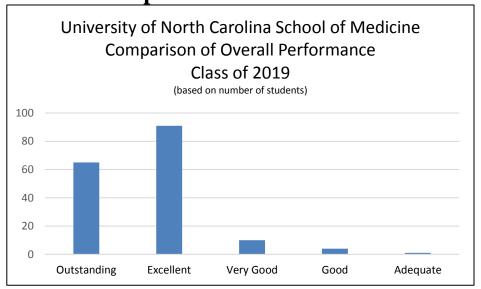
# Medical School Information University of North Carolina School of Medicine Chapel Hill: Class of 2019



Assignment of the rating category for each student is based on overall performance. Factors affecting this designation include, but are not limited to, course grades, performance on NBME shelf exams, Step exam failures, nominations to Alpha Omega Alpha, and completion of the combined UNC M.D./Ph.D. program.

## Special programmatic emphases, strengths, mission and goals of the medical school:

The mission of the University of North Carolina School of Medicine is to improve the health of North Carolinians and others whom we serve, accomplished by achieving excellence and providing leadership in *patient care, education* and *research*. The UNC Health Care System is a tertiary care referral center, receiving regional, national, and international referrals. According to *U.S. News and World Report* 2019 rankings, the UNC School of Medicine ranks **first** in commitment to training primary care physicians and **twenty-third** in excellence in research.

### Special characteristics of the UNC SOM's educational program:

In 2014, the UNC School of Medicine implemented **Translational Education at Carolina (TEC)**, a tripartite, translational medical school curriculum, comprising Foundational Phase (Semesters 1-3); Application Phase (semesters 4-5); and Individualization Phase (semesters 6-8). TEC seeks to transform the way medical students learn the art and science of medicine by integrating basic sciences and clinical skills, providing longitudinal patient care experiences and offering earlier clinical opportunities in specialty fields to better inform students' career choices. This curriculum reflects the ever-changing practice of medicine, and allows early career differentiation and exploration.

- Foundation Phase (semesters 1-3): the first phase comprises three semesters of organ-based blocks, clinical skills education, and professional development through courses in Patient Centered Care, Professional Development and Medical Sciences. Foundation Phase combines normal and abnormal human conditions, teaches through the presentation of clinical cases and experiences, and employs active learning techniques, such as small group discussion and simulation. Coils represent basic sciences, such as biochemistry and microbiology, and specialty areas, such as radiology and behavioral science, which are integrated throughout the curriculum.
  - Transition Course (one week): As part of the TEC curriculum, students complete a one week course
    to help facilitate the transition from the structured instruction of the classroom to the less structured
    settings of clinical medicine. This course is completed during the week preceding the start of
    Application Phase.
- Application Phase (semesters 4-5): During Application Phase, students spend 12 months completing core clinical clerkship blocks through three courses:
  - Community Based Longitudinal Care (CLBC) is an ambulatory course that comprises Pediatrics, Internal Medicine, Family Medicine, Hospice, Emergency Room Care, and Care Management opportunities. All students have the opportunity to develop longitudinal relationships with preceptors, patients, and practices, and contribute to practice quality improvement efforts.
  - Care of Specific Populations (CSP) is an integrated course which comprises Pediatrics, Psychiatry and Obstetrics & Gynecology, and consists of inpatient, outpatient, and subspecialty experiences.
  - Hospital, Interventional and Surgical Care (HISC) is an inpatient course that teaches an evidence-based approach to evaluation and management of adult patients who need inpatient medical or surgical care. The course comprises Inpatient Internal Medicine and Surgery with both general and subspecialty rotations, and integrated didactics are used.

Students may complete Application Phase in one of four campus programs: Charlotte, Asheville, Wilmington and Central (Chapel Hill and surrounding areas). All campuses have the same course objectives and assessments, but each site is characterized by a unique curricular structure incorporating varying amounts of integration, self-directed learning and longitudinal emphasis. Regardless of campus assignment, all students will be prepared for Individualization Phase and their future career endeavors.

- Intensive Integration (meets monthly during Application Phase): Students complete the Intensive Integration Course, in which they develop skills to apply clinically-relevant basic sciences, humanities, social and behavioral science, and population health to the care of patients, and demonstrate effective strategies for caring for patients with contextual challenges (poverty, underinsurance, low literacy, low English proficiency, limited social support, etc.) Students refine advanced communication skills such as delivering bad news, motivational interviewing, end-of-life care planning, and handing off care of patients. They continue to develop and improve skills to work effectively in teams across disciplines and professions. The course highlights translation of basic science principles to clinical medicine, examines strategies for improving systems of care, and gives students an opportunity to critically reflect with a faculty mentor on patient care encounters experienced throughout the Application Phase, exploring moral quandaries encountered in clinical decision making, stigma and the effects of social determinants of health on individual patients.
- o *Individualization Phase* (semesters 6-8): In this third and final phase of the medical school curriculum students develop individual core clinical interests and skills with focus on future career plans, and have

many options to individualize their learning experience based on their career goal interests and their unique needs for clinical skills development.

**F.I.R.S.T. Program:** In 2014, UNC SOM introduced the F.I.R.S.T. (Fully Integrated Readiness for Service Training) Program, an accelerated three-year medical school curriculum designed to fast-track students into a North Carolina Family Medicine Residency, followed by three years of service to patients in North Carolina with ongoing support in practice. The curriculum starts in March of Foundation Phase. The Class of 2019 included two students who will complete the F.I.R.S.T. program.

### **Campus Branches**

In the class of 2019:

- 20 students were selected to complete Application Phase at Carolinas Medical Center (CMC), now Atrium Health, in Charlotte, NC, one of the largest not-for-profit healthcare systems in the nation. Students in the Charlotte Program complete a curriculum that consists of six months of integrated longitudinal experiences and six months of inpatient experiences.
- 23 students were selected to complete Application Phase in Asheville, NC, in an alternative curriculum of Longitudinal Integrated Clerkships at Mission Hospital and the Mountain Area Health Education Center (MAHEC).
- 3 students in this class were selected to complete Application Phase in Wilmington, NC, at New Hanover Regional Medical Center and Southeast Area Health Education Center (SEAHEC). Wilmington students follow the same curriculum as Central Campus students.

## **Additional Degrees**

Approximately 30% of students in this class took a leave of absence, usually following third year, to conduct research, complete an M.P.H., M.S.P.H. (usually at the UNC Gillings School of Global Public Health), an M.B.A. (usually at the UNC Kenan-Flagler Business School) or other graduate degree. M.D./Ph.D. students usually go on a leave of absence after second year.

Average length of enrollment (initial matriculation to graduation, in calendar years) at UNC/SOM:

All graduates: 4.49 years M.D. only: 4.12 years M.D./M.P.H. or 4.96 years

M.S.P.H.:

M.D./M.B.A.: 5.00 years M.D./Other 5.00 years M.D./Ph.D.: 8.44 years

## **GRADING**

All campuses adhere to the same assessment structure and grading standards.

- **Foundation Phase:** all Medical Science, Patient Centered Care and Professional Development courses are graded on a Pass/Fail basis. Students who successfully pass all blocks within a course receive a Pass (P) for the semester-long course on their official transcripts.
- **Application Phase:** all courses, with the exception of Intensive Integration, use the following grading standards that rely on a 100 point scale. Passing is defined as scoring greater than 2.5 SD below the mean on final score calculation. Students who fail are required to retake the full course. Of students who meet this criteria, Honors/High Pass/Pass is awarded using the following guidelines.

Honors: top 30-35%

High Pass: middle 40-50% Pass: lower 20-25%

• **Individualization Phase:** all Individualization Phase courses are graded on a scale of *Honors*, *High Pass*, *Pass*, *Fail*. Research electives are an exception, and are graded on a *Pass* or *Fail* basis.

Foundation Phase:

P: Pass, Entirely Satisfactory

F: Fail, Failed

W: Withdrew from Course

# Application and Individualization Phase:

H: Honors, Clear Excellence HP: High Pass, Above Average P: Pass, Entirely Satisfactory

F: Fail, Failed

Temporary Grades:

IN: Incomplete other than final examination

# Medical school requirements for successful completion of USMLE Step 1 and 2: (check all that apply):

| USMLE Step 2 Clinical                  | USMLE Step 2 Clinical  |
|--|--|
| Knowledge:                             | Skills:  |
| □ Required for promotion               | □ Required for promotion   |
| Required for graduation                | □Required for graduation   |
| $\sqrt{\text{Required}}$ , but not for | $\sqrt{\text{Required}}$ , but not for   |
| promotion/graduation                   | promotion/graduation   |
| □ Not required                         | □ Not required   |
| $\sqrt{\text{Required for NRMP}}$      | √ Required for NRMP  |
|  | Knowledge:  □ Required for promotion Required for graduation  √ Required, but not for promotion/graduation  □ Not required |

Medical school requirements for successful completion of Objective/Observed Structured Clinical Evaluation (OSCE) at medical school. OSCEs are used for (check all that apply):

- √ Completion of course
- √ Completion of clerkship
- □ Completion of third year
- √ Graduation

Utilization of the course, clerkship, or elective director's narrative comments in composition of the MSPE. The narrative comments contained in the student's MSPE can best be described as (check one):

- √ Reported exactly as written
- □ Edited for length or grammar, but not for content
- □ Edited for content or included selectively

Utilization by the medical school of the AAMC "Guidelines for Medical Schools Regarding Academic Transcripts." This medical school is (check one):

- √ Completely in compliance with Guidelines' recommendations
- □ Partially in compliance with Guidelines' recommendations

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Description of the process by which the MSPE is composed at the medical school (including number of school personnel involved in composition of the MSPE):

Each MSPE is drafted by a staff writer, reviewed by the student, and by the Dean or a member of the Student Affairs staff. Students read the final version (and may have it reviewed by their academic advisor) before submission.

Students are permitted to review the MSPE prior to its transmission (check one):  $\sqrt{\text{Yes}}$