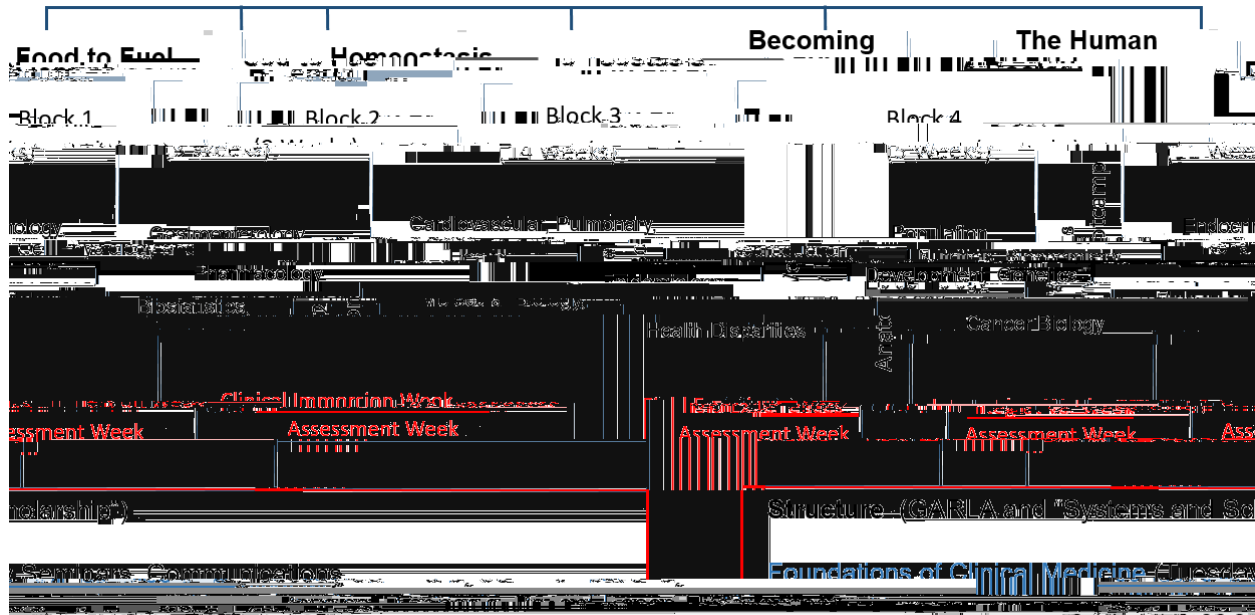


Case Western Reserve University – University Program Medical School

Block 4: Action Plan 2021- 2022

Year 1 – July through May



1. Course Description:

The Homeostasis Block (Block 4) integrates the following disciplines: Cellular Physiology, Principles of Pharmacology, Bioethics, Physiology and Pathophysiology of the Heart, Lungs and Kidneys. The content areas are introduced individually and then integrated, primarily through IQ cases, SEQs, and Simulated Case Presentations during Clinical Immersion week during the second half of the Block.

2. Block Co- Leaders:

Jason Mears, PhD and Vidya Krishnan, MD MHS

3. Design Team :

(section leader) and Mark Aulisio, PhD
MD (section leaders); Jose Ortiz, MD, and

Shaman, MD (section leaders); Jeffrey

4. Block Goals : Please fill in the table below for your Block Goals.

Competency and Definition	Educational Program Objective (EPO)	Block Goals Block 4	Recommended Changes
<p>Knowledge for Practice Demonstrates knowledge of established and evolving biomedical, clinical, epidemiological and socialbehavioral sciences as well as the application of this knowledge to patient care</p>	<p>Demonstrates ability to apply knowledge base to clinical and research questions</p> <p>Demonstrates appropriate level of clinical and basic science knowledge to be an effective starting resident physician</p>	<p>Apply principles of cell physiology to understand molecular function of the heart, kidneys and lungs.</p>	<p>none</p>
		<p>Understand how drugs affect the body and how the body handles drugs.</p>	<p>none</p>
		<p>Understand a) normal cardiovascular physiology and cardiac cell function and b) how cardiovascular diseases alter normal cardiac physiology and function at both the organ and cellular levels.</p>	<p>none</p>
		<p>Understand a) normal pulmonary physiology; and b) how pulmonary diseases alter normal pulmonary physiology and function.</p>	<p>none</p>
		<p>Understand a) the role of the kidney in maintaining homeostasis and b) the interaction of the kidneys with other organ systems.</p>	<p>none</p>

Common to all Blocks:			
<p>Knowledge for Practice Demonstrates knowledge of established and evolving biomedical, clinical, epidemiological and social behavioral sciences as well as the application of this knowledge to patient care</p>	<p>Demonstrates ability to apply knowledge base to clinical and research questions</p> <p>Demonstrates appropriate level of clinical and basic science knowledge to be an effective starting resident physician</p>	<p>Recognize and analyze ethical problems in clinical medicine and</p>	

Interpersonal &

5. In the grid below, please list the specific course changes you made this year based on last year's report .

<p>What changes were made 2020-2021?</p>	<p>How did the changes work?</p>	<p>What would you like to change next year 2021-2022?</p>
<p>As part of the iPad curriculum development, A/V utilities were</p>		

What changes were made 2020-2021?	How did the changes work?	What would you like to change next year 2021-2022?
Increased use of virtual office hours	Office hours were held by the section leaders primarily at the end of the block. They were attended by 38 students per session, but valuable to the students who attended.	Schedule office hours as a virtual option for each discipline once during the first half of the block, and then again once in the week prior to the exam preferably after the end-of-block review.
Clinical Immersion Week	Very positive student feedback comments. There were some site variations in student experiences. There were also differences in patient interaction experiences based on availability.	Site variability can be improved by having more planning sessions prior to the week and having a basic structure for the experience. The variability of patient experiences and variability in teacher practices are meant to be part of the realworld experience.

6. What changes do you anticipate making to the Block next year (AY 2022 -2023)

We are so grateful to Nivo Hanson and Deidre Gruning for all their support in this past year. We warmly welcome Elizabeth Day as the new Block 4 co-manager with Nivo Hanson for the upcoming year.

Returning to in-person sessions was a treat for faculty and students. Our experience with online learning will result in continued use of virtual learning to supplement the curriculum, and review sessions used this technology effectively.

We are using student feedback to improve the offerings of Block 4 lectures and sections. We plan to improve introductions to the Block overall, and to each subsection – including setting expectations and providing a roadmap for the block/sections. We will also use the student attendance for lectures and consider replacing lectures with low attendance with alternative offerings (additional topics, expounding on current important topics).

We annually review the success and feasibility of the Clinical Immersion week. The feedback this year was generally positive, which also reflects the ability to coordinate these sessions in person. The students appreciated the opportunity to integrate the concepts that they had been learning throughout the block. Any negative feedback was largely due to logistics (group size, uniformity, etc). We will work to try to make the experiences more uniform by learning objectives across centers but will embrace the diversity of the experiences offered at different sites. We will continue to prioritize Clinical Immersion week as a key element of Block 4 in AY2022-2023.

7. What successful, innovative components of your block that are best practices that you would like to share with the other Blocks?

The incorporation of Pharmacology Videos related to the IQ sessions were an excellent addition to the Block 4 curriculum. Most students (75%+) responded that they used this material as a learning resource. The only concern was the use of the Notability app, which limited access for some individuals. Regardless, this active learning content was very well received by the students.

The reviews from the TBL sessions were also generally positive. The expansive slides that were incorporated for the remote sessions in previous years were simplified to ensure interaction in the TBL rooms in Sampson. 110096131029 (B216) (B.05614079 (e) 112565

In addition to in-person learning sessions, identify continued virtual supplementation of curriculum (review sessions, office hours, etc)	In-person interactions are invaluable, but virtual sessions are effective in providing easily accessible sessions to directly address students' questions and review content
At least 2 interactive questions in each lecture (or other interactive technique, e.g., pair and share exercise).	Better faculty and student engagement during interactive sessions.

9. Please review your Block objectives. Have you added or deleted major concept areas to your Block?

tablet, iPads, Poll Everywhere, etc) and Nicole Pilasky who supported the Block facilitator's training for use of Poll Everywhere. Carol Chalkley's assistance with organizing Week 12 Clinical Immersion Week across 3 sites, in addition to coordinating the Cardiology Clinical Reasoning and Cell Physiology Review during the week, was greatly appreciated. We wish to thank Dr. Amy Wilson-Delfosse for her continued guidance in managing Block 4 and all of its complexities and moving parts! We also wish to thank Drs. James Finley and Al Connors who both, despite retiring from clinical work, have continued to take an active role in supporting Block 4 content, and a supportive role for when the pulmonary team has been overwhelmed by clinical work. We also wish to acknowledge the entire Office of Curricular Affairs for their collaborative spirit in coordinating an integrated curriculum that included highly effective in-person and virtual sessions. They are all invaluable and we could not put forth a quality Block 4 without them!

