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Learn
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Artificial Intelligence In & For Medical Education

Oct. 31, 2024

Association of American Medical Colleges

Artificial Intelligence *IN* and *FOR* Medical Education

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AAMC

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Transforming Medical Education
AAMC

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Vice President
Medical Education Innovations
AMA

Image generated with DALL-E

AI in training

training in AI

"Educators and leaders need to optimize the training environment to prepare trainees for a future far different than the one their teachers have known." – Robert Wachter, MD 2024

Session Objectives

1. Describe the urgency to include training about AI in all health professions programs
2. Discuss physician competencies in AI needed for today and tomorrow
3. Define Precision Education
4. Outline opportunities to leverage AI to improve the process of health professions education

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training in AI

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Disclosures

Dr Howley is an Educational Psychologist,

Works FT for the AAMC,

No other relevant financial disclosures

Defining AI

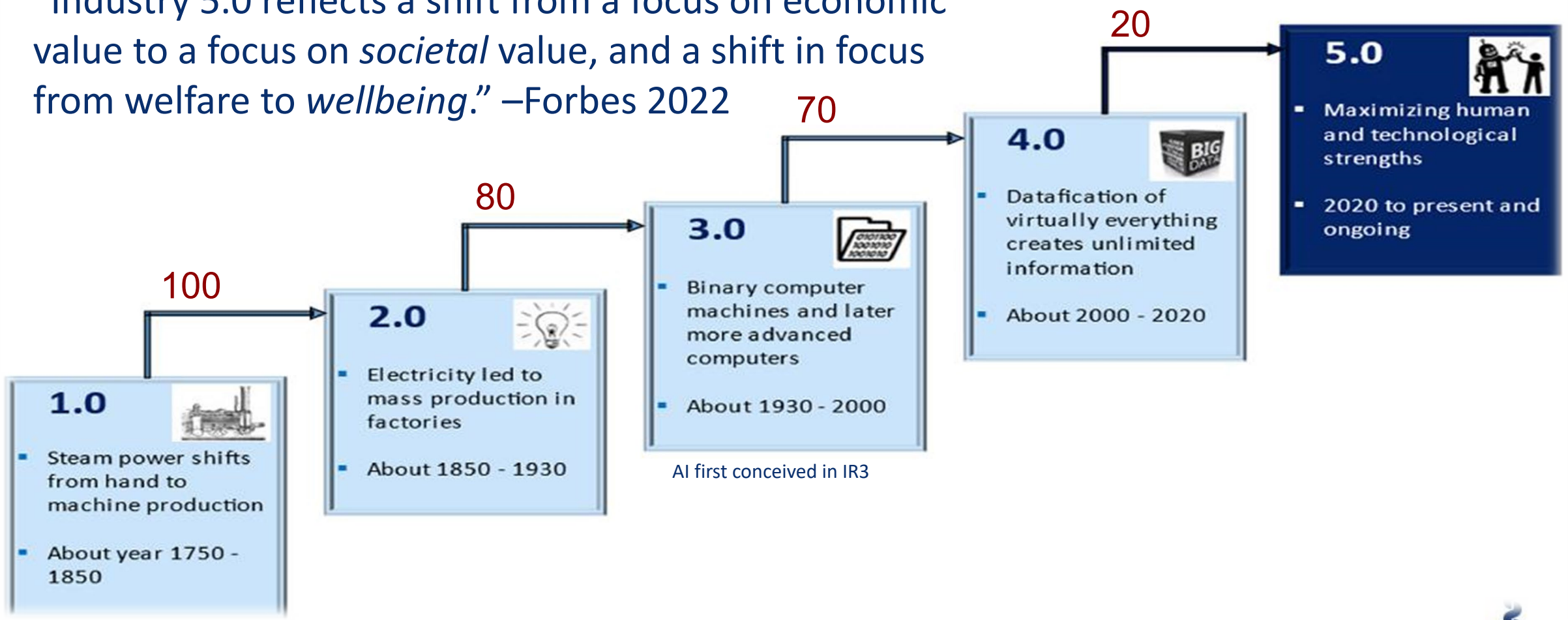
Artificial intelligence, or AI, is technology (programming) that enables computers and machines to simulate human intelligence and problem-solving capabilities.

Generative AI refers to deep-learning models that can take raw data—say, all of Wikipedia or the collected works of Rembrandt—and "learn" to generate statistically probable outputs when prompted. -IBM

ChatGPT (Chat Generative Pre-trained Transformer) is a series of chatbots developed and maintained by OpenAI. The latest versions of the chatbot are multimodal and can recognize images, generate images, engage in voice conversations. -Techopedia

Industrial Revolutions

"Industry 5.0 reflects a shift from a focus on economic value to a focus on *societal* value, and a shift in focus from welfare to *wellbeing*." –Forbes 2022



AI first conceived in IR3

Noble, S. et al. The Fifth Industrial Revolution: How Harmonious Human–Machine Collaboration is Triggering a Retail and Service [R]evolution, Journal of Retailing, Volume 98, Issue 2, 2022. https://doi.org/10.1016/j.jretai.2022.04.003.

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A BRIEF STORY
By L. Howley & ChatGPT

AI in Health Care & Medical Education

AI is requiring us to reimagine **clinical practice (or Training in AI)**

- Routine information gathering, scribes and “keyboard liberation”
- Diagnostic support
- Treatment including perioperative care
- Care management
- Population health

AI is requiring us to reimagine **educational practice (or AI in Training)**

- How educators teach, collect information, assess and give feedback
- How learners seek and access information, gain new skills, self-assess, seek and regulate feedback

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Are Medical Schools Including AI in Required or Elective Curricula? If so, how are they doing so?

Curriculum SCOPE Survey

The Association of American Medical Colleges (AAMC) and Association of Osteopathic Colleges of Medicine (AACOM) Curriculum SCOPE Survey, first administered in 2023, is a national questionnaire administered by the AAMC.

It collects medical education program data regarding curriculum Structure, Content, Organization, Process, and Evaluation.

Preliminary SCOPE Data…

Of 167 MD and DO granting medical schools in the United States and Canada…

- **33% (55)** reported covering artificial intelligence in the required curriculum
- **38% (63)** reported covering artificial intelligence in the elective or optional curriculum

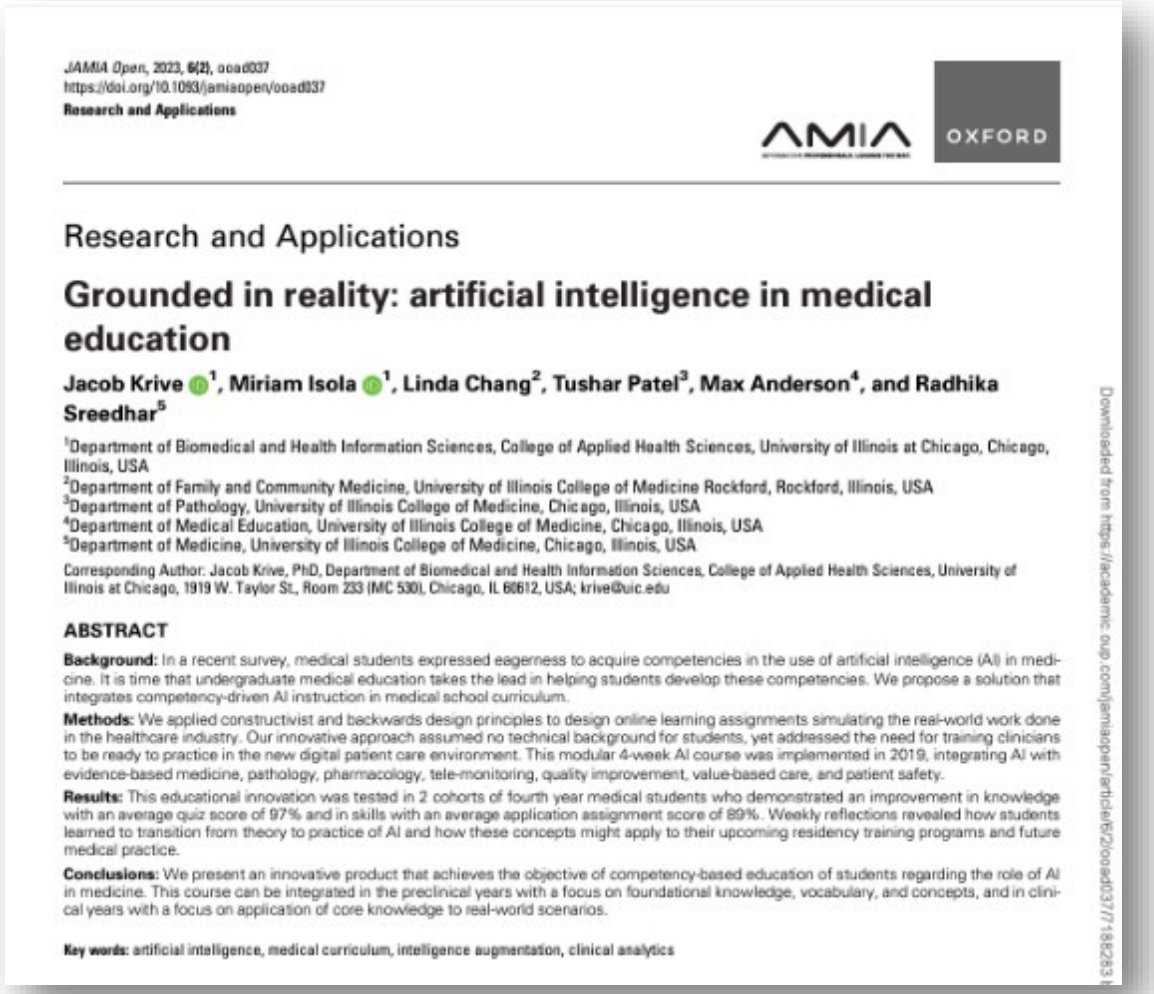
This data is not mutually exclusive nor exhaustive.

AI will Rapidly Expand in MedEd: From Electives

"The more I learned, the more I realized how vital it (AI) is to the whole field of medicine regardless of your specialty."

–MS4

UNIVERSITY OF ILLINOIS
COLLEGE OF MEDICINE



JAMIA Open, 2023, 6(2), ooad037
https://doi.org/10.1093/jamiaopen/ooad037
Research and Applications

AMIA OXFORD

Research and Applications

Grounded in reality: artificial intelligence in medical education

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[3]Department of Pathology, University of Illinois College of Medicine, Chicago, Illinois, USA
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ABSTRACT

Background: In a recent survey, medical students expressed eagerness to acquire competencies in the use of artificial intelligence (AI) in medicine. It is time that undergraduate medical education takes the lead in helping students develop these competencies. We propose a solution that integrates competency-driven AI instruction in medical school curriculum.

Methods: We applied constructivist and backwards design principles to design online learning assignments simulating the real-world work done in the healthcare industry. Our innovative approach assumed no technical background for students, yet addressed the need for training clinicians to be ready to practice in the new digital patient care environment. This modular 4-week AI course was implemented in 2019, integrating AI with evidence-based medicine, pathology, pharmacology, tele-monitoring, quality improvement, value-based care, and patient safety.

Results: This educational innovation was tested in 2 cohorts of fourth year medical students who demonstrated an improvement in knowledge with an average quiz score of 97% and in skills with an average application assignment score of 89%. Weekly reflections revealed how students learned to transition from theory to practice of AI and how these concepts might apply to their upcoming residency training programs and future medical practice.

Conclusions: We present an innovative product that achieves the objective of competency-based education of students regarding the role of AI in medicine. This course can be integrated in the preclinical years with a focus on foundational knowledge, vocabulary, and concepts, and in clinical years with a focus on application of core knowledge to real-world scenarios.

Key words: artificial intelligence, medical curriculum, intelligence augmentation, clinical analytics

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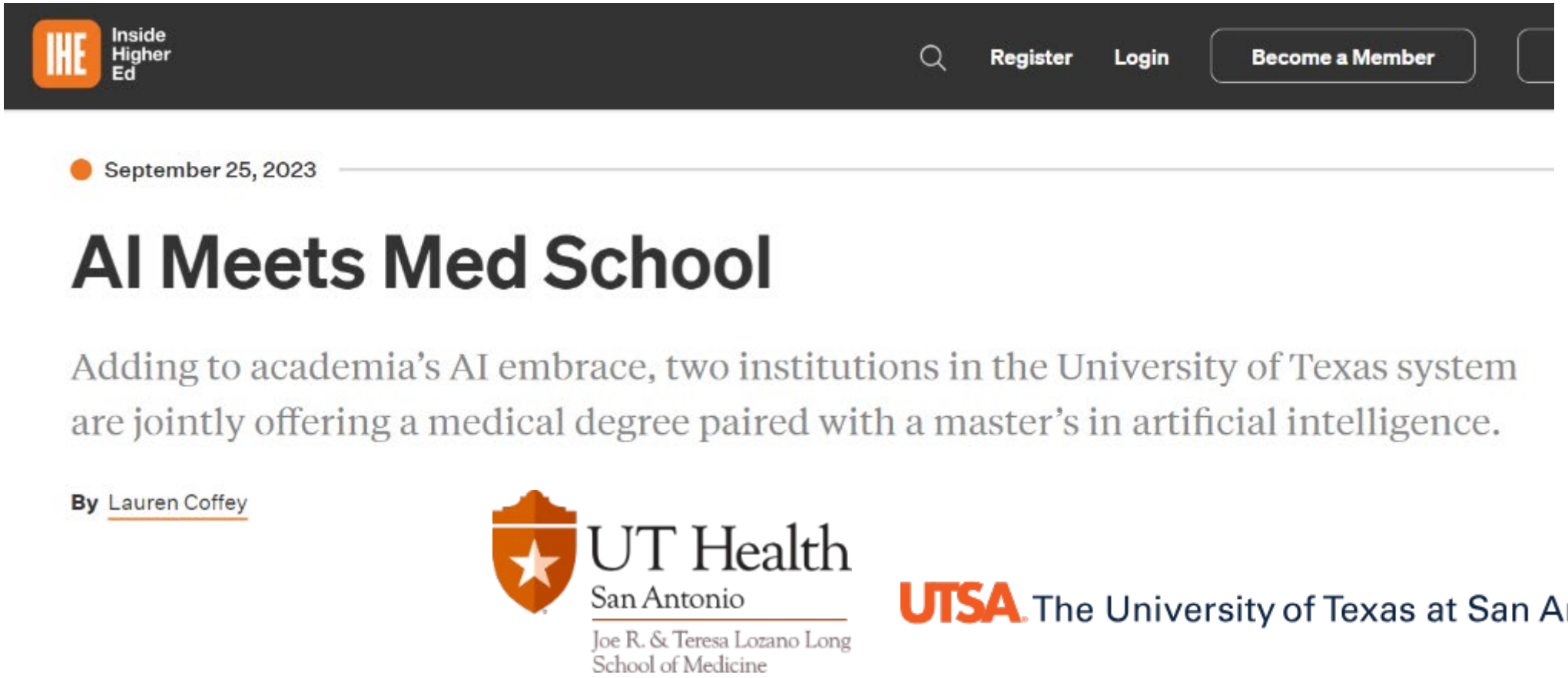
…to Degree Programs



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What AI competencies are needed of current and future physicians?

How will other competency domains be impacted by AI?

New Competencies in AI

- McCoy, L.G., Nagaraj, S., Morgado, F. *et al.* **What do medical students actually need to know about artificial intelligence?.** npj Digit. Med. 2020 **86(3).**
- Liaw W, Kueper JK, Lin S, Bazemore A, Kakadiaris I. **Competencies for the Use of Artificial Intelligence in Primary Care.** Ann Fam Med. 2022 Nov-Dec;20(6).
- Russell RG, Lovett Novak L, Patel M, Garvey KV, Craig KJT, Jackson GP, Moore D, Miller BM. **Competencies for the Use of Artificial Intelligence-Based Tools by Health Care Professionals**. Acad Med. 2023 Mar 1;98(3):348-356.
- Jacobs SM, Lundy NN, Issenberg SB, Chandran L. **Reimagining Core Entrustable Professional Activities for Undergraduate Medical Education in the Era of Artificial Intelligence.** JMIR Med Educ. 2023 Dec 19;9

UNIVERSITY OF TORONTO

Tilman J. Fertitta Family College of Medicine
UNIVERSITY OF HOUSTON

VANDERBILT School of Medicine

UNIVERSITY OF MIAMI
MILLER SCHOOL of MEDICINE

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I. Foundational Knowledge

Knowledge of AI: Explain what artificial intelligence is and describe its health care applications.

"It is more important for students to have a robust conceptual understanding of AI and the structure of clinical data science than to understand constantly changing technical specifics." –McCoy 2020

Adapted from McCoy (2020), Liaw (2022), and Russell (2023)

II. Clinical Applications of AI

AI-Enhanced Clinical Encounters: Carry out AI-enhanced clinical encounters that integrate diverse sources of information in creating patient-centered care plans.

Adapted from McCoy (2020), Liaw (2022), and Russell (2023)

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III. Collaborative AI-based Care

Workflow Analysis for AI-Based Tools: Analyze and adapt to changes in teams, roles, responsibilities, and workflows resulting from implementation of AI-based tools.

Adapted from McCoy (2020), Liaw (2022), and Russell (2023)

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IV. Critical Appraisal of AI

Evaluation of AI-Based Tools: Evaluate the quality, accuracy, safety, contextual appropriateness, and biases of AI-based tools and their underlying datasets in providing care to patients and populations.

Adapted from McCoy (2020), Liaw (2022), and Russell (2023)

V. Continuous Improvement

Practice-Based Learning and Improvement Regarding AI-Based Tools: Participate in continuing professional development and practice-based improvement activities related to use of AI tools in health care.

Maintaining safety, practicing vigilance amid deskilling (Automation Complacency*)

Adapted from McCoy (2020), Liaw (2022), and Russell (2023)

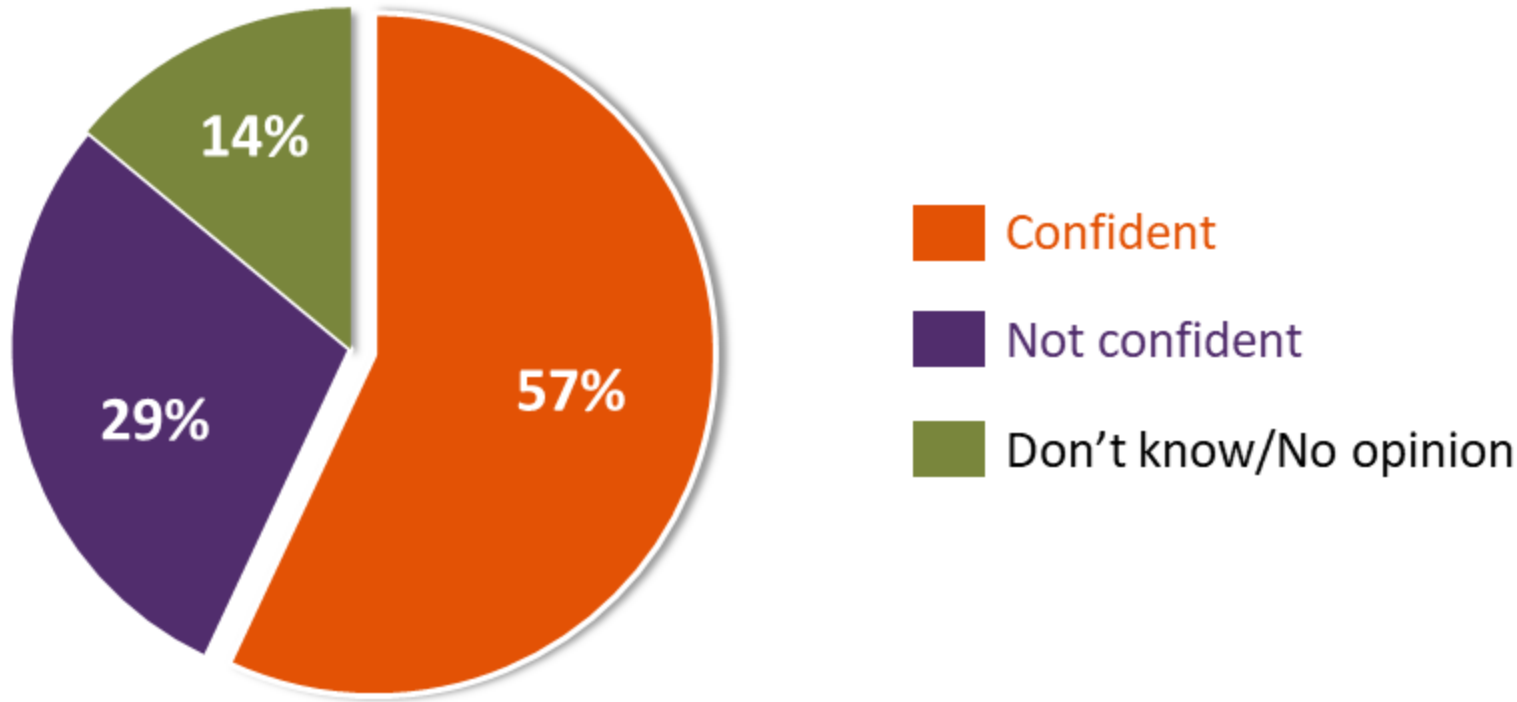
*Automation complacency = insufficient attention to and monitoring of automation output, usually because that output is viewed as reliable.

VI. Ethical Implications of AI

Societal & Ethical Implications: Explain how social, economic, and political systems influence AI-based tools and how these relationships impact ethics.

Adapted from McCoy (2020), Liaw (2022), and Russell (2023)

Most adults are confident in the ability of scientists to use AI to advance our understanding and improvement of human health.



Source: Morning Consult online poll of 2,197 adults. Data weighted to approximate a nationally representative sample based on gender, age, education, race, and region.

Other Competency Areas - Some Big Shifts…

- From disease orientation to promotion of wellness and disease prevention
- From knowledge acquisition (individual stewards of information) towards information management
- Differentiating & appreciating AI from human skills –
  - Humility
  - Metacognition
  - Compassionate care

training in AI | AI in training

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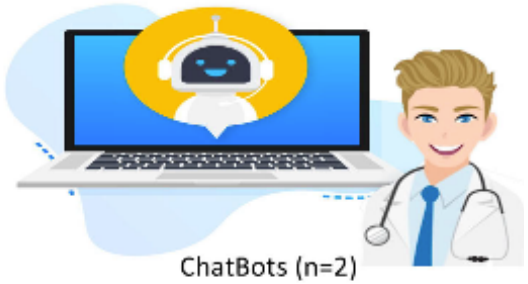
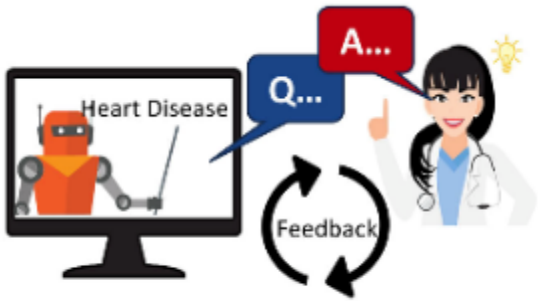
Disclosures

- Dr. Lomis is a full-time employee of the American Medical Association
- The content in this presentation draws upon my own work and that of other AMA staff members, as well as input from members of the
  AMA ChangeMedEd® Initiative and the
  National Academy Global Forum on Innovation in Health Professions Education
- The opinions expressed do not necessarily reflect American Medical Association policy

Use cases for AI in Health Professions Education



ChatBots (n=2)
(e.g., Q & A)

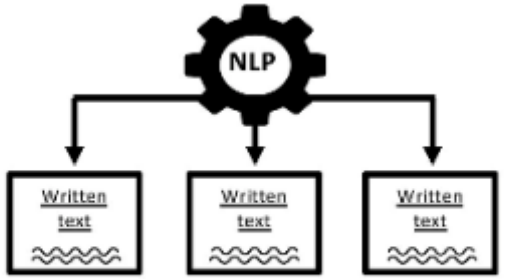


Personalized Learning Platforms (n=6)
(e.g., intelligent tutoring systems)

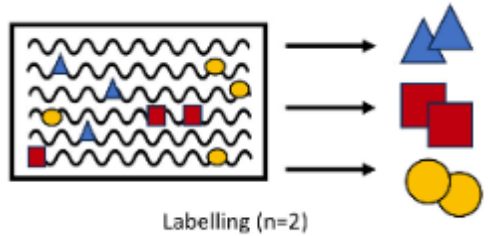
Content Generation (n=5)
(e.g., production of educational materials)

Summative Assessment Completion (n=32)
(e.g., model performance on exams)

Clinical Guidance for Trainees (n=10)
(e.g., decision support tools)



Data Analytics (n=9)
(e.g., application review)



Labelling (n=2)
elling and sorting)

Sentiment Analysis and Bias Evaluation (n=7)
(e.g., determining emotional tone from text)

Virtual Patient Simulators (n=11)
(e.g., clinical reasoning practice)

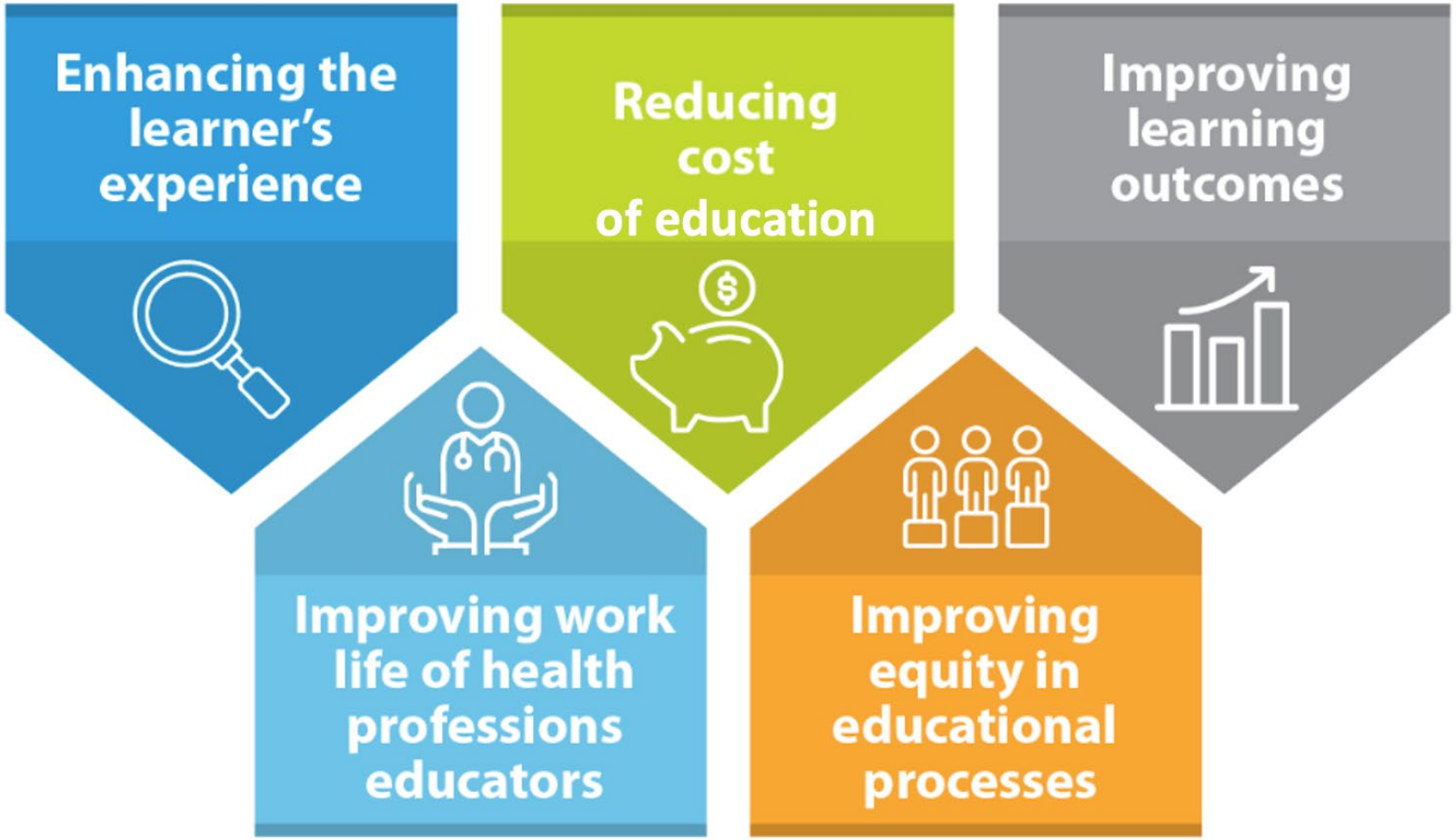
Procedural Guidance for Trainees (n=5)
(e.g., directions for learning a skill)

Performance Analytics (n=19)
(e.g., assess knowledge, skills, abilities)

Predictive Models (n=17)
(e.g., predict ability / competence)

Gordon, Daniel, et al. (29 Feb 2024): A scoping review of artificial intelligence in medical education: BEME Guide No. 84, Medical Teacher

AI is poised to drive the Med Ed Equivalent of the Quintuple Aim



https://www.ama-assn.org/practice-management/digital/advancing-ai-medical-education-through-ethics-evidence-and-equity

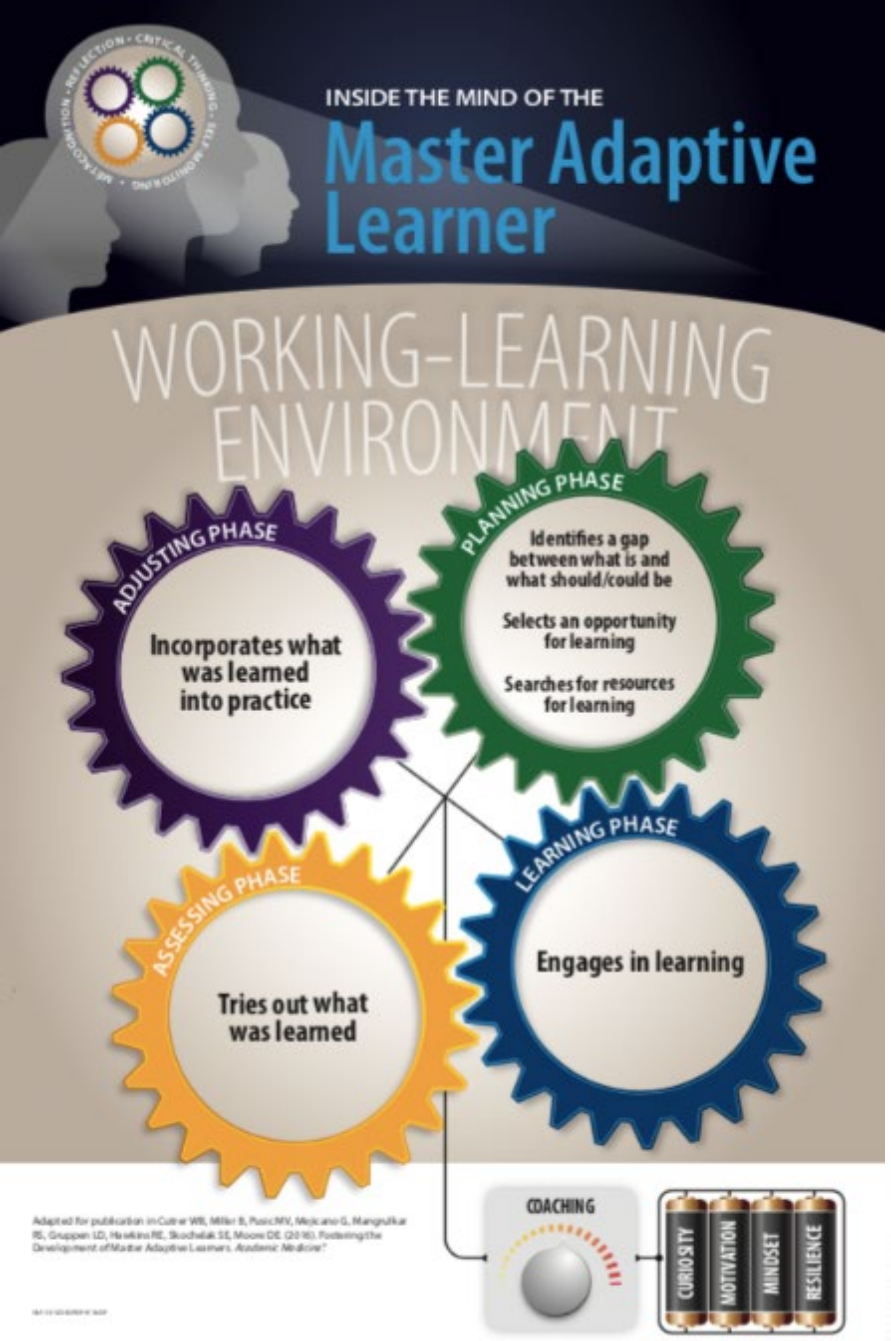
Integrating learning & work

- Just-in-time assistance & coaching
- Capturing and coding clinical experiences
- Elevating learning resources & experiences prompted by work artifacts
- More anticipatory learning
- Enabling individualized pathways

Precision Education

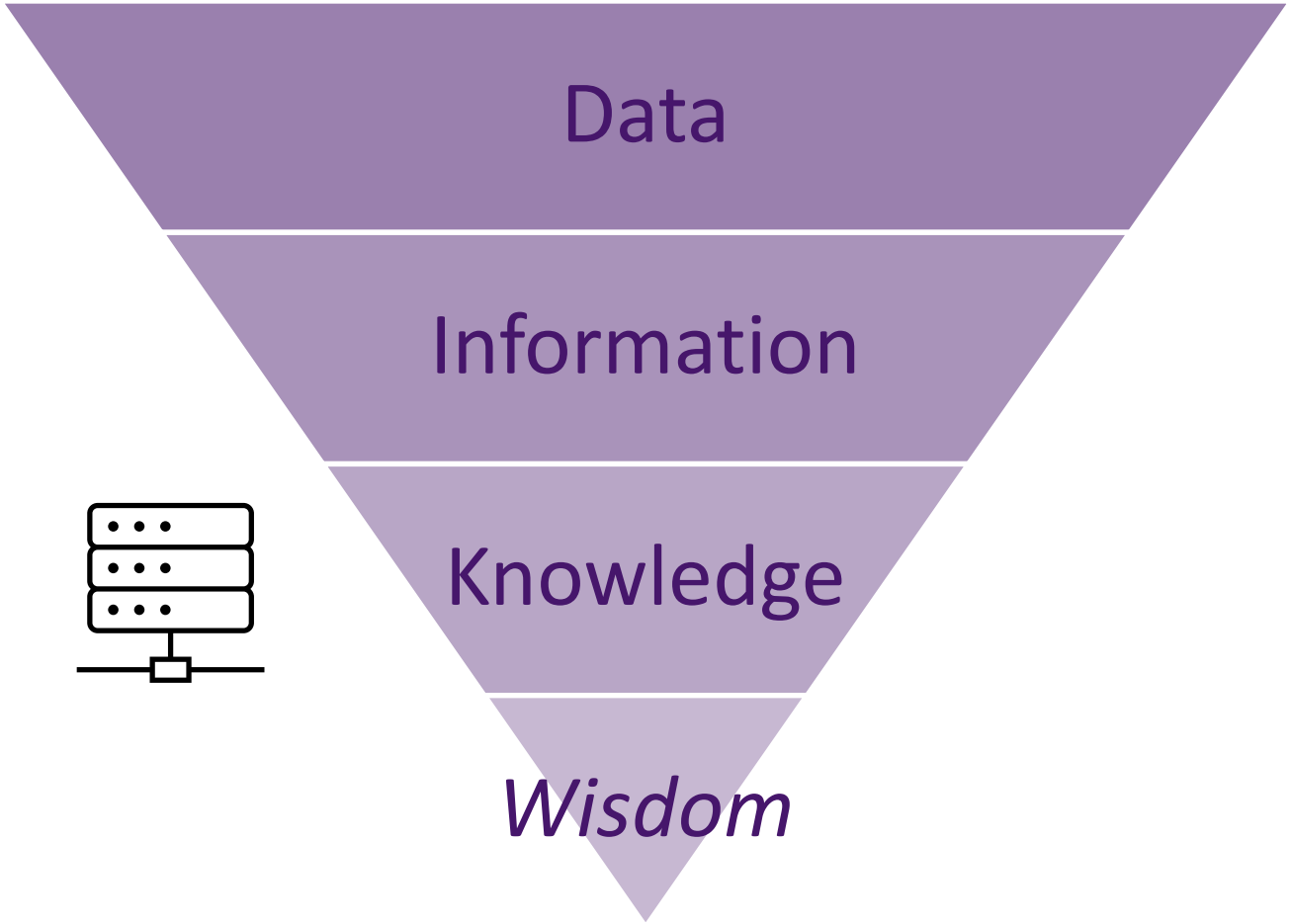
A process that leverages data & technology to

- promote a true continuum of competency development throughout one's career and
- enhance alignment between learning and practice.



Cutrer et al

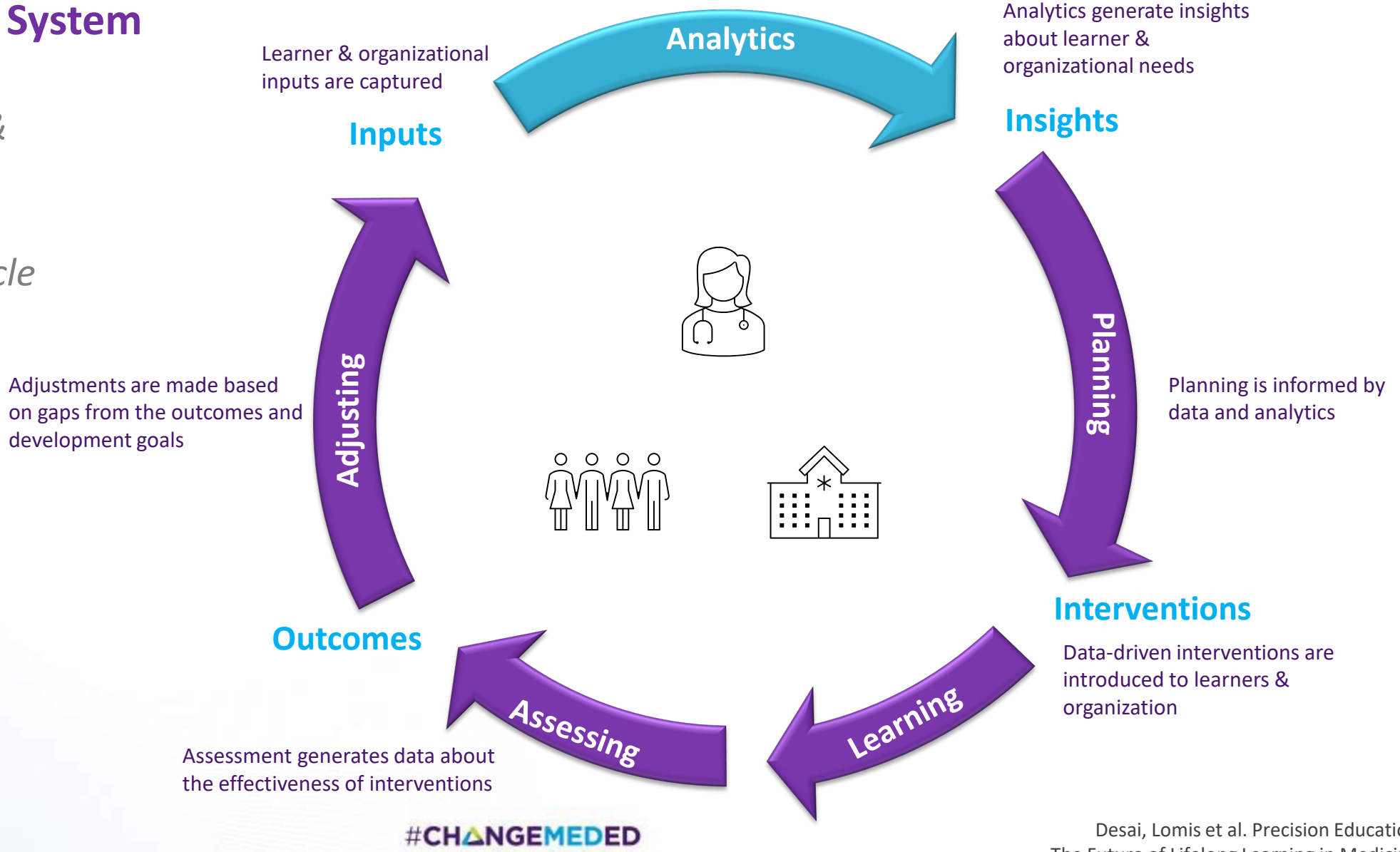
AMA | CHANGEMEDED



#CHANGEMEDED

Precision Education System

emphasizes the contribution of data & analytics to enable –and propel– the entire learning cycle



Levels of engagement:

- individual (micro)
- program (meso)
- organization (macro)

#CHANGEMEDED

Desai, Lomis et al. Precision Education: The Future of Lifelong Learning in Medicine. Academic Medicine 99(4S):p S14-S20, April 2024

EDUCATION & INNOVATION

Meet Jill Watson: Georgia Tech's first AI teaching assistant

Nov 10, 2016 | By Hillary Lipko

Scoring clinical notes

NLP in clinical skills assessment

A comprehensive dataset created from the USMLE Step 2 Clinical Skills patient note corpus provides an abundance of clinical patient notes, allowing researchers to explore the application of NLP models in clinical skills assessment. An important part of the dataset contains information on the myriad of ways that important clinical concepts can be expressed. Providing the content specific-data needed to build and train an NLP system opens avenues for future research and innovation in the field.

The dataset, together with expert annotation of important concepts, is available to request for research purposes via NBME's Data Sharing Portal.

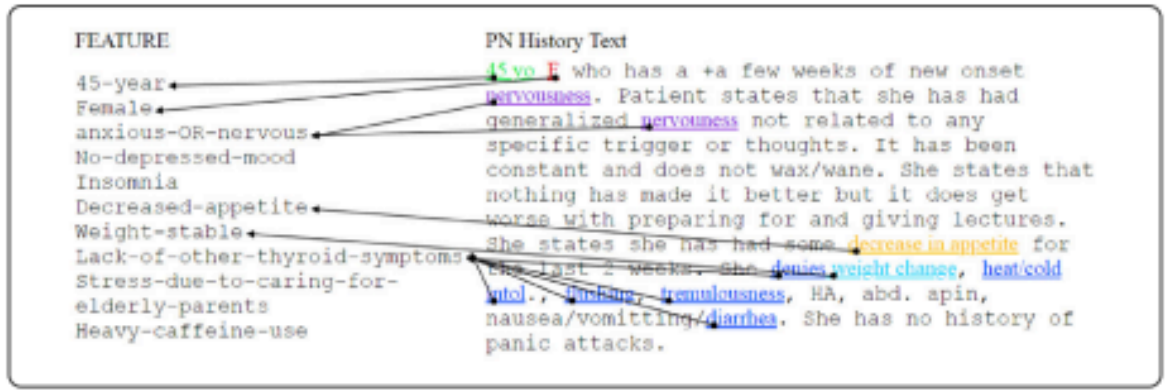


Figure 1: Key concepts from an exam rubric (left) and how these have been expressed in an examinee-written patient note (right). The more such concepts an examinee has covered in their patient note, the higher their score. NLP systems facilitate scoring by detecting these phrases automatically and mapping them to their corresponding concept from the rubric.

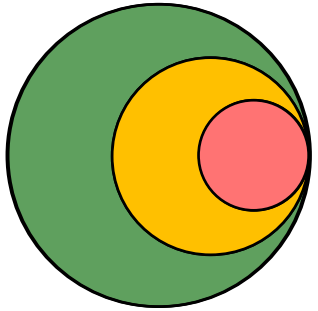
FOR FURTHER READING

Yaneva, V., Mee, J., Ha, L. A., Harik, P., Jodoin, M., & Mechaber, A. (2022). The USMLE® step 2 clinical skills patient note corpus. *Association for Computational Linguistics*.

NBME

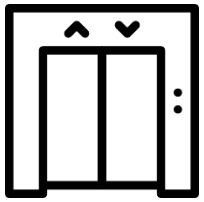
Providing Feedback on Clinical Outcomes: TRACER

Patient Cohorts



- **Any Type 2 DM**
- **High Risk T2DM** (Glc ≥ 180 in ED)
- **Very High Risk T2DM** (Long-acting insulin PTA or recent A1c ≥ 8.5)

Setting

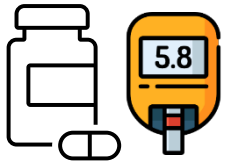


Admitted to general IM ward

Initiating Event + Time

Admit order

Clinical Data



Insulin orders, glucose readings

Informatics Black Box

SQL queries, ML, NLP

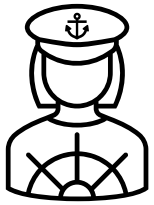
Type 2 Diabetes TRACER Bundle

Admission to +12hr:

- **Sliding scale** insulin monotherapy?
- **Long-acting** insulin?
- **Balancing** measures: glucose <60 or >180

Performance Dashboard

Coach



Attributed Trainee(s)

(e.g. plurality of medication orders)

University of CINCINNATI

Stanford MEDICINE

AMA

Support from AMA ChangeMedEd

Burk-Rafel et al. TRainee Attributable & Automatable Care Evaluations in Real-time (TRACERs): A Scalable Approach for Linking Education to Patient Care. Perspectives on Medical Education. 2023.

RECONNECT

A new way to curate recent medical findings for physicians

An AI engine capable of curating educational content based on:

Upcoming patient visits

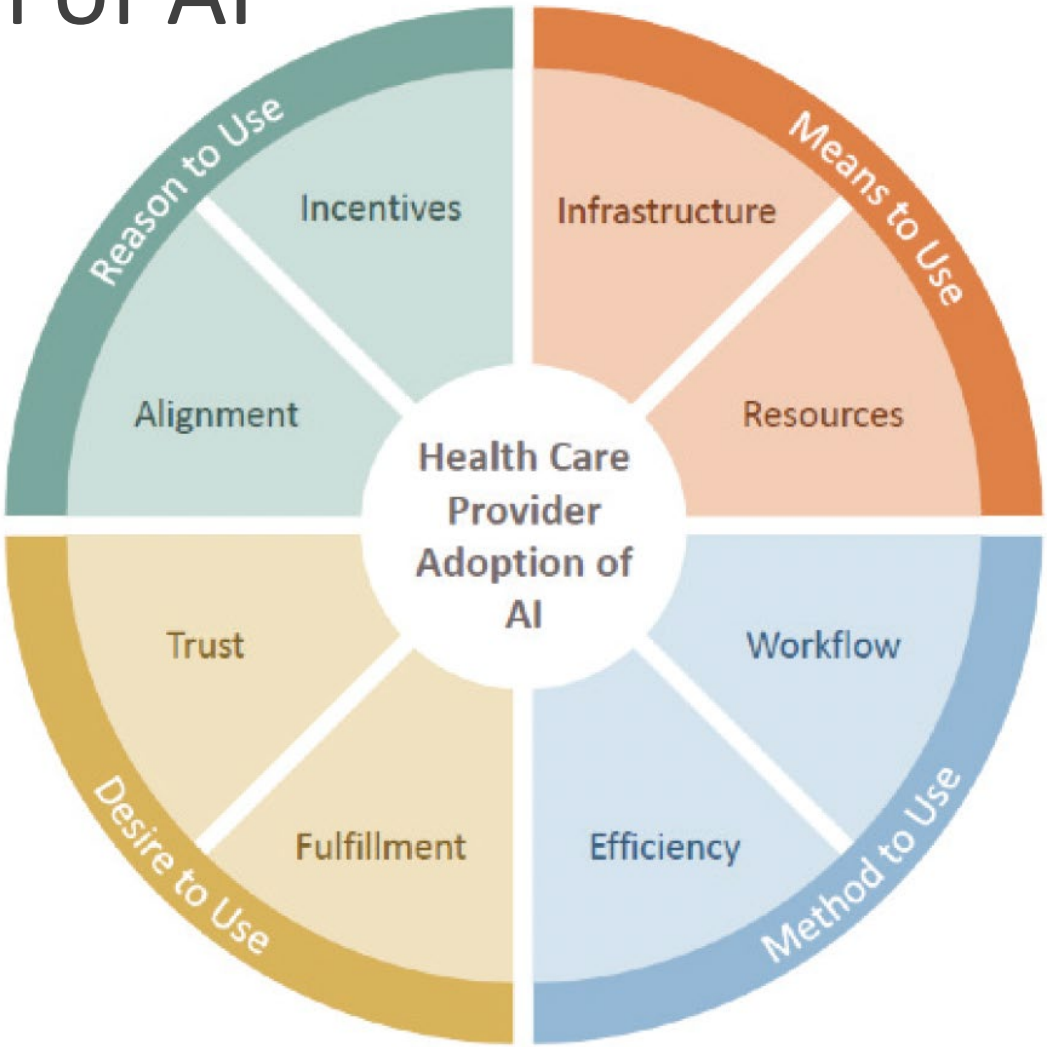
Multivariate nuances within individual patient records
[comorbidities, treatment-diagnosis combinations, medication combinations]

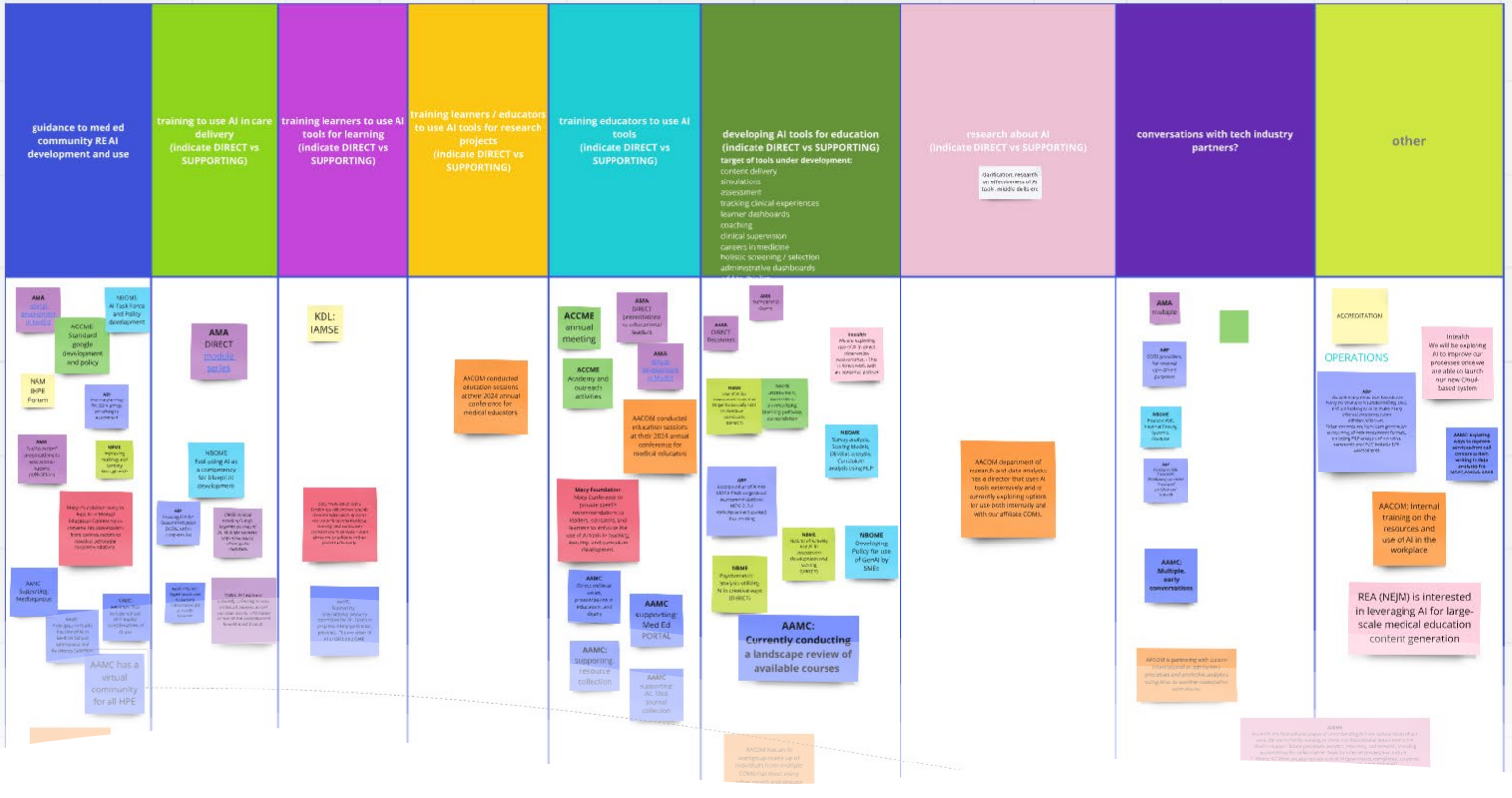
Trends within a physician's practice patterns

Efficient delivery of personalized education, anticipatory to the physician's workflow

Challenges to implementation of AI

- Bias & disparities
- Transparency, explainability
- Dataset quality and availability
- Infrastructure, workflow
- Governance, regulation
- Monitoring & calibration drift





American Medical Association

Think Tank on AI in Medical Education

July 2024

Dimensions of AI to be addressed in MedEd

	Guidance to constituents	Training in use of AI for HC delivery	Training in use of AI as learning aid	Training in use of AI in research	Training educators for AI use	Developing AI tools for ed use	Research about AI	AI for organizational operations	Exploring tech partners*

Organizational leadership of AI in MedEd

	Guidance to constituents	Training in use of AI for HC delivery	Training in use of AI as learning aid	Training in use of AI in research	Training educators for AI use	Developing AI tools for ed use	Research about AI	AI for organizational operations	Exploring tech partners*
Direct action									
Indirect action									
Preparation									
Contemplation									

Current landscape of organizational activities

*a given organization may appear at multiple levels of action
change in symbol (X, +, ^) indicates new actors joining in that level

	Guidance to constituents	Training in use of AI for HC delivery	Training in use of AI as learning aid	Training in use of AI in research	Training educators for AI use	Developing AI tools for ed use	Research about AI	AI for organizational operations	Exploring tech partners*
Direct action	XXXX XXXX (8)	XX		XXX	XXX XXX	XXX	XX	XXX XXX	XXXX XXXX
Indirect action	XX (2 repeats)	XX ++++	XX			X ++	+		
Preparation	+ (1 new)					X^^	^	+	
Contemplation								^	*11 tech companies named
TOTAL UNIQUE	9	6	2	3	6	7	4	8	8

N= 13

Priorities among leadership organizations

- Elevate urgency to provide foundational training about AI at all levels of continuum, and for medical educators
- Opportunities to advance CBME and scale innovations
  - Assessment
  - Coaching
- Consider options to support this community of innovation

Artificial Intelligence Learning Series

Developed in collaboration with

Action items:

- ✓ Outreach to CHAI to collaborate in educational efforts
- ✓ Feed findings into Macy Foundation pre-work for their convening in November (with anticipated recommendations in Q1 2025)
- ✓ Suggest for discussion at Coalition for Physician Accountability meeting in December

Responsible development & deployment of AI *by educators*

Responsibility	Innovation project team	Educational administration (deans, curric cmte.)	Educator
PLANNING AND DEVELOPMENT			
Ensure the AI system addresses a meaningful educational goal	○		○
Ensure the AI system works as intended	○		○
Explore and resolve legal implications of the AI system[1] prior to implementation and agree upon appropriate safe, effective and equitable use of and access to education AI	○	○	○
Develop a clear protocol to identify and correct for potential bias	○	○	○
Ensure appropriate learner safeguards are in place for direct-to-consumer tools that lack educator oversight	○		
IMPLEMENTATION AND MONITORING			
Make educational decisions such as advancement and remediation		○	○
Have the authority and ability to override the AI system			○
Ensure meaningful oversight is in place for ongoing monitoring		○	○
Ensure the AI system continues to perform as intended through performance monitoring and maintenance	○	○	
Ensure ethical issues identified at the time of purchase and during use have been addressed[2]		○	
Ensure clear protocols exist for enforcement and accountability, including a clear protocol to ensure equitable implementation	○	○	○

https://www.ama-assn.org/practice-management/digital/advancing-ai-medical-education-through-ethics-evidence-and-equity

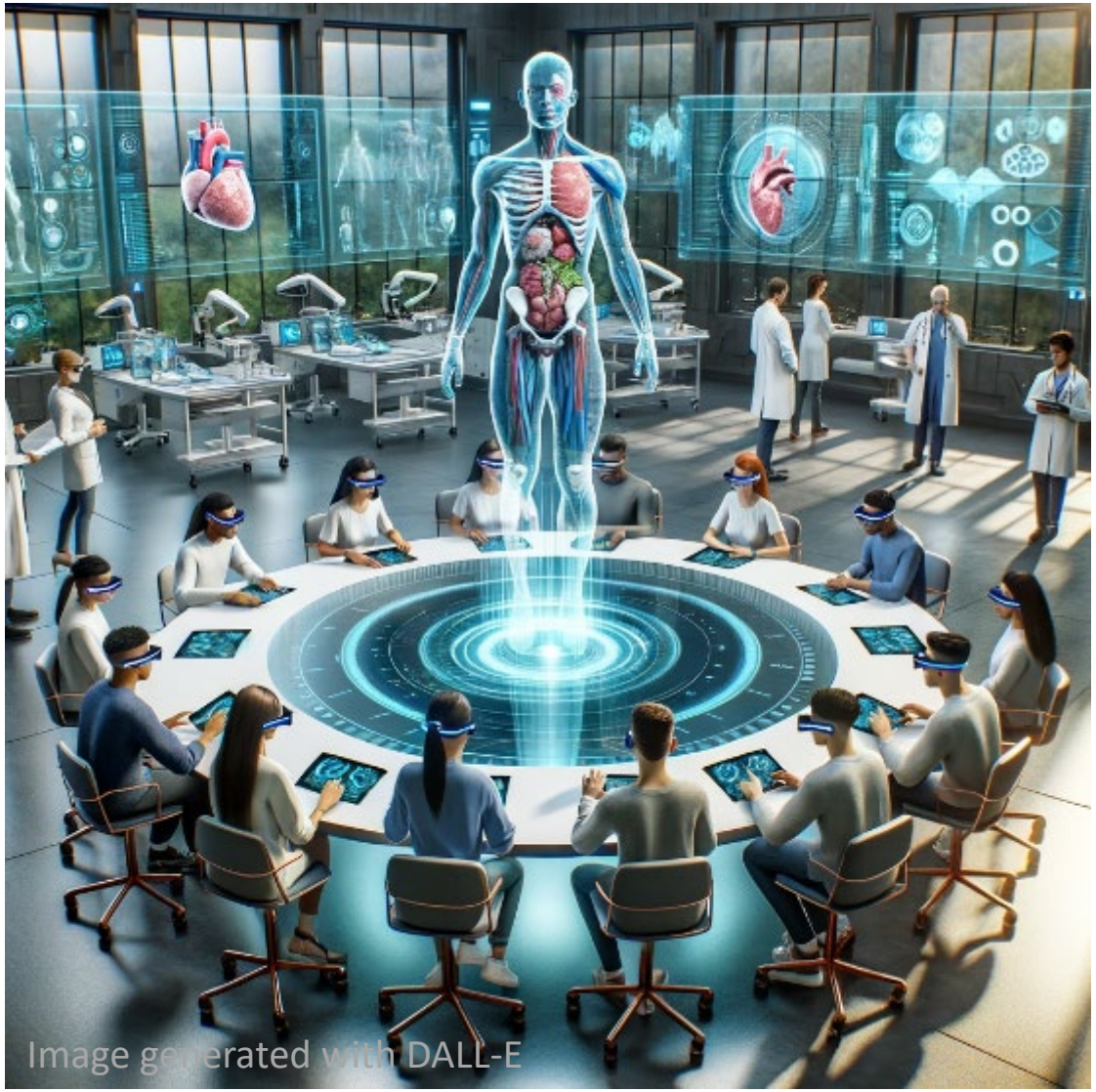
training in AI

AI in training

for educators…

- Educate appropriate faculty in basic concepts
- Build relationships of expertise within your institution
- Establish a local advisory group
- Review your program's competencies and curriculum
- Review your assessment program
- Review existing admissions /selection processes
- Participate in evaluation and research in AI in med ed
- Engage in global discussions to refine objectives
- Leverage AI to improve the process of education

Lomis, Whelan, et. al.
Artificial Intelligence for Health Professions Educators
National Academy of Medicine Perspectives,
September 2021



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@KimLomisMD

Resources & Opportunities to Learn More

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Tomorrow's Doctors, Tomorrow's Cures®

Association of American Medical Colleges

What can you do?

- Get Experience
- Be Curious
- Get Informed
- Be Cautious
- Remember your/your institutions mission, values, principles and the goals of Health professions Education

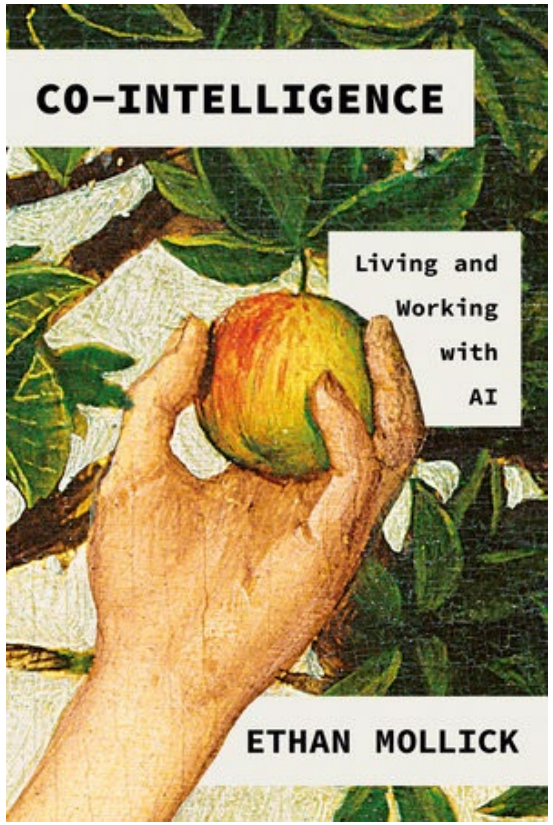
Get Experience: Four Rules for Co-intelligence

1. Always invite AI to the table (legally and ethically)

2. Be the human in the loop

3. Treat AI like a person (but tell it what kind a person it is)

4. Assume this is the worst AI you will ever use



Mollick, Ethan. Co-Intelligence: Living and Working with Ai. Portfolio/Penguin, 2024.

Get informed, knowledgeable
READ (critically)!

- Bowen, J., & Watson, K. (2023). **Teaching with AI: How artificial intelligence is transforming education**. Routledge.
- Christian, B. (2020). **The alignment problem: Machine learning and human values**. W. W. Norton & Company.
- Lee, T., Grewal, M., & Wright, A. (2023). **The AI revolution in medicine: How artificial intelligence is transforming healthcare**. Springer.
- Mollick, E. (2024). **Co-intelligence: Living and working with AI**. Portfolio/Penguin.
- Mount Sinai Health System. **Artificial intelligence in graduate medical education: Annotated bibliography**. https://libguides.mssm.edu/ai/gme.
- Pearl, J. (2024). **ChatGPT MD: How AI empowered patients and doctors**. Basic Books.
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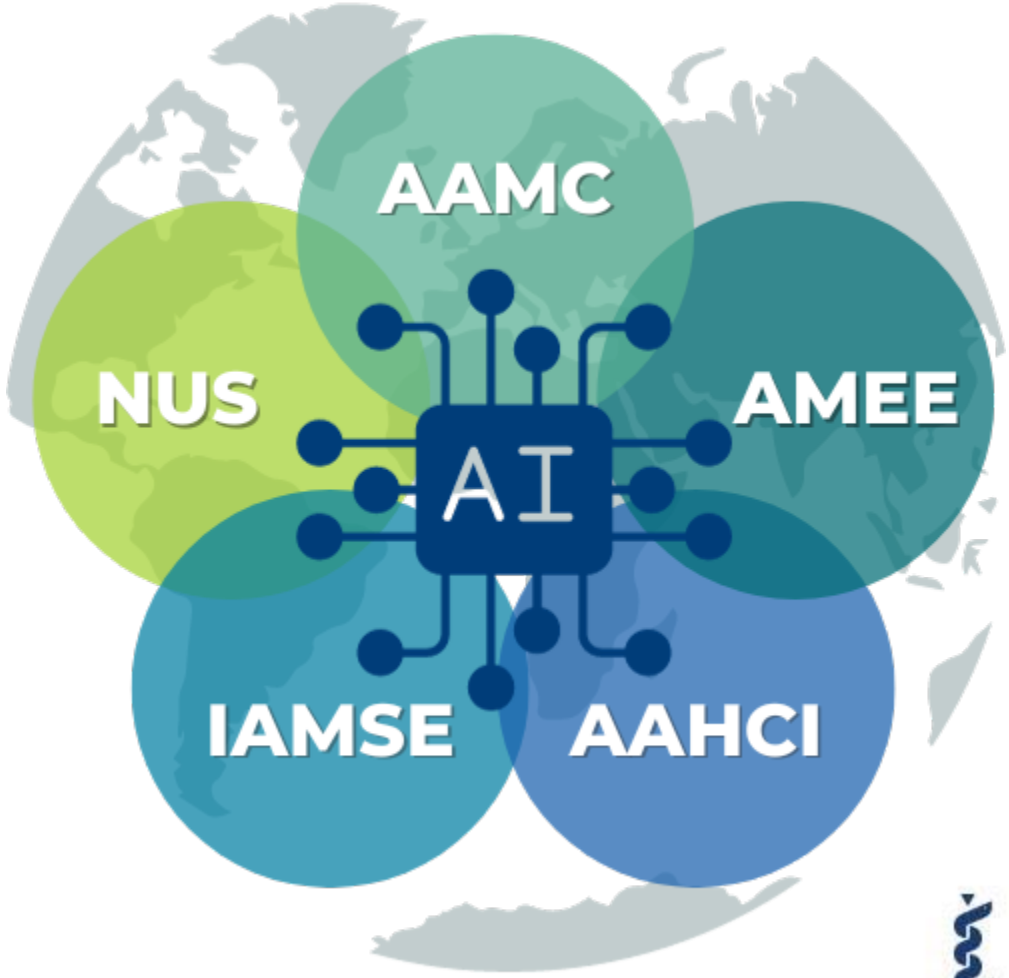
- Wachter, R. (2015). **The digital doctor: Hope, hype, and harm at the dawn of medicine's computer age**. McGraw-Hill Education.

International Advisory Committee for AI (in Medical Education)

- Inaugural 16 members representing over 10 countries with expertise in AI and medical education
- Convened to provide guidance and best practices for the HPE community
  - To *survey* the dynamic AI landscape
  - To identify opportunities and address concerns for learners, faculty, staff
  - Imagine new realities for medical education in this AI era



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Learn from Experts, Share Your Innovations & Engage with Colleagues

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- Key resources collection
- Discussion threads
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- And More

Stay in touch:
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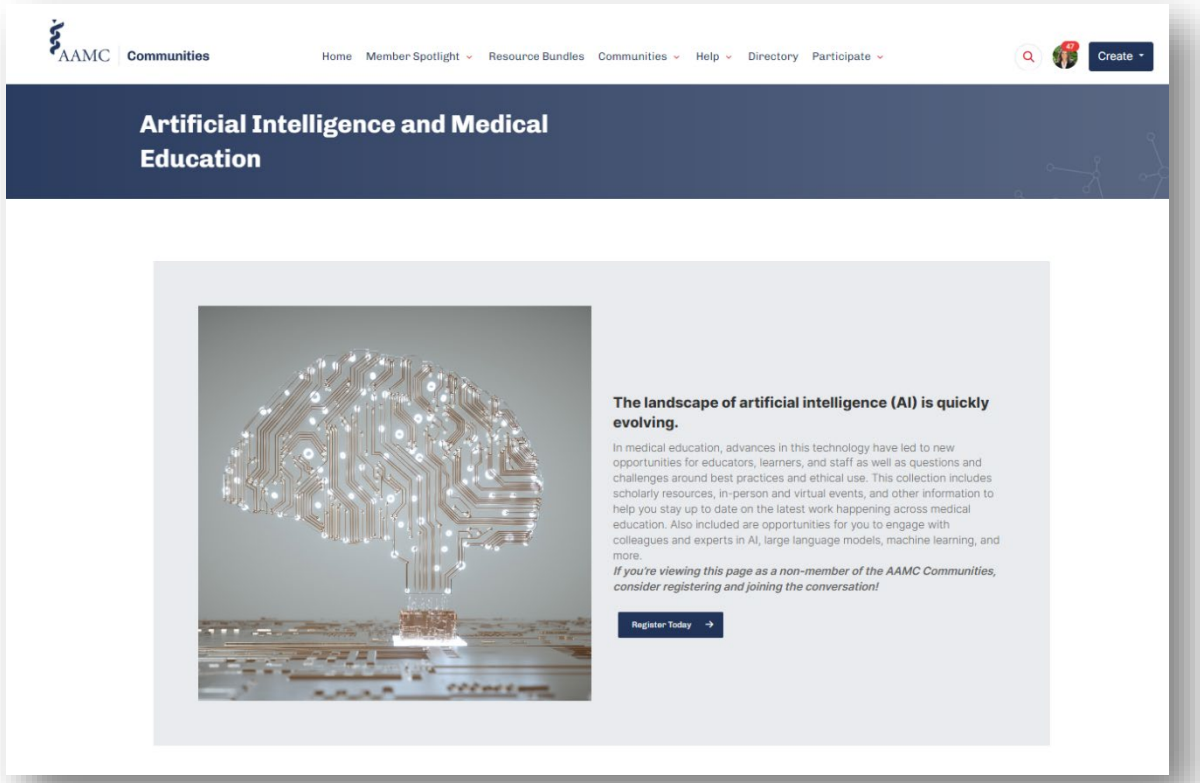

Principles for Responsible AI in Medical School Admissions and Residency Selection

1) Balance Prediction and Understanding
2) Protect against Algorithmic Bias
3) Provide Notice and Explanation
4) Protect Data Privacy
5) Incorporate Human Judgment
6) Monitor and Evaluate

COMING SOON! Principles for Responsible AI in Medical Education

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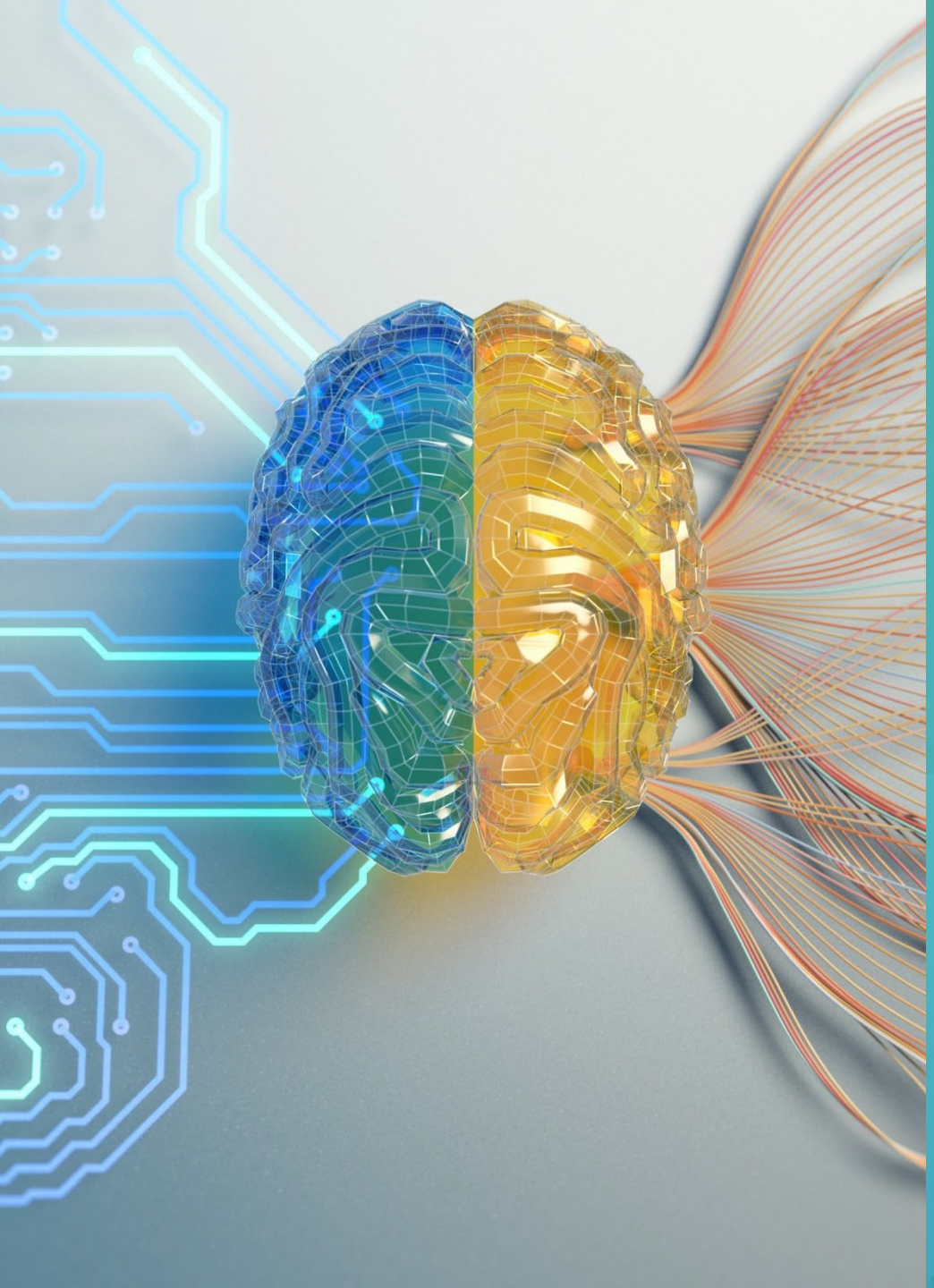

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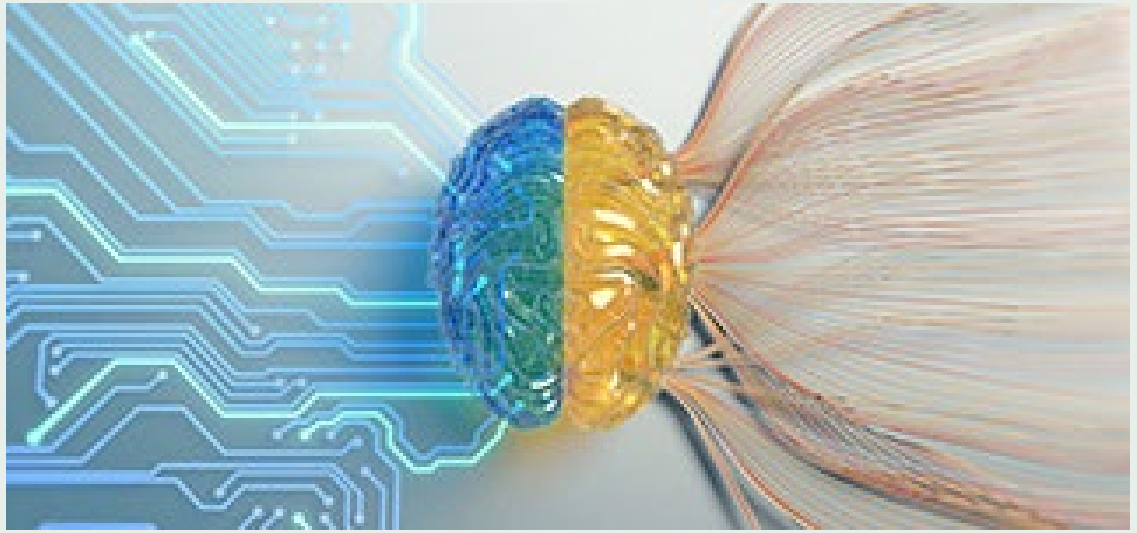

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MedEdPORTAL invites submissions of responsible and ethical implementation AI tools in teaching, learning, and assessment towards the aim of improved patient care

Collection Editors

Cornelius James, MD
University of Michigan Medical School

Elissa Hall, EdD
Mayo Clinic College of Medicine and Science

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Questions?

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Thank you!

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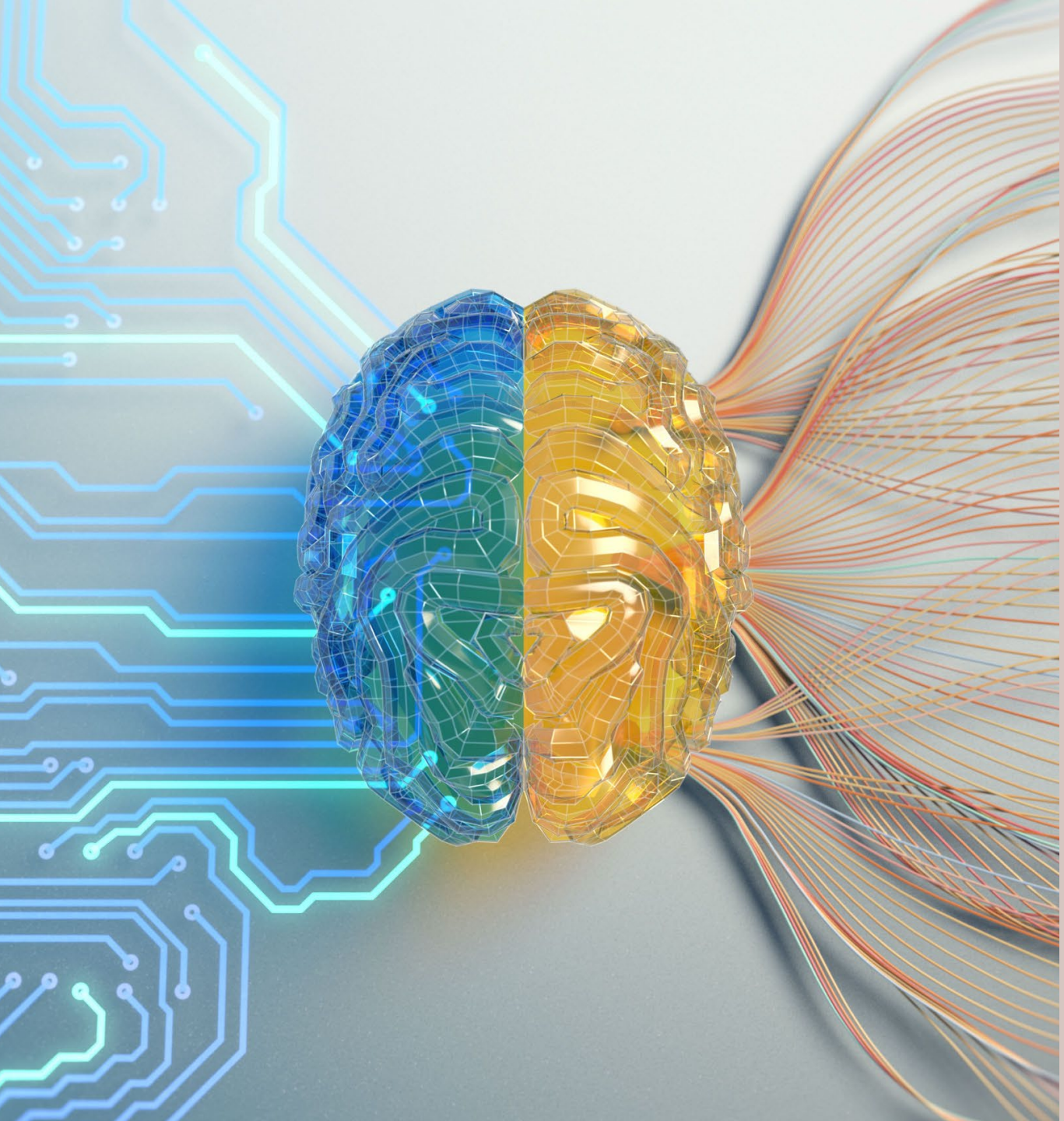

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Artificial Intelligence Education

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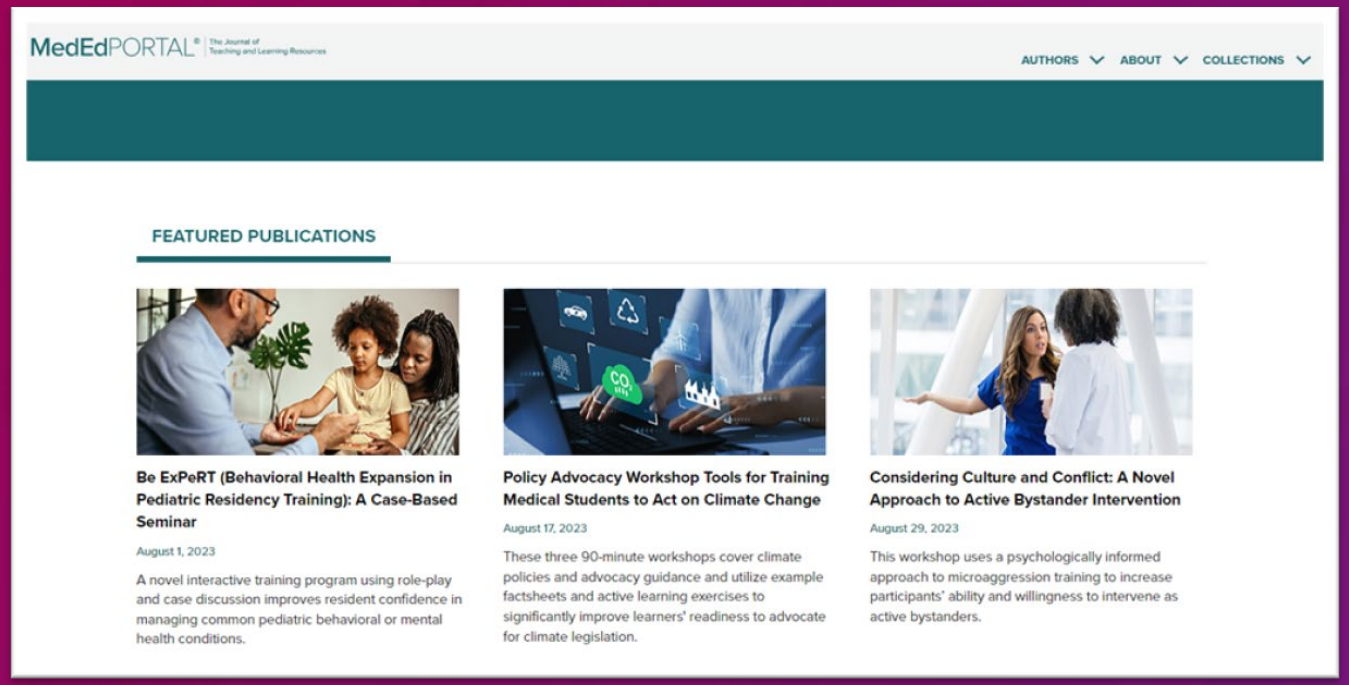

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