

## **Supplemental Digital Content**

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**YEAR 1**

**Integrated Disciplines**

	August	September	October	November	December	January	February	March	April	May	June	July
Orientation	CMBL		ELIC WEEK 1	HSF		Winter Break	ELIC WEEK 2	FND	Spring Break	NEURO		Summer Research SRIP Program
	PCM											
	PAS											
	CBL1											
<p><b>Cellular and Molecular Basis of Life (CMBL)</b>- Biochemistry, Genetics, Cell Biology and Molecular Biology  <b>Human Structure and Function (HSF)</b>- Anatomy, Physiology, Embryology and Histology  <b>Foundations (FND)</b>- Microbiology, Immunology, Pathology and Pharmacology  <b>Neuroscience (Neuro)</b>- Nervous System and prevention, diagnosis and treatment of neurologic diseases  <b>Patient Centered Medicine (PCM)</b>- patient-centered and evidence-based care  <b>Physician and Society (PAS)</b>- public, occupational, &amp; international health; preventative and social influences on Med  <b>Case Based Learning 1 (CBL1)</b>- small group; clinical/health care cases; integrates content of other courses  <b>Experimental Learning in Community Setting (ELIC)</b>- L-CHIP and FCE experiences (see highlights section)  <b>Summer Research Immersion Program (SRIP)</b> – individual student/faculty research projects</p>												

**YEAR 2**

**Integrated Systems**

	July	August	September	October	November	December	January	February	March	April	May	June
Orientation	SYS 1		ELIC WEEK 1			Winter Break	SYS 2		Spring Break	ELIC WEEK 3		Summer Research SRIP Program
	APM						ELIC WEEK 2					
	CBL2											
<p><b>Systems 1 (SYS 1)/Systems 2 (SYS 2)</b> – cardiovascular, respiratory, nervous, hematology, endocrine, reproductive, gastrointestinal, connective tissue and bone, renal, dermatology, oncology and infectious disease. In addition, these courses continue to address the interface of the patient, physician, and society, and introduce clinical thinking and decision-making in today’s socio-economic and cultural environment  <b>Art and Practice of Medicine (APM)</b> –physicians’ unique relationship to patients, professionalism, professional development, cultural awareness, legal vs. moral values, health systems, quality improvement, and critical clinical decision-making.  <b>Case Based Learning 2 (CBL 2)</b> – discussion of clinical cases or health care issues by small groups of students  <b>Longitudinal Clinical Experience (LCE)</b> - (see highlights section)  <b>Quality Improvement Community Collaboratives (QuICCS)</b> - (see highlights section)</p>												

**YEAR 3**

**LIC and Blocks**

	July	August	September	October	November	December	January	February	March	April	May	June				
Orientation	Outpatient Internal Medicine					Winter Break	Inpatient Adult Medicine	Emergency Medicine	Inpatient OB/GYN	Inpatient Surgery	Anesthesia	Inpatient Psych	Selectives	Electives	Inpatient Pediatrics	Core Week
	Outpatient Family Medicine															
	Outpatient OB/GYN															
	Outpatient Surgery															
	Outpatient Psychiatry															
	Outpatient Pediatrics															
<p><b>Inpatient-based rotations/Longitudinal Integrated Clerkship (LIC)</b> - The M3 Longitudinal Integrated Curriculum provides students with comparable, high quality clinical experiences in both outpatient and inpatient settings within our six core clerkships- <b>Family Medicine, Internal Medicine, OBGYN, Pediatrics, Psychiatry and Surgery</b>. Students in the outpatient curriculum will spend one half day weekly with an assigned physician in an ambulatory setting for a semester and then will spend intervals of 1-4 weeks in inpatient rotations during the other. In addition to clinical experiences, students are engaged in Health Care Improvement and an active Quality Improvement Community Collaborative project within their regional campus.  <b>Clerkship Education Days (CED)</b> – weekly group learning, case conferences, reflections and other core curricula</p>																

**YEAR 4**

**Traditional Blocks**

	June	July	August	September	October	November	December	January	February	March	April	May		
Core Week	Break	Senior Seminar	SUB-I Medicine	SUB-I Student Choice	Acute Care ICU	Electives Students Choice					Core Week/Match	IPE Selective	Electives Student Choice	Graduation
<p>Traditional inpatient/outpatient block schedule; 36 weeks of clinical curriculum which include rotations in:</p> <ul style="list-style-type: none"> <li>• One, 4-week medicine sub-internship in an inpatient facility</li> <li>• One, additional 4-week sub-internship in medicine or another core discipline</li> <li>• One, 4-week acute care rotation One, 2-week interprofessional selective</li> <li>• One, 1-week senior seminar course</li> <li>• One, core week emphasizing preparation for residency</li> <li>• Five additional months of electives</li> </ul>														

Supplemental Digital Appendix 2  
Medical Education Program Objectives

General Competency	Educational Program Objective(s)	Outcome Measure(s)
<p><b>Medical Knowledge</b></p> <p>The competent graduate will have the necessary body of knowledge within the basic, clinical, and cognate sciences (e.g. epidemiological and social behavioral) to be prepared for successful transition into graduate medical education training. Moreover, the graduate will have the skills that will enable the continual assimilation and utilization of the concepts and knowledge discovered throughout the years following medical school to optimize patient care.</p>	<p>Competency: Demonstrate a comprehensive foundation of basic science knowledge that includes the essentials of the fundamental disciplines detailed below, because this foundation is necessary for any future residency training.</p> <ul style="list-style-type: none"> <li>• Normal structure and function of the body and each of its major organ systems.</li> <li>• Molecular, biochemical, genetic, and cellular mechanisms important to maintaining the body's homeostasis.</li> <li>• Pathogenesis of disease, including altered structure and function and the pathophysiology of pain.</li> <li>• Developmental changes and milestones, psychological development, and the differences between normal variation and disease across the human life span.</li> <li>• Etiology, epidemiology, clinical manifestations, prognosis, and natural history of common illnesses.</li> <li>• Principles of contemporary therapeutics, including molecular, biological, genetic, pharmacological, and surgical.</li> <li>• Principles, risks, and possible benefits of complementary and alternative medicine.</li> <li>• Principles of nutrition as they relate to health maintenance and the care of acutely and chronically ill patients.</li> </ul> <p>Competency: Demonstrate a comprehensive knowledge foundation of the clinically supportive cognate sciences.</p> <p>Competency: Obtain the necessary clinical skills to address the health screening and maintenance needs and to diagnose and manage common health problems of individuals.</p> <p>Competency: Obtain the necessary clinical and informatics skills to diagnose and manage the health problems and health maintenance needs of populations and communities.</p> <p>Competency: Demonstrate an investigatory and analytic approach to patient care practices.</p>	<p>Written &amp; oral exams, essays, narratives, observation (ratings &amp; checklists) record review, case presentations, standardized patients, patient simulators, patient and procedure log (e-portfolio) review, reflective writing, USMLE Step Exams, NBME Subject Exams,</p>
<p><b>Practice-Based Learning and Improvement</b></p> <p>The competent graduate will be self-aware and understand his/her learning needs to continually optimize their professional performance and patient care. The graduate should be able to investigate, reflect, and evaluate his/her patient-care practices and to critically filter, appraise and assimilate evolving scientific evidence.</p>	<p>Competency: Analyze clinical experiences and reflect on personal practice patterns to initiate practice-based improvement activities using a systematic methodology.</p> <p>Competency: Locate, appraise, and assimilate evidence from scientific studies related to their patients' health problems; apply knowledge of epidemiological principles, appropriate and inappropriate use of statistical methods, and proper study design to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness.</p> <p>Competency: Use information technology to manage information, access online medical information, and support self-education.</p> <p>Competency: Obtain and use information about their population of patients and the larger population from which the patients are drawn.</p> <p>Competency: Facilitate the learning of students and other health care professionals.</p>	<p>Written exams, essays, narratives, observation (ratings &amp; checklists) record review, case presentations, standardized patients, patient simulators, patient and procedure log (e-portfolio) review, reflective writing, USMLE Step Exams, NBME Subject Exams,</p>
<p><b>Interpersonal Skills and Communication</b></p> <p>The competent graduate will have essential verbal, nonverbal, and written communication skills, as well as compassionate and culturally sensitive interpersonal skills that promote effective information exchange and collaboration with patients, patients' families, and professional associates.</p>	<p>Competency: Use effective listening skills and elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills.</p> <p>Competency: Create and sustain a therapeutic and ethically sound relationship with patients.</p> <p>Competency: Work effectively with others as a member or leader of a health care team or other professional group.</p>	<p>Written &amp; oral exams, narratives, observation (ratings &amp; checklist), case presentations, chart review, standardized patients, patient assessment of encounter, presenting patients to attending,</p>
<p><b>Professionalism</b></p> <p>The competent graduate will have professional integrity with awareness of and commitment to the principles and responsibilities of the medical profession and a profound respect and unconditional regard for human dignity.</p>	<p>Competency: Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society that supersedes self-interest; accountability to patients, society, and the profession; and a commitment to excellence and ongoing professional development.</p> <p>Competency: Recognize that the need to learn and develop professionally is continuous.</p> <p>Competency: Demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices.</p> <p>Competency: Demonstrate sensitivity and responsiveness to patients' and colleagues' culture, age, gender, race, religion, and sexual preferences.</p>	<p>Narratives, observation (ratings &amp; checklist), record review, case presentations, standardized patients, simulations, reflective writing,</p>
<p><b>Patient Care</b></p> <p>The competent graduate must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. The graduate will be required to construct appropriate, fundamental management strategies (diagnostic and therapeutic) for patients with common health problems that may be emergent, acute or chronic, across the spectrum of disciplines, while considering costs for the patient and others. The graduate must be able to combine knowledge of basic biomedical, clinical, and cognate sciences to accomplish the above.</p>	<p>Competency: Demonstrate caring, respectful, and effective communication skills when interacting with patients and families.</p> <p>Competency: Gather essential and accurate information about the patient.</p> <p>Competency: Formulate appropriate diagnostic and therapeutic management strategies for patients with common health problems that may be emergent, acute, or chronic, across the spectrum of disciplines based on patient information and preferences, current scientific evidence, and clinical judgment, while considering costs for the patient and the system.</p> <p>Competency: Develop and implement patient management plans that actively engage the patient and caretakers.</p> <p>Competency: Use information technology to optimize patient care.</p> <p>Competency: Perform competently appropriate medical and invasive procedures considered essential for entering any area of graduate medical education.</p> <p>Competency: Promote standard health maintenance and disease prevention based on age, gender, and risk factors.</p> <p>Competency: Work with other health professionals to provide patient-focused care.</p>	<p>Written exams, essays, narratives, observation (ratings &amp; checklists) record review, standardized patients, patient simulators, patient and procedure log (e-portfolio) review, reflective writing, USMLE Step Exams, NBME Subject Exams,</p>
<p><b>Systems Based Practice</b></p> <p>The competent graduate will have an awareness of the larger context and systems of health care and will aptly strive to contribute to system improvement. The graduate will have sensitivity and responsiveness to the interrelationships of the individual, their communities and the health care system.</p>	<p>Competency: Understand how their patient care and other professional practices affect other health care professionals, the health care organizations, and the larger society, and how these elements affect their practice.</p> <p>Competency: Know how types of medical practice and delivery systems differ from one another, including methods of controlling health care costs and allocating resources.</p> <p>Competency: Practice cost-effective health care and resource allocation that does not compromise quality of care.</p> <p>Competency: Advocate for quality patient care and assist patients in dealing with system complexities.</p> <p>Competency: Act as an advocate for better health for patients and the community by partnering with health care managers and health care providers to assess, coordinate, and improve health care and outcomes.</p>	<p>Written exams, essays, narratives, observation (ratings &amp; checklists) record review, case presentations, patient and procedure log (e-portfolio) review, standardized patients, patient simulators, peer assessment, self-assessment, reflective writing, USMLE Step Exams, NBME Subject Exams,</p>