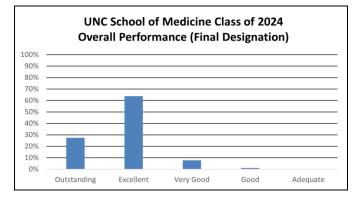
Medical School Information Appendix D: Class of 2024 University of North Carolina School of Medicine



Assignment of rating category for each student based on overall performance. See detailed rubric in Section 7.

1. SPECIAL PROGRAMMATIC EMPHASES, STRENGTHS, MISSION, AND GOALS

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* 2023 rankings, the UNC School of Medicine ranks seventh in commitment to training primary care physicians and twenty-sixth in excellence in research.

2. UNC/SOM CAMPUSES

Students may complete Application Phase in one of four campus programs: Asheville, Central (Chapel Hill, Raleigh, Greensboro, and surrounding areas), Charlotte, and Wilmington. All campuses have the same course objectives, content, 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 through successful completion of four courses:

- Social and Health Sciences 4 (SHS4): Year-long course comprising population health, critical reflection, interprofessional education, humanism, ethics, and communication skills.
- Community Based Longitudinal Care (CBLC): Outpatient pediatrics, internal medicine, family medicine, hospice, emergency room care.
- Care of Specific Populations (CSP): Obstetrics/gynecology, pediatrics, psychiatry; Asheville campus also includes neurology.
- Hospital, Interventional, and Surgical Care (HISC): Inpatient medicine, surgery.
- **Central Campus/Chapel Hill:** Students on the Central Campus are assigned to a variety of clinical settings with UNC Hospitals in Chapel Hill as their home base. Greensboro and Raleigh are also major training sites. The courses are scheduled in a trimester (16 weeks) format and specialties are integrated

within the trimester. Students work in urban and rural settings, and experience patient care in community-based and academic settings.

- Asheville Campus: Students on the Asheville Campus participate in a longitudinal program utilizing continuity outpatient offices and preceptors, along with inpatient training at Mission Hospital and area partners, to learn the core curriculum. Students follow their own panel of patients in the outpatient setting for eight months. Students' interactions with attending physicians are substantial, allowing for continuous, in-depth evaluation and feedback, and active learning.
- **Charlotte Campus**: Students on the Charlotte Campus participate in a half-year, longitudinal, community-based program along with a half-year, traditional, inpatient experience in partnership with Novant Health. These experiences are enriched with weekly multidisciplinary case-based learning, ultrasound, and simulation sessions. Students work in urban, rural, community-based and academic settings.
- Wilmington Campus: Students on the Wilmington Campus are assigned to a variety of clinical settings with Novant Health New Hanover Regional Medical Center as their home base. The courses are scheduled in a trimester (16 weeks) format and specialties are integrated within the trimester. Students work in urban and rural settings and experience patient care in community-based and academic settings.

Class of 2024 Branch Campus Distribution

- **4 students in Class of 2024** were selected to complete Application Phase at the UNC Charlotte Campus, through an affiliation with Novant Health in Charlotte, NC, one of the largest not-for-profit healthcare systems in the nation. Students in the Charlotte Program completed a curriculum that consists of six months of integrated longitudinal experiences and six months of inpatient experiences.
- **36 students in Class of 2024** 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).
- **18 students in Class of 2024** were selected to complete Application Phase in Wilmington, NC, at Novant Health New Hanover Regional Medical Center and Southeast Area Health Education Center (SEAHEC). Wilmington students follow the same curriculum as Central Campus students.
- **120 students in Class of 2024** completed Application Phase at Central Campus which comprises hospitals, clinics, and practices located in Chapel Hill, Raleigh, Greensboro, and surrounding areas.

3. SPECIAL CHARACTERISTICS OF THE UNC SOM EDUCATIONAL PROGRAM

In 2014, the UNC School of Medicine implemented Translational Education at Carolina (TEC), a tripartite, translational medical education curriculum, comprising Foundation Phase (18 months); Application Phase (12 months); and Individualization Phase (14 months). 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. Students work through four broad areas over time: medical sciences, patient-centered care, population health, and professional development (the last focusing on communication, standards of practice, team collaboration, personal responsibility, etc.).

• *Foundation Phase (18 months)*: The first phase comprises three semesters of organ-based blocks, clinical skills education, and social and health systems and science through courses in Medical Sciences, Patient Centered Care, and Social and Health Systems. 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 genetics which are integrated throughout the curriculum.

- *Application Phase (12 months)*: During Application Phase, students begin by completing the Transition to Application Phase course, then spend 12 months completing core clinical clerkship blocks through three courses and attending monthly sessions of longitudinal courses.
 - **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.
 - **Community Based Longitudinal Care** (CLBC) is an ambulatory course that comprises pediatrics, internal medicine, family medicine, hospice care, 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 evidencebased 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 includes integrated didactics.
 - Social and Health Systems (SHS4: meets monthly during Application Phase): Students complete the SHS 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, under-insurance, 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.
- *Individualization Phase (14 months):* 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. Courses include translational research, a critical care course, two acting internships, one advanced clinical rotation, social and health system sciences, four electives, and a Transition to Residency course.

4. SPECIAL PROGRAM

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 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 2024 includes 5 F.I.R.S.T. students, all entering Family Medicine.

5. ADDITIONAL DEGREES/RESEARCH YEARS

Approximately 31% of students in this class took a leave of absence, usually following Application Phase, to conduct research, complete an M.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 the second year and return to the curriculum after completing their additional degree.

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

All graduates:	4.54 years
M.D. only:	4.29 years
M.D./M.P.H.:	5.00 years
M.D./M.B.A.:	5.25 years
M.D./Ph.D.:	8.33 years

6. GRADING

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

- Foundation Phase: All Medical Science, Patient Centered Care, and Social & Health Systems 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 Social and Health Systems (SHS4), use the following grading standards that rely on a 100-point scale. Students who fail are required to retake the full course. The school has moved to a competency-based grading structure for the application phase using Honors/High Pass/Pass. These grades are assigned using the following guidelines.
 - 90 or above = Honors
 - 85 89.9 = High Pass
 - 75 84.9 = Pass
- Individualization Phase: All Individualization Phase courses are graded on a scale of *Honors, High Pass, Pass, Fail.*

Description of the evaluation system used at UNC SOM:

- 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 W: Withdrew from Course
- *Temporary Grade:* IN: Incomplete other than final examination

7. FINAL ADJECTIVES

Each student's final adjective in their MSPE is assigned based on the performance rubric below:

*PERFORMANCE RATING categories used to evaluate candidates for residency are Outstanding, Excellent, Very Good, Good, or Adequate. Assignment of the performance rating is based <i>primarily</i> on grades, but may positively reflect extraordinary leadership, community service, or research, or be adversely affected by academic or professionalism issues. A committee of staff and faculty members reviews/approves each final adjective to ensure we have followed the guidelines below. Students may appeal their adjective by contacting the Staff Writer.			
OUTSTANDING	Earned grades of Honors in all Application Phase courses and blocks. No USMLE exam failures. No professionalism		
	concerns.		
EXCELLENT	Good academic performance with few/no academic difficulties. No USMLE exam failures. No professionalism concerns.		
VERY GOOD	Satisfactory academic performance; able to overcome academic difficulties such as a failure of Step 1 exam, multiple failures during medical school (2 or more Foundation Phase blocks, shelf exams, or combination), or professionalism concerns.		
GOOD	Failed one Application or Individualization Phase course or failed more than one Step exam, or the Student Progress Committee levied an adverse action for professionalism concerns.		
ADEQUATE	Was reviewed by Student Progress Committee for possible dismissal.		

8. USMLE COMPLIANCE INFORMATION

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

USMLE Step 1: √ Required for promotion √ Required for graduation □ Required, but not for promotion/graduation □ Not required	 Step 2 Clinical Knowledge: □ Required for promotion □ Required for graduation □ Required, but not for promotion/graduation □ Not required √ Required for NRMP 	 USMLE Step 2 Clinical Skills: □ Required for promotion □ Required for graduation □ Required, but not for promotion/graduation √ Not required □ Required for NRMP
	-	-

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

- $\sqrt{1}$ Completion of course
- $\sqrt{}$ Completion of clerkship
- □ Completion of third year
- $\sqrt{\mathbf{Graduation}}$

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

- $\sqrt{\text{Reported exactly as written}}$
- $\hfill\square$ 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):

- $\sqrt{\text{Completely in compliance with Guidelines' recommendations}}$
- □ Partially in compliance with Guidelines' recommendations
- □ Not in compliance with Guidelines' recommendations

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 a dean or a member of the Student Affairs staff. Students read the final version (and may have it reviewed by their advisor) before submission.

Students are permitted to review the MSPE prior to its transmission (check one): $\sqrt{2}$ Yes \Box No