2020 GSA-CiM-OSR Professional Development Conference

March 27-29, 2020
Sheraton Grand Chicago
Chicago, Illinois
GSA-CiM-OSR Professional Development Conference

Meeting Proceedings

The meeting was cancelled due to the COVID-19 pandemic.

GSA – Group on Student Affairs
CiM – Careers in Medicine
OSR – Organization of Student Representatives
The 2020 Group on Student Affairs-Careers in Medicine-Organization of Student Representatives (GSA-CiM-OSR) Professional Development Meeting (PDC) was planned and developed by GSA-CiM-OSR Advisory Committee in close collaboration with the GSA Steering Committee and Association of American Medical Colleges (AAMC) Meetings and Marketing Staff.

Session and Poster proposals underwent rigorous peer review and were carefully selected and accepted for presentation at the 2020 GSA-CiM-OSR PDC scheduled for March 27-29 at the Sheraton Grand Chicago in Chicago, Illinois.

The meeting was cancelled due to the COVID-19 pandemic.

Acknowledgments

The Group on Student Affairs (GSA) Leadership, AAMC Constituent Engagement Unit (CEU), and Student Affairs and Programs (SAP) staff wish to thank the following individuals for their invaluable contribution to planning the 2020 GSA-CiM-OSR Professional Development Meeting:

GSA-CiM-OSR Advisory Committee (p. 5)

GSA Steering Committee (p. 115)

AAMC Meetings and Marketing Staff (p. 117)

Our thanks to Helen Gineris, CMP, MTA and Irena Tartakovsky, MD, MS, for producing this meeting proceedings document.
Dear Colleagues:

A tremendous amount of work goes into producing a professional development meeting. Well before participants are expected to step up to the onsite registration table, a dedicated group of individuals begin the hard work of developing the programming and organizing the logistics of the meeting. I am pleased to be able to acknowledge the work of the faculty, staff and students who responded to the call for proposals and worked hard to develop sessions and posters, and of the Advisory committee who met regularly to craft the program agenda and review proposals. Together, they created what promised to be a robust experience for the attendees of the 2020 GSA-CiM-OSR Professional Development meeting. We are pleased to be able to showcase that hard work in this meeting proceedings document.

Anita Pokorny, M.Ed.
National GSA Chair
2020 GSA-CiM-OSR PDC Advisory Committee Chair
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PROGRAM

Thursday, March 26

7:30 AM - 5:00 PM  Registration and Information

8:00 AM - 12:00 PM  GSA National Committee Meeting: COA Meeting (Closed - Invitation Only)

8:00 AM - 12:00 PM  GSA National Committee Meeting: COSA Meeting (Closed - Invitation Only)

8:00 AM - 12:00 PM  GSA National Committee Meeting: COSDA Meeting (Closed - Invitation Only)

8:00 AM - 12:00 PM  GSA National Committee Meeting: COSFA Meeting (Closed - Invitation Only)

8:00 AM - 12:00 PM  GSA National Committee Meeting: COSR Meeting (Closed - Invitation Only)

8:00 AM - 5:00 PM  CiM Workshop (Additional Fee Required)

12:00 PM - 1:00 PM  GSA Committees Joint Luncheon (Closed - Invitation Only)

1:00 PM - 4:00 PM  GSA National Steering Committee Meetings (Closed - Invitation Only)

Friday, March 27

6:45 AM - 6:00 PM  Registration and Information

7:00 AM - 8:00 AM  Breakfast for PDI Workshop Attendees and OSR

7:30 AM - 8:30 AM  OSR Business Meeting (Closed - Invitation Only)

8:00 AM - 11:30 AM  GSA PDI Preconference Workshop: Disrupting the Sink or Swim Culture (Additional Fee Required) Click here to learn more about the GSA Professional Development Initiative (PDI) Preconference Workshop.

  Speakers:  Talicia Jackson, Ann-Gel Palermo

8:45 AM - 10:00 AM  OSR Breakout Sessions (Closed - Invitation Only)

10:00 AM - 11:30 AM  GSA New Member Bootcamp
10:00 AM - 11:30 AM  **Collaborative Problem Solving: Creative Solutions by Reducing Silos**  
Are you interested in meeting new people in GSA, learning about collaborative problem-solving, and becoming a collaborative problem solver? If so, this session is for you!

When problems arise in medical education, we want to take action to ameliorate them. However, some well-intentioned solutions that develop in silos result in unintended consequences, which can exacerbate the predicament. Employing collaborative problem solving could better address challenges we face in medical education.

In this workshop you will: meet new partners in the GSA, learn about a framework for collaborative problem solving, hear about a collaborative project in the GSA (Texas STAR), identify an issue at your own institution to develop a collaborative problem solving action plan, participate in a small group case discussion for feedback on your collaborative action plan, engage in a large group discussion to reflect on session learning, takeaway next steps to embark on your own collaborative problem solving, and reflect on the positive impact that networking and collaborative problem solving can have on your professional development.

**Learning Objectives:**
Upon completion, participants will be able to:
2. State three essential skills for collaborative problem solving.
3. Identify an issue and compose an action plan for a collaborative problem-solving project at their respective institution.

**Speakers:** Kathleen Kashima, Angela Mihalic, Ushasi Naha, Charles Pohl

10:00 AM - 6:00 PM  **Exhibit Hall Open - Visit the Exhibitors**

10:15 AM - 11:30 AM  **OSR Breakout Sessions** (Closed - Invitation Only)

11:30 AM - 11:45 AM  **Break**

11:45 AM - 1:15 PM  **Welcome Lunch and Opening Plenary: Moving from Surviving to Thriving**

*Moving from Surviving to Thriving: The Transformative Potential of Holistic Student Affairs*

Sink or swim. Survive or thrive. Figure it out or wash out. While our current culture of medical education can be described in many ways, it ultimately isn’t serving many people as well as it could or should. It’s time for student services professionals to collaborate with students and colleagues to contributing to building a system of training that enables all students to thrive. Holistic Student Affairs is a model for critically examining the systems, structures, and environments in which medical students and trainees learn with the goal of re-shaping them into inclusive, thriving cultures that value learners’ lived experiences and foster learner success. The plenary speakers will share their personal narratives, experiences, and perspectives to uncover the underlying assumptions that maintain non-inclusive and ineffective structures and practices to make real the transformative potential of the HSA model.
The session will end with a call to action for the entire GSA community to partner in creating a holistic medical education experience.

Learning Objectives:

At the conclusion of this session, participants will be able to:

1. Describe how certain personal attributes, experiential factors, and demographics shape how students navigate university systems and structures.
2. Identify different systemic and structural barriers that impede student success.
3. Describe core elements of the Holistic Student Affairs model.

Plenary Speakers: Talicia Jackson, Ann-Gel Palermo

1:15 PM - 1:30 PM  
Break

1:30 PM - 2:45 PM  
Adapting an Equitable Mental Health (EMH) Framework in Academic Medicine

Research indicates that students of color at U.S. colleges and universities are almost twice as likely not to seek care when they feel depressed or anxious compared to white students. Additionally, a recent online Harris Poll of 1,000 college students conducted by JED and the Steve Fund found that students of color are significantly less likely to describe their campus as inclusive and more likely to indicate that they often feel isolated on campus. These statistics indicate a need for a more tailored approach to protecting the mental health of students of color. The EMH Framework provides academic institutions with a set of ten actionable recommendations and key implementation strategies to help strengthen their activities and programs to address the mental health disparities facing students of color such as mentioned above. In this workshop, participants will provide feedback on the Equity in Mental Health Framework and assess its adaptability for medical education.

Learning Objectives:

1. Discuss the social, emotional, and mental health needs of medical students of color and the learning and practice environments that enable students from diverse backgrounds to thrive.
2. Identify the Equity in Mental Health Framework’s recommended stages for developing, implementing, and refining on-campus programs to support the mental health and emotional well-being of college students of color.
3. Evaluate the Framework for adaptability within the structure of medical education, considering the decentralization of training during the clinical years.

Speakers: Annelle Primm, Geoffrey Young

1:30 PM - 2:45 PM  
Career Advising in a Changing Medical Education Landscape

At last count, 24 new medical schools have achieved accreditation from the LCME over the last 10 years in the United States, each striving to direct prospective students into the residency pipeline. Between 2014-2019, the number of graduates from U.S. allopathic medical schools increased by over 1500, and graduates from osteopathic schools by close to 2000. Concurrently, the residency application process has grown in complexity with innovations such as simulated video interviews, standardized letters of recommendation, and the transition to a single accreditation system, among other procedural changes. The nuances of 4th year scheduling, number of programs to which to apply, early match, military match, couples match, and other specific residency considerations are just the tip of the iceberg of uncertainties in career advising for the novice advisor at a new medical school,
particularly when coupled with evolving medical curricula, such as delaying Step 1 requirements. It is critical that career advisors and student affairs offices gain effective strategies to advise students amidst the growing complexities of the residency application process.

Learning Objectives:
1. Discuss three emerging challenges in the residency application process for Career Advisors and students at new medical schools and those undergoing curricular reform.
2. Identify strategic Career Advising practices to employ when challenging situations arise during the residency application process.
3. Appreciate the formation of a community of career advisors within the GSA.

Speakers: Gino Farina, Karen Jubanyik, Listy Thomas

Facilitator: Kim Pham

1:30 PM - 2:45 PM

Financial Aid 101
This session will be presented by a seasoned financial aid officers. The purpose of this session is to provide insight to new FAO's as well as all other members of the GSA. Basic information about financial aid will be covered. There will also be more specific details shared about how federal regulations impact students, their choices, their paths. For example: enrollment, leaves of absence, withdrawals, and, academic progress. There are very specific guidelines that need to be followed. Come to this session to learn about how these things may impact your students.

Learning Objectives:
1. Upon completion of this session, new FAO's as well as all members of the GSA, will have a basic understanding of how financial aid works and how changes to a student's path can impact their financial aid.
2. Upon completion of this session, GSA Members will have a better understanding of the financial aid calendar and the potential impact on their respective areas.

Speakers: Wendy Clark, Cynthia Gonzalez, Casey Wiley

1:30 PM - 2:45 PM

Holistic Review and Situational Judgment Test Program Updates
The AAMC is committed to providing resources, guidance, and tools that support schools in admitting diverse cohorts of students with desired pre-professional attributes, life experiences, and the academic readiness to successfully contribute to the achievement of the school's mission and goals. This session will feature updates from two AAMC teams working to providing this support: Holistic Review and the Admissions and Selection Program. The Holistic Review team will describe their work with innovators to strengthen the knowledge and practice base in admissions, apply holistic review principles and practices to enhance diversity across the continuum, and disseminate effective practices to drive change. The Admissions and Selection Program team will describe the AAMC Situational Judgment Test (SJT), an assessment designed to provide information on applicants' pre-professional competencies. They will provide an overview of the project and share evidence demonstrating that SJT scores are reliable, valid, easy-to-use, and result in small group differences. They will also discuss next steps including an upcoming small-scale launch with two medical schools.
Learning Objectives:
1. Identify and describe enhanced tools and resources related to implementation of holistic review in admissions.
2. Explain the work emerging from new applications of holistic principles and practices in academic medicine.
3. Identify opportunities to contribute to the growing holistic practices knowledge base.
4. Describe the purpose and scope of the AAMC SJT research project.
5. Identify gaps in current pre-interview selection with respect to non-academic competencies.
6. Understand the potential value-add of the AAMC SJT to the admissions process.

Speakers: Amy Addams, Dana Dunleavy, Rebecca Fraser, Thomas Geiger, Michelle Shader

1:30 PM - 2:45 PM

Like, Swipe, Post: Leveraging Social Media to Expand Student Engagement in Advising and Wellness

Student Affairs professionals and leaders at all medical schools are required by LCME accreditation standards to create, implement, and manage meaningful career advising and wellness activities to support medical students. Schools have flexibility in determining the methods by which they support students’ specialty exploration and professional identity development and offer a myriad of approaches to address medical student well-being. In many educational settings, traditional methods rely on one-on-one mentoring, in-class presentations, and incorporation of online resources. These can and should be supplemented with newer communication modalities. Successful programs must keep current with this generation of learners’ evolving needs and reliance on interactivity and consider delivering programs and offering services in formats through which learners most readily access, share, and curate information. This panel discussion aims to provide a practical approach an primer to adopting social media as a platform for career advising and wellness support that can simultaneously engage students, provide access to information and role models, and promote academic productivity of faculty.

Learning Objectives:
1. Identify at least three common social media platforms routinely utilized by medical students.
2. Describe and compare three distinct models for engaging students via social media in career advising and wellness activities.
3. Demonstrate how to measure impact and reach of social media influence and its potential importance in supporting faculty professional development and expertise.
4. Engage in dialogue with colleagues to review common barriers encountered in career advising programs and identify novel strategies to overcome them.

Speakers: Amiethab Aiyer, Katherine Chretien, Duyen Vo

Facilitator: Hilit Mechaber
Physician Education Debt and the Cost to Attend Medical School

While the medical education community remains concerned with the cost of earning an MD degree and the resulting debt for medical students, both cost and debt have increased only slightly more than inflation over the last decade. This and other findings from the 2019 State of Debt report will be presented and discussed. The report summarizes the current state of education debt for medical graduates and the cost to attend medical school with a focus on 2019 education debt is analyzed by school type, gender, premedical and non-education debt, race and ethnicity, household income levels, and how grants/scholarships influence debt. The role of financial factors in the specialty choice decision to pursue or not pursue primary care will be analyzed. This session will include a discussion of the real-world impact of the current state of these issues on repayment, lifestyle and specialty choice.

Learning Objectives:
1. Upon completion, participants will be able to understand factors that influence the cost of medical school and the resulting education debt.
2. Upon completion of the session, participants will be able to better counsel students regarding the implications of cost, financing medical school and repayment strategies.

Speakers: Julie Fresne, Jay Youngclaus

Tackling Increasing Numbers of Residency Applications: Can We Work Together?

The culture of the Match has become unhealthy for all stakeholders. The Committee on Student Affairs and the AAMC are encouraging collaborative activities to create a healthier match culture. The purpose of this panel discussion is to hear perspectives from stakeholders, learn about cooperative approaches, understand the barriers to collaboration, and discuss ideas to overcome barriers to promote new and innovative ideas for partnership.

Learning Objectives:
1. Describe the trend of increasing numbers of applications to residency programs and perspectives from stakeholders.
2. Explore two collaborative approaches to address trend.
3. Understand and discuss barriers to stakeholder collaboration.
4. Discuss overcoming barriers and ideas for collaboration.

Speakers: Steven Angus, Angela Mihalic, Alex Park, Alexis Pelletier-Bui
Facilitator: Kathleen Kashima

The Black Box of Admissions: An Examination of Interview Invitation Processes

One of the least understood parts of the admissions process is the transition from completed application to “you are invited to interview.” As medical schools embrace Holistic Admissions practices, medical admissions professionals are still faced with thousands of applicants who qualify for an interview invitation. What are the best practices for narrowing down the pool while still assuring that important Holistic characteristics are retained? Individual missions, values and enrollment goals mean that each school must develop its own process, but examining process and outcome measures from other medical schools can inform those individual institutional decisions.
Learning Objectives:
Upon completion, participants will be able to:

1. Contrast different screening/invitation processes.
2. Formulate strategies which align with their school’s mission, values and enrollment goals.
3. Conceptualize best practices that can be re-engineered to their school’s process.

Speakers: Linda Berardi-Demo, Elizabeth McElhinney, Valerie Parkas, Julia Saltanovich

Facilitators: Cary Jewkes, Rubia Khalak

1:30 PM - 2:45 PM

The Role of Student Records and Diversity Affairs in Promotions Committee Decision making

Promotions committee decision-making takes place in a high-stakes environment where committee members are tasked with evenly applying institutional academic standards while ensuring recommendations are centered on addressing the individual student's unique needs (i.e., providing the appropriate time and opportunity to take advantage of available support, remediate failures and demonstrate improvement). Promotions committee decision-making is data-driven, and the roles of student records and student diversity affairs are often overlooked or underutilized sources of critical information and innovation. In this session, participants will explore the strengths and challenges of the relationship dynamics of the three roles in the context of the acute needs of students who are underrepresented in medicine through a panel discussion. Representatives from COSR, COSDA, and OSR will discuss the impact of different relationship dynamics and identify barriers and facilitators for greater collaboration between the roles. At the end of the session, participants will have a toolkit of practical strategies that they can implement at their institution.

Learning Objectives:

1. To assess the extent to which Student Records, Student Financial Aid, and Diversity Affairs are engaged in the Promotions committee decision making process at their own institution.
2. Conduct a systems thinking analysis using the Iceberg Model of a specific event regarding a student who is from underrepresented and or disadvantaged background.
3. Identify levers for change using the critical behaviors from the GSA PDI that would create a just and holistic experience with the Promotions committee that foster a thriving culture for equitable student success.

Speakers: Teresa Cook, Princess Currence, Talicia Jackson, Sandra Mingo, Ushasi Naha, Ann-Gel Palermo, Linda Strong James

2:45 PM - 3:00 PM

Break
A Practical Approach to Increasing Diversity in Medical School Admissions

Despite progress in recent years, medical schools struggle to matriculate students who reflect the increasing diversity of the patient populations they serve. This is, in part, because the admissions process still relies heavily on metrics, which has the unintended consequence of restricting diversity. The literature has identified a number of interventions to promote diversity in admissions; however, barriers to implementation have often been underestimated, which fuels disparate conversations between researchers and admissions officers. Drawing from both the medical education literature and personal experiences, this workshop will review practical strategies for increasing matriculant diversity at every step of the admissions process from recruitment to making offers of acceptance, identifying potential barriers and ways to overcome them.

Learning Objectives:
1. Summarize interventions in medical school admissions that have demonstrated empirical support in increasing matriculant diversity.
2. Brainstorm other potential methods to increase diversity at every stage of the admissions process from recruitment to interview to final acceptance decisions.
3. Formulate strategies to address potential obstacles when attempting to make changes to the admissions process.
4. Build on one’s skills for advocacy and allyship in becoming a champion for diversity and inclusion in medical education.

Speakers: Leila Amiri, Benjamin Chan, Liesel Copeland, Mark Henderson

Facilitator: Kelly Dore

AMCAS Update

This session will provide a brief update on the 2020 application cycle trends and Choose Your Medical School tool. The remainder of the session will be a collaborative discussion between AMCAS and the admissions community on important initiatives.

Learning Objectives:
Upon completion, participants will:
1. Understand data trends in the 2020 application cycle.
2. Learn about updates and best practices related to the AMCAS Choose Your Medical School tool.
3. Engage in a dialogue with colleagues regarding opportunities and challenges facing the admissions community

Speakers: Sharifa Dickenson, Patrick Fritz, PJ Kania, Rachel Shore

Careers in Medicine Program Update: Impact on Past, Present, and Future of Medical Student Advising

Careers in Medicine (CiM) is a comprehensive career planning program established in 1999 to support medical student career decision-making. Through this session, we will examine various methods of evaluating CiM’s past reach, value, and impact on career advising for the purposes of program evaluation including a 20-year retrospective of utilization data.
We will examine CiM’s program’s response to advisor and advisee needs through a review of the current program’s enhancements and resources. Lastly, we will share the future vision of the program’s scope (including tools, information on specialties and training programs, advice for the application process, etc.) and open discussion on how to best support the career decisions of trainees in an everchanging medical education landscape.

Learning Objectives:
1. Describe the core components of the CiM program and review the program’s reach and impact
2. Understand important CiM programmatic updates available in the current program
3. Evaluate and discuss future enhancements for the CiM program to best serve the needs of advisors and advisees

Speakers: Meredith Grogan Moore, Mary Halicki

3:00 PM - 4:15 PM

Grappling with Professionalism Standards in the MSPE: How Far Have We Come?

It has been three years since the MSPE Task Force released its Recommendations for Revising the Medical Student Performance Evaluation (MSPE). One of its major and most challenging recommendations was to include details on professionalism, both deficient and exemplary performance. This has been met with resistance and confusion - in the absence of shared criteria for what rises to the level of inclusion in the MSPE, schools have deliberated over how to implement the recommendation without unfairly affecting a student’s ability to match. In addition to providing a national-level update on implementation of this recommendation, UME and GME MSPE Task Force members and student affairs deans will share experiences with the ongoing challenges and promising implementation practices. The panel will engage participants in solution-focused dialogue about next steps, continued process improvement, and enhancing the MSPE’s value in facilitating learner handoffs from UME to GME.

Learning Objectives:
1. Identify the MSPE Task Force 2016 Recommendations related to documentation of professionalism.
2. Analyze differences in approaches taken by medical schools to present professionalism accurately in the MSPE.
3. Engage in dialogue with colleagues to address barriers encountered in attempting to adhere to MSPE recommendations with transparency while supporting and advocating for students.

Speakers: Amy Addams, Aurora Bennett, Ana Campo, Daniel Giang

Facilitators: Kathleen Kashima, Hilit Mechaber
LCME Accreditation and the ISA: Not Just an Eight Year Cycle

The Independent Student Analysis (ISA) provides extensive, impartial insights into what students perceive to be the strengths and weaknesses of their medical school and their educational experience when medical schools undergo their LCME (Liaison Committee on Medical Education) accreditation process every eight years. At this session, members from the Medical University of South Carolina (MUSC; Site Visit: January 2021) will discuss in detail the process of conducting an ISA and analyzing the results.

Additionally, the University of Utah School of Medicine (UUSOM; Site Visit: March 2020 has currently implemented a novel approach to the ISA survey that allows students to provide yearly feedback similar to the ISA report. This annual feedback offers a voice for all students while serving as an impetus for student-driven change. It is our aim that attendees will benefit from learning more about the ISA and student-driven feedback, regardless of their current status in the LCME cycle. Come here to learn more about the LCME and how the ISA can be used to improve your institution.

Learning Objectives:
1. Outline the crucial preparation phases of the Independent Student Analysis (organization of student leadership, survey design, survey promotion and distribution) and define ways these steps would be completed at your institution.
2. Participants will be guided through the process of data analysis, interpretation, incorporation into self study, and administration response to results of the ISA.
3. Participants will be given an overview of the how the UUSOM has used data collected from the ISA to enact lasting change to medical school curriculum.
4. Participants will be given the opportunity to respond to interactive aspects of the session as well as ask questions of the presenters.

Speakers: Michele Friesinger, Jaxon Olsen, Jackson Pearce, Aakash Shingala, Molli Walker, Derek Woodruff

Playing at Home or Away: Teaming up for the Visiting Student Rotation

In recent years, both the Office of Student Records and the Office of Student Affairs Offices have watched as the culture of student away rotations morphed. This process has become less about obtaining new experiences as a student, and more about obtaining the upper hand in the residency application process. Join us as we have a lively discussion about the ways in which the various student service areas work together to position our students for the best chance at a good residency, as well as our plans to advocate for students in the residency process at large.

Learning Objectives:
1. Understand how the visiting student process intersects with the residency application process.
2. Organize with colleagues in other departments at their home institutions in developing a holistic residency plan of action for students that includes the visiting student application process.
3. Formulate a plan for engaging the GME departments at their home institutions in the visiting student application process.

Speakers: Marrissa Cook, Teresa Cook, Marissa Miles, Sandra Mingo, Susan Schmidt
Professional Identity Formation: Understanding and Interrupting Microaggressions in Healthcare

Microaggressions are more than just race related. Columbia professor Dr. Derald Sue (1997) refers to microaggressions as “brief and commonplace daily everyday verbal, nonverbal, and environmental slights, snubs, or insults, whether intentional or unintentional, which communicate hostile, derogatory, or negative messages toward racial groups”. At Geisinger Commonwealth we have been successful in facilitating multiple sessions throughout the academic year that address microaggressions. This session will provide participants an opportunity to understand how people from various marginalized groups experience microaggressions, the impact of microaggressions, how to equip students with strategies to interrupt microaggressions both as the receiver and the bystander, and how to use the strategies in a variety of contexts in healthcare. Session participants will also be able to identify tools used to assist them with understanding how they navigate the landscape of healthcare. In addition, the facilitators will share the components of the interactive workshop, share information as to the train the trainer sessions held for Student Affairs staff to become facilitators and students' feedback as to what they learned.

Learning Objectives:
1. Upon completion, participants will be able to examine how people from various marginalized groups experience microaggressions and their impact.
2. Upon completion, participants will be able to identify a variety of ways to address microaggressions, both as the receiver and the bystander.
3. Upon completion, participants will be able to distinguish a range of practical strategies and tools to use in a variety of healthcare contexts.

Speakers: Amy Kline, Vicki T Sapp
Facilitator: Tanya Morgan

PSLF Through the Looking Glass: Guiding Students as a Financial Aid Administrator & PSLF Participant

With all the uncertainty and concern surrounding the Public Service Loan Forgiveness (PSLF) program, we will clarify the process, so that administrators can better assist their graduating students with taking advantage of PSLF. This presentation will give administrators an inside, borrower view of the PSLF process, including the timeline, forms, and view within the website. We hope to give administrators the knowledge and tools to help their students that they would otherwise not have access to without being an applicant for the program.

Learning Objectives:
1. Upon completion, participants will be able to describe the Public Service Loan Forgiveness application process in detail to their students.
2. Upon completion, participants will be able to assist their students through the process and feel confident that they understand what is required to gain loan forgiveness.
3. Upon completion, participants will be able to conduct their own Public Service Loan Forgiveness application presentation for interested students at their university.

Speaker: Sara Donnelly
3:00 PM - 4:15 PM  

You are Resilient, Great! But Are You Adaptable?

The concept of resilience refers to the ability to persevere through hardships to meet goals. The need for a resilient response may stem from pressure to perform, a fear of failure, and a lack of ability to handle challenging situations and disappointment. Resilient individuals exhibit the capability to bounce back from stressful and negative emotional experiences. Adaptability refers to having the ability to adjust to a new or changing conditions. Adaptability skills help an individual change attitudes, actions or approaches to suit the situation or environment. Adaptable individuals can accept change and respond to new circumstances smoothly and in a timely manner.

In the medical education community, much has been said about resilience. However, adaptability is an important and somewhat overlooked concept that works best in tandem with resilience for dealing with uncontrollable factors in our environment. This session will demonstrate the linkage between resilience and adaptability in medical school and clinical settings. We will consider ways to help students, staff, and faculty integrate these concepts in their daily lives.

Learning Objectives:
1. Describe defining behaviors that demonstrate both resilience and adaptability.
2. Explain why both resilience and adaptability are necessary for dealing effectively with challenging situations as well as changing environments.
3. Consider findings from a literature review on resilience and begin to explore best practices for nurturing resilience and adaptability in students, staff and faculty.

Speakers: Carol Elam, David Rudy, Christopher Simmons

4:15 PM - 4:45 PM  

Networking Break / Visit with Exhibitors

4:45 PM - 6:00 PM  

GSA Regional Meeting: Central Region

4:45 PM - 6:00 PM  

GSA Regional Meeting: Northeast Region

4:45 PM - 6:00 PM  

GSA Regional Meeting: Southern Region

4:45 PM - 6:00 PM  

GSA Regional Meeting: Western Region

4:45 PM - 6:00 PM  

OSR Meeting: Central Region (OSR Members Only)

4:45 PM - 6:00 PM  

OSR Meeting: Northeast Region (OSR Members Only)

4:45 PM - 6:00 PM  

OSR Meeting: Southern Region (OSR Members Only)

4:45 PM - 6:00 PM  

OSR Meeting: Western Region (OSR Members Only)

6:00 PM - 7:30 PM  

Welcome Poster Reception

Decision notes will be sent to poster submitters by January 10 and a full list of accepted posters will be posted here by January 15.
Saturday, March 28

7:15 AM - 9:00 AM  Recruitment Fair - Recruiter Table Setup

7:15 AM - 6:15 PM  Registration and Information

7:30 AM - 8:30 AM  GSA/OSR Networking Breakfast

7:30 AM - 8:30 AM  FIRST/MLOC Update for Financial Aid Professionals
   
   This session, led by AAMC staff, will provide updates on recent initiatives by the Office of Student Financial Services (OSFS) including financial literacy efforts and on-going improvements to the MedLoans® Organizer and Calculator (MLOC). Attendees will learn what resources are available to support the financial aid efforts at their school and how to improve their skills with MLOC to assist students with evaluating their loan repayment options. Plenty of time will be allotted for Q&A and hands-on use of MLOC for those so inclined. Attendees are encouraged to bring their laptops for discussion of best practices for hands-on MLOC strategies with students.

   Learning Objectives:
   1. After participating in this session, attendees should be able to summarize financial aid resources available from OSFS which can be implemented at their school.
   2. Attendees will also be able to evaluate MLOC outputs, create scenarios applicable to their school, and synthesize the repayment numbers into actionable agendas for individual students.

   Speakers: Kristen Earle, Julie Fresne, Julie Gilbert, Nicole Knight, Jay Youngclaus

7:30 AM - 8:30 AM  Residency Explorer: What's New for 2020
   
   This session will provide the medical student, student affairs, and student adviser communities with an update on Residency Explorer, a resource designed to help medical students and applicants to U.S. residency programs research programs in their specialty of interest and compare themselves to previous matched applicants at those programs. Residency Explorer was tested with residency applicants in 2019. In this session, we will review the evaluation of the working prototype as well as enhancements and changes for 2020.

   Learning Objectives:
   1. Describe the purposes, features, and upcoming deployment plans of Residency Explorer.
   2. Describe the outcomes of the 2019 evaluation of Residency Explorer and contribute ideas to future iterations of the tool.

   Speaker: Angelique Johnson
VSLO Program Update
This Visiting Student Learning Opportunities (VSLO) program update will provide an update of the U.S. and the Global networks, review application data, and share the near-term technical roadmap. Upon completion, participants will be able to know key program statistics that include the numbers of institutions, applicants, applications, average # of applications submitted, among other important data points.

Learning Objectives:
Upon completion, participants will:
1. Understand the technical roadmap for the software.
2. Learn how to find the transition to residency website with tools and data, as well as see the relationship between doing an elective and accepting residency offers.

Speaker: Ken Self
Facilitator: Janette Samaan

AACOM Council of Student Financial Aid Administrators Meeting
For members of the osteopathic financial aid community, the American Association of Colleges of Osteopathic Medicine (AACOM) will hold its annual in-person meeting of the Council of Student Financial Aid Administrators Meeting (CSFAA). The CSFAA is an official council of AACOM, which discusses and provides guidance on matters pertaining to student financial assistance for AACOM member institutions. For further information and to RSVP, please contact aacomgr@aacom.org.

Speakers: Julie Crockett, Joy De Guzman

Exhibit Hall Open - Visit the Exhibitors

Student/Parent Registration, Pre-Med High School and College Workshops and Recruitment Fair
Click here to learn more about the Pre-Med Student Workshops and Recruitment Fair.

Break

Plenary Session: Improving Care for All: Increasing Diversity Throughout the Continuum
To improve diversity in undergraduate medical education, in 2009, the Liaison Committee on Medical Education (LCME) adapted 2 accreditation standards focused on broadening diversity among medical school applicants and students. These standards mandate that schools develop programs and policies to attract and retain students from diverse backgrounds. Effective July 2019, residency programs accredited by the Accreditation Council for Graduate Medical Education (ACGME) must now also “engage in practices that focus on mission-driven, ongoing, systematic recruitment and retention of a diverse and inclusive workforce of residents, fellows (if present), faculty members, senior administrative staff members, and other relevant members of its academic community.” This session will
bring together the perspectives of UME and GME to discuss opportunities for collaborations with the goal of increasing diversity and decreasing attrition across the continuum of medical training – from pipeline programs, through UME and GME.

10:00 AM - 10:30 AM  
**Networking Break / Visit with Exhibitors**

10:30 AM - 11:45 AM  
**Developing an Identity as a Scholar: Cultivating Habits for Success**  
Do you struggle with creating an identity as a scholar? Does scholarly work always take second (or third, fourth, or fifth place) in your work life? Do you need better strategies to increase your scholarly productivity? During this workshop, participants will explore their own writing and research process; discuss strategies to protect their writing time and space; and consider ways to turn their everyday work into scholarship. Participants will leave with a better sense of what works for them as researchers and writers, and new ideas to strengthen their scholarly work habits.

Learning Objectives:
1. Describe their personal identity as a writer and researcher.
2. List barriers to scholarly productivity, and some strategies to overcome them.
3. Describe a research question relevant to their daily work.
4. Describe a way to turn their research question into at least two scholarly products.

**Speakers:** Diane Doberneck, Julie Phillips, Deana Wilbanks

10:30 AM - 11:45 AM  
**Developing Effective Narrative Evaluations for the MSPE**  
A GSA/GEA Constituent Collaborative Project: Writing Narrative Feedback for the MSPE convened a working group in early 2019 to consider the current state of narrative feedback used to compose the MSPE. The intent of the working group is to build upon the work done by the MSPE Task Force that developed the MSPE Guidelines furthering their work to enhance the transmission of useful information from UME to GME in the residency application process. This work will contribute to move the focus from primarily quantitative measures to more qualitative measure of student performance and to find ways to explicate student’s professional characteristics. This interactive workshop will provide foundational information on writing a high quality narrative evaluation, showcase the work product of the working group - a faculty development module to assist clerkship directors in supporting the work of the clinical faculty and residents, and provide resources for the clerkship directors or student affairs deans in assisting clerkship directors complete effective narrative evaluations for the MSPE that follow the AAMC MSPE Guidelines.

Learning Objectives:
1. Upon completion, participants will be able to describe the core components of an effective narrative evaluation.
2. Upon completion, participants will be able to compose a faculty development session for clinical faculty and residents using the module developed by the working group.
3. Upon completion, participants will be able to construct a summative narrative evaluation for the MSPE that is consistent with the MSPE Guidelines.

**Speaker:** Lee Jones  
**Facilitator:** Donna Elliott
10:30 AM - 11:45 AM

**Enriching Orientation: Developing New Approaches to Strengthening Orientation Processes and Outcomes**

In recent years, the University of Minnesota Medical School (UMMS) has provided incoming students with strong orientation and pre-matriculation programming. However, programming redundancies, inclusion issues, and a need for improved content focus led to the merging of programs for a unified orientation effort. This session explores both the challenges of this process and the procedural, collaborative, and content improvements gained by involved staff and students. Through small group activities, participants will be given time to reflect upon their own orientation programming efforts and consider how UMMS efforts can guide insights for improvements in their own processes and efforts. Evaluation data and participant feedback related to the ‘new’ UMMS orientation will also be shared.

**Learning Objectives:**

1. Demonstrate insight into the importance of building orientation programming around objective, content and process-driven approaches.
2. Apply the strategies of curriculum design and assessment to evaluate and improve their orientation programming efforts.
3. List the objectives defined for the UMMS Orientation program and related evaluation outcomes used to assess the success of its programming efforts.
4. Articulate the role peer mentors will play in their orientation programming efforts.

**Speakers:** James Cooper, Rachel Rudeen, William Slattery

**Facilitator:** Scott Davenport

10:30 AM - 11:45 AM

**Exploring Unanticipated Costs Along the Medical School Continuum**

The cost of medical school is usually well laid out for accepted students. Schools publish the "Cost of Attendance," which includes necessary costs such as tuition, fees, transportation, health insurance and living expenses. Students are often caught off-guard by the unanticipated costs of things like away electives, applying for and interviewing for residency and licensing exam fees. In addition, we have students who require additional academic time or costs associated with repeat course work, prep courses/materials and repeat test taking. This session will present data on these unanticipated costs and information that will help medical school professionals help students understand, anticipate and fund these expenses.

**Learning Objectives:**

Upon completion of the session, participants will:

1. Have a better understanding of the kinds of unanticipated costs our applicants and students face.
2. Understand how current students can, and are, currently funding these costs and what schools can do within the bounds of federal regulations to assist student in obtaining funds to finance them.
3. Hear current residents discuss their experience and provide perspective and advice to students currently in medical school.

**Speakers:** Wendy Clark, Abdul Kazi, Nicole Knight, Kelly Stazyk
10:30 AM - 11:45 AM  **Hot Topics in Career Advising for Students**

What are you currently grappling with when it comes to advising students about specialty and the match? How about challenges around picking the right residency program? Join your colleagues to discuss these and other career advising challenges in facilitated round table discussions. Bring your questions, expertise and perspective so that we can all learn from each other! Upon completion, participants will learn from rich discussions how to better advise students. This is a networking opportunity. Participants with specific issues/questions will leave with advice from their colleagues.

**Speakers:** Julie Fresne, Mary Halicki

10:30 AM - 11:45 AM  **Rapid Fire Presentations: Medical Student Wellness: Innovations and Effective Practices**

Rapid Fire-style presentations have become a popular means of succinctly sharing ideas. Each presenter will have seven-ten minutes to share their innovative idea or program related to Medical Student Wellness.

The presentations will highlight the major contribution of their work:

1. What is the problem?
2. Why it is important?
3. How it was addressed.
4. What are the major results and conclusion?

Rapid-Fire presentation topics:

- Taking Steps to Improve Medical Student Wellness
- Healing the Healers: Reducing Impostor Phenomenon in Medical Students Through Belonging
- Free and Confidential: Considerations for Creating In-house Counseling Support for Students
- Protecting & Promoting Student Health: How to Build a Comprehensive, Student-led Well-being Program
- Bridging Past Medical Student's Wellness Concerns to Today's Solutions

10:30 AM - 11:45 AM  **Transgender Health and Gender-affirming Care: Incorporating Lived Experiences into Medical Education**

The Institutes of Medicine (IOM), AAMC, GSA Committees (e.g., COSDA) and the OSR have called for medical curricula to cultivate comprehensive knowledge and skills for providing affirming, comprehensive care to LGBTQ patients. Rush Medical College of Rush University Medical Center (Rush), a large academic health center based in Chicago, has been recognized as a leader in LGBTQ healthcare for ten consecutive years. Through curriculum renewal, Rush applied a holistic view of the physician's role in the undergraduate training model, Physician Roles-based Curriculum. In 2015, Rush initially provided a transgender health training for medical providers at Rush. Since then, students, staff, and faculty have come together to develop educational materials for both the medical and nursing colleges. Implications for student, clinical, and curricular affairs are discussed. During facilitated small group breakout discussions, participants will share challenges and discuss best practices for developing a transgender medicine curriculum and apply lessons-learned at their institutions.
Learning Objectives:
1. Describe the elements of a holistic physicianship curriculum in relation to transgender health and gender affirming care.
2. Identify disparities in transgender healthcare, gaps in curriculum, and key stakeholders to organize for change.
3. Outline ways to create innovative and thoughtful learning modalities that address the needs of the transgender population.
4. Determine effective stage implementation approaches to incorporating transgender health and gender affirming care in medical education at one’s own institution.

Speakers: Princess Currence, Neeral Sheth, Hale Thompson

When It Takes More Than Four: Perspectives from Student Records and Student Financial Assistance
The number of students taking more than four years to complete medical school is rising. Students extend their medical education beyond four years to pursue dual degrees or research, because they are experiencing academic difficulty, to delay residency match, and for personal reasons including health. Student records and financial aid professionals have the responsibilities of managing state, federal and institutional compliance related to enrollment and student financial aid. They are often called upon by their colleagues to find ways to maintain students’ enrollment and financial aid; even when it appears the student is not eligible. In this session, case studies related to leaves of absences and delayed progression will be presented; and student records and financial aid professionals will share their strategies and innovations for managing the complexities of enrollment and financial aid for these student statuses using the GSA Professional Development Framework and their interpretation of institutional, state and federal policies.

Learning Objectives:
1. Upon completion, participants will be able to describe the GSA PDI Area of Expertise for student records management and student financial assistance, and the common area of expertise for all stakeholders, Student Academic Progression.
2. Upon completion, participants will be able to acquire useful innovations and policy interpretations that they can use to revise their institutional practices to support students during periods of non-enrollment.
3. Upon completion, participants will be able to assess their performance on one or more of the four non-technical critical behaviors related to the session topic.

Speakers: Teresa Cook, Casey Wiley

Facilitator: Damien Jackson
10:30 AM - 11:45 AM

**Working with Difficult Medical Students for Best Outcomes**

This interactive workshop is designed for faculty, administration, and staff who interact with medical students on a regular basis and have encountered difficult to work with students. This workshop will build upon the foundational approaches to providing student services and guidance including relationship dynamics and strategies for managing difficult student personalities. The focus will be on the management of students with a diagnosed (or undiagnosed) personality disorder that require additional levels of time and skill, in contrast to the majority of students seeking assistance from student affairs staff. We will also discuss strategies for differentiating between mental health diagnoses versus personality disorders and personality styles. The session will begin with an overview of the literature and information surrounding personality disorders among health care professionals and will focus on interactive case situations for strategies to manage individual student case situations. The session will conclude with strategies for application and management of difficult student interactions.

**Learning Objectives:**

1. Identify the characteristics of a personality disorder in a medical student encountering difficulty.
2. Identify key characteristics of personality disorder vs. personality styles vs. mental health diagnosis.
3. Practice strategies in managing the needs of a medical student with a personality disorder and the staff interacting with the student.
4. Network with fellow Student Affairs staff, faculty, and administration who face similar workplace challenges.

**Speakers:** Nathaly Desmarais, Nancy Havas, Robin Michaels, Melanis Rivera Rodríguez

**Facilitator:** Tatiana Felix

11:45 AM - 12:15 PM

**Networking Break / Visit with Exhibitors**

12:15 PM - 1:30 PM

**Student Affairs and Programs Update Luncheon**

12:15 PM - 1:30 PM

**American Dental Education Association (ADEA) Financial Aid Lunch**

For members of the dental financial aid community, the American Dental Education Association will convene a lunch meeting and networking opportunity.

1:30 PM - 1:45 PM

**Break**

1:45 PM - 3:00 PM

**Increasing American Indian and Alaska Native Presence in Medicine**

Data show that there is more work necessary to increase the presence of American Indians and Alaska Natives (AI-AN) in medicine. The numbers of applicants and matriculants who identify as AIAN has been relatively stagnant in the past 15 years. The visibility of AI-AN health in the medical school curricula and creating culture and climate that supports AI-AN students is also an issue. This may be viewed as a crisis, in light of the persistent health and health care disparities disproportionately experienced by AI-AN communities. This presentation will highlight current AAMC data, and findings from Reshaping the Journey: American Indians and Alaska Natives, a report prepared by AAMC and AAIP, and a recent Summit and explore how holistic student affairs may be integrated as a strategy. There will
be an interactive discussion highlighting effective practices and to explore a range of strategies on how to engage multiple stakeholders to increase American Indian and Alaska Native presence in medicine.

Learning Objectives:
2. Compare effective institutional strategies to increase American Indian and Alaska Native engagement in medicine.
3. Assess the current institutional resources and programs that focus on American Indian and Alaska Native communities.
4. Develop strategies for outreach, recruitment, admissions and student affairs to augment Native presence in medicine.

Speakers: Ann-Gel Palermo, Norma Poll-Hunter

1:45 PM - 3:00 PM

MatchTrack: Residency Interview Tracking Tool for Student Affairs Career Advisors
Currently, many medical school student affair advisors send emails or surveys at different points throughout the interview season to ensure students obtain adequate interviews: too few and the student risks not matching; too many and financial costs and absences from rotations increase. With our IT department, we created MatchTrack, which allows 4th year students and student affairs advisors the ability to track and make recommendations about interview counts during the residency application season, real-time. This small group session will walk attendees through our method to gather information real-time during interview season.

Attendees will also work together to:
1. Discuss approaches used when students have too few or too many interviews.
2. Discuss how this could be used for more transparency into the residency application/interview process.
3. Discuss how the app can help 'see' when specific programs are offering interviews to our students.
4. Monitor the stress the student may be under related to interview offers.
5. Work as a team to explain to students holding large numbers of interviews how that may be affecting fellow students’ ability to obtain an interview.

Learning Objectives:
1. Understand the importance of Match season interview counts and correlation to Match success.
2. Appreciate and understand the importance of tracking interview counts in real-time to monitor 4th year student's interview acceptances, declines and ability to quickly guide students to improve their chances for Matching.
3. Mentor 4th year students in various case scenarios during Match interview season of 4th year students with too few interviews, too many interviews based on Charting the Outcomes mean interview for probability of Matching >90%, and couples matching.

Speaker: Susan Kaib
1:45 PM - 3:00 PM  
**Mission-based Holistic Admissions Training Curriculum and Tool Development for Admissions Committees**

In order to admit medical students who reflect the mission and institutional goals at the University of Nevada, Reno School of Medicine, the Admissions Executive Committee, with the support of administrative faculty, were tasked with developing assessment tools and a multi-tiered training curriculum to better facilitate and train new committee members in how to administer a mission-focused holistic review of our medical school applicants. Join us for discussion about the outcomes of this undertaking on the diversity of our student body, for step-by-step direction on how to develop a mission-based assessment tool, and for opportunities to share the techniques, strategies and challenges of implementing and using holistic review.

**Learning Objectives:**

1. Describe a multi-tiered approach to educate, engage, and prepare admissions committees for holistic review in the evaluation of medical school applicants which has shown to increase knowledge and buy-in within the admissions process.
2. Bring home to their institution tools and techniques to facilitate training and develop processes that assist in reviewing applications and enrolling a class whose values and competencies align with institutional missions, visions, and goals.
3. Identify potential competencies to be used in the holistic review of an application.
4. Understand the long-term benefit of utilizing holistic review tools in data collection to inform traditionally qualitative application elements as success markers for pre-medical students.

**Speaker:** Zachary Walker

**Facilitator:** Tamara Martinez-Anderson

1:45 PM - 3:00 PM  
**Preparing for Careers in Academic Medicine: How Can Student Affairs Officers Best Support Students?**

With the increase in enrollment across medical schools in the United States in recent years, there is ample need to encourage the current generation of medical students to consider entering careers in academic medicine. To address ongoing challenges in the recruitment and retention of individuals who choose to pursue careers as medical school administrators, perhaps student affairs officers can help their medical students gain relevant exposure and experience? How can we best engage medical students in focused mentoring and/or experiential programs that will retain and enhance their interests in academic medicine? This brainstorming session is designed to answer that question and should be of direct interest to individuals representing the Group on Student Affairs, Careers in Medicine, and the Organization of Student Representatives.

**Learning Objectives:**

1. Delineate job skills, personality attributes, and/or professional competencies required to be an effective student affairs administrator.
2. Brainstorm ways students can get the necessary exposure and experience while in medical school to start to develop insight into their desired future academic medicine career role.
3. Describe programs in place at your institution to support the vocational interests of your students who are considering pursuing administrative positions in a medical school in the future.

**Speakers:** Carol Elam, Christina Grabowski

**Preparing Students for Step 1: Best Practices and Lessons Learned from Three Institutions**

The USMLE Step 1 has a significant impact on career trajectory and can be one of the most stressful milestones of medical school. This workshop will highlight best practices of three Step 1 preparation programs.

Various aspects of each program will be discussed, including:

1. A Cognitive Behavioral Therapy (CBT) skills and mindfulness workshop that targets anxiety about studying and sitting for the exam.
2. An academic elective and mind-body skills intervention for students deemed at-risk for not passing the exam by the institutional deadline; and
3. Faculty-facilitated, subject-specific, question-based, review sessions.

Lessons learned from each institution will be shared with session participants, including challenges with faculty and administration buy-in, funding obstacles, and student participation. Session participants will work in small groups to explore how these types of programs can be implemented at their institutions and problem solve potential barriers.

**Learning Objectives:**

Upon completion of the session, participants will be able to:

1. Describe highlighted components of the academic, mental health, and wellness activities provided by Ohio State University College of Medicine, Geisinger Commonwealth School of Medicine, and University of Texas Medical Branch School of Medicine.
2. Analyze what is working well with their current Step 1 prep support.
3. Describe any challenges they have faced/are facing with their current Step 1 prep support.
4. Identify any changes/improvements they would like to implement in their current Step 1 prep support.

**Speakers:** Justin Barterian, Amy Kline, Kelly-Ann Perry, Samuel Rowe, Stacy Shields

**Re-examining Exams: NBME’s Effort on Wellness (RENEW) Project**

The National Board of Medical Examiners (NBME) has convened a task force termed RENEW, or "Re-examining Exams: NBME’s Effort on Wellness," in collaboration with leaders in the field of wellness and burnout in order to examine the role of high-stakes assessments such as Step 1 of the United States Medical Licensing Examination (USMLE) in the student journey. Two qualitative and two quantitative studies were undertaken with the goal of generating ideas that might inform: (1) possible school-based interventions; (2) future house of medicine research and development activities; and (3) multifactorial system-wide approaches to addressing the challenge of stress and burnout in medical education and practice.
Learning Objectives:
1. At the conclusion of this session, participants will be able to summarize key findings from the multifaceted RENEW research collaborative, evaluate these findings in relation to their own expertise and experiences, and apply an understanding of RENEW findings to their work as educators and scholars at their institutions.

Speaker: Miguel Paniagua

1:45 PM - 3:00 PM

Students Affairs and Student Financial Assistance Collide: Let's Fit the Square Peg in a Round Hole
Legislative and regulatory guidelines for student financial assistance has been a rising topic of discussion among student affairs and student records professionals. In this session we will look at these federal guidelines through the lens of the medical school curriculum. In addition, we will try to obtain a deeper understanding of the potential effects on cost of attendance and disbursement dates and how this will impact financial aid recipients directly.

Furthermore, the Student Affairs and Student Records professional will be able to identify ways in which they can help create policies and procedures that may alleviate some of the nuances associated with these regulations. Creating synergy among the different offices in Undergraduate Medical Education, which may include the Curriculum Office, Office of the Registrar, Office of Admissions, and most importantly Office of Student Financial Assistance is an important task to remain in compliance as each office adds a layer of complexity which should be analyzed as we move forward with these guidelines.

Learning Objectives:
1. Understand the federal definitions for Standard Term, Non-Standard Term, and Non-Term Programs based on their curricular structure.
2. Demonstrate a good understanding of disbursement rules for each of these Program Types.
3. Identify potential compliance concerns for their program-type.
4. See how schools have transitioned from a Non-Term Program to a Term-Based Program.

Speaker: Carol Archaga

1:45 PM - 3:00 PM

The Role of the Medical School Record's Professional in the LCME Accreditation Process
The medical school records professional plays an important role in preparing the institution for an LCME review including providing information for the Data Collection Instrument (DCI) related to admission and enrollment and providing relevant policies and narrative responses required for the DCI related to student records management and security, matriculation and graduation and the visiting student process. In 2016, the AAMC Committee on Student Records formed a workgroup to develop guidelines for the records professional's role in this process. This was in response to issues identified by the constituency with consistency of information and data included in the institution's LCME response, lack of understanding of the standard, and difficulty engaging in the LCME preparation process at their institutions. In this session, the charge of the workgroup will be explained, the guidelines and effective practices introduced, and records professionals and workgroup members with recently completed site
visits will share their experiences and lessons learned during their institution’s preparation and site visit. This session will be informative for all engaged in the LCME process.

Learning Objectives:
1. Upon completion, participants will be able to describe the role of the records administrator in the LCME accreditation process using the GSA PDI Framework area of expertise for the records professional.
2. Upon completion, participants will be able to implement effective practices at their institutions to prepare for an impending or future site visit.
3. Upon completion, participants will be able to use the GSA PDI to enhance their professional development in common areas of expertise and areas of expertise related to the LCME accreditation process.

**Speaker:** Teresa Cook

**1:45 PM - 3:00 PM**

**WAKE Active Bystander to Promote Professionalism and Inclusion**

Professionalism and Inclusion both represent important foci for medical education and student affairs. Each are tremendously important but are typically quite difficult to teach using traditional pedagogy. Does our current training enable learners and teachers to create/maintain the climate and culture that promotes professionalism and inclusivity? How should we expect our students/faculty/staff to respond when there are instances of incivility? We expect our community to engage when there is incivility, however, decades of research (led by Darley and Latane) suggests that people won’t necessarily intervene. The reasons people don’t interrupt these incivilities is important to creating a program that addresses the problem. WAKE Active Bystander teaches our students/faculty/staff how to interrupt instances of incivility with a special focus on traditionally underrepresented populations. This initiative also promotes professionalism by building pragmatic skills that can be utilized with fellow learners, faculty, patients, or even in social situations. Importantly, these skills are able to be used regardless of power dynamics or hierarchy to build an inclusive culture.

Learning Objectives:
1. Upon completion, participants will understand what prevents people from interrupting instances of incivility in a academic or clinical environment.
2. Upon completion, participants will learn a strategy for interrupting instances of incivility, with a special focus on underrepresented populations, and building a culture of professionalism.
3. Upon completion, participants will have the opportunity to demonstrate understanding of how to deploy an Active Bystander strategy.
4. Upon completion, participants will learn how to deploy an Active Bystander program in their institution as a curricular/co-curricular/training opportunity.

**Speakers:** Lilicia Bailey, Marquita Hicks, Montez Lane Brown, Brenda Latham Sadler, Dave McIntosh

**3:00 PM - 3:30 PM**

**Networking Break / Visit with Exhibitors**
AAMC Student Surveys Update
This AAMC Services update will review the current AAMC Student Surveys and associated reports. In addition, new analyses of data from the Year Two Medical Student Questionnaire and the Graduation Questionnaire will be presented, focusing on how Student Survey data can be used for schools' continuous quality improvement activities. These new analyses will be focused on how the data may be used to examine progress in diversity and inclusion. Also included will be a discussion of how Student Survey data might be used in considering the Holistic Student Affairs model. Participants will be encouraged to contribute how their schools use Student Survey data for CQI, as well as to suggest changes to the Student Survey and reports that would help schools in their assessment activities.

Learning Objectives:
1. Upon completion, participants will understand what the AAMC Student Surveys are, what reports schools receive from those surveys, and what changes are underway in the 2020 surveys.
2. Upon completion, participants will understand how data from the student surveys may be used in continuous quality improvement activities.
3. Upon completion, participants will be able to identify a range of items from the Student Surveys that may be used to address goals related to diversity and inclusion.

Speakers: Tomas Massari, David Matthew

Applying Smarter, Not Harder--from the CORD Advising Students Committee in Emergency Medicine
The Match has become increasingly stressful for students and advisors, evidenced by increasing numbers of applications submitted per applicant in many specialties. CORD ASC-EM has created consensus and evidence-based recommendations to help EM-bound students apply smarter, not harder. We will showcase many of the resources that students and advisors can utilize and demonstrate how to apply these in varied scenarios.

Learning Objectives:
1. Upon completion, participants will understand the trend of over-application in the residency match.
2. Upon completion, participants will understand the goal of creating CORD ASC-EM as a way to facilitate further conversation about the application process and combat concerning trends with the creation of data- and consensus-driven resources.
3. Upon completion, participants will be familiar with available resources created by CORD ASC-EM to help students and advisors successfully navigate the residency match process.

Speaker: Shannon Moffett

Collaboration at Its Finest: A Degree Audit for Tracking Evolving Medical School Degree Requirements
The Registrar and the Manager of Business Systems from Indiana University School of Medicine will share their process for working across multiple stakeholder groups to develop a degree audit dashboard for use in tracking student progress toward our ever-evolving MD degree requirements. After a demonstration and discussion about the dashboard they have
developed, the session leaders will guide the attendees in creating a plan for their own degree audit by using tools that will assist them in articulating degree requirements and identifying important stakeholder groups and available resources at their respective institutions. The session leaders will also help attendees recognize gaps and, as a group, generate ideas for addressing those. The session leaders will also lead a discussion in how to develop the process for monitoring progress toward degree and the challenges medical schools face as they undergo curriculum revisions and degree requirement changes. The discussion will highlight degree progress in its relation to LCME accreditation standards and the impact that curriculum changes can have on students.

Learning Objectives:
1. Identify the specific details of medical school degree requirements to be used in the development of a degree audit.
2. Create a timeline and plan for the development of a degree audit.
3. Develop a process for monitoring student progress toward degree.

Speakers: Jenny Weddle, Amanda Ybarra

3:30 PM - 4:45 PM

Enrollment Management in Medical Schools: Using Data to Drive Effective Decision-Making

The concept of “Enrollment Management” has long been associated with recruitment and retention efforts for undergraduate universities. With the adoption of holistic review by medical schools, medical educators are increasingly turning to enrollment management principles to help drive medical school enrollment strategies. Data-informed decision-making in the recruitment, selection, retention, and graduation of students shows promise for enabling schools to create a physician workforce poised to meet the diverse health care needs of our communities. This session will highlight how one medical school set up a multidisciplinary task force to implement a new enrollment management program and how another school uses predictive analysis to leverage scholarship awarding to meet admissions goals.

Learning Objectives:
1. Recognize various approaches to using enrollment management principles in medical student enrollment and retention.
2. Identify data/studies needed to better inform mission-driven enrollment and support strategies.
3. Create action items for implementing enrollment management practices.

Speakers: Steven Gay, Christina Grabowski

3:30 PM - 4:45 PM

Financial Aid Curriculum Helps Future Doctors from Drowning in Debt

Geisinger Commonwealth School of Medicine's (GCSOM) Financial Aid Department and their Associate Dean designed a four-year curriculum to assist medical students in financial literacy. GCSOM utilizes resources provided by the Association of American Medical Colleges, National Health Service Corps, and expert speakers to weave financial aid and debt management counseling into the "Financial Aid Across the Doctor of Medicine Curriculum." Our mission is to address the Liaison Committee on Medical Education's Standard 12.1, which focuses on financial aid/debt management counseling.
During this session, we will share how we developed the financial literacy program including: 1) the construction of a curriculum map and syllabus; 2) engagement for curriculum approval and oversight; and 3) utilization of the learning management system, Canvas, to effectively and efficiently deliver the "Financial Aid Across the Doctor of Medicine Curriculum" to students. Through this longitudinal four-year program, students are encouraged to view their loan portfolios, develop debt management strategies, and utilize financial literacy resources such as counseling, newsletters, self-directed webinars, videos and podcasts.

Learning Objectives:
1. Upon completion, participants will be able to understand the process used to develop a financial aid program that spans the medical school curriculum including the development of a syllabus with learning objectives and assessments.
2. Upon completion, participants will be able to utilize a curriculum map to longitudinally construct a financial aid literacy and debt management program across the four-year medical school curriculum.
3. Upon completion, participants will be able to understand the process utilized and leadership needed to engage appropriate faculty committees needed to approve an addition to the curriculum.

Speakers: Sue McNamara, Michelle Schmude, Roxanne Seymour

3:30 PM - 4:45 PM

Identifying Support Systems and Resources for Undocumented and DACA Status Students
This session will explore the unique challenges facing DACA recipients and undocumented medical school aspirants in their pursuit of a professional degree and beyond. Panelists will address the life cycle of these students from the perspective of admissions, financial aid, student affairs and career advising, identifying support systems and effective institutional practices and strategies. Topics to be discussed include a review of the current legal policy, admissions practices, funding approaches, career advising and graduate medical education strategies. Session outcomes seek a better understanding of the DACA student experience and needed support systems from application through the transition to residency.

Learning Objectives:
1. At the conclusion of this session, attendees will garner a better understanding of the DACA student experience and opportunities to provide support.
2. At the conclusion of this session, attendees will come away with institutional effective practices on admissions policies, student funding, student affairs support and career advising.

Speakers: Diana Andino, Sunshine Nakae, Valerie Parkas

3:30 PM - 4:45 PM

Integrating Spirituality as a Dimension of Learner Well-being and Clinical Care
In a January 2018 article in the Journal of Religion and Health, Callie Ray and Tasha Wyatt explored the ways that religion and spirituality work as a cultural asset in the lives of medical students and how students anticipate using this asset as physicians. They found that “regardless of faith, students repurposed their religion/spirituality to help them cope with the stress of medical school, make clinical decisions, resolve inexplicable events, and practice patient-centered care.” Ray and Wyatt advised medical educators to leverage this asset to drive future clinicians toward patient-centered care.
As the number of physicians in crisis rises and clinician well-being continues to be of concern, medical schools are beginning to take an inward look at physician spirituality as a path to clinician well-being. This session invites participants to consider the role of spirituality in the education of future physicians and offers promising practices for integrating spirituality in diverse contexts both as a dimension of learner well-being and as a component of clinical care.

Learning Objectives:
1. Reflect on spirituality as a dimension of wellness and a tool for building resilience.
2. Discuss the relationship between religion, ethics, and the practice of medicine.
3. Consider the practice of medicine as a vocational calling.

Speakers: Elizabeth J. Berger, Kirtley Yearwood

Facilitator: NaShieka Knight

3:30 PM - 4:45 PM

Make the InVISIBLE Visible: LGBTQ Communities Lessons Learned
We will conduct a condensed "Safe Zone" awareness session to share the material presented in the PIFCC sessions and students’ feedback. We believe that the PIFCC sessions are a proactive approach to assist with the formation of medical students’ identity and tap into their own humanity to formulate their identities as future physicians. Moreover, their participation in the PIFCC sessions has led them to examine the concepts learned in and outside of the classroom, engage in productive conversations with their peers, and better understand being inclusive in their attitudes, behaviors and actions at Geisinger Commonwealth School of Medicine and beyond.

Learning Objectives:
1. Participants will learn how students identify the difference between the L, G, B, T, and the Q of LGBTQ, acquire an understanding of the importance of language in relation to creating affirming environments for LGBTQ individuals.
2. Participants will learn how students describe the difference between biological sex, gender identity, gender expression, and attraction.
3. Participants will learn how students contribute in real world written scenarios that physicians may encounter and be able to engage in role play to describe answers to common questions related to LGBTQ identity and individuals.

Speakers: Amy Kline, Vicki T Sapp

Facilitator: Tanya Morgan

3:30 PM - 4:45 PM

Mentorship and Career Choice: Frameworks, Barriers, and Strategies
Mentorship is a powerful tool to facilitate medical students’ socialization into the medical profession, develop their career paths and uncover the hidden curriculum such as social norms, professionalism, ethics, values and the nuances of clinical care medicine which cannot be learned in a classroom or textbook (Rose et al. 2005; Murphy, Steele & Gross, 2007). Despite individual medical schools’ efforts to provide mentorship and career development activities, students still feel that there isn't enough support relative to mentorship
and career choice, according to a 2018 Organization on Student Representatives national student survey. This interactive workshop aims to explore different mentorship models, identify strategies to help students establish meaningful mentoring relationships. At the completion of this interactive case-based session, participants (faculty, staff and students) will be able to apply concrete strategies aimed to ameliorate common barriers that hinder students from finding effective mentorship experiences and fully exploring possible career choices, particularly students who are disadvantaged or underrepresented in medicine.

Learning Objectives:

1. Identify the barriers for students to establish meaningful mentorship relationships and identify mentorship relationships to make effective mentor-mentee pairings.
2. Describe the types of challenges institutions and students face in establishing meaningful mentorship relationships.
3. Identify the essential characteristics of effective mentorship relationships and programs. (lecture, large group, & Think-pair-share)
4. Apply best practices from effective mentorship models at their home institution.

Speakers: Christine Corral, Princess Currence, Suparna Dutta, Ushasi Naha

4:45 PM - 5:00 PM  Break
5:00 PM - 6:15 PM  Birds of a Feather: OSR
5:00 PM - 6:15 PM  Birds of a Feather: Admissions
5:00 PM - 6:15 PM  Birds of a Feather: Student Affairs
5:00 PM - 6:15 PM  Birds of a Feather: Student Diversity Affairs
5:00 PM - 6:15 PM  Birds of a Feather: Student Records
5:00 PM - 6:15 PM  Birds of a Feather/Business Meeting: Student Financial Assistance

Join your financial aid colleagues for a business meeting and networking opportunity. Please note this is a business meeting with a formal agenda and presentations.
Sunday, March 29

7:00 AM - 11:15 AM        Exhibit Hall Open - Visit the Exhibitors
7:00 AM - 8:00 AM        Networking Breakfast
7:00 AM - 8:00 AM        OSR Regional Business Meeting and Breakfast: Central Region (OSR Members Only)
7:00 AM - 8:00 AM        OSR Regional Business Meeting and Breakfast: Northeast Region (OSR Members Only)
7:00 AM - 8:00 AM        OSR Regional Business Meeting and Breakfast: Southern Region (OSR Members Only)
7:00 AM - 8:00 AM        OSR Regional Business Meeting and Breakfast: Western Region (OSR Members Only)
7:00 AM - 12:00 PM       Registration and Information
8:00 AM - 8:15 AM        Break
8:15 AM - 9:30 AM        Plenary Session: Canaries in The Coal Mine: It's Time We did Something about the Mines

In the old days, coal miners took canaries into the mines. If the birds got sick or died, they knew there was a problem. But they didn’t teach the canaries to meditate or do yoga, they recognized that the problem was with the mines. Student affairs and diversity officers and staff have done heroic work supporting the canaries, but they need to move beyond these critical efforts to advocate strongly for what should be viewed as a moral imperative-doing something about the educational mines. In addition, the canaries-students themselves-must become strong advocates for change. At Saint Louis University School from 2008 to 2017, an inexpensive and simple well-being initiative, focused largely on environmental/curricular change, led to greater than 80% drops in depression and anxiety rates of pre-clerkship students. The model could be implemented at any medical school, but political barriers stand in the way. This session will begin with a brief overview of the model for change, interventions, and mental health and academic outcomes from the SLU initiative. This will be followed by an overview of ongoing threats, both environmental and individual, that threaten medical student well-being. The presentation will include time for discussion of barriers to change and how they can be overcome.

Learning Objectives:
1. Describe the model and specific curricular changes made at Saint Louis University that led to dramatic reductions in rates of depression and anxiety for pre-clerkship medical students.
2. Describe the environmental and individual threats to the well-being of medical students.
3. Describe the political barriers to curricular change at their own institutions, evidence-based arguments for change, and how these changes can be advocated for.
4. Develop and action plan for advocacy for curricular change.

Speaker: Stuart Slavin
Break

Addressing Issues of Race and Inequity in Medical Education
In December 2014, medical students on campuses across the United States held a “die-in” in response to the police-related deaths of black men and people of color in Ferguson, New York City, and other cities across the country. This event, including the formation of the national WhiteCoats4BlackLives movement, catalyzed medical schools to explicitly address issues of race and equity in medical education and healthcare. In this panel discussion, four schools will reflect on their experiences, lessons learned, and how this has changed medical education, student affairs, and diversity affairs.

Learning Objectives:
1. Explain the importance of engaging with students in this work.
2. Describe two strategies for how to successfully manage student-campus actions.
3. Identify one best practice that can be implemented or reinforces a solution they have in place.
4. Describe three common challenges that all institutions face in addressing these issues.

Speakers: Gary Butts, Charlene Green, Lee Jones, Shawna Nesbitt, DoQuyen Tran-Taylor

Diversity Pipeline Programs: Showcasing our successes and how can we do better?
Diversity Pipeline Programs have become a mainstay at most medical schools in the United States. These programs play an integral role in providing the much-needed diversification of the physician workforce. However, no two pipeline programs are alike and although we have seen improvement nationwide, retaining URiM students at all points of entry into a pipeline program including the medical school application process remain challenging. Even retaining accepted applicants to becoming matriculants continues to be an area of difficulty for medical schools nationwide due to increased competition for a narrow pool of qualified URiM candidates. Identifying pipeline programs with initiation during middle school, high school, or entry at the undergraduate level is imperative to allow interested institutions to learn from the journey traveled by successful, effective programs. Our presentation will highlight productive diversity pipeline programs from various entry points and provide ways to assess and evaluate the pipeline program to generate feedback for changes to ensure success. During our panel discussion, each participating medical school will discuss the process of their program.

Speakers: Rubia Khalak, Dori Marshall, David Milling, Flavia Nobay, Julia Saltanovich, Elizabeth Wilson-Anstey

Innovative Technologies to Reach Your Students
This session will look at a variety of communication strategies and technologies to help you choose the right one for a particular need. Learn how to evaluate content and posting cadence with regard to different social media platforms utilized by NYU School of Medicine and Sallie Mae. We will also highlight how Boston University Medical Campus has used “Rhett,” an artificial intelligent chatbot provided by Ocelot, to answer student questions on a variety of financial aid related topics, such as financial literacy and debt management, and how they leveraged the chatbot data to develop more targeted debt management communications.
Learning Objectives:
1. Discuss, through real student data, the most popular debt management/financial literacy questions asked by students.
2. Share tips and tricks for providing clear and concise financial aid information through text and visuals.
3. Present the benefits of A.I. technology to assist students.
4. Discuss Chatbot 2.0. Rhett’s potential to further assist students through enhancements and use in additional departments.

Speakers: Nicholas Burrell, Johnathan Chancellor, Temeka Easter, Meaghan Smith

9:45 AM - 10:45 AM
NRMP and ERAS Updates

Speakers: Donna Lamb, April Martin

9:45 AM - 10:45 AM
The Identity & Inclusion Initiative: Promoting an Inclusive Environment and Professional Development

When developing diversity and inclusion efforts, medical school professionals should be attuned to the difference between diversity (numerical measurements of workforce and student body) and inclusion (complex interactions and learning opportunities). At the University of Chicago Pritzker School of Medicine, students, staff, and faculty deans have been working together since 2016 on a project designed to reap the full benefits of structural diversity through the promotion of an inclusive environment. This Identity and Inclusion (i2i) Committee has developed an interdisciplinary suite of experiences to promote key facets of inclusion such as civil discourse, comfort with complexity and ambiguity, and managing differences of opinion, giving students the skills to interact as professionals with those who may have different views or backgrounds. At this session, Pritzker deans and students will give an overview of the i2i Committee’s work; present outcome data from i2i events; provide attendees with takeaways they can apply to similar initiatives at their own institutions; and guide participants in a miniature civil discourse event of their own during guided breakout activity.

Learning Objectives:
1. Understand the significance of differences between diversity and inclusion and the importance of fostering inclusion.
2. Learn how one school leveraged diversity and inclusion to promote broader professional development in civil discourse, complexity and ambiguity, conflict management, and a more inclusive learning and care environment.
3. Model and practice activities that promote the topics stated above, with a particular focus on civil discourse.

Speakers: Tyrone Johnson, Wei Wei Lee, Walter Parrish, III, Rebecca Silverman, Shanetha Thomas, Monica Vela, Zaina Zayyad

Facilitator: Jim Woodruff
The Potential of Video Interviews in UME Admissions: Challenges and Lessons Learned

The AAMC Standardized Video Interview (SVI) continues in pilot evaluation in Emergency Medicine. Several medical schools are conducting their own trials and pilots of on-line video interview methods for undergraduate medical education as well. Medical schools in Utah, New Mexico, Illinois, and Texas discuss their experience, faculty reaction, admissions data, and lessons learned utilizing video interviews in their application process. These schools are using a video interview format at various phases of the selection process, with varying weights in evaluating applicants. Potential benefits may include: reduced cost to applicants or schools; applicant familiarity with a video interview to prepare them for possible future SVI; possible multiple reviewers of interview submission; increased participation of rural and community physicians, utilization of remote interview capability.

Learning Objectives:

1. Evaluate potential risks and benefits of incorporating video interviews as a piece of a Holistic Review for UME admission.
2. Evaluate four distinct process utilizations for video interviews in UME.
3. Evaluate four distinct technical approaches, as well as the associated costs and budget considerations for implementation.
4. Assess the effectiveness and fidelity of a video interview vs. a traditional in-person interview.
5. Understand the applicant experience in the various process utilizations and technical platforms. Schools have surveyed participants regarding their level of comfort with the online video interview and the results are clearly positive.

Speaker: Marlene Ballejos, Benjamin Chan, Joel Daboub, Colin Van Orman

Facilitator: Stephen Smith

Using Validity Data for MCAT Scores and UGPAs to Refine Your School’s Admissions Practices

New predictive validity data for the MCAT exam demonstrate the MCAT scores do a good job of predicting how well students perform in the first two years of medical school, on their Step 1 exams, and their progression into the third year of medical school. With validity data in hand, panelists will describe how they use MCAT scores, undergraduate GPAs, and data about applicants' experiences and attributes, to inform admissions policies and practices at their medical schools. Admissions and student affairs officers from four medical schools will describe how predictive validity data inform their use of MCAT scores and undergraduate GPAs, how they use application and interview data to identify applicants with modest metrics who are likely to succeed, and how the application data inform the academic and other support services some students may need in medical school.

Learning Objectives:

1. Describe how local and national validity data for MCAT scores and undergraduate GPAs can be used to shape medical schools’ admissions policies.
2. Identify application and interview data that can be used to identify applicants with modest MCAT scores and undergraduate GPAs who are likely to succeed.
3. Describe how MCAT scores and undergraduate GPAs for applicants can be used to determine which students may need academic support in medical school.

**Speakers:** Kristen Goodell, Christina Grabowski, Lina Mehta, Sunshine Nakae

**Facilitator:** Quinn Capers

**10:45 AM - 11:00 AM**

**Break**

**11:00 AM - 12:00 PM**

**Advising Military Medical Students from Matriculation Through Graduation**

Advising medical students with military health professions scholarships presents a unique set of challenges due to the added scholarship requirements and military match participation. This interactive, case-based workshop will address common issues faced by military students and their academic advisors across the continuum from matriculation to graduation. This session will be led by facilitators with extensive experience leading military undergraduate and graduate programs and advising military medical students. Participants will have the opportunity to apply prior experiences to common cases, then address personal challenges, share best practices and fill in knowledge gaps through peer interactions and facilitator-led discussions. Resource materials, including a military match advising timeline, will be shared.

**Learning Objectives:**

1. Identify the specific scholarship and military match participation requirements of military health profession scholarship students.
2. Describe strategies for supporting a student to meet both military scholarship training requirements and school academic requirements.
3. Utilize enhanced understanding of the military match to advise students.

**Speakers:** Chris Bunt, Ashley Maranich, Pamela Williams

**Facilitator:** Aaron Saguil

**11:00 AM - 12:00 PM**

**Busting Unconscious Bias: Who, What, Where and When - Introduction of a Pilot Documentation System**

The purpose of this session is to review various forms of unconscious bias that affect medical school admissions and introduce a novel technique for documenting instances of bias that can be used to encourage dialogue, challenge perceptions, improve procedures, and inform future training. This session will begin with an engaging review of unconscious bias with a contextual lens toward equity and holistic review. We will focus on the major biases that affect the admissions process and simulate actual scenarios with case-based examples. The session will include a demonstration of this documentation system, highlighting feasibility and ease-of-use, and will include suggestions for implementation for interested parties including development of robust unconscious bias training. Finally, we hope to discuss pitfalls and limitations we have encountered and highlight future directions and areas for improvement.

**Learning Objectives:**

1. List, define and classify the major implicit biases affecting medical school admissions processes. Participants should be able to express the ways these biases can affect evaluation of candidates, limiting holistic review.
2. Establish, develop and implement documentation systems for unconscious bias and incorporate them into robust unconscious bias training.

3. Reiterate pitfalls and limitations of this novel documentation system and discuss future directions for improvement.

**Speaker:** Valerie Parkas

**Facilitator:** Jessica Maysonet

11:00 AM - 12:00 PM  
**Exploring the Impact of Medical Education Costs on the Pipeline**

Diversity across race, ethnicity, and socio-economic background is an area of continued focus for academic medicine. While there is a federal attention on the cost of higher education and growing educational debt, it’s still unclear how this impacts increasing diversity, particularly amongst underrepresented students. This session will explore:

- Recent trends in institutional aid and the national discussion.
- What do we know about the impact of medical school financing on students and physicians? A look at AAMC data from premed to practice.
- How do expected costs of medical education impact the pipeline and potential applicants?
- Can we advise students early on about financial aid opportunities and the good investment that is medical education?

11:00 AM - 12:00 PM  
**It's About Community: Supporting First Generation Medical Students**

According to the Center for First Generation Student Success, "...The term first-generation implies the possibility that a student may lack the critical cultural capital necessary for college success because their parents did not attend college." While there is not much data on first generation college students in medical school, there is growing national interest in identifying and supporting these students. The First Generation Committee at the Indiana University School of Medicine (IUSM) is a collaboration between medical students and the Student Affairs Mentoring and Advising Program. The goals of the committee are to support first-generation college students now attending medical school by creating a network of first-generation students, faculty, and staff at IU School of Medicine to celebrate individual success stories and enhance their sense of belonging. This session will start with an overview of the IU School of Medicine's First Generation programming, including the detailed process used to create the program, and then assist participants in applying these principles to create similar programs at their own institutions.

**Learning Objectives:**

1. Participants will be able to describe “first-generation college students” and understand the overall demographics.
2. Participants will be able to develop a deeper understanding of the importance of creating support strategies for first-generation student success in the medical education field.
3. Participants will be able to identify methods that current medical schools utilize to support first-generation students and determine goals and initial plans to develop their own program.

**Speakers:** Lauren Henninger, Justin Rice, Rebekah Roll, Kamilah Walters, Emily Walvoord  
**Facilitator:** Niki Messmore
Passing the Litmus Test for Race-conscious Admissions Practices

As medical schools play their part in diversifying the physician workforce through increasing the diversity of incoming students, we face legal and procedural challenges regarding how to reach our institution's mission-aligned diversity goals. This interactive session will help to clarify your own institutional goals when it comes to defining diversity and identify race-conscious and race neutral approaches to assist in reaching those goals. The Paul L Foster School of Medicine at Texas Tech University Health Sciences Center El Paso will be used to illustrate admissions processes that have helped us to inch closer to our diversity goals while maintaining compliance in a ever changing landscape.

Learning Objectives:
1. Participants will be able to identify applicable laws and guidelines impacting their medical school admissions processes.
2. Participants will be able to deconstruct institutional mission statements, admissions philosophies and diversity statements in order to guide race-conscious and race-neutral admissions practices.
3. Participants will be able to critically evaluate a variety of race-conscious admissions approaches to determine best fit for their program.

Speaker: Cynthia Perry

Student Records System Update

The AAMC Enrollment Services staff will be providing an update on and a demo of the Student Records System (SRS).

Learning Objectives:
1. Upon completion, participants will be able to understand how to use the Student Records System (SRS).
2. Upon completion, participants will be able to learn about upcoming changes to the Student Records System (SRS).
3. Upon completion, participants will be able to have any SRS-related questions answered by SRS staff.

Speakers: Tyler Litsch, Lindsay Roskovensky

Use of a Structured Early Intervention to Improve Student Success

Indiana University School of Medicine has a competency-based curriculum with defined milestones that students must achieve to graduate. Early identification of students with challenges in these competencies enables educators to quickly intervene to help ensure these students achieve those competency specific milestones. Area of Concern (AOC) was developed to allow faculty to recognize and identify “low level” concerns in a course/clerkship/elective and to facilitate the opportunity for additional coaching by the Lead Advisor before these behaviors lead to a significant impact on grades.

Learning Objectives:
1. Identify the benefits of an early intervention system as they pertain to a medical school's core competencies.
2. Distinguish possible interventions for each competency.
3. Devise a plan to coach students to success using provided interventions and available resources.

**Speakers:** Liam Howley, Kelly Matthews, Rakesh Mehta

**Facilitator:** Abigail Klemsz

**11:00 AM - 12:00 PM**

**What Inspires “Aha Moments” in Students’ Development and How Can We Craft Those Opportunities?**

This panel session answers, what factors or elements trigger inflection points or Aha moments in learners, inciting strong reactions that reveal something new about themselves or the world and/or propelling them to grow and develop in one direction over another?

While educators spend much time designing curricula, programming, policies, and events and activities to achieve a particular goal, do we know what to do and how to guarantee the intended outcomes are realized? Or are we taking best guesses, the wait to see how our efforts resonate?

This panel discussion highlights curricular innovations, targeted programming, and trainee experiences during undergraduate medical education that speak to learners’ personal and career/professional development.

**Learning Objectives:**
1. Describe generally how medical school experiences can shape students’ growth and development. [learn the theory]
2. Describe how specific medical school experiences formally and informally impact students’ career and professional identity development, creating aha moments or career infection points. [real life application]
3. Initiate on their campus a thoughtful and purposeful process to plan and implement experiences that promote students’ career and professional identity development. [intentional planning]

**Speakers:** Nicole Borges, Gemma Costa, Sandra S. LaBlance, Will Ross

**Facilitator:** Kelly Stazyk

**11:00 AM - 12:00 PM**

**Whose Data is it Anyway?**

When it's not clear who owns the data, you have to improvise. The results are rarely funny. Join us as we work through a comedy of potential errors that can result from the lack of a data management plan. Props optional.

Benchmark 3 of the PDI for Student Records Management details several behaviors reliant on a comprehensive data governance and management plan. This session will provide a foundation for data management before addressing the benchmark 3 behaviors in detail.

**Learning Objectives:**
1. Define the components of data in a sample Student Information Systems (SIS).
2. Develop an office data management plan.
3. Refine an office data management plan.
4. Identify which benchmark behaviors from the PDI are reliant on effective data management.

Speakers: Marrissa Cook, Teresa Cook, Kris Slaney
2019 Asylum Evaluation Training: How Administration Can Support Student Initiatives

Grace Wood
Medical Student
University of Illinois College of Medicine

Sofia Sami
Medical Student
University of Illinois College of Medicine

Margaret Schmit
Medical Student
University of Illinois College of Medicine

Vikrant Garg, MPH
Medical Student
University of Illinois College of Medicine

This poster describes the role of healthcare professionals in providing forensic evaluations for people seeking asylum. A full-day training was organized by UIC College of Medicine medical students for 150+ medical students, residents, fellows, and attendings from five academic medical centers, private practice, and in the community. This training augments the core values of medical education for people at all levels, and builds the capacity of evaluators in the Chicago area.

The poster will discuss the process of organizing this training, along with areas for improvement for future trainings and opportunities for medical student administration to support students in similar endeavors. Students encountered challenges in the process of securing funding internally and externally. Students also identified areas to improve regarding accessible channels of communication both within their own school’s departments and health systems, and across medical schools. Students modeled educational content for the training based on core-case style sessions in the medical curriculum. Improving student access to resources empowers them to provide enriching opportunities for students and faculty.

A Framework for An Institutionally Supported Student Social Mission Committee

Karampreet Kaur, BA
Medical Student
Vanderbilt University School of Medicine

Mollie Limb, BA
Medical Student
Vanderbilt University School of Medicine

Kelsei Brown, BS
Medical Student
Vanderbilt University School of Medicine

William Furuyama, BS
Medical Student
Vanderbilt University School of Medicine

Student activism is transformative in medical education, however, institutional memory is limited by student turnover and lack of central leadership. The establishment of a Social Mission Committee (SMC), run by a 10-student executive board and advised by the former Senior Associate Dean of Medical Education, has galvanized a student body to pursue sustainable social justice and health equity work. About 25% of the student body participates in six subcommittees: Education, Service, Mentorship, Recruitment, Research, Monitoring & Evaluation.

Thus far, SMC has successfully incorporated social medicine themes into case-based learning and created a Health Equity Certificate Program. We’ve developed school-wide, community engagement strategy, created a strong career mentorship program across all specialties, and integrated community engagement methods into the research curriculum. To assure longevity, we are publicizing the SMC to prospective students, bolstering institutional partnerships, and regularly analyzing subcommittee goals. The establishment of the SMC has facilitated sustainable collaboration in social justice work and has improved school-wide commitment to social medicine.
A Healthier Nevada: Youth Educational Modules

Brandon Conner, BS Biology
Medical Student-2
University of Nevada, Reno School of Medicine

Katie Weller, MS
Medical Student-2
University of Nevada, Reno School of Medicine

Alexa Allen, BS
Medical Student-2
University of Nevada, Reno School of Medicine

Matt Biondi, BS
Medical Student-2
University of Nevada, Reno School of Medicine

Megan Rescigno, BS
Medical Student-2
University of Nevada, Reno School of Medicine

Katie Weller, MS
Medical Student-2
University of Nevada, Reno School of Medicine

A Healthier Nevada: Youth Educational Modules brings clinical medical education to high school students in hour-long presentations. The modules cover topics such as relationships and addiction and are presented in a low-stress setting using interactive education theory. We personalize the modules to fit the students and place a heavy emphasis on class discussion and activities to promote student problem solving. Our goal is to provide preventative medical education to Washoe County high school students, with a secondary goal of improving mental health and reducing illness.

Preventative medicine, although a gold standard in the modern health care system, is more of a goal rather than a reality, since only one doctor’s visit is usually insufficient to make lasting change on a patient’s lifestyle. By bringing clinical medical education to students using interactive, engaging modules several times throughout the year, our project seeks to bring these students this lasting change. Additionally, since we as medical students teach these modules, it makes us more well-versed and professional when providing thorough patient counseling in areas such as stress, diet, and exercise.

A Multifaceted Approach to Career Development & Advising for Medical Students Residency Preparation

Paula Hernandez, MA
Career Advisor
University of Illinois College of Medicine

Stacey Walters, Master's degree
Director of Career Services
University of Illinois, College of Medicine

Claudia Boucher-Berry, MD, MD
Associate Professor of Pediatric Endocrinology
University of Illinois College of Medicine

P. Melissa Hernandez, MA
Career Advisor
University of Illinois College of Medicine

The purpose of this workshop is to discuss the implementation of our career development and advising program which promotes, educates, and provides support for medical students. This session will explain the importance of collaboration within student affairs, specialty departments, student interest groups, and the diversity and inclusion office to create a community that advocates for a successful career path in medicine.
A Successful Model of Long-Term Mentoring for Pre-Medical Students: the UMMSM Method

Hilit Mechaber, MD
Associate Dean for Student Services
University of Miami Leonard M. Miller School of Medicine

Kristen Zayan, BS
Medical Student
University of Miami Miller School of Medicine

Jacob Rosewater, BS
Medical Student
University of Miami Miller School of Medicine

The UMMSM Miller Mentors program pairs volunteer medical students with premeds at our university, and aims to alleviate the stress identified by students going through the medical school application process. Mentor-mentee pairs meet each semester to discuss topics ranging from how to build a competitive application to what to expect once enrolled. A longitudinal relationship develops and mentors remain continuously available during the premeds’ undergraduate experience to provide ongoing guidance. Additionally, as they remain in close contact with their mentor learning about daily activities and responsibilities, the participants will gain a better concept of their future medical education. Through detailed surveys sent to the mentees before, during, and after engaging in the program, we are measuring mentee self-reported stress reduction, expectations of the program, stress around the pre-medical program, and how medical students can help them reduce stress related to their pre-medical education. We are also identifying areas where medical students can better focus programmatic efforts, and the positive impact on mentor participation.

Academic Advisor Roles within the Learning Community

Cary Chelladurai, Ed.D.
Assistant Dean, Student Affairs
University of Missouri-Kansas City

This poster describes the role of full-time student affairs staff (non-physicians, non-faculty) who serve as academic advisors for medical students. This role seems to be rare in medical schools and is not represented as an Area of Expertise on the GSA PDF. However, the role of the academic advisor is key to academic success and retention efforts at our school, and has been for almost 50 years. Academic advisors anchor the learning community experience by providing advising, student development, policy explanation, and student support throughout the curriculum. Longitudinal, trusted relationships form between the student and their advisor allowing for in-depth conversations, guidance, and mentorship to occur frequently.

This poster describes the role of the advisor as well as various impacts of the role on student success. The goal of sharing this information is to present conference attendees with a new idea of how to structure their student affairs services utilizing full-time staff to provide holistic student services. This poster was well-received at the Learning Communities Institute in October, facilitating conversations on student support and workforce structuring.
Acceptance to Matriculation: Bridging the Gap with SAP

Linda Nield, MD  
Professor, Assistant Dean for Admissions  
West Virginia University School of Medicine

Alexandra Van Horn, MS  
Medical Student  
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Director, Undergraduate Medical Education Programs  
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Manager, Admissions and Retention  
West Virginia University School of Medicine

Sap is not only a vital glue-like substance that keeps plants thriving, it is also an acronym for our “Student Ambassador Program” (SAP) which has a vital glue-like function that keeps accepted applicants thriving. This session will include four main presenters: a medical student, an admissions and retention manager, an undergraduate medical education director and an admissions dean. During the first 15 minutes, the expert panel will explain SAP and SAP members’ involvement in the creation of interactive webinars which are provided to accepted applicants in the months preceding matriculation. The main goal of the webinars is to make the transition to medical school as smooth as possible. During the next 20 minutes, lively discussion will be encouraged, as attendees will form smaller groups to brainstorm about the greatest obstacles faced by accepted students, admissions officers and student service personnel as all prepare for medical school orientation. The whole group will reconvene for the last 25 minutes to brainstorm about effective webinar ideas that members of SAP, admissions and student services can implement to bridge the gap from acceptance to matriculation.

Addressing the problem of inpatient immobility through medical student education

Chandler Montgomery, BS  
Student  
Vanderbilt University School of Medicine

Jeremy Hatcher  
Medical Student  
Vanderbilt University School of Medicine

Daniel Pereira, BA  
Medical Student  
Vanderbilt University School of Medicine

Low mobility of hospitalized patients is an under-recognized clinical problem. Loss of mobility during hospital admission is common and is associated with adverse outcomes including increased falls, delirium, and costs. However, most hospitals lack programs promoting patient mobility. Previously implemented programs have utilized nursing, physical therapist, and mobility technician labor and education, but there are few examples in the literature of approaching this issue from a physician education perspective. Authors will describe a novel approach to promoting mobility via education and training of medical students during the medicine clerkship. We intend to educate students about immobility and provide training in mobility assessment and safe ambulation practice. This curriculum will develop physicians with the skills to address the problem of immobility regardless of specialty choice. Further, this will expand the medical student role in the medical center while facilitating a common language of mobility across the medical team. Authors will describe the initiative while providing preliminary data on student knowledge, skill attainment, and patient mobility status change.
Aligning Coaching, Advising, and Mentoring Programs with the Three Phases of the Curriculum  

Michelle Lizotte-Waniewksi  
Director, Student Success & Wellness  
Charles E. Schmidt College of Medicine at Florida Atlantic University  

The Schmidt College of Medicine at Florida Atlantic University uses a tripartite advising and mentoring program for academic, career, and professional and personal development. Evolving and increasing needs for different aspects of the advising and mentoring program were identified based on student and faculty feedback gathered through surveying tools and focus group sessions. In response, the College of Medicine developed a revised structure that integrates the three phases of the curriculum. The three phases of the curriculum are pre-clerkships, comprised of the biomedical sciences, organ systems and foundational clinical skills; clerkships, including the six required by the LCME; and post-clerkship which include acting internships and away rotations. The coaching, advising, and mentoring components will be integrated horizontally in that activities occur in each phase of the curriculum and integrated vertically in that the component themes cross the three phases of the curriculum. Faculty development is crucial to this new structure and will be delivered through workshops and small group sessions with key faculty becoming certified coaches.

Analysis of Step 1 Study Schedules and Behaviors in WSUSOM Medical Students  

Jason Booza, PhD  
Assistant Dean of Continuous Quality Improvement and Compliance  
Wayne State University School of Medicine  

Noor Khan  
WSUSOM OSR Delegate  
Wayne State University School of Medicine  

Passing USMLE Step 1 is required to earn an MD degree and match into a residency program, and the score is one of the most important factors used by residency directors to select for interviewees (Green, Jones, Thomas, 2009). Due to the hefty importance of this exam, a plethora of Step 1-related study resources have been created and made available on the market for medical students. This has led to an overwhelming abundance of choice for students as they get ready to prepare for this career-defining exam. The methods used by students to prepare for Step 1 require more analysis, particularly for the purposes of designing curriculum and providing resources to students so they can have improved Step 1 scores and confidence in their study plans.

Wayne State University School of Medicine is a public medical institution with one of the largest medical student bodies on a single campus. Medical students who had recently taken Step 1 after a two-year subject-based pre-clinical curriculum (N=77) were asked to complete a Qualtrics survey about their study schedules and strategies. The results from this survey will be presented in this poster.

Analyzing the Presence of a Support System and Its Effect on Mood Among Medical Students at UMKC  

Nilooofar Shahmohammadi, M.A.  
Wellness Program Coordinator  
UMKC School of Medicine  

A student-led study was conducted to assess the factors that play a role in mental health. Questions regarding social factors, such as social support and sentiments of isolation, were included in the survey knowing that they play a role in mental health, specifically depression and anxiety. Data collected on the perceived presence or lack thereof of a support system was then compared to PHQ 9 and GAD 7 results and it was determined that those who perceived a lack of social support also scored significantly higher for depression and anxiety. Students studying for Step 1 were also shown to have the greatest lack of perceived social support. Knowing this, schools can create specific programs and check-ins targeting students as they prepare for Step 1 to keep them engaged during those months.
Applying the GSA PDI Framework in a University Setting

Joshua Hanson, MD, MPH
Associate Dean for Student Affairs
UT Health San Antonio Long School of Medicine

Stephanie Reeves, DO
Assistant Dean for Student Affairs
UT Health San Antonio Long School of Medicine

Many medical schools operate within a university, which can be challenging for student affairs (SA) units as many functions overlap with university programs. Previously, SA units were smaller and are now experiencing growth, which may lead to duplication of effort. Growth demands the development of management skills and use of those skills within talent management systems that do not translate to SA unit functions. Finally, as the SA unit responsibilities grow, medical educators may not be aware of what resources they have. In all of these settings, defined expectations are critical to excellent performance.

At the Long School of Medicine, SA leadership has been successful in using the PDI Framework (PDIF) to create partnerships with external offices, such as the registrar and student counseling center, in growing the staff of SA unit, and to communicate the SA unit functions to groups of medical educators, such as the clerkship directors. Additionally, the university’s talent management system has been made more relevant by overlaying the PDIF during quarterly meetings and annual performance reviews. Here we share the management strategy in applying the PDIF in these settings.

Assessing for BIAS in the MMI: A Process Improvement Project

Angela Sullivan, MS
Director of Admissions
University of Alabama School of Medicine

James Banos, PhD
Assistant Professor of Medical Education
University of Alabama School of Medicine

Christina Grabowski, PhD
Associate Dean for Admissions and Enrollment Management and Assistant Professor of Medical Education
University of Alabama School of Medicine

The UAB School of Medicine (SOM) uses Multiple Mini Interviewers (MMI) as one tool in the holistic review applicants for admission to medical school. To examine whether local ratings on MMI resulted in group bias, the SOM analyzed three years of MMI data. A sample of 1,355 medical school applicants who participated in the MMI process was examined for evidence of systematic bias affecting subgroups that may be vulnerable to bias. The data set included applicants from the 2016, 2017, and 2018 application years. Specific subgroups of interest included women, Alabama applicants who graduated from a high school designated as rural, and applicants from racial or ethnic groups considered to be underrepresented in medicine (URiM). Individual MMI ratings across stations were examined, as was overall performance on individual stations. Findings were reviewed by the MMI working group that evaluates implementation of the MMI. The MMI working group made changes to one MMI station that showed differences for a key mission area. Findings also inform how the issue of potential bias is addressed in MMI rater training.
Assessing the Reliability of Student-Reported Data in Texas STAR: A Quality-Control Study

Galen Gao, B.S.
Medical Student
UT Southwestern

The NRMP “Match” is a nebulous part of the transition to residency. A historical lack of transparency in the application process has hindered decisions regarding which programs to apply to. To aid students in finding programs that match their characteristics, UT Southwestern has implemented Texas Seeking Transparency in the Application to Residency (STAR). Using Texas STAR, students nationwide can self-report their characteristics in order to assist future applicants assess their competitiveness for various programs.

To assess the quality of STAR’s self reported data, we validated 2018 Texas STAR data with averages provided in the NRMP's “Charting Outcomes in the Match” 2018 report. Our analysis demonstrates that student-reported STEP scores and number of research items are consistent with data reported by the NRMP for the majority of large specialties. We observed statistically significant inflation of student-reported quartiles and AOA status compared to expected values. While discrepancies exist, many factors contribute to these differences. Such differences themselves do not preclude Texas STAR’s efficacy as a tool for students and advisors in the application process.

Barriers to Treating Mistreatment: Intake Issues

Tim Lacy, PhD, MA, BS
Director, Medical Student Learning Environment
University of Illinois College of Medicine

With this poster I plan to present, qualitatively, a range of intake issues for mistreatment reporting that must be considered by any institution. While fostering a positive learning environment involves a range of considerations, one viable to approach to lowering incidents of mistreatment is to increase enforcement visibility. To accomplish that, increased reporting helps indicate a resolve to all institutional actors to minimize incidents. In this poster I will forward several themes and arenas that constitute barriers to, and issues in, reporting. These include: student hesitation (fear, time, retribution), consultations (pre-reporting), marketing/awareness (e.g. my own Office of Medical Student Learning Environment), confidentiality and discretion, mandatory reporting (by me and staff), and finally the student need for advocates. In each arena, I will raise a question and present a solution, when possible, that has arisen in my first year-plus of work at the University of Illinois College of Medicine (UI-COM). UI-COM has four campuses, which presents an interesting, dynamic laboratory for dealing with mistreatment issues. This poster is, again, a qualitative study.
Becoming Active Bystanders & Advocates: Student-Led Workshop to Address Bias in the Clinical Setting

Michelle York, BS
Vanderbilt University Medical School

Kyle Langford, BE
Medical Student
Vanderbilt University School of Medicine

Amy Fleming, MD, MHPE
Associate Dean for Medical Student Affairs
Vanderbilt University School of Medicine

Maya Neeley, MD
Professor of Pediatrics
Vanderbilt University School of Medicine

Celeste Hemingway, MD
Professor of Obstetrics and Gynecology
Vanderbilt University School of Medicine

Regina Russell, PhD
Professor
Vanderbilt University School of Medicine

In recent decades, the demographic makeup of medicine has changed significantly. While the diversity of providers has improved the quality of patient care, unfortunately, extensive data exist to support that certain physicians including underrepresented minorities and women experience substantial bias within the clinical setting, which can contribute to burnout. The medical literature lacks published educational methods that are successful at targeting this bias in-the-moment.

We developed a student-led workshop adapted from the Green Dot Program. We piloted the workshop with 83 clinical medical students. After reviewing the prevalence of bias and microaggressions, students were taught the “3-D’s” (the Green Dot active bystander framework) response types: Distract, Delegate, and Direct. In small groups, students roleplayed cases to practice direct responses.

Participants indicated a high degree of satisfaction with the workshop and an intention to practice the discussed response framework. 91% of attendees agreed that the workshop was effective. Participants’ confidence in addressing bias and microaggressions significantly improved after completing the workshop (p < 0.05).

Bridging past medical student’s wellness concerns to today’s solutions

Nathaly Desmarais, Psy.D.
Director Counseling and Wellness
FIU HWCOM

Melanis Rivera Rodriguez, Psy.D.
Licensed Psychologist Assistant Professor
Florida International University Herbert Wertheim College of Medicine

Katherine Daly, PhD
Director of Counseling & Wellness Services and Assistant Professor
University of Central Florida College of Medicine

Nicki Taylor, PhD
Assistant professor; Licensed psychologist
Florida State University College of Medicine

Burnout and depression are currently at the forefront discussions regarding medical education. Physician suicide and burnout are epidemics that need to be addressed early in medical training. An opportunity to engage in conversations amongst expert providers who have been working closely with medical students and whose medical schools (Herbert Wertheim College of Medicine and Florida State University College of Medicine, amongst others) have created specific centers for the provision of services. It will address what are specific mental health concerns for the medical student population, wellness initiatives and programming that have been successfully implemented and provide a detailed view of the support services and collaboration with other healthcare providers in destigmatizing mental health. Additionally, the panel discussion will be open to exploring ethical dilemmas that might arise as a result of utilization of medical students and mental health services. Encouraging faculty and staff to engage in these conversations could inform their work with medical students and medical residents who might be considering the utilization of these services if needed.
Building a National First-generation and Low income Medical Student Association

Roselande Marcellon, MPH, MA  
MD Candidate  
Albany Medical College

Rema Elmostafa, BA  
Medical Student  
Mercer University School of Medicine

Annel Fernandez, BA  
Medical Student  
Columbia University Vagelos College of Physicians & Surgeons

Micaela Torres, BA  
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UCLA David Geffen School of Medicine

Hailey Roumimper, BS  
Medical Student  
Georgetown University School of Medicine

Mytien Nguyen, MSc  
MD/PhD Student  
Yale School of Medicine

While the number of people living in poverty increased in the past several decades, the percentage of medical students from the lowest quintile has never been greater than 6%. Since 2002, the percentage of low-income matriculants has remained stagnant. In order to produce medical professionals that reflects the population it serves, medical institutions need to deconstruct its traditional establishment to include trainees across socioeconomic strata. With this in mind, the National First Generation and Low Income in Medicine Association aims to create a network of first-generation and low-income (FGLI) medical students. We will launch our efforts with a national symposium for FGLI students in September 2020. The symposium will include guest speakers, workshops, and breakout sessions where students are able to meet and network in-person. The mission of the national organization and symposium encompasses three themes: empowerment, advocacy, and community. In this presentation, we will highlight our road to establishing a national association, organizational structure, and topics that are important to FGLI students in medicine.

Building Self-Care And Knowledge Acquisition Skills To Prepare Medical Students For Residency

Maureen Gecht-Silver, OTD, MPH  
Associate Director of Medical Student Education  
University of Illinois College of Medicine

P. Melissa Hernandez, MA  
Career Advisor  
University of Illinois College of Medicine

Emily Graber, MD  
Family Medicine Resident  
University of Illinois College of Medicine

Sagina Hanjrah, MD  
Director of Medical Student Education  
University of Illinois College of Medicine

US medical students are suffering from increasing rates of anxiety, depression, substance abuse, burnout, and other behavioral health issues. Recent studies demonstrate student burnout rates as high as 50%. In response, institutions are developing wellness initiatives to help students become more resilient earlier in their medical careers. This session will discuss an innovative two-credit longitudinal elective that addresses both medical knowledge and wellness. It is designed to enhance students’ medical decision making and self-care to ease the transition into residency. The blended structure of online and face-to-face will be described with specific learning activities highlighted. Session participants will be exposed to self-assessments that promote student reflection on their own strengths and challenges. A key program feature is the process of promoting individually tailored student self-care projects. Sample student projects and outcomes will be shared along with experiences of a resident who completed the program during her M4 year. This session will share ways to create collaborations between faculty and office of student affairs professionals.
Career Advising for Medical Students: Forming and Utilizing a Student Advisory Committee

Abigail Roebker, B.S.N.
Medical Student (M2)
University of Cincinnati College of Medicine

Leah Hershberger, BA
Medical Student (M2)
University of Cincinnati College of Medicine

Alice Mills, MD, MPH
Director of Career Development, Office of Student Affairs
University of Cincinnati College of Medicine

Madison Epperson, BA
Medical Student (M4)
University of Cincinnati College of Medicine

Alison Jarmas, MS
MD/PhD Student
University of Cincinnati College of Medicine

Margaret Carney, BS
Medical Student (M3)
University of Cincinnati College of Medicine

Caroline Lynch, BS
Medical Student (M2)
University of Cincinnati College of Medicine

Meredith Moore, B.S.N.
Medical Student (M3)
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Robert Daulton, BS
Medical Student (M4)
University of Cincinnati College of Medicine

Kevin Milligan, B.S.N.
Medical Student (M3)
University of Cincinnati College of Medicine

BACKGROUND: Tailoring a career advising program to meet the needs and interests of students at a particular medical school depends on student feedback that can be difficult to obtain.

METHODS: In 2018, the University of Cincinnati College of Medicine (UCCOM) Office of Student Affairs formed a Career Development Student Advisory Committee (SAC) with the following goals: (1) to receive student input about the Career Development Program and (2) to help enhance the program. Steps for forming the SAC included: (1) outlining the committee structure, (2) soliciting applications, (3) reviewing applications submitted via Google Docs, and (4) selecting 3-4 representatives per class.

RESULTS: To achieve the first goal of receiving input, in-person meetings were held with the SAC and additional feedback was solicited via email between meetings. To achieve the second goal of enhancing the program, each M1 representative completed a mini-project.

OUTCOMES: Creating a SAC is one way to obtain timely, constructive student feedback on existing career development programming. This feedback can help guide future steps and be especially valuable during the reaccreditation process.
Careers in Medicine at 20: Assessing the Program’s Impact on Medical Student Advising

**Meredith Moore, BS**  
M3; OSR Liaison to Careers in Medicine  
University of Cincinnati College of Medicine

**Brian Clyne, MD, MHL**  
Vice Chair for Education/Dept. of Emergency Medicine  
The Warren Alpert Medical School of Brown University

Careers in Medicine (CIM) is a comprehensive career planning program established in 1999 to support medical student career decision-making. The program is sponsored by the Association of American Medical Colleges (AAMC) and designed to work with school liaisons who lead local advising programs. CIM’s objective is to empower students with insights and information to make sound career decisions by helping them identify career goals, explore specialty/practice options, and research specific training programs. The program is based on a four-year, four-phase developmental career planning framework: Understand Yourself—>Explore Options—>Choose a Specialty—> Prepare for Residency. Guided by this model, CIM has expanded its scope and content over the past two decades. It now serves as a centralized resource for students and advisors that includes self-assessment tools, information on specialties and training programs, and advice for the application process. Through this session, we examine various methods of evaluating CIM’s reach and impact on career advising for the purposes of program evaluation.

Careers in Medicine® at 2: Assessing the Program’s Impact on Medical Student Advising

**Mary Halicki**  
Program Director, Careers in Medicine  
Association of American Medical Colleges

Careers in Medicine® (CiM) is a comprehensive career planning and advising program sponsored by the AAMC® Established in 1999. CiM works with school liaisons to support medical student career decision making. CiM empowers students with information to make sound career decisions by helping them identify career goals, explore specialty and practice options, and research specific training programs. The program is based on a four-year, four-phase developmental framework.

Over the course of two decades, CiM has expanded its scope and content. It now serves as a centralized resource with self-assessment tools, specialty and residency program information, and advice for the application process. We sought to examine CiM’s impact on US medical student career advising for the purpose of program evaluation.
Clerkship Administrative Day: Institutional Logic and Student Utilization

Madeline L’Ecuyer  
Student  
OSR

Reeder Wells  
Student  
OSR

Neil Robinson  
Student  
OSR

Mark Mullen  
Student  
Saint Louis University School of Medicine

In 2009, Saint Louis University School of Medicine (SLUSOM) began reforming its curriculum with an eye on student wellness. Each successive academic year featured new innovations, many of which represented major changes to the status quo. During the 2013-2014 academic year, SLUSOM moved to a strict pass/fail system for assigning preclinical grades. As a result, student mental health was drastically improved as represented by a near halving of reported symptoms of anxiety/depression on the Y2Q when compared to previous years. However, these statistics quickly regressed to the national average during the clinical years. In an attempt to target the unique stressors faced by medical students on clerkships, SLUSOM instituted one “Applied Clinical Skills” day per third year clerkship. Academic duties typically end by noon at which point students are free to use the rest of the afternoon in whatever way they choose. The concept is that the unique schedules of clerkship students represent stressors that are unlike other comparable professional roles. In this poster, we will present the logic behind the innovation and how students are choosing to use this opportunity.

Community College Outreach, Recruitment, and Engagement to Increase Physician Workforce Diversity

Marcella Anthony, MPA  
Assistant Director, Outreach, Recruitment, Engagement  
Stanford Medicine Center of Excellence in Diversity in Medical Education

The poster will focus on several iterations of a summer program over 20 years to demonstrate the un-tapped resource of community college students on the premedical pathway. The data will highlight the efforts of a top-tier medical school to increase the health professional workforce through targeted outreach and partnerships with regional community colleges. Outcomes examined will include continuity of interest and pursuit of a health profession, persistence in community college studies, transfer to a university, continued participation in pre-professional development opportunities outside of the classroom, employment, research, and internship experiences, application to medical school (or other). This poster highlights the importance of access and opportunity for community college students, many of whom receive little to no pre-health professions advising at their home institutions. Outcomes: Community college students who participated in the summer program entered the health professions at a rate similar to their university peers. Specific case studies and data will be shared to illustrate community college student successes to date.

Community Connections

Jessica Marcus, MSEd  
Student Affairs coordinator  
Perelman School of Medicine at the University of Pennsylvania

In-depth review of a community connection program designed to highlight assets of the surrounding neighborhoods that are served by the University Hospital system. It’s a program that was created to help first year students gain a framework for discussing the social determinate of health and to create stronger relationships with community partners.
Developing A Pilot Pre-Matriculation program

Iyabode Okoro, Ed.D.  
Lead Advisor for Student Success and Transitions  
Indiana University School of Medicine

Alex Chong  
MS 2  
Indiana University School of Medicine

Faisal Shariff  
MS 1  
Indiana University School of Medicine

Andrea Gonzalez  
MS 2  
Indiana University School of Medicine

Admission into Medical School is for the brightest and the best. Most students apply to an average of 14 schools with nothing less than a 3.5 gpa, which indicates that these students are indeed among the best in their cohort. However, in the midst of these best of the best, literature indicates that there is a group who seem to struggle no matter how good they were on coming in. In this group of students are some which the literature has identified that due to their general identity will tend to struggle; they may repeat or retake Step 1 or take 6 years to graduate or have to withdraw altogether. However, if this group of students, who are already identified on admission, could be put through a pre-matriculation program the academic struggles they have may be mitigated.

In this panel presentation participants will hear and learn about the impact made through a Pre-Matriculation from 5 people involved in the program which include the coordinator of the program, two student volunteers and 2 newly admitted MS1s who went through the program.

Developing a Well-Received Pre-Matriculation Program: The Evolution of MedFIT at UNR Med

Brandon Conner, BS Biology  
Medical Student-2  
University of Nevada, Reno School of Medicine

Cameron Berg, BS  
Medical Student-3  
University of Nevada, Reno School of Medicine

Megan Almansoori, MA  
MS1-2/PAS Learning Specialist  
University of Nevada, Reno School of Medicine

Ranna Nash, MA  
Coordinator of student development and academic enrichment  
University of Nevada, Reno School of Medicine

Alexa Allen, BS  
Medical Student-2  
University of Nevada, Reno School of Medicine

As a continued effort to help those at UNR Med integrate into their first year of medical school, the University has implemented a mandatory program known as MedFIT. Going into its third year, MedFIT is centered on orientation, housekeeping, team building, and preparation for the rigors of medical school. MedFIT has undergone some radical changes in the past 12 months as we continue to respond to feedback from those who have undergone the program. Our improvements are based primarily on listening to student feedback, analyzing how the program prepares students for their first year of medical school and beyond, and overall learning success between those in the class of 2021, class of 2022, and class of 2023.
### Developing Empathic Physicians through Critical Community Engagement Projects

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<tr>
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<tr>
<td>Niki Messmore, M.S. Ed</td>
<td>Program Director for Community &amp; Civic Engagement</td>
<td>Indiana University School of Medicine</td>
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<tr>
<td>Karen Xu, BS</td>
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<tr>
<td>Caroline Dean, BS</td>
<td>Graduate Apprentice</td>
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<td>Sarah Komanapalli, BS</td>
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<td>Purva Patel, BS</td>
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<td>Abhi Mishra, BS</td>
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<td>Allison Young, BS</td>
<td>Medical Student</td>
<td>Indiana University School of Medicine</td>
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A requirement of the LCME is that medical education programs provide sufficient opportunities for, encourages, and supports medical student participation in service-learning and community service activities (LCME Standard 6.6, IS-14-A). But it is not enough to just provide these opportunities. Research demonstrates that service learning programs that lack substance in justice-centered education, only perpetuate stereotypes of underserved populations. Medical schools must utilize a critical service learning theory framework in order to develop ethical programs for students that develop empathy towards diverse populations. This session will highlight substantive programs demonstrate growth in student empathy and awareness of diverse populations, including alternative breaks and days of service. Participants will be provided with a theoretical framework towards developing critical community engagement programs, understand the different steps to developing these programs, and learn why student evaluations can mark these as high impact experiences.

### Dismantling Medical School Stress and Burnout: Rush Student Wellness Advisory

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<tr>
<td>Shivaliben Patel</td>
<td>MD Candidate</td>
<td>Rush Medical College of Rush University Medical Center</td>
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<td>Kaitlyn Fruin</td>
<td>MD Candidate</td>
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<tr>
<td>Manvita Tatavarthy</td>
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<td>Rush Medical College of Rush University Medical Center</td>
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We aim to share our experience of starting and leading a wellness advisory student committee at Rush. We would like to talk about the current mental health state of the student body both before and after wellness measures were taken. It is important to not only share the measures taken at our school but also collaborate with other schools on initiatives taking place around the nation in efforts to fight student depression and burnout.
Education-Centered Medical Home at University of Illinois at Chicago

Andrew Mudreac, BS
Medical Student
University of Illinois at Chicago College of Medicine

Natasha Mehta, MS
Medical Student
University of Illinois at Chicago College of Medicine

Natalie Jansen, PhD
Medical Student
University of Illinois at Chicago College of Medicine

Adam Douglas, BS
Medical Student
University of Illinois College of Medicine

Education-Centered Medical Home (ECMH) is a 4-year program at the University of Illinois at Chicago (UIC) established in 2017. Adapted from the ECMH program created by Northwestern University’s Feinberg School of Medicine, ECMH at UIC provides a select group of students exposure to team-based, patient-centered care. Students work at a UIC-affiliated federally qualified health center that cares for underserved patients with complex medical and psychosocial issues. Students are organized into teams of four - one from each class (M1-M4) and work closely with a preceptor and panel of patients. Unique to the ECMH clinic, patient visits are 45 minutes to allow students ample time to meet with patients, address their concerns, develop an assessment and plan, and reinforce and strengthen patient-student relationships. Students also follow up with patients between appointments and accompany patients on specialist visits. Overall, both students and patients benefit from ECMH because vulnerable patients receive comprehensive and compassionate care while students gain early clinical exposure and patient continuity in an outpatient clinic environment.

Effect of Receiving Education Materials on Fruit/Vegetable Intake in AA Church-Affiliated Population

Prarthana Patel
Medical Student
University of Missouri-Kansas City School of Medicine

Cardiovascular disease (e.g., coronary heart disease, stroke) continues to be the leading cause of death in the United States. African Americans (AAs) are disproportionately burdened by this disease. Studies indicate that frequent consumption of fruits and vegetables can reduce CVD risk. Our study examined educational material exposure and its relationship to fruit and vegetable consumption from a faith-based intervention implemented in AA churches.

Amount of FIT education intervention exposure was not related to fruit or vegetable consumption at 4 months. However, attending cooking classes and hearing personal testimonies of individuals with diabetes/CVD/stroke was positively related to fruit consumption. Personalized education, such as testimonies from fellow church members, may be more effective in inspiring a behavioral change. Cooking classes may provide tangible skills and strategies that may inspire healthy behavior change. Given the well-documented health disparities affecting AAs and decreased prevalence of CVD with increased fruit/vegetable intake, educational interventions targeting faith-based AA communities may be the solution to mitigating health disparities.
**Engaging Medical Students with Improvement Science to Strengthen MedEd Project Design**

Emily Smith, BS  
OSR  
Mercer University School of Medicine

Michael Trainer  
Student  
Mercer University School of Medicine

Harris Burton  
Student  
Mercer University School of Medicine

The overall goal of improvement science is to provide a framework for evidence-based Quality Improvement activities pertaining to healthcare. A number of national organizations have called for a greater emphasis in health systems science in undergraduate medical education, but there is little consensus on best practices curricula. There are a number of popularized methodologies available, including Lean, Six-Sigma, and the IHI Model for Improvement (PDSA cycles). Students do not typically receive a formal education in these topics, and learning in these areas is often experiential and can be woven into everyday activities. Our poster will demonstrate how medical students studied data from the Graduation Questionnaire and used run charts and PDSA cycles to implement change with the way student mistreatment is reported at their institution. The poster will also outline other basic areas of improvement science to engage medical students looking to create change at their institution. The ultimate goal is that students will retain a basic understanding of the principles and carry forward an improvement mindset to their clinical duties and the remainder of their medical careers.

**Enhancing the Medical Student Experience Through Learning Communities – The “Society Cup”**

Gautam Adusumilli, BS  
OSR  
Washington University in St. Louis School of Medicine

Monica Lim, BS  
OSR  
Washington University in St. Louis School of Medicine

Griffin Plattner, BS  
OSR, Class of 22  
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Learning communities (LCs) at medical schools have been increasing in prominence as an alternative to the traditional approach of students independently seeking out faculty mentors. LCs can complement existing wellness structures and systemically incentivize camaraderie, ex pense of teamwork, and increased social interactions within and between classes. With those goals as a preface for WashU’s LCs, called “Societies”, the OSRs at WashU launched the first edition of “Society Cup” for the 2018-2019 academic year. Points were assigned to achievement, teamwork, and participation for students of each society, with the winning society being awarded a gift from the school as the Society Cup champions. Points were earned through competitive, participatory, and longitudinal events. Many improvisations were made throughout the year, including recruiting M1s as “Society Leaders” during the winter and letting them build experience leading events, and inviting the M2-M4 classes and faculty to all events. Our goals for the next year are to: 1) continuously improve the diversity of events, 2) achieve greater upperclassmen participation, and 3) be more economical to allow for sustainability.
Evaluation of Med School 11’s Impact on High School Aged Participants and Medical Student Teachers

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Vanderbilt University Medical School Kyle Langford, BE
Medical Student
Vanderbilt University School of Medicine

Background: The United States is facing a physician shortage as its population continues to grow, age, and live longer (AAMC 2019). University-run summer programs for high school students have been shown to increase the odds of students wanting to pursue careers in STEM fields, even when controlling for background characteristics (Kitchen, Sonnert, Saddler 2016).

Innovation and Development: Med School 101 is a three-week summer course for rising 11th and 12th grade students led by senior medical students at Vanderbilt. It utilizes traditional and hands-on learning modalities to give high school students an immersive medical experience. The medical student leaders work to revise/design and implement the curriculum under faculty supervision. Medical students gain valuable experience and receive elective credit for their efforts.

Results: On average, the high school students reported learning new information and had an increased desire to pursue careers in medicine and science. Furthermore, the medical student leaders reported an improvement in their teaching abilities and an intention to stay in academic medicine. This program could easily be implemented at other institutions.

Fantasy Interview Season: A Program to Transcend Fourth Year Isolation

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Fourth Year Medical Student
University of Colorado

Catherine Waymel, BA
Medical Student
University of Colorado School of Medicine

Jeff Druck, MD
Assistant Dean Student Affairs
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Fourth year medical students spend much time away from their peers, traveling from state to state as they make their way through interview season. This can be an isolating and stressful time, with students wondering if they are alone in their experiences. The Advisory College Program (ACP) designed a program that bolstered a feeling of community by designing a platform for students to share their experiences during interview season.

All fourth-year students (184) are granted access to a logger where they can document their experiences after each interview. Points are earned by selecting from a pre-formed list of experiences, which includes options such as: “made a friend from a different school,” “had an awkward handshake,” or “found my program.” Students can also share a picture or submit free text stories.

The first month there were 62 submissions, with a total of 415 experiences shared. The most common logged experience was “talked confidently about something I have done and felt proud of myself” (36), and “made a new friend from a different school” (34). 25 students shared stories, 20 shared pictures. Students have noted a feeling of community due to this program.
Faster Access: Multi-Tiered-Systems-of Support (MTSS) in Medical Education

Ranna Nash, MA
Coordinator of Student Development and Academic Enrichment
UNR Med

The University of Nevada Reno, School of Medicine’s (UNR Med) Learning and Wellness Resource Center (LWRC) wanted to take a closer look at interventions provided to students to determine whether implementing a MTSS system (currently used in K-12) would be feasible in undergraduate medical education.

The system was piloted in the Fall of 2018 with positive outcomes. The system monitored all students in the entering Class of 2022 and increased student support as needed. This system allowed for non-punitive support for students, while measuring outcomes with this evidence-based approach.

Faster Access: Multi-Tiered Systems of Support (MTSS) in Medical Education

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This project looks to address a new support system for medical students at a United States, ACGME accredited medical school. Over the last 5 years, physician/student burnout has risen across the country. In order to circumvent this challenge, the Multi-Tiered Systems of Support (MTSS) model has been introduced into the UNR Med curriculum. This “tiered” support model originated in the K-12 system and is composed of several teams consisting of block directors, curriculum and assessment directors, learning specialists, counselors, and disability resource representatives. The overall goal of restructuring the existing support model is to provide faster support to students prior to any punitive measures and before they fail a block and are required to undergo remediation. Intervention plans are created when a student falls below 75% on a given exam, which allows them to be categorized into a 3-tier system in which the level/intensity of planned intervention varies. Preliminary data has indicated that in general, students who receive interventions increase in exam scores and are satisfied with this support, while the rest of the population decreases in exam scores throughout the year.

First Year Student's Summer Experience and Its Relation to Residency Choice

Braden Thomas
Medical Student
LSU Health Sciences Center- Shreveport

James Pearson
Medical Student
LSU Health Sciences Center- Shreveport

Students do not have much choice during school of their curriculum or experiences in medicine as these are very rigid and formulated by the administration to meet their school's learning objectives as well as LCME accreditation. One of the few opportunities for students to choose how to spend their time in medical school at LSUHSC Shreveport is the 6 week summer break given after first year. Our poster compares students choice of how they spend this summer break and if a relationship exists with the specialty choice 3 years later. Our poster highlights the variety of experiences offered as well as possible gaps in student exposures that may entice or deter students from certain fields early in their career. It also compares how this is related to how competitive of a specialty for which these students decide to apply.
Free and confidential: Considerations for creating in-house counseling support for students

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Postdoctoral Psychology Fellow  
University of Minnesota Medical School

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Director, Office of Learner Development  
University of Minnesota Medical School

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Assistant Dean for Student Affairs  
University of Minnesota Medical School

In response to 2 mental health-related student deaths and a growing need for accessibility to medical student-centric mental health services, the University of Minnesota Medical School (UMMS) created an in-house mental health counseling clinic, the Confidential Bridging Counseling services (CBC). Through facilitated group activities and discussion, this session will enable participants to explore considerations, challenges and benefits of adopting this model in 4 relevant implementation areas: scope of services (with theoretical orientation), confidentiality and privacy, logistics, and assessment. Session will conclude with a discussion of how UMMS addressed these areas, and presentation of preliminary utilization and satisfaction outcomes from the first year of CBC services. Information gathered and discussed during the workshop will be shared with participants afterwards.

Further Insight into Student Perspectives, Anxiety and Depression

Alper Dincer  
Students  
Virginia Commonwealth University School of Medicine

Using a student-led wellness initiative from 2018 as a model, class leaders administered a modified version of the previous survey to the current M2 class. The survey asked about students’ attitudes towards the administrative office, preclinical curriculum, student life and the institution’s university counseling services, while also incorporating anxiety and depression questionnaires, the GAD-7 and PHQ-9 respectively.

We plan to evaluate how different environmental factors correlate with levels of depression and anxiety within the M2 class. Using the PHQ-9 and GAD-7 scores, we will look for correlations with the previously mentioned survey topics. We will also assess whether there is a correlation between the number of gap years prior to matriculating into medical school, students' self-identified academic ranking and gender with depression and anxiety scores.

With the results from the PHQ-9 and GAD-7, we will also compare the current M2 class’ results with the national average and with results from the previous initiative to determine if wellness initiatives in the interim have been effective.
Further Insight into Student Perspectives, Anxiety and Depression

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Kalissa Zhang  
Student  
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Wei-Li Suen  
Student  
Virginia Commonwealth University School of Medicine

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With the results from the PHQ-9 and GAD-7, we will also compare the current M2 class’ results with the national average and with results from the previous initiative to determine if wellness initiatives in the interim have been effective.
Generating Just-in-time Responses to Gender Bias in the Clinical Workspace: A Student-Led Workshop

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Maya Neeley, MD  
Professor of Pediatrics  
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Professor of Obstetrics and Gynecology  
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Medical Student  
Vanderbilt University School of Medicine

Women have gone from comprising 21.8% of the graduating physicians in 1980 to 47.7% in 2012. While this diversity has improved patient care, extensive data exist to support that women (from trainees to faculty) experience substantial bias in the clinical setting, which can contribute to burnout. The medical literature lacks published educational methods that are successful at targeting this bias in-the-moment.

We developed and piloted a student-led, case-based workshop with 14 women, including medical students, residents, and faculty. Participants were surveyed immediately before and after the workshop. After providing shared terminology, participants reviewed sample cases of gender bias in small groups and generated possible responses. Responses were submitted anonymously, and everyone reconvened to identify the most useful and professional options.

After the workshop, 92% of participants concluded that they were more likely to address the perpetrator of gender bias, with confidence in addressing a perpetrator improving significantly (p < 0.05). Qualitative analysis of the proposed responses suggested themes around re-direction, clarification of the statement, and direct response.

GSA Professional Development Initiative

Kristen Earle  
Lead Specialist, Office of Student Financial Services  
Association of American Medical Colleges

This poster session will serve as an overview of the core principles and approach to supporting student affairs professionals through the GSA Professional Development Initiative model. It will highlight key elements of the approach, including the foundational GSA Performance Framework that contains both technical and non-technical essential behaviors for performance across GSA roles. It will provide background on the GSA PDI learning approach and show examples for application of the model at both the national and local levels. It will serve as an important opportunity to continue to socialize the Initiative with key stakeholders.
Healing the Healers: Reducing Impostor Phenomenon in Medical Students Through Belonging

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Indiana University School of Medicine

Kristin Richey, MEd
Learning Strategist
Indiana University School of Medicine

Courtney Lewellen
Lead Advisor
Indiana University School of Medicine

Abigail Klemsz, MD, PhD
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Indiana University School of Medicine

“Many in medicine suffer the pain of impostor syndrome. In one study of residents, approximately 30% indicated feeling like impostors, and in another, 49% of female and 24% of male medical students did. And it occurs even among those at an advanced stage of their careers” (Bynum, 2019). In meetings with students, student affairs staff at the Indiana University School of Medicine observed behaviors consistent with Impostor Phenomenon (IP), previously referred to as Impostor Syndrome.

Students come to the student affairs staff noting that they have failed an exam, validating their fear that they "don't belong here." Other times, students face an identity crisis because they are in new territory that may redefine how they once viewed themselves. Through this presentation, participants will learn how to identify Impostor Phenomenon in medical students, brainstorm ways to address it and learn about IU School of Medicine’s first year of research on Impostor Phenomenon on matriculating medical students and the subsequent interventions implemented to combat IP.

I Matched' - Residency Application Support Strategies to Help Students Succeed in the Match

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University of Missouri - Columbia School of Medicine

Jen Rachow, BHS
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Director of Student Services
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In order to ensure medical students are best prepared for residency interviews a robust advising program has been instituted at Mizzou Med. The program provides application support through planning strategies and a variety of internal and external resources.

A Support Advising Team (SAT) was developed and meets regularly during residency interview season through SOAP. The SAT identifies students who may be at risk for matching and develops a "caution list." Students on the caution list will be contacted and offered support and strategies to ensure they are best prepared for success. Bi-weekly emails are sent to the class offering support, asking for the number of programs applied to and interviews offered. The team shares collated interview offer data with students and encourages communication if students have concerns. Students may be identified and added to the caution list at this time if they seem to lack a sufficient number of interview offers. The team also offers support to all students. Over recent years Mizzou Med’s match rate has ranged from 98-100%. We believe our success correlates with the advising team’s proactive work.
IDEA Clinic Expansion through National Health Leadership Consortium

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University of Miami Miller School of Medicine

Nidhi Patel, B.S.  
MS3  
University of Miami Miller School of Medicine

Florida currently exceeds the national average in drug-related deaths, Hepatitis C and HIV incidence, and opioid prescriptions. With the passage of the Infectious Disease Elimination Act in 2019, sterile needle and syringe exchange programs were legalized in Florida. The IDEA clinic based out of the University of Miami Miller School of Medicine was the first needle exchange program created to decrease the incidence of HIV infection amongst people who inject drugs (PWIDs). Since its creation in 2016, UM’s IDEA exchange has served as an example for other programs to replicate. By conducting needle exchanges and HIV and Hepatitis C screening, students improve the lives of PWIDs as well as protect the community from incidental exposure. UM DOCS Consortium arranged meetings between leaders from prospective programs at UCF and the director of UM IDEA Clinic to facilitate their efforts. DOCS Consortium serves as the primary point of communication and a resource for any interested parties.

Identifying Successful Strategies in Flipped Classroom Instruction at UICOM-Chicago

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University of Illinois College of Medicine at Chicago

Despite increasing prevalence of the flipped classroom (FC) in graduate-level education, few studies have examined the efficacy of the approach in the landscape of medical curricula. Additionally, current literature focuses primarily on framework development, strategies for implementation, and/or student satisfaction rather than the specific instructional tools and skills that drive the theoretical framework in practice. The purpose of the present study is to explore aspects of the FC perceived to be most effective by both medical students and faculty at UICOM-Chicago. We employed a mixed-methods approach combining data from an anonymized survey for students and semi-structured interviews of faculty regarding their preparation, perceptions of student preparedness, and self-assessment on their efficacy as facilitators. Our findings suggest that faculty engagement for FC sessions is largely contingent on student engagement, which in turn depends on a wide array of factors including: relevance and length/format of prep material, stratification of high- vs. low-yield concepts, well-crafted practice questions, and better balance between content review and opportunities for discussions.
Impact of Simulation based Medical Skills Course Throughout Integrated Pre-Clerkship Curriculum

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Thwe Htay, MD  
Associate Professor  
Texas Tech University Health Sciences Center  
Paul L. Foster School of Medicine

The Paul L. Foster School of Medicine has established a highly integrated, clinically orientated curriculum. Students spend 2 hours of clinical skills course weekly during the first two years practicing the 140 clinical presentations taught in the basic science course. Our objective is to highlight the pre-clerkship curriculum, emphasizing unique structure and delivery of clinical skills curriculum correlating with students’ satisfaction and performance. We aim to measure impact of clinical skills course contact hours to students’ step 2 CS performance during clerkships, and student satisfaction with their skills training utilizing and comparing with other US schools utilizing AAMC data. A concise overview will be given on the typical weekly clinical skills training a pre-clerkship student receives.

Data will compare the clinical skills course training hours and USMLE step 2 CS scores from PLFSOM and the other medical school, USMLE Step 2 CS scores, and AAMC’s Graduate questionnaire (GQ ) scores will be used as an outcome measure for PLFSOM students’ performance and satisfaction/perception for readiness towards clerkship.

Implementing an Immersive Research Experience: Professional Development in Evidence Based Medicine

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Daniel Pereira, BA  
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Vanderbilt University School of Medicine

Simone Herzberg, BS  
Medical Student  
Vanderbilt University School of Medicine

Luke Finck, EdD, MA  
Assistant Director, Office of Medical Student Research  
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At Vanderbilt, the Office of Medical Student Research (OMSR) has endeavored to develop a comprehensive research curriculum that spans all four years of medical school. The current program equips students with the necessary components for successful academic development: exploration, education, mentorship, inquisitiveness, self-directed research, and leadership. Each student is given the opportunity to explore their individual perspectives and ambitions in an immersive research context. In doing so, diverse student voices are elevated in the literature while cultivating future physicians motivated and mentored to be future physician-leaders. Knowing that this initiative was established through different phases over this year, authors will describe the curriculum in a manner helpful for fellow institutions and education leaders. Further, we will show student specific outcomes and perspectives as well as the professional benefits that the research curriculum offers to student training. Currently, the program shows promising outcomes in diversity of projects, productive academic deliverables, and student specific perspectives.
Implicit Bias training and its Impact on both Minority Medical Students and the General Student Body

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As of right now, LSUHSC-Shreveport School of Medicine has no implicit bias training in place for the first year medical school curriculum. Preliminary Data suggest there is a need for this training due to both its absence at our institution and the lack of understanding of what implicit bias is and how it can hinder the field of medicine. Using two different surveys, one for minority students and one for the general student body, we hope to make a connection between implicit bias training and its impact on student life. Specifically, the amount and intensity of implicit bias training given at medical schools and the support felt by minority students and the skills gained by the remainder of the school. Based on the data collected, we wish to apply the most compelling diversity training to our institution to create a more welcoming space with the hope of changing the culture that exists for minority medical students in Shreveport, LA.

Incorporating the Science of Learning to Improve Satisfaction with Student Peer Tutoring Program

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Medical Student
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Lamar Martin, MSEd
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University of Miami Leonard M. Miller School of Medicine

The Academic Societies program at the University of Miami Miller School of Medicine is a collaborative effort between students, faculty, and administration to encourage peer teaching, leadership development, and community service. One key service, the Peer Tutoring Program, promotes student volunteerism through peer-to-peer tutoring. Recent programmatic enhancements included tutor skill development, using science of learning techniques. Volunteer tutors are approved after meeting academic criteria and completing training led by our academic enrichment specialist, and are then matched by student program leaders with tutees, using Google forms. For over five years, program evaluation through surveys using Likert scale questions from “strongly disagree” to “strongly agree” found high satisfaction and improved academic self-confidence among participants. With new additions this year, tutors are being surveyed to assess their utilization of the science of learning techniques and satisfaction with the addition of training for their own personal development. This program is a low-resource, high impact service that can be easily replicated at other medical schools.
Individual Student Wellness Tracking: Mid-Year Evaluation of M1 Student Well-Being

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Martin Huecker, MD  
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Jenna Rogers, MPH  
Student  
University of Louisville School of Medicine

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Director of Medical Student Affairs & Wellness  
University of Louisville School of Medicine

As workload increases during medical school, burnout increases, empathy decreases, and depersonalization sets in. Students often develop poor sleep and exercise habits and even mental illness, contributing to decreased academic performance. In response, medical schools are being more intentional in addressing student well-being by incorporating wellness and supplemental learning into the curriculum. Unfortunately, this often results in low participation by those who need closer monitoring. Instead of a “one size fits all” approach, a more individualized assessment of student well-being is needed. The Individual Student Wellness Tracking project at ULSOM monitors student well-being longitudinally. A daily nine-question survey was administered to M1s to evaluate quality/duration of sleep and schoolwork, emotional/mental health, engagement with friends/family, participation in self-care and other tasks, and nutrition. A final question asked whether students had an urgent need to speak with someone in the next 24 hours (mental health, academic help, etc.). This poster will report observations of individual behaviors and how aggregate M1 class data varies with curricular demands.

Lack of Manpower--Tailoring an Advising Program with Minimal Resources

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Lisa Shah-Patel, MD  
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University of Arizona College of Medicine-Phoenix

Given the non-uniformity and time/financial constraints of advising programs, we propose a myriad of tailorable programs/resources that are useful with minimal updates, thus being attractive to smaller programs and those lacking robust advising teams.

For MS1s, an opportunity to be part of a Specialty Newsletter team presenting different specialties while having the unique chance as an MS1 to interview attending faculty is an easily implemented program. MS2s can explore and share 2 specialties of interest with their advisor by completing an on-line learning module form focusing on specialty specifics (step score range, salary/lifestyle). Another program is the implementation of a “Big Sib/Lil Sib Program” in which an MS3 is paired with an MS4 applying to the field which the MS3 is interested. An ERAS guide and on-line advisor presentations reviewing CVs, letters of recommendations, and personal statements, are useful tools for MS4s requiring only minimal changes as updates occur.

Overall, we plan to showcase programs and resources advising programs can utilize and implement to best guide students into becoming successful individuals in medicine both personally and professionally.
Marshall Medical Outreach: Student Run Clinic Supporting the Local Homeless Population

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OSR Representative  
Joan C Edwards School of Medicine at Marshall University

Sam Kaplan  
OSR Representative  
Joan C. Edwards School of Medicine at Marshall University

Marshall Medical Outreach (MMO) is a student-led free mobile health clinic that takes place once per month at the local Trinity Episcopal Church. Starting in 2011, by medical students, the purpose of MMO is to provide medical care for the homeless and people in need in our city. Under the supervision of Dr. Charles Clements MD, the goal of MMO is to establish primary care as well as take care of any other medical problems. In addition to over-the-counter medications, prescriptions are filled, free of charge. An eye screening station was added and ran by students in the ophthalmology interest group. The patients are referred to our student ran Ophthalmology clinic on the following Tuesday and provided free reading and prescription glasses to meet their needs. Additional services such as clean needle exchange and counseling have been added to address the harrowing opioid epidemic in the heart of WV. Through this program, we are striving to help lessen the multi-faceted burdens that are affecting not only our homeless and at-risk population, but also make an impact on the region as a whole.

Match Watch: Using Principles of Preventive Medicine to Improve Match Outcomes

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We will describe efforts to advise, track and advocate for students in the Match. We will reveal the resources we use and the systems in place to help our students who are at highest risk. We will provide checklists and tools to recreate this at other institutions.
Medical Student Wellbeing: Community Building Through Team Based Competition

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Medical Student  
Vanderbilt University School of Medicine

A growing body of research in learning theory has shown that students learn best within communities. In response, institutions have developed learning communities and wellness programs. A major component of these wellness programs and learning communities include events that foster inter-community teamwork and time away from academic commitments. “College Cup” is a school-wide event at Vanderbilt that comprises the four learning community “colleges,” as well as student partners, faculty participants, and staff. It is an annual event that promotes friendly competition in areas of service, sports, cooking, writing, and more. Attendance is high. It is an event that unites the entire school body. We contend that such an event elevates the mission of community in the medical school and expands on it by including participation from the student’s support system. Authors intend to show the impact of the event as well as the diversity of attendance. A brief cost analysis will also be provided. Further, using data from survey analysis we will show relevant outcomes and steps forward, including impact on student wellness and suggestions for implementation at other institutions.

Medical Students as Teachers: Assessment of Evidence-Based Study Strategies in Medical Education

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University of Miami Miller School of Medicine

Medical Students as Teachers (MSAT) is a student-led science of learning teaching assistant (TA) program at the University of Miami Miller School of Medicine. The goals of MSAT are to facilitate first year medical students’ transition to medical school by educating students and providing student teachers with early exposure to science of learning principles and practice with implementing evidence-based learning strategies, developing curriculum and instructional resources, and providing formative feedback. MSAT developed short instructional videos about the evidence-based study strategies (e.g., retrieval practice, spaced, practice, varied practice) and created small group workshops to aid first-year students in developing these learning strategies. Workshops included hands-on instruction and feedback on how to implement evidence-based study strategies, how to develop study schedules to address time management, and how to utilize retrieval practice by creating self-made questions from their classes. Based on anonymous student survey responses, the majority of students stated that MSAT guided students in applying self-regulated, active learning strategies to their coursework.
Medical Students’ Confidence Counseling Patients and Educating Colleagues about PrEP: National Survey

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Chair & Associate Professor
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Although effective and safe, the use of PrEP for HIV prevention is low, a reported reason for which is low rates of physicians recommending PrEP. Recent work found 94% of conversations about PrEP were initiated by patients. We present a nationwide, cross-sectional survey of students in US allopathic (MD) and osteopathic (DO) programs about their confidence counseling patients about PrEP, educating colleagues about PrEP, and caring for a patient living with HIV. A total of 902 students, 586 (65%) in MD and 316 (35%) in DO programs were surveyed. Overall, 88.8% indicated awareness of PrEP. M4 students felt most confident in all 3 areas compared to M1s (P<.001) and M2s (P<.001). Lesbian, gay, or bisexual identity was also associated with higher confidence in all 3 domains (all P<.001). Finally, students who received education about PrEP in medical training reported higher confidence compared to those who had not (all P<.001). No differences were found between the 2 types of medical training. This is the first, national survey of medical students regarding confidence related to PrEP. Ensuring future physicians are prepared to prevent HIV in the biomedical prevention era is imperative.

Mentorship and Specialty Exploration in the Pre-Clinical Years: A Student Organization Approach

Ushasi Naha, BA
OSR National Delegate for Community & Diversity

The University of Illinois College of Medicine (UICOM) Mentors Program is a student organization that aims to expose students in pre-clinical years to a variety of medical specialties as well as provide early integration of the basic sciences they experience in the classroom with clinical skills. Interested first and second-year students are matched with a resident or fellow from over 23 specialties. Students have the opportunity to shadow, receive feedback on their burgeoning clinical skills and translate experience into a formal write-up that is presented at a poster session. This program arose from student interest, and it has had positive response which is illustrated in positive response from student surveys. We anticipate the description of UICOM's organization will benefit the medical education community at large and act as a model for other institutions who want to create a program to encourage mentorship and specialty exploration for pre-clinical students.
Mind Full to Mindful

Paulina Mazurek, MA
Director of Wellness and Professional Formation
UT Health San Antonio

Joshua Hanson, MD, MPH
Associate Dean for Student Affairs
UT Health San Antonio Long School of Medicine

Distressed medical students can experience emotional exhaustion, sleep problems and symptoms of depression and anxiety. Evidence suggests mindfulness practice can assist students address physiological, psychological, and sociological challenges. Mindfulness meditation is a practice that acknowledges thoughts, sensations, and distractions, while focusing one’s attention on the present moment without judgement (Kabat-Zinn, 1994). A mindfulness practice has been found to improve symptoms of anxiety and depression, increased empathy, and improve focus, sleep and promote healthy decision-making. Headspace is a mobile application that guides users through the essentials of meditation and mindfulness by offering a library of guided meditations, animations, articles, and videos. The Long School of Medicine partnered with Headspace to offer 100 students (MSI – MSIII) a complimentary annual membership to Headspace in March 2019. After seven months, students who used the app consistently reported decreased stress and improved sleep. Educating students on the relevant benefits of mindfulness and offering them opportunities to practice is an effective way to support medical student wellbeing.

Multi-pronged Approach to Connecting Students to Mental Health Care on Campus

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OSR
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OSR
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In the 2018-2019 academic year, medical student government worked with the Practice of Medicine course director to provide small group introductions to burnout. This session was led by counseling and student health staff. We assessed the impact of this session on students’ perceptions of burnout and mental health resources on campus.

While certain objectives, such as educating medical students about physician burnout, were met, surveys demonstrated again a student demand for a more personal introduction to mental health care appointments. By reassessing this need, administration and students implemented a plan for the 2019-2020 academic year. This plan was multi-pronged: 1) mental health counselors will proactively reach out to students via lunch talks normalizing stress and burnout during at least two key times of high stress 2) reaching students via a Canvas Wellness page that lists existing resources and 3) providing the Mayo Well-Being Index to students for self-assessment.

During the academic year, we plan to assess this new approach by surveying for feelings of burnout, perceptions of mental health resources, and quantifying mental health resource use on campus.
Medical student-run health fairs and clinics are integral programs for medical students and faculty both as health services for disadvantaged patients as well as educational programs. Medical schools across the country run their own health-based community services, but there is no forum to promote collaboration between schools. The National Health Leadership Consortium (NHLC) was created to bridge this gap by promoting communication between student organizations nationally. The NHLC serves as a resource for students interested in establishing health projects at their schools, modeled after the Department of Community Service Model (DOCS) at UMMSM. The NHLC has worked with medical schools in Florida to create the Florida Clinics Collaborative to share local resources and set up conferences for research and project collaboration. On the national level, NHLC has created an open online forum for schools to join where students can exchange ideas and resources. The NHLC has partnered with schools to increase student and physician recruitment, expand existing clinics, modify EMRs and do need based assessments of the community.

New Student Orientation: Promoting Wellness from Day One

**Emily Walvoord, MD**
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Indiana University School of Medicine

**Rolando Gerena, BS**
Third Year Medical Student
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**Emma Ross, BS**
Second Year Medical Student
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**Rebekah Roll, BS**
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**Kristen Heath, MS**
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Assistant Dean of Student Affairs
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It is imperative to incorporate programming that fosters wellness and promotes resiliency in medical school training. By starting the medical education journey with intentional programming that makes student wellness a priority, medical schools can better set the stage for a successful future for their students. Much of IUSM’s statewide new student orientation is planned around the eight dimensions of wellness. During the statewide orientation, new students participate in activities such as service projects, trust and conflict exercises, and wellness breakout sessions (similar to conference sessions these “breakouts” allow students to sample activities based on the eight dimensions of wellness). The highlight of this year’s orientation centered on the breakout sessions, which were created by the schools’ Wellness Coalition and facilitated by current students. During this interactive workshop, attendees will learn more about the IUSM statewide orientation program, the Wellness Model that frames the work, and how to use their existing resources as well as designing new programming to create comprehensive wellness programming for their own institution.
Outcomes from a First Year Learning Community

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Medical Student  
University of Kentucky College of Medicine

Trent Goodin  
Medical Student  
University of Kentucky College of Medicine

Topic: Learning Communities are becoming an integral component of many medical schools due to their impacts on wellness, personal development, and community.

Description: The University of Kentucky COM piloted student-led Learning Communities in the 2018-2019 academic year. Prior to the implementation, a survey was completed by the Class of 2021 following their MS1 year. This same survey was completed by the Class of 2022, who were the first class incorporated into the new LCs. The surveys evaluated feelings of belonging and connectedness to various aspects of UKCOM.

Outcomes: There was no significant difference in the feelings of connectedness to other MS1, MS2, MS3, or MS4 students or faculty between the classes. However, in open-ended statements, many students discussed how the LCs increased their opportunity to connect with other groups of students. While we expected to see an objective increase in connectedness, reasons for not seeing a change could be due to the lack of full integration of LCs and navigating the culture shift of implementing the system. We will continue to evaluate responses throughout the year to further assess outcomes following a full integration of LCs.

Peer Assisted Learning: Implementing a New Tutoring Program in Medical School

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Associate Dean for Student Affairs  
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Komal Safdar, BS  
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Assistant Dean for Medical Education  
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Peer Assisted Learning, or PALs, is a combined student and faculty initiated peer tutoring program for all medical students at Virginia Commonwealth University School of Medicine. The poster will describe the four phases of implementation: 1) Reviewing the Literature, 2) Creating the Program Structure, 2) Implementing the Program, and 4) Evaluating the Program.

In the initial research phase, a medical student reviewed existing tutoring programs and learning theories, which assisted in developing the program’s objective and structure. We will share our program’s framework, which can be divided into five categories: the stakeholders of the program, the tutors, the tutees, the scheduling medium, and session formats. Through these categories, we will discuss questions such as: Who should lead the program? How are tutors selected and trained? How are appointments made? What do we consider success? Finally, feedback, solicited from program participants over the course of the semester, will be provided. Reported secondary benefits such as the formation of peer mentor relationships, formation of peer groups after failing exams, and impact on perceived student well-being will be included.
Personality Predictors of Medical Student Success

Katrina D'Aquin, BA, MS, PhD
Director Career Advising
Tulane University School of Medicine

Michael Woodson, BA, MS
Director of Admissions
Tulane University School of Medicine

Efforts to predict medical student success, defined as performance on the Step 1 US Medical Licensure Exam (USMLE), using students' Medical College Admission Test (MCAT) scores demonstrates that MCAT scores account for less than 20% of the variance of Step 1 scores. This leaves much variance in Step scores for which to account. An additional component which may be an important consideration is the potential students' personality type. Researchers discovered relationships between personality types and student success in various healthcare fields including pharmacy, dentistry, and obstetrics-gynecology.

We add to this literature by determining whether medical students' personality preferences add to the prediction of students' USMLE exam scores, over and above their MCAT scores and GPA. A mediation analysis demonstrated that students' preference for sensing as measured on the MBTI ® was a predictor of Step 1 performance, over and above the predictive power of MCAT scores. Results are discussed in the context of implications of admissions decisions.

Perspectives: Designing an Effective Medical School Academic Advising Program

Lauren Henninger
Lead Advisor
Indiana University School of Medicine

Abigail Klemsz, MD, PhD
Assistant Dean, Academic Advising and Associate Professor of Clinical Pediatrics
Indiana University School of Medicine

Scott Davenport
Director of Student Affairs
University of Minnesota Medical School

Addy Irvine, MA
Academic Advisor
University of Minnesota Medical School

A recent development in medical schools, academic advising has existed in higher education for decades. Being intentional in designing and implementing academic advising in the unique medical school setting is key to its success. In this session, presenters from two large medical schools will discuss the ways they have integrated professional (non-MD) academic advisors into their communities to enhance student support. While the structures are different at each of the schools, the role the Academic Advisor/Lead Advisor plays in a student's medical education is the same at both institutions. Each advisor is assigned a cohort of students they advise from matriculation through graduation and facilitate the students' progression toward completing their MD degree. Doing so requires significant collaboration with students, faculty, and other departments throughout the medical school. In addition to understanding two unique models, we will use discussion and activities to learn about the integration of advising programs into existing structures and lessons learned. Participants will also take away an action plan of how they can integrate academic advising into their own medical schools.
Physician Education Debt and the Cost to Attend Medical School

Jay Youngclaus, MS  
Senior Education Analyst  
Association of American Medical Colleges

Julie Fresne, MA  
Sr. Director, Student Financial & Career Advising Services  
Association of American Medical Colleges

This poster will highlight current trends and data in both the cost to attend medical school and physician education debt. It will also highlight valuable resources for medical school administrators to use with students to educate them on borrowing and paying back strategically.

Pilot Active Bystander Training to Empower Medical Students to Address Instances of Bias

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University of Rochester School of Medicine and Dentistry

Michelle Benassai, BA  
Student  
University of Rochester School of Medicine and Dentistry

Mahima Iyengar, BS  
Student  
University of Rochester School of Medicine and Dentistry

Michelle Liu, BA  
Student  
University of Rochester School of Medicine and Dentistry

Introduction: Instances of bias are common in medicine, however intervening in these situations – being an active bystander – is rarely addressed in medical education. This workshop was created to prepare pre-clinical students to be better active bystanders for their colleagues and patients.

Methods: The workshop was split into 2 one-hour small group sessions and facilitated by faculty and students in their clinical years. Students established ground rules, reviewed definitions, role played cases, and reflected. Cases were based on current students’ clinical encounters.

Results: Quantitative post-participation survey results (N=95) revealed that the majority of students (85%) rated the workshop positively and agreed with the importance of active bystander training. Qualitative evaluations focused on facilitation and ranged from the value of student facilitators to facilitator overreach. Discussion: Active bystander training may better prepare students transitioning into their clinical years to work with diverse patient care teams and patient populations. Future directions include both workshop standardization and prospective follow up to further evaluate workshop effectiveness.
Planting the Seeds Early: Teaching Motivational Interviewing Skills to Peer Mentors

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Courtney Lewellen, MS  
Lead Advisor  
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Antwione Haywood, PhD  
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Student  
Indiana University School of Medicine  

Rebekah Roll, BS  
Medical Student  
Indiana University School of Medicine  

Peer mentoring is an important component in the transition to medical school at the Indiana University School of Medicine. In 2019, two advisors collaborated with the school's Peer Mentoring Committee to develop a novel curriculum for incoming Peer Mentors that would teach transferable skills to future physician and benefit to the mentor-mentee relationship. With this in mind, Motivational Interviewing was selected as an effective medium to mold the communication skills of the incoming Peer Mentors. The session will discuss the factors behind this decision, an overview of the mentor curriculum, and future plans.

Pride in Louisiana; LGBTQIA+ patient perspectives on healthcare accessibility and acceptability

Meagan Tinsley, BS  
OSR Alternate  
Louisiana State University Health Sciences Center  
Shreveport School of Medicine  

Using a simple 10 question survey administered at the annual Pride festival in Shreveport-Bossier City as well as at various LGBT friendly centers, we hope to hear from LGBTQIA+ identifying individuals living in Northwest Louisiana about their experiences with healthcare, both friendly and alienating. While there is some data concerning LGBT communities in healthcare in larger cities throughout the South, such as in New Orleans and Nashville, region specific data for LGBT patients in northwest Louisiana is scarce. Data from other areas of the country suggest that patients who are able to disclose their sexual orientation and gender identity are able to receive better healthcare specific to their needs, including those at increased risk for HIV and certain cancers. Preliminary data suggests certain providers are used by many in the LGBT community due to their accessibility and acceptance with those specific providers. Our aim is twofold. We hope to provide regional healthcare workers with the ability to improve the care of their patients and improve the quality of care given by healthcare workers to LGBTQIA+ identifying individuals.

Professional Identity and Education: Who Wants a Piece of PIE?

Alice Chuang, MD, MEd  
Assistant Dean for Student Affairs  
University of North Carolina, School of Medicine  

We will describe efforts to teach professionalism, including failed attempts and our current plan. We will discuss our needs assessment, lesson development, structure and outcomes. We will provide checklists and tools to recreate this at other institutions.
Professional Identity and Education: Who Wants a Piece of PIE?

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School of Medicine

A recent development in medical schools, academic advising has existed in higher education for decades. Being intentional in designing and implementing academic advising in the unique medical school setting is key to its success. In this session, presenters from two large medical schools will discuss the ways they have integrated professional (non-MD) academic advisors into their communities to enhance student support. While the structures are different at each of the schools, the role the Academic Advisor/Lead Advisor plays in a student's medical education is the same at both institutions. Each advisor is assigned a cohort of students they advise from matriculation through graduation and facilitate the students’ progression toward completing their MD degree. Doing so requires significant collaboration with students, faculty, and other departments throughout the medical school. In addition to understanding two unique models, we will use discussion and activities to learn about the integration of advising programs into existing structures and lessons learned. Participants will also take away an action plan of how they can integrate academic advising into their own medical schools.

Promoting Diversity and Equity for Nearly a Half Century: A Successful Pipeline Model

Linda James, MS  
Assistant Dean for Student Diversity and Inclusion  
Medical College of Georgia at Augusta University

Medical schools continue to attract and enroll more racially and ethnically diverse classes; however, there remains a need for diversity pipeline program to ensure a diverse healthcare workforce. Many medical schools struggle with developing and sustaining pipeline programs and pathways that ultimately contribute to workforce diversity and improved health equity and may benefit from the lessons learned in programs that have been successful in this regard.

In summer 2020, the Medical College of Georgia (MCG) will celebrate 50 years of preparing students who are underrepresented in the health professions for careers in medicine. The program began in 1970 with a pilot initiative for African American high school and college students. Each summer, SEEP offers enrichment to 55 students, providing intense coursework, MCAT prep, and other pre-health profession preparation. SEEP has served approximately 2400 students and about 80% have entered medicine and other health professions.

Effective program strategies must include:
Support from institution’s leadership that trickles down  
Consistent evaluation  
Internal and external collaboration  
Effective methods for measuring outcomes and tracking
Promoting first-generation college graduates’ success in medical school: An online toolkit

Hyacinth Mason, PhD, MPH, CHES
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Albany Medical College

Toshiko Uchida, MD
Associate Professor of Medicine and Medical Education, CGEA Representative to the AAMC UME Section Steering Committee; Chair of the UME First-Generation College Graduate Online Resource Toolkit Work Group
Northwestern University Feinberg School of Medicine

Alejandra Casillas, MD, MSHS
Assistant Professor of Medicine, UCLA First Gen Advisory Board, First Gen Faculty Advisor
David Geffen School of Medicine at UCLA

June Altholz, MD
National Delegate for Medical Education at AAMC’s Organization of Student Representatives
Uniformed Services University of the Health Sciences

Vicki Sapp, MD
Director for Student Engagement, Diversity and Inclusion; Assistant Professor
Geisinger Commonwealth School of Medicine

Medical students who were the first in their families to graduate from college bring unique strengths to medical school. They often possess highly desirable traits for a physician such as grit, self-determination, and innovative thinking as well as important insights into the complex health disparities facing the U.S healthcare system. First generation college graduates (FGCG) and others who come from backgrounds with limited exposure to medicine have assets they bring to medicine as well as invisible yet very real challenges that do not affect their continuing-generation counterparts. In 2018, the Association of American Medical Colleges (AAMC) introduced a First-Generation College Student Indicator and in 2019, the Undergraduate Medical Education (UME) Section of the Group on Educational Affairs (GEA) convened a work group to develop an online toolkit of resources for medical schools to support and celebrate their FGCG students. This poster will outline the process of toolkit development and provide an overview of the resources it contains.

Promoting first-generation college graduates’ success in medical school: An online toolkit

Mytien Nguyen, MSc
MD-PhD Student
Yale School of Medicine

Medical students who were the first in their families to graduate from college bring unique strengths to medical school. They often possess highly desirable traits for a physician such as grit, self-determination, and innovative thinking as well as important insights into the complex health disparities facing the U.S healthcare system. First generation college graduates (FGCG) and others who come from backgrounds with limited exposure to medicine have assets they bring to medicine as well as invisible yet very real challenges that do not affect their continuing-generation counterparts. In 2018, the Association of American Medical Colleges (AAMC) introduced a First-Generation College Student Indicator and in 2019, the Undergraduate Medical Education (UME) Section of the Group on Educational Affairs (GEA) convened a work group to develop an online toolkit of resources for medical schools to support and celebrate their FGCG students. This poster will outline the process of toolkit development and provide an overview of the resources it contains.
Protecting & Promoting Student Health: How to build a comprehensive, student-led well-being program

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Jonn Kalkman  
Medical Student  
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Program Coordinator  
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University of Minnesota Medical School

Maggie Plattes  
Medical Student  
University of Minnesota Medical School

In light of high physician and student burnout and suicide rates, it can be said that medical practice represents a threat to physician and trainee well-being. In recognition of a need to respond, the University of Minnesota Medical School (UMMS) partnered with its affiliated Center for Spirituality and Healing (CSH) to develop a comprehensive, student-led well-being program based on 6-dimensions of well-being. Through an experiential simulation of the 6-dimension program process, participants will learn about the structure and development of this program, and how it may inform related efforts at their home medical schools. Specific outcomes from the UMMS program will also be shared, as well as future considerations for integrating well-being programming into medical school learning communities.

Reflective essays and R2C2 feedback to promote Professional Identity Formation in medical students

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Tanja Adonizio, MD  
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Geisinger Commonwealth School of Medicine

Alexa Bolock  
MS3  
Geisinger Commonwealth School of Medicine

In recent years there has been an increasing focus on promoting professionalism and Professional Identity Formation (PIF) in medical students. One method of encouraging PIF is for learners to write reflective essays periodically throughout medical school, thus supporting students to become active participants in their own PIF. Medical educators can utilize personal reflective essays to support PIF in the following ways:

1. Encourage students to establish habits of self-reflection
2. Organize each student’s reflective essays in a portfolio so that students and advisors can follow development over time.
3. By providing feedback on reflective essays using the R2C2 feedback model.

With this in mind, this session aims to encourage educators to self-reflect by writing their own brief reflective essay. Afterward, attendees will learn how to use the R2C2 model to give and receive feedback on their essays. The R2C2 model is intended to spark a collaborative dialog to facilitate the learner’s self-reflection, active learning, and self-improvement. It is hoped that attendees will apply the R2C2 model to many other feedback scenarios within medical education.
Representing Oklahoma and Diversity: A Conference to Increase Minority Medical School Applicants

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OU College of Medicine

Stephanie Lee, BS
Medical Student
University of Oklahoma College of Medicine

Danial Gebreili
Interdisciplinary Education Liaison
The University of Oklahoma Health Sciences Center

Uzma Sandhu
Medical Student
University of Oklahoma College of Medicine

The ROAD Conference was a collaboration between administration and students to create a program addressing the challenges that impact an underrepresented minority student’s desire to pursue a medical career. All attendees were exposed to different activities that provided both application and engagement support. A survey (response rate 78.7%) was done to determine the effectiveness of the program through perceived level of knowledge (graded on a 100 point scale) of academic, logistical, and financial barriers before and after the conference. The program successfully addressed insufficient knowledge regarding application to medical school (mean increase in knowledge 23.67 points). Attendees saw a mean increase of 20 points in knowledge of minimum required scores and GPA. Attendees felt logistical barriers were best addressed (mean increase 46.32). Financial barriers were also well addressed (mean increase 27.81). The largest knowledge gap prior to the conference was availability of financial aid resources (pre-conference mean = 37.04), which increased by 41.17 points. Finally, personal student testimonials revealed one important value that couldn’t be measured objectively - hope.

Residents Mentoring Students: A Personal Statement Review Workshop

Emily Wasson, MD, MPH
Anesthesiology Resident
UT Health at San Antonio

As a part of Veritas, a structured mentorship program, residents are recruited each year to participate in various workshops and panels. From this pool of residents, eight were available for an in-person review session. Five were available for electronic review so students on away rotations could participate. All fourth-year medical students were invited to attend. Thirty-five fourth year students participated in the in-person review and seven had electronic reviews. Each student at the in-person session had their personal statement reviewed by at least one resident and additional reviews if desired. Reviews included overall feedback on content and structure as well as grammar and word choice.

Verbal feedback was overwhelmingly positive. Students reported that review by someone who had recently been through the application cycle provided valuable feedback and reassurances prior to submission. Residents who participated enjoyed being able to help students through a process they remember as stressful and look forward to being available in subsequent years. Future iterations will include a training session for residents and a formal post-event survey to more fully characterize impact.
Rush University Student Wellness Association (RU Well)

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Medical Student  
Rush Medical College of Rush University Medical Center

Bryan Rosenberg  
Medical Student  
Rush Medical College of Rush University Medical Center

The Rush University Student Wellness Association (RU Well) strives to support Rush students in their quest to lead healthy, balanced lives. It is the first wellness organization created for students, by students, currently with 100+ members and growing. Medical school is undeniably difficult, and stressors will amplify as students move from the classroom to the hospital. Recent studies show high levels of depression and anxiety in 1st- and 2nd-year students and increasing burnout rates. RU Well aims to combat this through three avenues: Hosting expert-led sessions focused on a range of topics related to health and wellness in order to teach students practical skills in the context of a busy medical school education. Implementing a curriculum that integrates the RU Well structure into the class schedule of each incoming medical student. Working with hospital administration to ensure that Rush students receive a comprehensive wellness experience from the day they join the Rush community.

Second Year Medical Students Mentoring First Year Medical Students: A Formal Program

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Medical Student  
UT Health San Antonio

Madison Chapman, BS  
Medical Student  
UT Health San Antonio

Much of the current literature regarding mentoring of medical students reviews the role of the physician mentor, while literature reviewing peer mentorship is minimal. In order to facilitate medical students’ transition into medical school and to encourage both academic and personal wellness, effective support through mentorship is important. We provide a description of the peer-mentorship program at our institution (UT Health San Antonio).

Our institution implements a peer mentorship program (Veritas) that utilizes selected second-year medical students (Veritas Peer Mentors; VPAs), in adjunct to faculty mentors, that mentor the first-year medical students. The VPAs help facilitate MS1s transition into medical school by leading both an off-campus retreat and small group discussions throughout the year that build meaningful relationships among students, promote both emotional and academic wellness, and provide career and professional guidance.

We analyzed survey data to evaluate the effectiveness of peer mentorship as a complement to physician mentorship, concluding that Veritas is a valuable resource for medical students, as it creates a supportive climate that promotes wellness.
Sexual and Gender Minority Affinity Groups at US Medical Schools: A Needs-Assessment

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Chicago Medical School, Rosalind Franklin University of Medicine and Science

Shana Zucker
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Tulane University

Timothy Keyes, BA
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Stanford University

Rishi Goel
Fourth Year Medical Student
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Justin Jia
Medical Student
Stanford University School of Medicine

Affinity organizations to support sexual and gender minority (SGM) students is one effective approach to promote minority inclusion at academic medical centers. This study evaluated the needs and interests of medical students towards establishing a national organization for SGM students. US allopathic and osteopathic students were invited to complete a 33-item survey. A total of 734 students responded to the survey, representing 75 institutions: 49.2% identified as SGMs. SGM respondents were dissatisfied (61%) with the inter-institution interactions of their school’s SGM community, and 90% felt that their school’s SGM community would benefit from an intercollegiate SGM medical student group. SGM and non-SGM respondents reported dissatisfaction in several areas regarding SGM resources offered by their school, including education, mentorship, and advocacy. Finally, SGM respondents reported being out to peers (90%), mentors (47%), but only 28% planned to be out in GME applications. These data suggest SGM trainees benefit from affinity organizations, but few felt supported by institutional climate, and indicate a need and desire for a national, intercollegiate SGM student organization.

Shaping the Future of Drainage Catheters

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Medical Student (MS3)
LSU Medicine

Ross Bonnot
Medical Student
LSUHSC Shreveport

Colton Toups
Medical Student
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Michael Ninh
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LSUHSC Shreveport

Drainage catheters have been used for thousands of years in order to treat a variety of conditions. In 460 BC, Hippocrates used “hollow pencils” to drain and treat empyema. In the first century, Aurelius Celsus used conical metal tubes to drain fluid from patients with ascites. Throughout the Middle Ages, incision and drainage through catheters were used for various abscesses and cysts. As we approach the 21st century, doctors began using image-guided techniques to percutaneously insert catheters and tubes for drainage of abscesses, pneumothorax, and other pathologies. With the 2017 invention of Butterfly IQ, a phone connected portable ultrasound, the medical community is reminded that there is always room for improvement for standard of care in developing countries. One of the most challenging obstacles we face with draining catheters is the need for follow up and the efficiency of drainage, especially with complications requiring repeat intervention. The focus of this research is to address how catheters can be shaped to maximize the effectiveness of drainage and to significantly reduce the need for costly follow up, particularly in resource poor countries.
Step 1 Advising: A Near Peer Mentoring Program

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Assistant Dean Student Affairs  
University of Colorado  

Catherine Waymel, BA  
Medical Student  
University of Colorado School of Medicine  

The Step 1 exam serves as a challenge and a pivotal step in current medical education. 4th year medical students held elective advising sessions for MS2s, with the intent of preparing them for Step 1 by offering tailored advice regarding study practices and easing anxieties.

Step 1 advising was offered to all MS2 students (184). In total, 78 students signed up for an advising session with a MS4 advisor. They selected their advisor based on a bio that included study style and study start time. All fourth-year advisors received approval by the SOM and received basic guidelines for instruction, which included disclosing their Step 1 score. 36 MS2 students completed a post-advising survey.

100% found the advising session helpful. 35 noted an increase in their confidence to study for Step 1. Themes for the strengths included specific study advice tailored to the students’ study history, as well as a study schedule for the months leading up to Step 1 (18), advisor characteristics of positivity, supportiveness, and knowledge (10), review of resources (8), and hearing how the advisors studied (7).

Strength in Shared Experiences: Applying Restorative Justice for Resilience and Community-Building

Ashley Wehrheim  
M2  
Rush Medical College

Kaitlyn Wehrheim  
M2  
Rush Medical College

Medical education introduces new stressors to students that can lead to burnout and interpersonal conflicts. To combat this problem, Rush Medical College applies the framework of Restorative Justice in both a student-led organization and in its curriculum. Students participate in team-building circles to help address concerns within the learning environment. The focus is to create an effective, collaborative community where everyone can learn and build resilience. This workshop will focus on introducing the concept of Restorative Justice, simulating the experience of a team-building circle, and modeling how these activities can be brought back to your own medical school.

Student Ambassador Program: Enhancing professional learning for student service representatives

Elizabeth McElhinney, MEd  
Director of Pre-Matriculation Programs  
Medical Student Admissions

Kiersten Hallquist, MEd  
Student Services Coordinator  
The Robert Larner, M.D. College of Medicine at the University of Vermont

The University of Vermont’s Larner College of Medicine Student Ambassador Program: Enhancing professional learning for medical and graduate student service representatives.

Historically, medical student ambassador programs across the country have been managed and supported by medical student admissions offices. Although the UVM Larner College of Medicine SA Program initially followed suit, launching under the purview of the Admissions Office, it quickly developed to provide a broader scope of engagement opportunities for our medical students beyond those normally available during the medical student application season. Now, in addition to involvement in admission events, students actively participate in college-level events throughout the year, including medical alumni events, grand rounds panels, student training opportunities, and public College-wide events such as White Coat Ceremony and Match Day. The program is now a successful example of cross-collaboration among diverse departments and provides invaluable student training and access to our Medical Admissions, Medical Communications, Medical Student Education, and Medical Alumni teams.
Student Perceptions of Support In A Redesigned Pre-Clinical Curriculum

Mitchell Naveh, BS  
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Wayne State University School of Medicine

Noor Khan  
WSUSOM OSR Delegate  
Wayne State University School of Medicine

Wayne State University School of Medicine (WSUSOM) recently overhauled its pre-clinical medical education, with the incoming class of 2022 being the first cohort of students to experience the redesign. Pre-clinical education was condensed to 18 months, and the organization of content is now systems-based, with specialized NBME exams as the primary means of assessment.

The transition into medical school and learning high volumes of information for exams is stressful enough as it is for medical students (Ludwig et al. 2015), but adding on a novel curriculum design can pose more challenges for students (Yengo-Kahn, Baker, and Lomis, 2017). Many medical schools have implemented curriculum change to better educate their students, but there is limited literature on the impact of those changes on student wellness and perceptions of support, and even less information from a school with a large student body, like WSUSOM.

This poster will discuss the results of a short Qualtrics survey completed by the first and second cohorts of medical students in the new curriculum at WSUSOM, and their perceptions of academic, administrative, and peer support.

Student Self-assessment as a Tool for Building Advising Relationships

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Rush Medical College

Rahul Patwari, MD  
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Rush Medical College of Rush University Medical Center

Joanna Kuppy, MD  
Assistant Professor of Pediatrics  
Rush Medical College of Rush University Medical Center

Meeting accreditation requirements and student expectations for advising, self-directed learning, and wellness programming is a perennial challenge for almost every medical school. We have addressed these thorny issues by pairing a brief self-assessment together with required faculty advisor meetings. The self-assessment we developed included three components: self-directed learning, emotional wellbeing, and professional identity development. Students are asked to identify learning needs and improvement strategies as well as reflect upon their wellness and developing professional identity. We expect that this pairing will create a more structured conversation and productive experience allowing greater student engagement with their faculty advisors. These self-assessments paired with the in-person meetings with advisors serve to facilitate further connection with their advisor, providing an important additional mechanism for detecting students’ need for academic and emotional support.

Student Wellness at GCSOM

Tanya Morgan, MS  
Assistant Director, Center of Learning Excellence  
Geisinger Commonwealth School of Medicine

Student wellness is a topic of major significance as the medical community begins to acknowledge the impact medical education has on the wellbeing of medical students and residents.
Taking Steps to Improve Medical Student Wellness

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P. Melissa Hernandez, MA
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Medical Student
University of Illinois College of Medicine

Nitin Sukumar, MS
Medical Student
University of Illinois College of Medicine

A 14-week physical activity intervention focused on increasing daily step counts of medical students enrolled at the University of Illinois at Chicago was designed and implemented by two first-year medical students (AN and MS). Most wellness programs targeted at medical students focus on mental health, and there are few such programs for physical activity. Medical students typically do not meet physical activity or daily step recommendations. This email-based intervention set an initial weekly goal of 6,000 steps a day, increasing by 500 steps/day each week until 11,000 steps/day was reached. Students self-reported daily steps online. A weekly leaderboard listing participants with the highest step counts was published, and participants received biweekly, social cognitive theory-informed support emails. Web-based, social, peer-lead physical activity interventions to increase daily step counts are feasible, acceptable, and effective in increasing medical students’ daily step counts.

Telling Their Story: First-Generation Students’ Experiences During their Medical School Journey

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Ashanti Littlejohn, MS
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The purpose of this study was to evaluate the lived experiences of first-generation medical students. Since there is little research available on this population, this study was designed to answer the question, “What are the experiences of first-generation students throughout their medical educational journey?” These experiences were examined in terms of what the specific experiences are and how they related to the students’ successes throughout their medical school journey.
Texas 2 Step: Incorporating Academic and Wellness Concepts in Step 1 Preparation

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Joshua Hanson, MD, MPH
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Dallin Busby, BS
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Medical students are facing pressure to increase USMLE Step 1 scores, partly because of their use in residency applications. This concern is reflected by the volume of available resources for students and is supported by results of recent NRMP Program Directors Surveys (2014-Present). Thus, Step 1 preparation remains relevant in medical education.

Long School of Medicine (LSOM) Student Affairs created a holistic program for student Step 1 Preparation in 2019. This program sought to help students plan for academic and wellness components of their Step 1 dedicated study period. This program, which has had two iterations, includes group workshops, individual consultations, and a framework to assist students’ preparation for the exam. It is delivered in the context of a USMLE Step 1 preparation pathway that pacers a given student’s academic readiness to take the exam and begin clerkships.

This interactive workshop will give participants the tools to understand the Step 1 preparation process, combining administrator and student perspectives. In addition, participants will develop a framework of their own, using session-generated ideas relevant to their campus and student population.

The Baggage We Bring to the Dying Patient: A Teaching Module

Emily Smith, BS
OSR
Mercer University School of Medicine

The need was identified to create a teaching module that: explored the process of death, influenced students during their clinical experiences, and had implications for future practice. Professionals with different backgrounds were interviewed to integrate what they thought were the most important things they have learned over time about death. Backgrounds included ethics, palliative care, and pastoral care. The information was synthesized into a learning module that focused on: recognizing personal biases about death, the basics of advance care planning, and wisdom these experts wished to share. The resulting presentation shared both the information gained from these interviews and about the legal procedures of the process of death in the state of Georgia. Pre and post session surveys indicated that the comfort level of faculty and students with advanced care planning, the death and dying process, and the ability to recognize one’s personal biases about death improved after the module. The goal of this is to start conversations among students so they can explore their knowledge about death and what “baggage” they bring to the patients they treat from their own personal experience.
The Batch Enrollment Process: Working Towards Timely and Accurate Enrollment

Brent McCoy
Senior Education Team Coordinator
University of Missouri-Kansas City School of Medicine

This session will provide an overview of our enrollment process. We will briefly discuss the previous enrollment process and the issues with the previous process. I'll then walk through how we have collaborated with the university Registrar's office to implement the batch enrollment process. This process has helped reduce staff time previously dedicated to communicating enrollment information to our students. This has ultimately helped to ensure timely enrollment and minimize enrollment errors.

The Biography of the "Undecided Student"

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Lead Advisor
Indiana University School of Medicine

Courtney Lewellen, MS
Lead Advisor
Indiana University School of Medicine

Abigail Klemsz, MD, PhD
Assistant Dean, Academic Advising and Associate Professor of Clinical Pediatrics
Indiana University School of Medicine

Physicians and professional advisors alike discuss career exploration and development with students who are processing specialty fit during their medical school journey. According to the AAMC, "there are many variables to consider in a decision as significant as choosing a medical specialty. It's no wonder the process can be daunting." At the IU School of Medicine, career mentoring and exploration is one of the four Mentoring and Advising Program pillars that are discussed in required professional advising meetings. Through this presentation, participants will learn how to coach students to discover their intrinsic career motivations and desires at all levels of advising.

The Child & Adolescent Motivation and Enrichment Program: Enhancing Preclinical Pediatric Education

Jennifer Ferrante, BS, BA
Medical Student
University of Miami Miller School of Medicine

Olivia Neumann, BS
MD Candidate
University of Miami, Miller School of Medicine

Early clinical experiences correlate with increased empathy, basic science knowledge, and comfort with patients. However, pediatric clinical exposure is rarely incorporated into preclinical curricula. To address this, The Child and Adolescent Motivation and Enrichment Program (CHAMP) provides preclinical pediatric exposure and career guidance with volunteering, shadowing, and educational opportunities. CHAMP is a medical student volunteer program designed to enhance literacy, health literacy, and social support in pediatric chronic kidney disease (CKD) patients on dialysis.

Mentors were evaluated in pre- and post-test surveys after six months of volunteer and educational opportunities. 85% strongly agreed that CHAMP helped them gain empathy for patients with chronic healthcare needs, and 65% strongly agreed that CHAMP enhanced their education. There was a significant increase in understanding of CKD prior to (M=2.33, SD=.65) and after volunteering (M=2.92, SD=.90); t(11)=2.24, p=.046. Results suggest that CHAMP provides medical students with meaningful pediatric exposure and professional development, increasing students’ empathy and level of comfort in the clinical environment.
The effectiveness of a formal mentorship program for incoming first-year medical students

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Peer mentorship plays an important role in personal and professional development in medical education. With evidence linking mentorship to a more satisfying career in medicine, the University of Nevada, Reno School of Medicine (UNR Med) implemented a formal orientation and peer mentorship program called MedFIT (Medical Freshman Intensive Transition). This program provides incoming first-year students with exposure to medical school coursework and lecture formats, academic success resources, health and wellness tools, and more. Additionally, students are divided up into teams of three to four first-year students that will work together in various activities throughout their first two years at UNR Med. Each team is then assigned a “Pack Mentor” which is a second-year medical student that will serve as a mentor to these students throughout their first year of medical school. This formal peer-mentorship program has been built into the MedFIT orientation program at UNR Med in order to provide incoming first-year medical students with an established upperclassman mentor that can help to improve their transition into medical school.

The Influence of Social Experiences on Physicians in Training During Their Pre-Clinical Years

Kumail Hussain, BA, MS
Medical Student
The Chicago Medical School

Medical students face numerous challenges while balancing their studies and social lives. Students require an accepting and community-oriented atmosphere to help foster an optimized learning environment that contributes to academic and professional success. Much research has been conducted regarding the components of an optimized learning environment, however, there is a need for data concerning the unique social experiences of the various groups of students. The study investigates the differences in the social experiences of students based on ethnicity/race. Much time is spent studying difficult concepts during the pre-clinical and clinical years of medical school. These findings suggest that students crave a socially stimulating atmosphere that promotes camaraderie which all helps to create an optimized learning environment. There is also a notable difference in the social experiences of students of various races. The results show that social experiences are a vital component in creating a positive learning environment that may help faculty and administrators to develop inclusive communities at their respective institutions.
The Learning Environment Assessment and Feedback (LEAF) Committee

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Katie Houghton, BA, MA, MBA
Project Director
Vanderbilt University School of Medicine

LeAnn Lam, BS
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Kianna Jackson, BS
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Regina Russell, PhD
Professor
Vanderbilt University School of Medicine

In recent years, focus on the clinical learning environments of medical trainees and physicians has grown exponentially. With the growing epidemic of burnout among medical providers and students, there is greater emphasis on improving their learning and working environments.

We intend to showcase the novel approach Vanderbilt takes to elevate the learning environment: The LEAF (Learning Environment Assessment and Feedback) Committee. This group includes hospital and educational leadership, physicians, residents, nursing staff, and medical students. The committee gathers data from human resources, local and national education evaluation, and patient feedback. The data is then presented to primary stakeholders and the medical center through a “report card.” Medical student initiatives like a student-specific feedback platform, bystander training, humiliation feedback, and clerkship specific data are also included.

In this poster, authors will elaborate on the committee, data analysis efforts, the medical center wide “report card”. We will also showcase medical student led initiatives and future steps to improve the learning environment.

The Letter of Recommendation-From the Requestor to the Reference

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University of Arizona

Lisa Shah-Patel, MD
Director, Career and Professional Advising
University of Arizona College of Medicine-Phoenix

Mary Frances Kuper, MEd
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Letters of recommendations (LOR) are a vital part of the medical student and residency application process, but who trains students in the etiquette of asking and what to provide to their references? In turn, who trains the references on how to construct a strong LOR? There are no “official” guides for either of these important processes.

Coaching students to inform references as early as possible, build professional rapport, and request the LOR in person builds a positive pro-active relationship. Providing the reference with a CV, information on the program, specific accomplishments that highlights why the student is competitive for the placement and offering to draft the letter for further discussions with the requestor can facilitate and aid in improving LOR content.

For the reference, beginning with one’s role, relationship, and assessment of the student compared to others followed by extrapolation of PARs will allow the reader to gain a concrete understanding of the student’s accomplishments.

Once drafted, the LOR must be analyzed for terms of unconscious bias. Gender bias calculators and templates allow writers to maintain a focused, streamlined approach when writing LOR.
The Path to Medical School: Experiences of Asian American medical school matriculates.

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University of Massachusetts Medical School

There is virtually no literature on the experiences of Asian American students during and prior to medical school. Data was obtained from three US medical schools. Currently enrolled medical students were invited to take a survey and interview if they indicated interest. Codes and themes emerged through qualitative analysis. Survey data showed that 30% of respondents identified as Asian American. 85% of Asian American students said their ethnicity impacted them at medical school, and 39.9% of surveyed Asian American students met WHO-5 criteria for recommended depression screening. Some concerns brought up were fear of “blending in” amongst other Asian American students as well as dealing with stereotypes and microaggressions both during application to and in medical school. Though Asian Americans are not an underrepresented group in medicine, this itself may pose certain challenges, such as a perceived difficulty in standing out amongst peers or the notion that there is no need for a support system for this specific ethnic group, among others. Specific support systems may need to be put in place in addition to further research to better serve this population of students.
The Peer Support Network: Developing Peers as Students’ Best Vehicle for Support

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The Peer Support Network (PSN) is a group of trained medical students (Navigators) who serve as peer advocates, providing support to any student experiencing a hardship in any realm including academic, interpersonal, mental or physical health. Established earlier this year by members of the Wellness Advisory Council, the PSN created an innovative method to help students reduce stigma of and overcome multiple barriers to help-seeking. Navigators were selected based on self-described experiences and interest in advocacy, attempting to diversify the pool. Importantly, navigators were trained in both campus resources and mental health first aid, teaching them how to assist individuals in distress with an action plan. The program launched this fall, and is available to students in all classes. Navigators have provided a listening ear to their peers, offered advice based on similar experiences, and have successfully increased awareness of resources that are available to students. The PSN will be integral to helping foster a campus environment centered around wellness, support, and accessibility, and can serve as a model for other institutions interested in developing similar programs.
The Pre-Med Experiences of 1st Gen College Grads in Medical School and their Continuing Gen peers

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Though differences in medical school matriculation rates exist between FG and CG pre-medical students, little research explains this gap. Data was collected from three US-medical schools. Currently enrolled medical students were invited to take a brief survey. A subset of interested respondents was contacted for an interview. Qualitative analysis was used to develop codes and themes. Survey data indicate 21% of respondents identified as FG and 79% as CG. Though considerable variation existed between FG/CG responses to many questions, WHO-5 wellness scores were comparably low. Overarching interview themes were: Support, financial considerations, overall experience and diversity. Both FG and CG students expressed stress throughout the pre-/post-application phases. Differences existed in access to support, perception of impact of identity on the application process and financial implications. While the overall application process for FG/CG students is stressful, CG students are often better prepared to manage the challenges of the process. More support for FG-students during the pre-application phase could provide a stronger foundation for success during the post-application phase.
The Road to Success: A Longitudinal Career Advising Curriculum Aimed at Successful Matching...

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Senior Dean for Student Affairs
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Manavi Bhagwat
Medical Student, OSR Representative
Virginia Tech Carilion School of Medicine

This poster will explain how the small allopathic medical school, Virginia Tech Carilion School of Medicine, has developed a longitudinal career advising curriculum aimed at successful matching. Located in southwestern Virginia, the school has graduated six classes of students of which all have achieved a 100 percent residency match rate. The curriculum incorporates various resources at designated time periods throughout medical school. This curriculum was built within the office of student affairs in collaboration with the OSR representatives. Examples include how students are oriented to the AAMC’s Careers in Medicine platform early in their medical school careers. In addition, student government representatives from each class work together to produce an annually updated residency guide for students. The poster will explain how career advising can be interwoven into a curriculum and demonstrate the process used at the Virginia Tech Carilion School of Medicine. Statistics will be provided to show the 100 percent match rate of all six classes and the longitudinal nature of the career advising curriculum will be demonstrated.

The Role of Artificial Intelligence Tech in Diabetic Retinopathy Screening in Low Resource Settings

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University of Miami, Miller School of Medicine

Diabetic retinopathy (DR) is the principal cause of impaired vision in the developing world in individuals between 25 and 70 years of age. The majority of patients who develop DR do not present with symptoms until progression of the disease to advanced stages, at which point vision loss is irreversible. As the progression of DR is rapid and therapy is effective, annual screening is imperative for all patients with diabetes. By introducing screening in a low-resource primary care setting, barriers to access of care may be overcome to reach a greater number of diabetic patients. Artificial intelligence (AI) technology can be safely and effectively used as screening tools to help identify high-risk patients, particularly in areas where patients have limited to no access to ophthalmologists. This pilot project compares the results of screening with AI to ophthalmologist’s grading of the same image. A large number of screened patients were diagnosed with eye disease, many of whom were at high risk for vision loss. The goal is to minimize or eliminate the barriers to care facing patients in low-resource settings, which can be accomplished through the use of new medical technologies.
The Role of Future Practitioners in Engaging Effective Conversations about Gun Safety with Patients

Priya Singh  
Medical Student  
Northeast Ohio Medical University

Sagel Dubey  
Medical Student  
Northeast Ohio Medical University

Gun safety is among the most controversial topics in this country today. However, the initiative of safer gun use is a subject that many Americans agree on, regardless of political views. As this topic has become a public health concern, the medical field is at the forefront of the conversation about safe gun use. Students Demand Action (SDA) works to implement simple strategies to bring up the conversation of safe gun ownership with parents. As medical students and members of SDA, we want to bridge patient health with public health. By starting this conversation about gun safety in doctors offices, we hope to prevent accidental deaths and suicides that occur as a result of unsafe use and storage. The “Be SMART” initiative is a simple memory hook that aims to help gun owners remember tips for safer gun storage and handling that can be easily adopted by the medical community. Through our collaboration with SDA, we hope to educate current and future practitioners about “Be SMART” training and similar efforts focused on fostering effective and meaningful communication with patients to create a safer environment for children and young adults.

The Underrepresented Student Alliance: A Diversity Initiative Model in Medical Education

Sarah Martinez, BS  
Medical Student  
Albany Medical College

The poster will describe what the Underrepresented Student Alliance is, initiatives the group has implemented, and the importance of the model. The poster will also discuss the impact of integration of the Underrepresented Student Alliance on diversity initiatives at Albany Medical College. Through the Underrepresented Student Alliance, we hope to accomplish increased understanding and acceptance of marginalized intersectional identities in medicine, increased support for underrepresented students, increased scholarly activity by students with underrepresented identities, and increased allyship-based initiatives and education towards historically excluded identities in medicine.
The Virtual Tour: A Student Production at the Washington University School of Medicine

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OSR
Washington University in St. Louis School of Medicine

Monica Lim, BS
OSR
Washington University in St. Louis School of Medicine

Griffin Plattner, BS
OSR, Class of 22
Washington University in St. Louis School of Medicine

Patrick Ward, BS, MS
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A recent AAMC report documented that only ¼ of medical students come from the lowest 60% of income earning families in the United States. This number has been stagnant for the past 30 years despite increasing representation of students from lower socio-economic backgrounds in undergraduate study.

With the support of institutionally employed videographers, the virtual tour is a student-led, student-directed, and student-produced initiative. The multimedia project includes a virtual reality 3D “walk-through” tour developed using the Oculus VR platform. Photospheres were taken throughout campus to provide a “Google Street View” style experience. Embedded within the 3D virtual campus are on-demand video “tour stops” featuring nearly a dozen students. Finally, a video documentary of the school allows additional students to highlight the locations in and around our campus that are special to students. This poster documents a proposal for optional virtual interviews to reduce cost barriers of medical school application, methods for the development of a student-led multimedia “virtual tour” of a medical school campus, and the results and on-going work of these projects.

The Wellness Committee: A Systematic Approach to Medical Student Well-Being

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The wellness committee at VCU is a student-led body comprised of faculty and students that promote medical student mental health and well-being through initiatives. Each initiative consists of 4 phases: data-gathering, planning, implementation, and follow-up.

In the data-gathering phase, we assess overall student well-being by meeting with class representatives, deans of student affairs, and faculty from other campus resources. Interdepartmental collaboration is vital to informing effective interventions. In the planning phase, we create actionable steps to address students’ needs. These initiatives include both preventive (e.g. education, curricular changes) and reactive interventions (e.g. student panel, counseling). After implementing these initiatives, we assess the effectiveness of our interventions in the follow-up phase to inform future initiatives.

Having a wellness committee keeps medical student well-being a priority. The committee structure is student-led, systematic, and applicable for any medical school. Continuously assessing and addressing student well-being allows institutions to implement effective interventions and adapt to the changing needs of medical students.
Theater in Medicine: Using Theatre as a supplement to Professional Formation

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Student
Drexel University College of Medicine

As I develop further iterations of the class, the ultimate goal is to integrate the Medical Theatre curriculum into the Professional Formation curriculum, which at Drexel University College of Medicine is called "Foundations of Patient Care" (FPC). For the latest taught version of the class, I utilized a number of standards listed in the FPC curriculum to plan the exercises for each lesson. For example, one of the FPC Standards entails "communicate[] effectively in difficult situations, for example giving bad news, communicating adverse events and working with distressed patients and their family members" (Listed as ICS-8 in the Curriculum Handbook). The resulting exercise I created which aligned with the Standard was grounded in a theatre genre known as Theater of the Oppressed, and we explored different imaginative situations in which people have difficult conversations. I wish to share my experience of teaching the class with a receptive academic audience, and detail my students' experiences and reflections on how the class influenced their professional practice now that the class has ended.

Tier-Mentoring: A Pipeline Flow Enhancer for Diversity in Academic Medicine

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Michigan

Fatima Saad
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Brandon Lucas, MS, PhD
Program Manager
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The Office for Health Equity and Inclusion (OHEI) sponsor: The Michigan Health Science Undergraduate Research Academy (MHSURA), the Career Development Academy (MHSCDA), and the Pre-College Exposure Academy (MHSPEA). The initiatives are designed to enhance the readiness of underserved and underrepresented individuals for medical school. Key components of each program follow: 1) MHSPEA- SAT preparation and exposure to University of Michigan; 2) MHSURA-develop and foster research excellence (not exposure); and 3) MHSCDA- MCAT preparation and refining medical school application.

Expanding on the research template from the MHSURA program, OHEI has created Tier-Mentoring PODs which conduct student initiated health disparities research. The Research POD is headed by a senior faculty members and is comprised of medical and undergraduate students. The projects are frequently Quality Assessment/Quality Improvement or Community Based Assessments. The culminating goal is manuscript publication, with an abstract or oral presentation at a scientific conference being an intermediary achievement. Our approach has produced over 150 abstracts and first author manuscripts by ~40 students since 2014.
To Determine Best Practice for Medical Student Involvement on Admissions Committees

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Geisel School of Medicine at Dartmouth

Jenaya Goldwag, MD  
General Surgery Resident  
Dartmouth Hitchcock Medical Center

Aileen Panitz, MEd  
Admissions Director  
Geisel School of Medicine at Dartmouth

Currently there is no widespread consensus on the optimal involvement of medical students on medical school admissions committees. The goal of this workshop is to describe the current level of medical student participation in admissions based on collected data, define the advantages, opportunities and possible drawbacks of their contribution, and allow participants to share and define their own best practice model of student involvement at their respective institutions.

Umbrella Coalition’s Medical Colloquia Series: Empowering Students Transforms Medical Education

S. Essie Ghafoor, MBS  
Medical Student  
University of Illinois at Chicago College of Medicine

Vikrant Garg, MPH  
Medical Student  
University of Illinois College of Medicine

A. Sarah Agamah, MPH, MBA  
Medical Student  
University of Illinois College of Medicine

The Umbrella Coalition (UC) comprises the identity-based and politically progressive student organizations at the U of I COM-Chicago, with marginalized student (black, brown, women, LGBTQ+) leadership. Medical Colloquia (MC) is a mandatory co-curricular course for education about special topics not covered in a traditional medical curriculum. The UC’s student-organized, and co-led MC series expands the course, offering sessions on issues directly impacting marginalized groups. It demonstrates the benefit to empowering students to use their wealth of knowledge to teach their peers, and how this departure from the Paulo Freire’s banking model of education can enrich medical student education. The sessions include the pathologizing of black and queer bodies, single payer health care, integrative medicine and the role of black liberation movements in community health. Over 90% of students expressed a desire for more emphasis on these topics in the regular student curriculum, indicating their potential role as a recruitment tool for students interested in these topics. Future plans include incorporating these sessions into regular course curriculum through working with course directors.
Underrepresented Minority Differences in Medical Student Wellness Indices

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Student  
University of Toledo College of Medicine

Randall Worth, PhD  
Dean of Student Affairs  
University of Toledo College of Medicine

Madison Connelly, BA  
Medical Student  
University of Toledo College of Medicine and Life Sciences

Medical student wellness is an area of great concern in the health care field. Through an IRB approved yearlong systemized survey, the first and second-year medical student wellness was measured. The metrics of work burnout, personal burnout, resiliency, and perceived stress were measured in a 53-item survey. The study identifies statistically significant differences Under-Represented Minorities across these categories that varied over the course of the academic year.

Unity in Medicine: An Interprofessional Student Dialogue Focused on Diversity in Healthcare

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We would love the opportunity to speak about our unique event, Unity in Medicine, through this poster presentation. Unity in Medicine is a student-led event which is sustainable and beneficial to each of the seven colleges on campus at the University of Oklahoma Health Sciences Center. Our event began in 2017 as a student panel chosen by a planning committee to represent their story as a part of a minority within each of the seven colleges. Students across campus were invited to participate in a judgement-free question and answer session with this panel for two hours. After the event, we sent out a survey to which 60 of the 110 participants responded. We received overwhelmingly positive feedback via this survey. Students believed there was an added benefit from hearing from fellow students in contrast with IPE through a lecture setting. In presenting our poster, we hope to convey our concept to other programs so that they may also impact their student understanding of diversity within healthcare through our reproducible model.
UnsCripted Podcast – creation of a medical student-produced podcast: a description of key milestones

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Background: This poster will describe the key steps for creation of a medical student-run podcast. The podcast was launched in January 2019 to meet informational and social needs of students at the University of Cincinnati College of Medicine.

Methods: The poster will discuss steps taken to acquire appropriate equipment, the design and implementation of a website, and discuss optimization of our podcast recording/administrative review protocol. We will describe how our podcast content empowers students in their academic pursuits through near-peer study advice focusing on resource management and resiliency strategies.

Results: By means of a graphical timeline, we will demonstrate our approach to producing a portfolio of four unique podcast series in our first year. Major project milestones will include number of episodes, recording time, number of listeners, and description of guest hosts.

Discussion: We will propose goals for our upcoming year of production and vision for creating a recurring podcast infrastructure that will afford future medical students the opportunity to address student needs and topics related to medical education through this unique medium.

Urban Medicine Program at UIC COM: Supporting Student-led Community-Based Public Health Projects

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The Urban Medicine Program (UMed) at The University of Illinois-Chicago College of Medicine is a 4-year co-curricular program for students to be involved in longitudinal community-based projects. Previously a referral system for clinic patients facing food insecurity, the Square of Care project is a student-designed UMed project that has transformed into a pantry providing fresh and shelf-stable food. The poster will discuss the progression of the Square of Care project, barriers that the students faced in implementation of this project, and future directions for the pantry.

The poster will also discuss opportunities for college administration to support students in community-based public health work. There is currently no dedicated funding support for UMed projects, despite the program being heavily advertised during the admissions process. Its role in medical student recruitment needs to be reflected in budget allocation. A lack of funding greatly increases the difficulty of developing and sustaining projects. Providing more rigorous public health education would also benefit UMed students as they work to implement and evaluate their projects.
Using Team Based Learning to Apply Effective Learning Strategies to First-year Medical Students

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Student academic success and progression is a critical element of our medical education framework. The foundation of this framework is a strong collaborative partnership with medical education faculty and student affairs staff. In this session, participants will discuss how faculty and staff can work together to introduce successful study strategies based on the science of learning. Participants will have the opportunity to engage in a team-based learning application exercise that focuses on the incorporating strategies for successful learning into study plans. The activities in this session can be adapted and used as a method to actively engage students in conversations focused on active learning techniques that they are able to implement in their study plans starting day 1 of medical school.

Value-Based Care Education in Medical School: The Why & The How

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As costs of American health care continue to rise, the medical community has begun to embrace the idea of value-based care as a means of improving our current system. In fact, one of the Association of American Medical Colleges’ stated thirteen entrustable professional activities (EPAs), which medical students are expected to be able to perform upon entering residency, specifically references including value in clinical decision-making. And yet, the terms "cost" and "value" retain an unpleasant connotation to many in the health care profession, and there has not yet been a true cultural shift to embrace value-based care as a core principle of modern medicine. This poster will educate attendees on the current landscape of value-based care education as well as the rationale for beginning this culture shift during medical school. Additionally, this poster will enable attendees to drive this evolution to value-based care at their home institutions, including recommendations for designing value-based care electives, integrating value principles into existing core curriculum, and developing seminars for medical students to discuss the perceived trade-off of cost vs. care.
What a Pretty Assistant You Have': Results from a Student Roundtable on Workplace Gender Harassment

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Workplace gender and sexual harassment are psychosocial factors that negatively affect the medical trainees experience. Workplace harassment is associated with negative health measures including psychological distress, depression, traumatic work accidents, musculoskeletal disorders and negative health status perception.

Addressing the topic of inappropriate comments by patients, the University of Miami’s Women in Medicine organization held a student-led focus group to share personal experiences of when patients blur the lines of the physician-patient relationship. These experiences included comments regarding gender, sex and/or race.

This conversation focused on the limitations experienced by learners in hierarchal medical education settings and the responsibility of establishing professional standards. The group proposed approaches involving residency program directors, academic attendings, residents, and medical students. Solutions included proactively preparing reactions to specific patient encounters and workshops for physicians supervising students in clinical rotations.

WUMS Well: Connecting Students to Well-Being Resources

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The WUMS Well “Wellness Course” is housed in our program’s Canvas online learning platform. This initiative is designed, developed, and managed by students to improve awareness of resources available at Washington University, reduce barriers to accessing them, and provide an interactive tool to promote student wellness. Built by student volunteers, this initiative has required no additional funding. Our OSR led Wellness Committee identified barriers to utilizing mental health and wellness resources that include unfamiliarity with resources and how to access them, lack of time (especially during “business hours”), and stigma. WUMS Well addresses each of these barriers. It compiles a listing of available resources divided by the dimensions of wellness (Physical, Financial, Spiritual, Mental, Social, Academic). It provides on-demand access to advice that addresses common wellness concerns through multi-media modules produced by students, featuring our in-house specialists and a curated list of resources. Finally, it houses a balance of student stories and advice for peers to normalize challenges and promote a culture of help-seeking behavior.
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