discuss these issues with the course or clerkship director. If a mutually agreeable decision is not reached, the student should contact the Office of Student Affairs if they wish to pursue the matter further.
Remediation
Standardized remediation plan
for knowledge-based examinations in the
Genes to Society Year 1 and Year 2 curriculum

Goals
- Provide a uniform approach and set of expectations for students who fail an exam in a GTS course in years 1 or 2.
- Promote only those students who have demonstrated their competence.
- Assist students in obtaining that competence through the remediation process.

Policy
1. Passing score for first test administrations will be the lower of either 70% or 1.5 SD below the mean score.
   a. The latter option is for courses or sections of courses with unexpectedly difficult exams; the exam and/or teaching should be revised with subsequent iterations of the course to establish a 70% pass threshold.
2. Students who fail the first test administration or other requirements of the course or required section of a course will receive a U for the course until they successfully remediate. The U and remediation outcome will be reported to the registrar.
3. First remediation attempt will be no sooner than one week after the failed exam.
4. The latest that remediation can be completed is August 1st for first year students, and second year students must successfully remediate prior to beginning any clinical clerkship.
5. Whenever possible, remediation testing should be postponed until after a vacation (spring break, etc.) to prevent students from falling behind in on-going work.
6. Students failing any end-of-section exam will be contacted by the section leader or course director to discuss potential reasons for the failure and establish a learning plan. The student’s college advisor and the Dean of Student Affairs will be informed of the need to remediate by the course director.
7. First remediation requirement will be to retake a proctored exam
   a. Closed book format will require 70% to pass
   b. If banked exam questions are available, new questions should be substituted in the redo exam.
8. If the first remediation is failed, the student will meet with the course director. Learning plan must include scheduled peer tutoring sessions.
9. Second remediation requirement will be to retake the exam again (with new questions if available), requiring 70% correct to pass, PLUS the student’s choice of EITHER:
   a. Write one or more essays of up to 2 pages in length, on topic(s) assigned by the section leader. Topics should be based on the test questions that were missed and the associated lecture objectives, with the total page requirement < 5. Essays will be graded P/F by the section leader together with one or more other section faculty members, approved by the course director.
   OR
   b. Complete an oral examination administered by the section leader (or designee) together with at least 2 other section faculty, to be based on the missed test questions and associated lecture objectives.
10. Students whose attendance record does not show ≥80% attendance at the total required sessions for a course block will meet with the course director. If they cannot justify or disprove their absences, they will receive a grade of U until they remediate, and a Professionalism Concern Card will be forwarded to the Dean of Student Affairs.
   a. Remediation plan will be an essay based on the content of the missed session(s), not to exceed 6 pages, and
   b. A reflective essay on why attendance is considered required for certain curricular events, not to exceed 1 page.
11. All students who require remediation will be referred to the Promotions Committee for discussion.
Anne and Mike Armstrong Medical Education Building

Scheduling Rules

- All scheduling requests must be submitted through http://armstrong.som.jhmi.edu/.
- **Priority will always be given to the scheduled M.D. curriculum.**
- If an event will take the majority of the building, impede student study space, or create excess noise during class hours, the event must receive permission through the Office of the Vice Dean for Education. In the case of student organization conferences, the Medical Student Society, in addition to the Office of the Vice Dean for Education, will have to approve the building use.
- The building does not have enough dedicated staff to accommodate events being held by groups other than the SOM MD students, or offices within the Office of the Vice Dean for Education. Permission may be granted in some cases where the primary purpose of the requested event is educational. Holiday and social parties cannot be accommodated.
- Events cannot be scheduled in Wenz Café during its business hours (6:30 AM – 6:30 PM).
- The building has no Housekeeping or A/V staff for after hours or on weekends. Users of the building after hours or over the weekend must contact central AV (x5-3796) and Housekeeping (x5-3324) to arrange, and cover the cost of, the appropriate staff.
- The building has card swipe access only on the weekends. Corporate Security must be notified and provided with a list of attendees for any weekend events.
- Building privileges will be denied if groups violate the rules outlined in this document.

Room Use Rules

- No food is allowed in any room, except for designated areas (lobby, second floor atrium, and colleges). Water is allowed in any room, closed coffee mugs are allowed in the lecture halls.
- All furniture must be returned to its original configuration.
- Chairs taken from other rooms must be returned.
- Remove all personal belongings/rubbish when leaving.
- White Boards/Smart Boards
  - DO NOT USE SHARPIES - Please only use the dry erase marker pens provided. Please notify armstrongrooms@jhmi.edu, if markers are dry or absent.
  - Erase all white/smart boards when finished. Any writing not erased may be erased by housekeeping.
- Common Sense Etiquette:
  - Individuals studying in small group rooms must yield use to a group activity if no other small group rooms are available.
  - Groups without a room reservation must look for other available small group space before asking an individual to move from a group study room.
  - The quiet study room on the 4th floor is for QUIET study only.

Rental costs for room use:

Groups outside of the MD curriculum, internal MD student groups, and MD curriculum meetings may face charges for the use of the rooms. An IO will need to be provided at the time of booking.

<table>
<thead>
<tr>
<th>Lecture Hall</th>
<th>Learning Studio</th>
<th>Case Study</th>
<th>Teaching Lab</th>
<th>Conf. Rooms</th>
<th>Anatomy</th>
<th>Lobby, 2nd Floor</th>
</tr>
</thead>
<tbody>
<tr>
<td>$100/hr.</td>
<td>$100/hr.</td>
<td>$60/hr.</td>
<td>$60/hr.</td>
<td>$50/hr.</td>
<td>No</td>
<td>$50/hr.</td>
</tr>
</tbody>
</table>

Any group that damages the building will be responsible for any charges incurred.
**Armstrong Building**

Shown on the following pages is a floor plan for the Armstrong Building and a list of available teaching spaces.

Pictures of spaces with additional information can be found on the website at: http://www.hopkinsmedicine.org/som/curriculum/armstrong.html#spaces.

**Note:** The Academic Computing Center, the Reading Room and the Colleges are informal teaching spaces, and should NOT be scheduled for formal curricular events.

**Attendance Tracker:** Hardware is posted at the entrance to:
- East and West Auditoria
- Learning Studio (260)
- Teaching Labs (TL 342)

**Room reservations** for Armstrong can be requested by completing the reservation form and submitting it at: http://armstrong.som.jhmi.edu/. Specific questions or troubleshooting problems with reserving space can be sent to armstrongrooms@jhmi.edu.

The reservation form will ask: time, date, number of participants, room configuration and what AV support you will need, including a laptop for the presenter. You will receive a confirmation once the rooms have been scheduled.

The Academic Computing Center can provide laptop computers for student use in the Learning Studio.

![Image of a no food symbol]

**NOTE:** Please use discretion when bringing food and drink into carpeted areas of the building. Cups should have lids, for instance. All food should be disposed of properly. PLEASE RECYCLE APPROPRIATELY.
<table>
<thead>
<tr>
<th>Meeting Room</th>
<th>Max</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>PreFunction Area (Lobby)</td>
<td>160</td>
<td></td>
</tr>
<tr>
<td>150 East: Y1 Lecture Hall</td>
<td>170</td>
<td></td>
</tr>
<tr>
<td>150 West: Y2 Lecture Hall</td>
<td>170</td>
<td></td>
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<tr>
<td>220: Large Group</td>
<td>20</td>
<td>Classroom</td>
</tr>
<tr>
<td>226: Large Group</td>
<td>20</td>
<td>Classroom</td>
</tr>
<tr>
<td>260: Learning Studio</td>
<td>76</td>
<td>8 Tables with 8 Chairs Each</td>
</tr>
<tr>
<td>270: Meeting Room</td>
<td>40</td>
<td>Classroom</td>
</tr>
<tr>
<td>320: Large Group</td>
<td>20</td>
<td>Classroom</td>
</tr>
<tr>
<td>326: Large Group</td>
<td>20</td>
<td>Classroom</td>
</tr>
<tr>
<td>341: Teaching Lab</td>
<td>36</td>
<td>Computer Room (Card Reader)</td>
</tr>
<tr>
<td>342: Teaching Lab</td>
<td>36</td>
<td>Computer Room</td>
</tr>
<tr>
<td>343: Teaching Lab</td>
<td>36</td>
<td>Computer Room</td>
</tr>
<tr>
<td>344: Teaching Lab</td>
<td>36</td>
<td>Computer Room</td>
</tr>
<tr>
<td>345: Teaching Lab</td>
<td>36</td>
<td>Computer Room</td>
</tr>
<tr>
<td>370: Large Group</td>
<td>30</td>
<td>Classroom</td>
</tr>
<tr>
<td>381: Small Group</td>
<td>10</td>
<td>Circle (Large Table)</td>
</tr>
<tr>
<td>382: Small Group</td>
<td>10</td>
<td>Circle (Large Table)</td>
</tr>
<tr>
<td>383: Small Group</td>
<td>10</td>
<td>Circle (Large Table)</td>
</tr>
<tr>
<td>384: Small Group</td>
<td>10</td>
<td>Circle (Large Table)</td>
</tr>
<tr>
<td>385: Small Group</td>
<td>10</td>
<td>Circle (Large Table)</td>
</tr>
<tr>
<td>402: Case Study</td>
<td>80</td>
<td>Auditorium Style</td>
</tr>
<tr>
<td>420: Large Group</td>
<td>20</td>
<td>Classroom</td>
</tr>
<tr>
<td>426: Large Group</td>
<td>20</td>
<td>Classroom</td>
</tr>
<tr>
<td>441: Anatomy Lab</td>
<td>15</td>
<td>Lab (Card Reader)</td>
</tr>
<tr>
<td>442: Anatomy Lab</td>
<td>15</td>
<td>Lab (Card Reader)</td>
</tr>
<tr>
<td>443: Anatomy Lab</td>
<td>15</td>
<td>Lab (Card Reader)</td>
</tr>
<tr>
<td>444: Anatomy Lab</td>
<td>15</td>
<td>Lab (Card Reader)</td>
</tr>
<tr>
<td>445: Anatomy Lab</td>
<td>15</td>
<td>Lab (Card Reader)</td>
</tr>
<tr>
<td>470: Meeting Room</td>
<td>20</td>
<td>Square Table - Classroom</td>
</tr>
<tr>
<td>481: Small Group</td>
<td>10</td>
<td>Circle (Large Table)</td>
</tr>
<tr>
<td>482: Small Group</td>
<td>10</td>
<td>Circle (Large Table)</td>
</tr>
<tr>
<td>483: Small Group</td>
<td>10</td>
<td>Circle (Large Table)</td>
</tr>
<tr>
<td>484: Small Group</td>
<td>10</td>
<td>Circle (Large Table)</td>
</tr>
<tr>
<td>485: Small Group</td>
<td>10</td>
<td>Circle (Large Table)</td>
</tr>
</tbody>
</table>
Armstrong Medical Education Building
ROOM SETUP REQUEST

*Classroom:*  (All tables/chairs facing the front)

*Panel Style:*  (2 long rows of table with chairs on the outside for discussion panels)

*Hollow Square:*  (All tables/chairs facing “in” with room to walk around)

*Solid Square:*  (Push long tables together and put chairs around the table on outside)

*U-Shape:*  (U-shape facing the front of the room/speaker)
Ground Floor: Lecture Halls

YEAR 1 East Lecture

Year 2 West Lecture

Wenz
2nd Floor: Colleges & Commons

Colleges

Small Groups

Colleges
4th Floor: Anatomy, Case Study & Reading
**Smart Board Instructions**

**NOTE:** THOUGH THE USE OF DRY ERASE PENS ON THE SMARTBOARD WILL NOT DAMAGE THE SMARTBOARD, THEIR USE IS NOT ENCOURAGED.

I. To use the smart board as a white board
   a. Choose a colored pen to draw
   b. Use the eraser to erase
   c. To clear writing
      i. Return all pens to their cradle
      ii. Tap the screen with your finger
      iii. Select “Close Ink LAYER”

II. To use the SmartBoard as a mouse pad
   a. Return all pens
      i. Use your finger as a mouse to manipulate icons on the screen
      ii. If you have not Closed Ink LAYER a menu will appear asking you to close the ink layer before proceeding.
      iii. The Keyboard icon on the menu bar or on the pen tray will display a keyboard. (ESC key doesn’t seem to work)

III. To show a PowerPoint Presentation
   a. Double click the Powerpoint icon with your finger
   b. Open the appropriate file
   c. Start your Powerpoint presentation as normal
   d. Use either the navigation tool bar (which is movable by selecting and dragging its blue menu bar) or touch twice on the screen to advance slides; if you touch right then left you will go back.
   e. If you accidentally close the navigation window:
      i. Click the mouse button icon which is located in the right menu bar
      ii. Touch the screen
      iii. Select End show
      iv. Restart the show as normal

IV. To draw on a Powerpoint slide
   a. Start Powerpoint show as described above
   b. Use a pen to draw; note there is a slight delay
   c. Use eraser to erase
   d. To erase all
      i. Return all pens
      ii. Touch the screen
         1. To undo erase – use blue curled arrow in right menu bar

V. To end your Powerpoint Presentation
   a. Touch the mouse icon located in the right menu bar
   b. Touch the screen
   c. Select End Show
   d. To save your annotations (if any)
i. Answer Yes to “Would you like to add your drawings to your presentation?”
ii. When quitting, Save As to permanently store your annotations as part of a new presentation.

USING THE SMARTBOARD NOTEBOOK

I. Anything you display or write on the Smartboard can be saved in a program called “notebook”
II. Each sheet works like a slide in powerpoint—the notebook can be displayed a page at a time like a slideshow
III. When using the Smartboard as a whiteboard, every time the ink layer is closed it automatically snaps a picture of the entire board and puts it in the notebook (you will hear a click).
   a. To save what you have written, click on the camera icon in the upper right hand corner of the screen
   b. The notebook can also be accessed by clicking on the “page” icon in the menu bar on the right or, if in Powerpoint, in the navigation bar in the center.
IV. The first time the Smartboard saves an image, the notebook program will open and appear on the taskbar. You may switch to the notebook at any time by clicking on the taskbar.
V. You can copy a slide from any application by clicking on the camera icon in the upper right hand corner
VI. When open, each slide in a notebook can be annotated with the pens as with any other application.
VII. Before ending a session you can save your notebook file; this will save all the images you captured, and any annotation you have made.
VIII. There are many other features that can be used with notebook.

Websites for further instruction:
http://oac.med.jhmi.edu/ittutorial/

SMART Board basics,

Using the SMART Board with PowerPoint,
http://downloads01.smarttech.com/media/services/handsonpractices/pdf/english/hopnb10inkawarepowerpoint.pdf
Patient and Guest Lecturers

The curriculum frequently uses patients and family members or guest lecturers, especially in the first 2 years of the curriculum. If you are planning such an activity in your course, please notify the Office of Curriculum, which can help with the following:

1. OASIS clarification. This will be highlighted in OASIS so that students are aware that a guest is present. All events with guests or patients are required attendance for students.
2. Assist with orientation to the building. If we know your guest is arriving, we can help to greet and orient to the location, and provide complimentary refreshment.
3. Provide parking vouchers. Parking vouchers are kept in the Office of Curriculum.
4. Thank you. We would like to send a note of thanks to your guests, recognizing their contribution to the curriculum.

Please send the following information to: officeofcurriculum@jhmi.edu:
   i. Name of guest
   ii. Number in party (family members, etc.)
   iii. Address or contact
   iv. Date and time of event

We advise all guests to park in the McElderry Garage.
Student Assessment, Tests and Grading

The Genes to Society curriculum has been designed with a strong developmental focus. As students proceed through the curriculum, they will have multiple opportunities to gauge whether they are meeting the milestones expected in an array of knowledge and skills. Students should receive feedback not only on performance in written examinations, but also from small group facilitators and peers on their contributions to discussion, from clinical skills faculty and “standardized patients” on their professionalism, interpersonal skills and clinical reasoning skills, and from their peers on their teaching, public speaking and professionalism skills. The curriculum also emphasizes the growth of self-assessment and reflection, a key attribute of the master clinician. Evidence of accomplishment is collected in a student portfolio, which will be periodically reviewed by the College advisor with the student.

Comprehensive Examinations

Students are required to pass a Comprehensive Clinical Skills Examination in summer/fall of Year 4. This examination consists of 12 standardized patient cases drawn from the core clinical curriculum. It is scored in 4 performance domains: history-taking, physical examination, interpersonal skills and post-encounter work. Students who fail any one of the domains must remediate the examination with their College advisor.

“The Boards”

Students are required to take and pass Step 1 of the USMLE by the end of October in the third year. If a student fails to pass this examination, s/he will be brought to the Year 3 Promotions committee for a decision regarding her/his ability to proceed with the clinical curriculum. Students will typically take Step 1 in the summer following Year 2.

Students are required to take Step 2CK and Step 2CS before graduation. Most students take these after completion of the required Year 3 clerkships.

Creating Examinations

A good resource for writing multiple choice items is Case, SM & Swanson, DB (2001). Constructing written test questions for the basic and clinical sciences: Third edition revised. Philadelphia: National Board of Medical Examiners. [This item-writing manual is available for download free from the NBME or is available at the OAE (mrouse1@jhmi.edu)] An abbreviated item writing tip sheet is also attached.

The goal for exam length should be 75-100 questions. Use a simple item blueprint when building your exam that charts the types of items and the content you are testing. This will help insure that you are adequately testing for understanding as well as factual knowledge. Examination questions can be reused, but adjust the question based on the previous year’s item analysis or a change in the objectives or teaching materials.

For short answer, essays, patient write-ups, and reflections that will become part of the overall grade, course directors are asked to prepare a grading rubric when creating the assessment. Course directors are also asked to insure that students receive either a grade/feedback on all written
assignments/assessments. The feedback may be in the form of a score, the rubric, or faculty/peer discussion.

The Office of Assessment and Evaluation will provide item analysis for all online exams. Please contact the director of OAE for more information.

All examinations that count toward grade decisions will be given online through Questionmark. Violet Kulo, Ed.D. in the Office of Curriculum creates exams in the software. In addition, exam items are tagged and collected in an exam pool for the curriculum. Please refer to the Online Testing Policy for specifics regarding creation and deployment of online examinations.

**Grading**

The *Genes to Society* curriculum has 2 systems for grading; one for the *Foundations* and *Genes to Society* courses, and one for the remainder of the curriculum. Course grading for the first year and a half is Pass/Fail. The *Longitudinal Clerkship* and *Transitions to the Wards* also use a Pass/Fail system.

The Year Promotions Committees may confer a year-grade, “Pass with Distinction”, for students who performed well in all components of the curriculum and additionally made a notable contribution to the learning community.

Course grading for the clinical curriculum has 4 tiers: Honors, High Pass, Pass and Fail.

The Grading Policy approved by the EPCC as of December 2008 is presented below.

Students have the right to appeal a grade decision. The Grade Appeal Policy is detailed in the School of Medicine catalogue and available at: [http://www.hopkinsmedicine.org/som/students/policies/grades.html](http://www.hopkinsmedicine.org/som/students/policies/grades.html)
Item Writing Tip Sheet
Based on the NBME's Item Writing Manual

Anatomy of a multiple choice item

A 15-year old boy has had two episodes of severe anaphylactic shock following bee stings. Which of the following is the most appropriate intervention?

- A. Administration of corticosteroids during the summer
- B. Long-term prophylactic antihistamine therapy
- C. Protective clothing
- D. Restrict him to the house during the summer
- E. Desensitization with bee venom extract

Stem

Incorrect Responses
- Distractors
- Correct Response (Key)

In General

1. Each item should be aligned with a course or lecture objective
   1. Exam performance will reflect how well students meet objectives
   2. Will reduce students complaining about testing trivia
2. Each item should only have one correct or best answer on which experts would agree
3. Each item should assess one idea; otherwise consider breaking into two or more items
4. Include items that require reasoning and analysis, not just recall
5. Avoid groups of questions in which knowing the first is required to answer the others

Stem

- Students should be able to answer the question before reading the options (i.e. the options should not set the frame of reference)
   1. Use clear and unambiguous wording
   2. Avoid the following: is associated with, is useful, is important, may, could be, etc.
   3. Avoid negating wording (not, except), if unavoidable. CAPITALIZE the negative word(s)
   4. Avoid items that contain a frequency term (usually, often, frequently are interpreted variably)
   5. Longer stems with shorter options are preferred over shorter stems with long options
   6. If using a completion item, do not leave the blank at the beginning or in the middle of the stem
   7. Make sure the stem of one item does not cue the correct answer to another item

Distracters

- Distracters should not cue students to the correct response
  - Must be plausible (if no one is choosing the distracter than it probably needs to be replaced)
  - Should be similar to the correct answer in terms of:
    - Construction
    - Length
    - Grammar
  - For numerical data, the options need to be consistent and range non-overlapping.
  - Avoid 2 mutually exclusive responses; correct answer MUST be one of them
  - Avoid never and always; response is always wrong and students never choose it
  - Avoid excessive use of none of the above or all of the above. Students need only remember some of the information to answer all of the above (e.g. only need to know at least 2 options are correct) or to exclude none of the above (e.g. just need to know 1 option is true)

Grading Policy Committee Recommendations to the EPCC

The committee recommends that, beginning for Year 1 in AY 2009-10, and for Year 2 in AY 2010-11,

1) JHUSOM adopt a 2-tier (Pass/Fail) system to document student achievement of competencies in the preclinical curriculum. All courses should use the same criterion of performance for Pass, e.g., a score of 70 on written knowledge tests or explicit criteria on simulation assessments. This would apply to the following courses:
   • Scientific Foundations
   • Clinical Foundations
   • Patient, Physician and Society
   • Genes to Society
   • Areas of Interest
   • All Intersessions

2) Coupled with the use of the 2-tiered system, the committee recommends:
   a) Frequent feedback to learners in form of self-assessments, quizzes and numerical scores on written tests, and
   b) Use of a comprehensive basic science knowledge test for all students at the end of the Genes to Society Course, (NBME shelf exam or USMLE Step 1) which must be passed by September of Year 3 in order for a student to continue with the clinical curriculum. Failure to pass the comprehensive exam will require referral to the Promotion Committee for a remediation plan.
   c) The year committee may nominate up to 10% of the class to receive a “pass with distinction”. In order to be nominated, a student must be in the top 10% of the class based on academic performance. This is a necessary requirement, but it is not sufficient. The student must also receive nominations from faculty and other students signifying an exceptional commitment to the community of learning. Examples of commitment to the community learning might include assisting other students in achieving their learning objectives, tutoring classmates, helping small group or laboratory groups achieve special insights into subject material, improving the overall effectiveness of a team, etc. Special weight would be given to nominees about whom other students write that they made me a better future doctor. 10% of the class is the maximum number of students who may be nominated for pass with distinction. The list of nominees is then forwarded to the promotions committee for review. The promotions committee will make the final determination on which nominees meet the high standards for academic excellence, generosity with their time, and support of the community of learning. It is specifically not the intent of the “pass with distinction” to replace the honors grade that was based solely on academic performance. Rather, it is designed to acknowledge academic excellence in the spirit of service to the larger community.

3) That, for the new clinical curriculum beginning in March 2010, JHUSOM maintain a 4-tier system (Honors, High Pass, Pass, Fail) for the clinical clerkships and required courses in the 4th year of the new

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3 Approved by the EPCC December 4, 2008.
curriculum. Criteria for these grades should be standardized and made explicit to students. This would include the following courses and clerkships:

- Longitudinal Clerkship\textsuperscript{4}
- Transitions to the Wards\textsuperscript{5}
- Core Clinical Clerkships (Gyn/Ob/Women’s Health, Emergency Medicine, Medicine, Neurology, Pediatrics, Psychiatry, Surgery)
- Sub-internships
- Elective rotations
- Critical Care Rotation (ICU rotations)
- TRIPLE

In addition, clerkship and clinical course directors should be charged to:

a) Standardize grading across the clerkships; and
b) Review validity evidence for clerkship grading annually, as it is provided by SORD.

4) That the \textit{Student Portfolio Committee} continue its work as follows:
   a) Develop and write specific measurable objectives in competency-based language for milestones across the curriculum that support the documentation of achievement of the institutional objectives.
   b) Create student and faculty development plans to implement the portfolio.
   c) Pilot implementation of the portfolio

5) That the \textit{Professionalism Committee} continue its work to develop a system for assessment, tracking and remediation of the competencies related to Professionalism.

\textsuperscript{4} Following a SAPE review in May 2011, the Longitudinal Clerkship requested a change in grading to Pass/Fail, which was approved by the EPCC, effective with Class of 2015.

\textsuperscript{5} As of AY11-12, Transitions to the Wards is using a Pass/Fail system.
Grade Appeals Policy

The components of evaluation in a course or clerkship should be transparent to the student and discussed at the start of the student’s experience. Grades are generated by the course/clerkship director. Should there be a disagreement about a grade in a course or clerkship, the student is to follow the guidelines below for grade appeals.

1. The first stage of a grade appeals process will be a meeting between the student and the course director. The course director may also request any faculty preceptors involved in evaluating the student be present for this meeting. At that time, the student will have an opportunity to voice his/her concern(s) about the grade which he/she received. The course director will have the chance to review the criteria by which the final grade is determined and will be expected to answer any questions the student has. The course director may elect to obtain additional information based upon what the student has said and would ultimately decide to maintain the original grade or submit an amended grade to the Registrar.

2. If dissatisfied with the results of the above, the student may appeal to the appropriate Promotions Committee (First and Second Year or Third and Fourth Year) by contacting the Office of the Vice Dean for Education. The Committee will be chaired by the Vice Dean who will vote only in the case of a tie. The Associate Dean/Registrar, the Associate Dean for Student Affairs, and the Assistant Dean for Minority Affairs will be non-voting ex-officio members. The student will be asked to provide information regarding the grounds for the grade appeal and will be given an opportunity to address the Committee if they so desire. The course director involved will not be allowed a vote in the matter and will be excused for the period of debate and voting after being given a chance to address the Committee. After consideration, the Committee will advise the Vice Dean for Education of any changes merited. Two standards will be employed by the Committee in evaluating the appeal which could lead to a recommended amendment:

   a. if the grade is not found to reflect valid and consistent academic performance standards or criteria, or the considered academic judgment of the course director;

   b. if the grade is found to be based upon impermissible criteria beyond performance, achievement, and effort such as gender, race, age, or other factors as delineated in the policy on Teacher Learner Relationships.

3. The student may appeal an adverse decision to the Dean of the Medical School by notifying him/her in writing within 7 days of the decision. The Dean’s review will be limited to review of procedural integrity and his/her decision will be final.
Johns Hopkins School of Medicine Online Testing Policy

Pre-Clinical Examinations that count towards a grade are to be created and deployed online via Questionmark software. The reasons for this include: immediate scoring and feedback to students; ability to tag items to content areas, horizontal strands, and learning objectives; and lastly, the ability to develop an item bank of reliable test items. The following policy for online testing is intended to protect the integrity of each examination and to ensure that students receive constructive feedback in a timely manner.

Prior to the start of the course, course directors should decide how many examinations will be given, and what the weighting of the examinations will be toward determination of grade. Content of the examinations should be linked to the course learning objectives. The dates of the examinations should be confirmed and computer stations reserved at armstrongrooms@jhmi.edu (this is usually done at time of scheduling all Armstrong space for the course).

1. Timeline for Examination Preparation
   1.1 Course Directors must submit their examination items to Violet Kulo at least 5 business days (Monday-Friday) prior to the exam date.
   1.2 For each item, course directors must provide the following: point value, correct answer (key) and a topic tag (biomedical or social/behavioral horizontal strand*and/or MESH tag).
   1.3 If imaging or video will be used in the exam then these formats must be provided in a separate file(s) from the text items. Images should be sent as a jpeg file. Videos should be sent, preferably as Flash files, but OAC will assist in any conversions necessary.
   1.4 After the course administration enters the examination items into Questionmark, the course director will be notified and asked to review the examination.
   1.5 At this point, the course director can only make edited changes to the items. New items cannot be added to the exam.
   1.6 Another staff member from the Office of Curriculum will provide a final editing check of the examination.

2. Format of the Examination
   2.1 Each question should be derived from identified learning objectives.
   2.2 Acceptable Question Formats are as follows: multiple choice, extended matching, fill-in-the-blank, multiple response, ranking. Additionally, videos and images can be used on the examination.
   2.3 True-False items are not recommended
   2.4 If a course director decides to use essay items than these items can only be no more than 25% of the student’s total examination grade. The author of the essay question must grade the students’ responses and the responses should be blinded by student name. The Office of Curriculum does not provide grading support for any text response question.
   2.5 Course directors are strongly encouraged to consult NBME’s item writing manual: http://www.nbme.org/publications/item-writing-manual.html

   In addition, the Office of Medical Education Services has a recorded faculty development session on exam item writing at: http://www.hopkinsmedicine.org/fac_development/teaching/

3. Proctors
3.1 Each non-NBME shelf examination should have 2 proctors/60 students
3.2 Course directors who use a NBME shelf examination must abide by the NBME’s rules for proctors.
3.3 The Office of Academic computing provides staff for computer support during the examination. These staff members are not to be viewed as proctors.
3.4 The Office of Curriculum has limited ability to provide proctors for examinations; course directors should arrange for course faculty to proctor examinations.

4. Student Feedback
4.1 Students will have access to their raw exam grade immediately upon completion of the computer-based exam.
4.2 In addition, immediately upon completion of the exam students should be able to review items that they missed along with correct responses.
4.3 Examinations will not be returned to students, and correct responses to individual questions are not provided to students for their use after they leave the examination room.
4.4 In order to maintain the integrity of the exam questions, no additional exam review sessions will be held.
4.5 In lieu of providing more detailed and specific feedback on examinations used for assessment, during the course instructors should provide formative quizzes and/or examinations with more detailed feedback.
4.6 Exam scores and other performance measures should be placed in Blackboard’s grade sheet, and the field made visible to students so they can see their performance across the block.

5. Delaying an Examination in Pre-Clinical Years
5.1 A student must submit their reasons for delay prior to exam day to both course director and the Associate Dean for Students Affairs
5.2 Permission to delay an examination is granted only for exceptional circumstances (e.g. severe illness, death of a family member)
5.3 The Promotions Committee will receive documentation of any student who has been granted two or more delays
5.4 If an examination has been delayed, the course director needs to communicate with the Office of Curriculum about the need for a makeup. In general having more than one make-up time per examination should be strongly discouraged.

6. Make-up Examinations.
6.1 Students who fail a course must pass a remedial examination
6.2 It is up to the course director to decide on the appropriate remedial examination. Online remediation examinations need to be coordinated with the Office of Curriculum. Other forms of remediation can be done directly by the course director.

7. Item Analysis
7.1 Course Directors will receive an items analysis report within 3 days of the exam. This report will provide information on the overall reliability of the examination and guidelines for which items to keep, omit or revise.
7.2 The item analysis is reviewed by the SAPE committee.
7.3 Course Directors should use the report to improve their exam for the next year. Guidance for improvement is available from the Office of Medical Education Services.
*HORIZONTAL STRAND LIST

**Biomedical**

Anatomy
Genomics/Proteomics
Imaging
Biomedical Informatics
Embryology
Neoplasia
Pathology
Pharmacology
Therapeutics

**Social and behavioral**

Life Cycle: Peds/Human Development
Life Cycle: Aging
Pain
Patient Safety
Ethics and Professionalism
Nutrition
Communication
Cultural Competence
Health Disparities
Epidemiology
Health Policy
**Program Evaluation**

JHUSOM tracks a number of student outcomes for its curriculum, such as board scores, AAMC Graduation Questionnaires, Program Director surveys and alumni surveys. Results of these recent evaluations are posted on the GTS website.

The Office of Curriculum will collate online course evaluations by students and focus group discussions by students and communicate these with course directors and Year Committee chairs.

The **Student Assessment and Program Evaluation (SAPE)** committee is a subcommittee of the Educational Policy and Curriculum Committee and is composed of seven faculty members from the School of Medicine with support from the Offices of Curriculum and Assessment and Evaluation. The mission of the SAPE committee is: 1) to provide a system of continuous quality improvement within the JHUSOM M.D. curriculum that results in a curriculum of highest quality and that is responsive to the changing needs of students, faculty and institutional objectives; 2) to support clerkship and course directors by identifying resource needs and opportunities for collaboration and scholarship; and 3) to provide peer review of educational scholarship and inform Department Directors of quality and impact of course/clerkship directors' educational administration. The SAPE Committee is charged with rigorous review of the undergraduate M.D. curriculum, by reviewing each course/clerkship approximately every two to three years and providing recommendations to the EPCC. Because the school has developed a new curriculum, *Genes to Society (GTS)*, each core curricula component was evaluated after initial deployment with subsequent reviews conducted as indicated, but not less frequently than three years.

The SAPE process is described as follows. Each course/clerkship director completes a course or clerkship review questionnaire which details course objectives, methods and assessments. This documentation is sent to the SAPE committee, as well as most recent data from Office of Assessment and Evaluation (such as item analysis and score reports for examinations). The SAPE committee conducts independent observations of the course/clerkship followed by a meeting with the course director, and his/her appropriate supervisors (Department Director and/or Vice Chair for Education in Department).

Concurrent student surveys are conducted for each of the courses and clerkships as well as individual meetings with students. To ensure that student opinions provided to the committee are representative of the student body as a whole, a "jury system" is used. Students from each class are assigned to a jury by random numbers generation. Each student is responsible for no more than three reviews each year. Students are expected to gather data from their colleagues and to present this and their own opinions to the SAPE committee. Additional external review is solicited. A report is then produced by the SAPE review panel and presented to the Course Director. The SAPE chair then presents the report to the EPCC for discussion and comment by the course or clerkship director. The final report and EPCC recommendations are sent to the Course Director /Department Director and are noted in the EPCC minutes. Written response from the Course Director within 90 days is requested, and when necessary short cycle re-reviews or interim reports are conducted and the SAPE review cycle repeated.

The SAPE reviews have been effective in identifying both strengths and opportunities for improvement in the educational experience at JHUSOM. All courses and clerkships have submitted a short-cycle response that has been effective in instituting changes and improvements. The most notable improvements have been in learning objectives, methods and validity of assessment, and in areas of institutional commitment such as faculty development. All SAPE reports and responses are posted on the EPCC website at: [http://www.hopkinsmedicine.org/som/curriculum/epcc.html](http://www.hopkinsmedicine.org/som/curriculum/epcc.html)
**Student Curricular Review Teams**

In AY13, students from MSS and the Medical Education Concentration created the Student Curricular Review Teams (SCRT). These are elected groups of 6 students in Year 1 and Year 2, who are responsible for reading each course/section evaluation, convening a Town Hall to generate themes from these evaluations, and propose improvements. The SCRT then prepares a brief report that is discussed with the relevant section leader, course leader and Associate or Assistant Dean for UME. The SCRT report is edited based on that meeting (what is doable or agreed upon) and shared with the students, course and section leaders, the Deans for UME, and the SAPE Committee. Unlike SAPE, these reviews will take place with every academic year and are meant to promote ongoing quality improvement. Course or section leaders who would like to see past reports should contact the Office of Curriculum.
1. Goals/Competencies
   A. List the course goals/competencies, and links to the program competencies
   B. Are objectives specified for each instructional session? Yes/No
   C. How and when are students informed of the course goals/competencies?
   D. How and when are course faculty informed of the course goals/competencies?

2. Course content, structure and management
   A. Give a brief description of the major content areas of the course.
   B. How were these major areas selected for inclusion? How does this compare to national criteria or criteria from other institutions?
   C. What is the course length (weeks/hours) and do you feel you were able to cover the required content area?
   D. How is workload for the course monitored?
   E. What independent learning activities (outside of class) are regularly scheduled for learners? How are these assigned?
   F. Does the course include the following educational methods: Check all that apply:

<table>
<thead>
<tr>
<th>Educational Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opportunities to demonstrate critical judgment based on evidence</td>
</tr>
<tr>
<td>Opportunities for medical problem-solving</td>
</tr>
<tr>
<td>Opportunities to develop understanding of societal needs</td>
</tr>
<tr>
<td>Required laboratory experiences/ or opportunities to collect and analyze data</td>
</tr>
</tbody>
</table>

3. Methods of instruction
   A. What are the different learning methods? Check all that apply:

<table>
<thead>
<tr>
<th>Educational Method</th>
<th>Lecture</th>
<th>Laboratory</th>
</tr>
</thead>
</table>
B. How are these methods appropriate to meeting the course goals/competencies?

C. What faculty development activities are in place for teachers of this course?

D. If graduate students or residents are involved in teaching, how are they prepared for their teaching role?

4. Assessment

A. What (different) assessment tools are used during the course? Check all formats that are used in examinations or other evaluations that students must take in order to pass the course:

<table>
<thead>
<tr>
<th>Assessment Method</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Multiple choice, true/false, matching, written test</td>
<td></td>
</tr>
<tr>
<td>Fill-in short answer question</td>
<td></td>
</tr>
<tr>
<td>Essay question or paper</td>
<td></td>
</tr>
<tr>
<td>Oral examination</td>
<td></td>
</tr>
<tr>
<td>Problem-solving exercise</td>
<td></td>
</tr>
<tr>
<td>Presentation</td>
<td></td>
</tr>
<tr>
<td>Other (Describe)</td>
<td></td>
</tr>
</tbody>
</table>

B. How many formal examinations are given throughout the course?

C. Is a final examination given and is it comprehensive?

D. Have scores from internal examinations been tested for reliability and validity?

E. Are there other means used to assess student progress? Describe.

F. Are students provided with a formal mid-course evaluation of their progress? What is that process?

G. Is a narrative submitted with each student grade? If so, please provide examples (approximately ten) of narrative feedback given to students taking the course in the last year. Please do not provide any identifiers.

H. Please provide any examples of faculty development relating to the provision of narrative feedback. If none, so indicate.

I. How is information about student performance collected and conveyed to the course director?

The table below should be completed for the main goals of the course.
<table>
<thead>
<tr>
<th>COMPETENCIES (1A)</th>
<th>METHODS (3A)</th>
<th>ASSESSMENTS (4A)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Which learning method is/are used to address the competency?</td>
<td>Which assessment method is used?</td>
</tr>
<tr>
<td>COMPETENCIES 1:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>COMPETENCIES 2:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>COMPETENCIES 3:</td>
<td></td>
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<td></td>
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</tbody>
</table>

5. Course evaluation

A. Describe the different methods used for evaluating the successfulness of the course.

B. If available, attach student evaluations of the course for the last two cycles/iterations

6. Resources/Future

A. Do you feel you had adequate resources for delivering this course? What if anything would you need to make it more successful?

B. With respect to the above, a clear statement of the vision for the course during the next review cycle, including any outstanding barriers to the successful delivery of the course.
<table>
<thead>
<tr>
<th>1. Objectives</th>
<th>Exceeds Expectation</th>
<th>Meets Expectation</th>
<th>Below Expectation</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>There are specific, measurable written objectives for the clerkship.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>EE: Objectives meet criteria and include more than medical knowledge. ME: Objectives include who, what, when and by what measurement</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>The objectives support the institutional objectives and development of student core competencies.</td>
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</tr>
<tr>
<td>EE: As above, table should include objective, institutional objective, and measurement (see below for educational method). More competencies than medical knowledge. ME: Table with appropriate medical knowledge and patient care matched with institutional objectives.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>The objectives are effectively communicated to students, and faculty</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>EE: Some form of personal communication, i.e. face-to-face, video-conference with faculty/students, to occur in proximity to the course, during the course, and immediately after the course for key faculty. Must also have</td>
<td></td>
<td></td>
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</tbody>
</table>
written, enduring and accessible objectives, i.e. Blackboard, handout
ME: Annual personal communication with faculty, also in written form. Orientation meeting with each group of students, written/public availability.

<table>
<thead>
<tr>
<th>2. Educational Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educational methods are congruent with clerkship objectives.</td>
</tr>
<tr>
<td>ME: Educational methods used are expected to achieve the learning objectives</td>
</tr>
<tr>
<td>A variety of educational methods are used.</td>
</tr>
<tr>
<td>EE: Educational experience includes more than lecture and at least two additional methods as appropriate for objectives. ME: Structured learning experience (lectures) and one additional educational method.</td>
</tr>
<tr>
<td>Educational methods support the development of lifelong learning habits</td>
</tr>
<tr>
<td>EE: More than one experience where self-directed learning opportunities occur. For example problem-based learning, portfolio, presentation, journal club ME: At least one self-directed learning project</td>
</tr>
<tr>
<td>Course content is monitored for redundancies and omissions.</td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td><strong>EE:</strong> Year committee/Department/Division has educational committee consisting of more than course director and coordinator who meet more than annually to review the section/course and make suggestions for improvement. Sections of course must meet with overall course director and year meeting. <strong>ME:</strong> Course director monitors course experience</td>
</tr>
<tr>
<td>Faculty development is documented.</td>
</tr>
<tr>
<td><strong>EE:</strong> Faculty development occurs through an annual educational retreat, or an organized educational program provided through the department or university where more than the course director participates. <strong>ME:</strong> Course director and/or faculty development activities are documented.</td>
</tr>
<tr>
<td>If used for teaching or supervision, graduate students are prepared for teaching roles.</td>
</tr>
<tr>
<td><strong>EE:</strong> Some form of personal communication, i.e. face-to-face, video-conference with graduate or teaching assistants occurs, in immediate proximity and following the course. Some dedicated effort at improving teaching skills should be included. Evidence that student comments are included in graduate student teaching assessment is ideal.</td>
</tr>
</tbody>
</table>
### 3. Assessment and Evaluation

Assessment and evaluation methods are congruent with educational objectives.

EE: See objectives above. Table includes objectives, institutional objectives, instructional methods, and assessments in more than medical knowledge and at least two additional competency domains.

ME: As above with medical knowledge.

#### Assessment includes validity evidence

EE: Course director provides validity evidence through either psychometric analysis of written test, reliability evidence of clinical performance measures or other validity evidence. Efforts to improve psychometric test reliability if internal examinations are used.

ME: Course director collects information

#### Multiple measures of student performance are taken.

EE: Course director utilizes more than written examinations (or equivalent) and at least two additional methods of assessment.

ME: Written examination (or equivalent) plus one additional modality.
<table>
<thead>
<tr>
<th>Task Description</th>
<th>EE</th>
<th>ME</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment of multiple competencies is made: e.g. professionalism, life-long</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>learning, communication, etc.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>EE: Course director utilizes more than written assessment as above EE to assess</td>
<td></td>
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<tr>
<td>more than medical knowledge and at least two additional competency components.</td>
<td></td>
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</tr>
<tr>
<td>ME: Course director assess more than medical knowledge.</td>
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<td></td>
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<tr>
<td>Mid-course feedback occurs.</td>
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<tr>
<td>EE: Individual student feedback occurs and is documented.</td>
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<td></td>
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<tr>
<td>ME: Student feedback occurs.</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Grade includes a narrative.</td>
<td></td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td>Not applicable- Yes or NO (circle one)</td>
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</tr>
<tr>
<td>EE: Narrative comments on multiple competencies, is specific and individual to</td>
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<tr>
<td>the student experience.</td>
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</tr>
<tr>
<td>ME: Narrative noted for all students.</td>
<td></td>
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</tr>
<tr>
<td>Grades are reported within six weeks of completion of course.</td>
<td></td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td>ME: All grades reported to the registrar within 6 weeks. Student should be informed of written test results within 2 weeks.</td>
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<tr>
<td>4. Resources</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Course director perceives he/she has adequate resources to accomplish objectives (personal support, administrative support, access to faculty).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>EE: Explicit recognition of course director</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ME: Core Course Director= 0.25 FTE; Administrative staff (single person) = 1.0 FTE</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Faculty and students perceive they have adequate resources to support course.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>EE: Explicit recognition of primary teaching faculty, teaching awards</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ME; Adequate availability of resources.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Facilities are adequate.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Course director has made maximum use of institutional resources to support course.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>EE: Course director has utilized the Office of Medical Education, Simulation Center, professional development or other resources.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ME: Active participation and use of clerkship directors meeting.</td>
<td></td>
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</tr>
</tbody>
</table>
### 5. Course Evaluation

Students report satisfaction with course. (end of course evaluations and/or curriculum committee)

Students report satisfaction with clerkship.  
**Course Survey:**  
Students receive grade points for completing survey: YES or NO (circle)  
EE: Students report >90% very satisfied/outstanding  
BE: Greater than 10% report dissatisfaction or very dissatisfied.

**SAPE Survey:**  
EE: Students report >90% very satisfied/outstanding  
BE: Greater than 10% report dissatisfaction or very dissatisfied.

Student concerns have been addressed.  
EE: Examples of student concerns, changes made, and positive outcomes  
ME; Examples given

Teaching faculty are evaluated and receive feedback.
<p>| <strong>EE:</strong> Evidence of faculty review, public recognition, departmental awards or academy, educational effectiveness part of departmental faculty review, faculty development, |  |
| ME: Faculty are evaluated and receive feedback. Must be documented. |  |
| National benchmarks of student attainment of objectives indicate effectiveness of course. |  |
| Assessment not available- N/A |  |
| EE: Assessment scores &gt; 66%, or one Standard deviation above the mean |  |
| ME; Within one standard deviation from the mean. |  |
| <strong>6. Curriculum Management</strong> |  |
| <em>OASIS</em> data is attached and updated. |  |
| EE: Key words/events included |  |
| ME: Attached |  |
| <strong>7. Innovation &amp; Scholarship</strong> |  |
| Course director has introduced new content, methods or assessment. |  |
| EE: Introduction of new content, and/or new educational methods and/or new assessments |  |
| ME: Introduction of new content |  |</p>
<table>
<thead>
<tr>
<th>Clerkship director has produced scholarship from educational activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>EE: National presentation and/or publication, website development, educational products</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Clerkship director has shown evidence of university educational citizenship</th>
</tr>
</thead>
<tbody>
<tr>
<td>EE: Embraces and/or develops and/or adopts institutional educational priorities</td>
</tr>
<tr>
<td>ME: Actively participates and attends clerkship directors and EPCC meetings.</td>
</tr>
</tbody>
</table>

8. Recommendations for EPCC regarding this clerkship: (narrative)