## ASEF-PSOM Executive Council Meeting May 23, 2017, JMB Wood Room

**Present**: Roger Allen, Peter Bloch, Michael Crancro, Fred Frankel, Warren Gefter, Joel Greenberg, Susan Heyner, Howard Goldfine, Bill Hanson, Fred Henretig, Jon Lindstrom, Sue Kramer, Rob MacGregor, Vicki Mulhern (FAPD), Ana Lia Obaid, , Brian Salzberg, Jim Saunders, Karen Shala (FAPD), Peter Wilding, Don Young

**Absent**: Anna Meadows, Jeanne Myers, Yvonne Paterson, , Marvin Steinberg, Jamie Wheeler **Guest Speaker:** Dr. Gail Morrison, Senior Vice Dean for Education The meeting was called to order by Sue Kramer at 12:05PM.

**Gail Morrison:** Introduced her topic as "Medical Education in the 21<sup>st</sup> Century: Past, Present and Future". In the 20<sup>th</sup> century, the traditional curriculum was two years basic science and two years clinical experiences, with most clinical experience being in a hospital setting. Curriculum in the 21<sup>st</sup> century has shifted to a four year continuum with the integration of basic sciences and clinical medicine. Curricular model should maintain maximum flexibility.

Penn's Curriculum 2000 has three main themes: 1. Science of Medicine 2. Technology and Practice of Medicine 3. Professionalism and Humanism. Penn was ahead of other schools in the switch to a different style of curriculum including small groups and no large lectures, using online digital images, standardized (acting) patients, simulation learning and having information available online (books/lectures/etc.).

The new library being built has no books.

Virtual Curriculum came about when a young medical student was in the hospital after an accident and someone introduced the idea of virtual learning. Penn took the steps needed and the young woman was able to go through her courses online. This is beneficial to the school because you can track what the students are looking at and what they aren't.

Curriculum should be delivered by following "practice and do" so the brain can retain the information.

With the "New" model, students have almost everything they need to access in their pockets on their ipad (syllibi, books, lectures, journals, articles).

Penn offers Student Centered Programs. Students are able to follow patients longitudinally to better understand patient issues and chronic disease. The LEAPP Program allows Penn students to work with families in the West Philadelphia area. There are also a number of student —led community clinics.

Students at Penn have the opportunity to use simulation and in the future there will be simulation labs right next to procedure rooms.

In 2006, Penn implemented team-based learning. At the start of med school, they are placed in teams and will stay in these same teams throughout the four years. Every year, there are one or two teams that have issues working together and a coach will come in to help guide the group through their problems.

The stethoscope is being replaced by ultrasound machines. The machines are way more accurate and are getting small enough to fit in one's pocket. All students learn how to use ultrasound regardless of their track.

Most students receive a dual degree at Penn and this is not reflective of all US medical schools. 2017 Match Results: 40% primary care, 35.3% Other Specialties (Anesthesiology, Dermatology, Emergency Medicine, Neurology, OBGYN, Pathology, Physical Med. and Rehab and Psychiatry) and 24.12% Surgery Specialties.

The future involves looking at social determinates of health, outpatient vs. inpatient, technology/telemedicine and healthcare providers.

A new question to think about is what is a healthcare provider? You can go to CVS to get your vaccine and see a nurse practitioner instead of a doctor. Different roles are now overlapping in many areas.

40-60 year olds may need to be retrained through Faculty Affairs for the new transformation of medicine.

**President's report**: Sue Kramer introduced the new Executive Council Members:

Michael P. Cancro, PhD, Pathology and Laboratory Medicine

Warren B. Gefter MD, Radiology

C. William Hanson, III, MD, Anesthesiology and Critical Care

Jon M. Lindstrom PhD, Neuroscience

Brian M. Salzberg, PhD, Neuroscience (re-elected for an additional term)

The ASEF Spring End of the Year Party is on June 14<sup>th</sup> at 4:00PM immediately following the 2:30PM Council Meeting.

The Fall Cultural Outing will be at the Hagley Museum

Peter Bloch reminded the group to review the email that was sent out about FY18 Committees and to reach out if you are interested.

On Sept. 13, PASEF will be holding an event about community involvement.

Howard Goldfine asked if there was a president elect. There is not one at this time.

Meeting concluded at 1:20PM

Respectfully submitted, Karen Shala Administrative Coordinator, FAPD