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Professor and Chairperson, Department of Family Medicine

<b>Match to standard-setting example(s)</b>	
<input type="checkbox"/> <b>Example 1</b> PhD in basic science department who actively participates in both medical school and graduate school courses	<p>Unlike the clinician outlined in Example 2, my teaching is confined to first and second year medical students. When I returned to the University in 1999, I was on a 50:50 plan with half of my time devoted to seeing patients and the other half to teaching. As my academic responsibilities increased over the years, the amount of time dedicated to seeing patients was decreased. As of July 2007, I became a full-time medical educator. This allowed me to pursue other educational opportunities such as development of our Simulation Laboratory.</p>
<input type="checkbox"/> <b>Example 2</b> DO in clinical department who teaches both students and residents in lecture, small groups, and at the bed-side	
<input type="checkbox"/> <b>Example 3</b> Faculty in 8th year in basic science department who teaches almost entirely in the graduate school,	
<input type="checkbox"/> <b>Example 4</b> DO in clinical department who primarily works with learners in a clinical setting.	
<b>Personal Statement</b>	
Personal Goals	<p>.Promotion of patient safety</p> <ul style="list-style-type: none"> <li>• Increased medical knowledge and clinical skills for students</li> <li>• More refined teaching skills for myself</li> <li>• Advocate of improved health literacy for the public</li> <li>• Positive role model for students</li> </ul>
Personal Preparation	<p>.Ongoing faculty development through attendance at university presentations as well as STFM and AACOM Conferences</p> <ul style="list-style-type: none"> <li>• Designed and implemented a Simulation Laboratory</li> <li>• Increased participation in item writing for the National Board of Osteopathic Medical Examiners</li> <li>• Consistent research of Evidence Based Practices to incorporate into lectures to keep information that is delivered current</li> <li>• Attendance at numerous Academic Career Development events as outlined in vitae</li> </ul>

Personal Reflection/  
Process for  
Improvement

.Continual evaluation and revision of courses after feedback from students and other lecturers

- Participation as a member of the Peer Evaluation Committee and helped design a draft of a faculty evaluation instrument. This form was recently approved and evaluations of faculty are currently ongoing
- I initiated a 360 evaluation of my job performance by seeking input from my colleagues, dean and staff. Results were discussed with the COM and Faculty Development Dean with the goal of re-surveying the same people in a year's time to monitor improvement in my performance
- To witness best practices throughout the osteopathic community, I volunteered to become a COCA accreditation site evaluator, and underwent training in January 2009. My personal goal is to bring ideas back to campus to improve our curriculum at DMU

**Revised 10/27/11**

<p>2004-2008</p> <p>Physical Diagnosis I – 33 one hour lectures with 12 two hour lectures per year delivered to 277 osteopathic and podiatry students</p> <p>Physical Diagnosis II – 48 one hour lectures in the form of standardized patient presentations, DxR computer based case simulations, and human patient simulations. Labs, practicals and examinations accounted for another 71 contact hours with students</p> <p>Dermatology – I deliver 5 of 14 lectures in this short course followed by a written multiple choice examination and visual exam where students have to diagnose dermatological disorders by sight</p> <p>Medical Ethics I &amp; II – I assumed the responsibility of revising this course in 2004. Medical jurisprudence and controversial topics such as cloning and physician assisted suicide were added to our discussion groups</p> <p>Due to my fulltime position as a medical educator, I have high numbers of contact hours with students</p> <p>I am the main clinical faculty educator during the students’ first two years of medical education on campus. Since I have assumed this position, our students’ board scores have been consistently higher than the national average</p>	<p>Physical Diagnosis I – On a 15 Likert scale, my average score from students in the class of 2007 was 4.07: 2008, 3.91 and 2009 4.32. Due to changes in institutional software, results are not available in graphic form prior to 2007 (see Appendix A1 for details)</p> <p>Physical Diagnosis II – Using the same Likert scale, my average score for the last four years were 4.12, 4.07, 4.16, and 4.08 for the class of 2007-2010 respectively (see Appendix A2 for details)</p> <p>Dermatology – My average score from students evaluated over the last five years is 4.48 on a 15 Likert scale. (see Appendix A3 for details)</p> <p>Medical Ethics I &amp; II – This course is a pass/fail course, so no digital evaluative figures are available</p> <p>Numbers of annual contact hours with students range from 246 to 546. Contact hours includes PBL sessions, lectures, both simulated and standardized patient laboratories, Physical Diagnosis labs, and examinations/practicals (see appendix B)</p> <p>My areas of responsibility include the history and physical section of Level I COMLEX and the history and physical as well as family medicine sections of Level II COMLEX. As outlined in Appendix C, our scores are consistently higher than the national mean and in general are higher than prior to my arrival in 1999</p>
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<u>Descriptions of Quantity</u>	<u>Evidence of Quality</u>
	<p>Named Favorite Preclinical faculty member by Class of 2007, 2008, &amp; 2009</p> <p>Distinguished Service Award from COM Faculty – 2005</p> <p>Dean’s Leadership Award – 2004</p> <p>Recipient of the SOMA George W. Northup Outstanding Educator of the Year Award – 2001</p> <p>Letters of support for nomination from Deans, colleagues, and students (see Appendix D)</p> <p>Comments from preceptors on the performance/skills of our third year students on rotation (see Appendix E)</p>
<b>Discussion of Breadth</b>	
<p>In my role as a fulltime educator at the University, I lecture to Physical Therapy, Physician Assistant, Podiatric, and Osteopathic students. I am responsible for early introduction of communication skills, history and physical examination development, documentation, and diagnostic/management skills. I use multiple educational tools to train the students, including computerbased case scenarios, standardized patient assessment labs, human patient simulation labs, and cardiac simulation. I oversee numerous community medicine events annually, providing a much needed service to our underserved population while allowing students early clinical exposure to patients. I also am a strong advocate for health literacy and participate regularly in our Minimedical school lecture series for the public. I also contribute a monthly article on current medical issues for the health forum section of our regional newspaper.</p>	

### **Personal Statement**

I became a faculty member at the University immediately after completing my family medicine residency in 1987. After slightly over two years, I realized I would be a better educator if I had more clinical experience. I purposefully sought out a practice in rural Iowa where I had to make decisions on my own. I continued to precept students in my office since I had a strong desire to keep my hand in teaching. After ten years in solo practice, I was approached by the Chair of the Family Medicine Department about returning as a faculty member at the University. I felt I had gained tremendous skills as a clinician, and that I would have greater credibility with students after a decade of providing patient care. I subsequently returned to the academic world in 1999, and have ultimately been promoted to Chair of the department of Family Medicine. When I returned to fulltime teaching, I made the following personal and professional goals:

1. Promotion of patient safety
2. Increased medical knowledge and clinical skills for students
3. More refined teaching skills for myself
4. Advocate of improved health literacy for the public
5. Positive role model for students
6. Incorporating osteopathic patientcentered philosophy into the practice of medicine and the educational arena.

After nearly 12 years in academics, I feel I have made significant progress in reaching all of these goals as outlined in the following narrative.

**Promotion of patient safety**

I lecture to my students on a regular basis regarding reduction of medical errors; the need for thorough documentation and legible handwriting, etc. Due to overwhelming evidence indicating the high incidence of prescription errors, I supported the incorporation of electronic health records and eprescribing into our on campus practice. I invited an attorney involved in medical malpractice to deliver a medical jurisprudence course in 2003 which is still being given annually. I consistently impress patient safety upon my students, reminding them to “do no harm”.

**Increased medical knowledge and clinical skills for students**

As a medical educator, I want my students to be as clinically knowledgeable as possible once they leave campus for rotations. In an effort to improve clinical knowledge and skills, I made significant changes to the Physical Diagnosis course during first and second years. First year students now have three encounters with standardized patients (originally they had no exposure to SPs until second year). I also started including a clinician in the room during practicals since our video cameras weren’t adequate in confirming stethoscope or hand placement. For second year students, I introduced a weekly case presentation from the DxR software program from Southern Illinois University. To prepare students for computerized based testing, I wrote case based questions for each system that are answered by students following each standardized patient encounter. I increased the number of SP encounters from 4 to 8, one of which involves an ethical dilemma such as drug abuse, domestic violence, request for physician assisted suicide, etc. Due to our inability to create structural lesions in our standardized patients, I added a viscerosomatic area of tenderness in each scenario. Students now have to palpate the paraspinal muscles and check range of motion in each case to receive patient affirmation of tenderness – the area of which aids the student in reaching a correct diagnosis.

Our students have always done well in non urgent standardized patient scenarios. I wanted students to be exposed to more urgent, critically ill “patients”. I requested funding in 2006 to design and implement a simulation lab. I traveled to various sim labs around the country to pick up best practices and designs. The only space available to build the sim lab was an old micro lab. I worked with a technician in Tennessee to design the best lab we could with our space limitations. I personally met with contractors and administration to insure the design was followed. Remodeling started in November 2006 and our open house took place in May 2007. For the first year, our second year students had four simulation experiences (including an infant resuscitation, adult ACLS case, delivery of a baby, and a pediatric or adult critical care case). Due to increased availability of lab hours, students will have 8 simulation experiences this academic year. These experiences, in addition to our 8 standardized patient cases, have improved our student’s clinical knowledge and skills. Included in Appendix B are board scores documenting improved performance in the areas I am responsible for (history and physical examination, family medicine). Although I can’t state with certainty which of these curricular changes is responsible for improving the scores, I have no doubt that all of them have been beneficial. I am also including (in Appendix D) some comments from preceptors who take our third year students on rotation. Since I am the only fulltime clinician responsible for the introduction of clinical skills and patient care, I do feel my teaching has had a significant positive impact on student outcomes.

**More refined teaching skills for myself**

My role as a solo practitioner was educational, but I realized I needed some faculty development as a medical educator once I returned to fulltime academics. My vitae outlines the numerous faculty development

conferences I have attended. I have delivered three presentations at AACOM conferences in 2007 and 2008, and have had another accepted for 2009. I became a member of the Society of Teachers of Family Medicine and the Society of Osteopathic Medical Educators to avail myself of educational



opportunities. I am registered to attend the Predoctoral Directors Leadership Workshop at the STFM conferences in January and April 2009.

I wanted to improve my test question writing skills, so I started contributing items to the NBOME in 1999. I became a Regional Reviewer for NBOME in 2003, which led to my appointment as Vice-Coordinator of Level III in 2005. As of October 2008, I assumed the role of National Coordinator for Level III.

### **Improved health literacy for the public**

I teach students about the impact of lower health literacy on patient outcomes. As Chair of our Family Medicine Department, I advocate participation of faculty and students in our numerous Community Medicine events. I volunteer at church and civic groups to speak on health promotion and preventive health care topics. I lecture in our annual Mini-Medical School lecture series, which enrolls between 300 and 400 participants. I also volunteer to write a monthly column for The Des Moines Register Health Section on timely topics such as influenza, weight maintenance over the holidays, insurance issues, etc.

### **Positive role model for students**

I volunteer hundreds of hours at community service events to emphasize to students the need to get involved and give back to their communities. I have been faculty advisor for the student chapter of ACOFP for the past 21 years. I spend hours of time each week in labs with students, developing their interviewing and physical examination skills in first year followed by their diagnostic and management training in second year. I receive great reward from being an educator; after having been an anesthesiologist and a solo practitioner in rural Iowa, I realize I was supposed to be a teacher all along. It has just been a convoluted, fascinating journey getting here.

### **Incorporating osteopathic patient-centered philosophy**

I encourage students to assume a holistic view of patients- that financial, marital, psychological aspects compound physical disorders of our patients. I lecture students early in their first year about appropriate doctor-patient communication, and that no patient is ever as important to you than the one sitting in front of you. I encourage students to give of their hearts as well as their mind – at times we can't cure all of our patient's ailments, but we can always care about our patients. My years of private practice have provided me with a legion of stories that I relate to students to make medicine come alive for them. I urge all of them to teach those who come after them as well as their patients. I ask them to display their graduation certificate and their license to practice medicine proudly. We are osteopathic physicians, striving not only to care for our patients, but to care about our patients. We touch our patients, whether it is through manipulation for low back pain or a gentle touch on the shoulder to express empathy for the death of a loved one. I tell my students to be proud of being an osteopathic physician and shoulder the responsibility of the profession with great care and diligence.

### **Table of Appendices**

Appendix A-1 Graph of Physical Diagnosis I scores for the last 3 years

Appendix A-2 Graph of Physical Diagnosis II scores for the last 4 years

Appendix A-3 Graph of Dermatology scores for the last 5 years

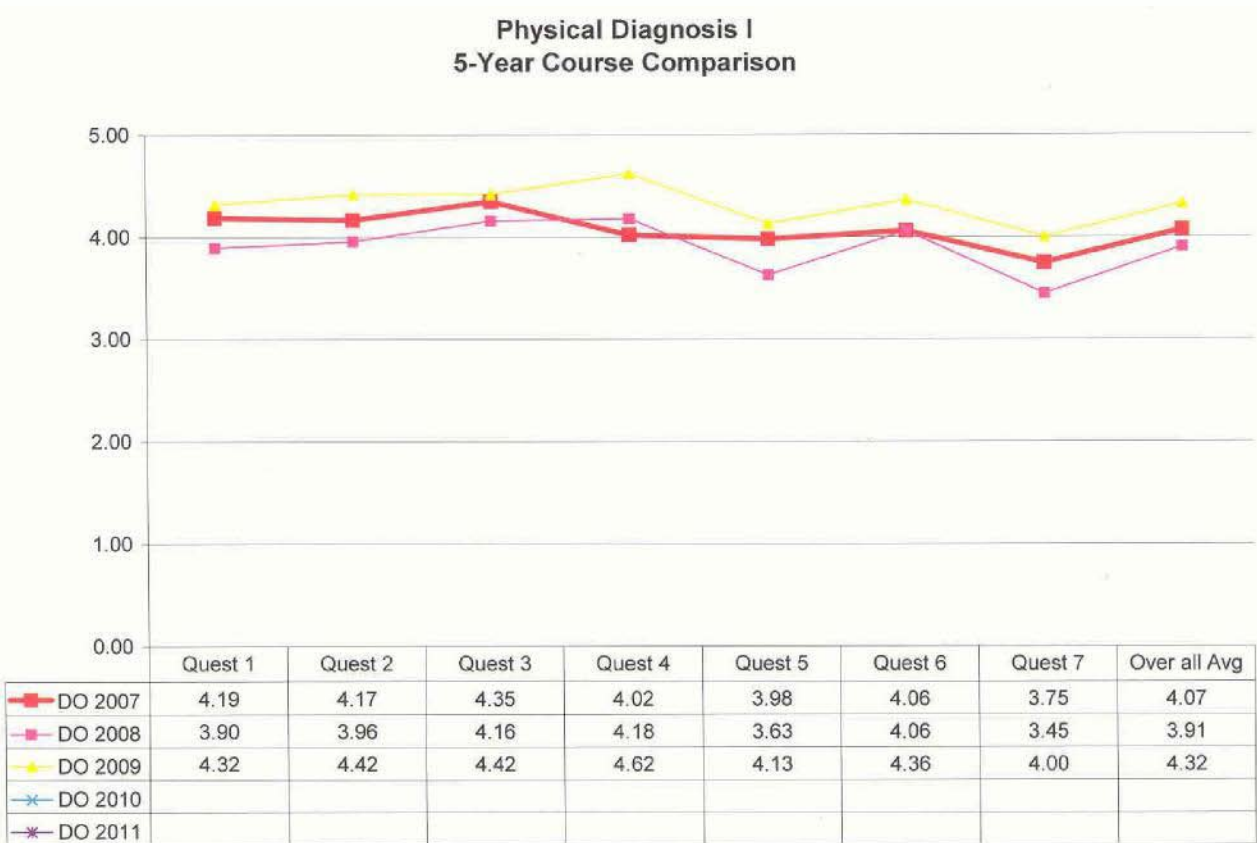
Appendix B Copy of Faculty Effort Report documenting number of contact hours with students. Due to page restriction, only the most recent three years are attached (documentation for the other two years can be provided upon request)

Appendix C Table of COMLEX Level I and II scores for the past 4 years

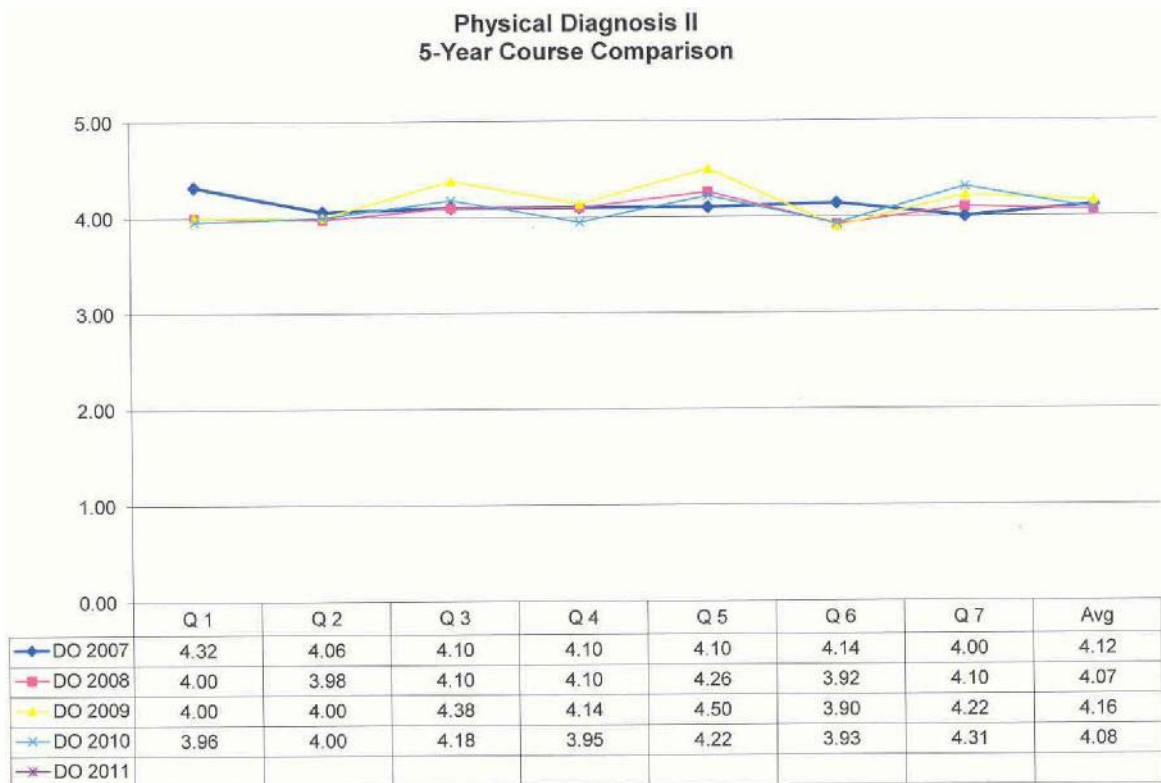
Appendix D Letters of support from college Deans (Dr. x, and Dr. y), colleagues (Dr. z and Dr. d), and students/residents (a & b)

Appendix E Written comments from preceptors regarding third year student performance in their clinics

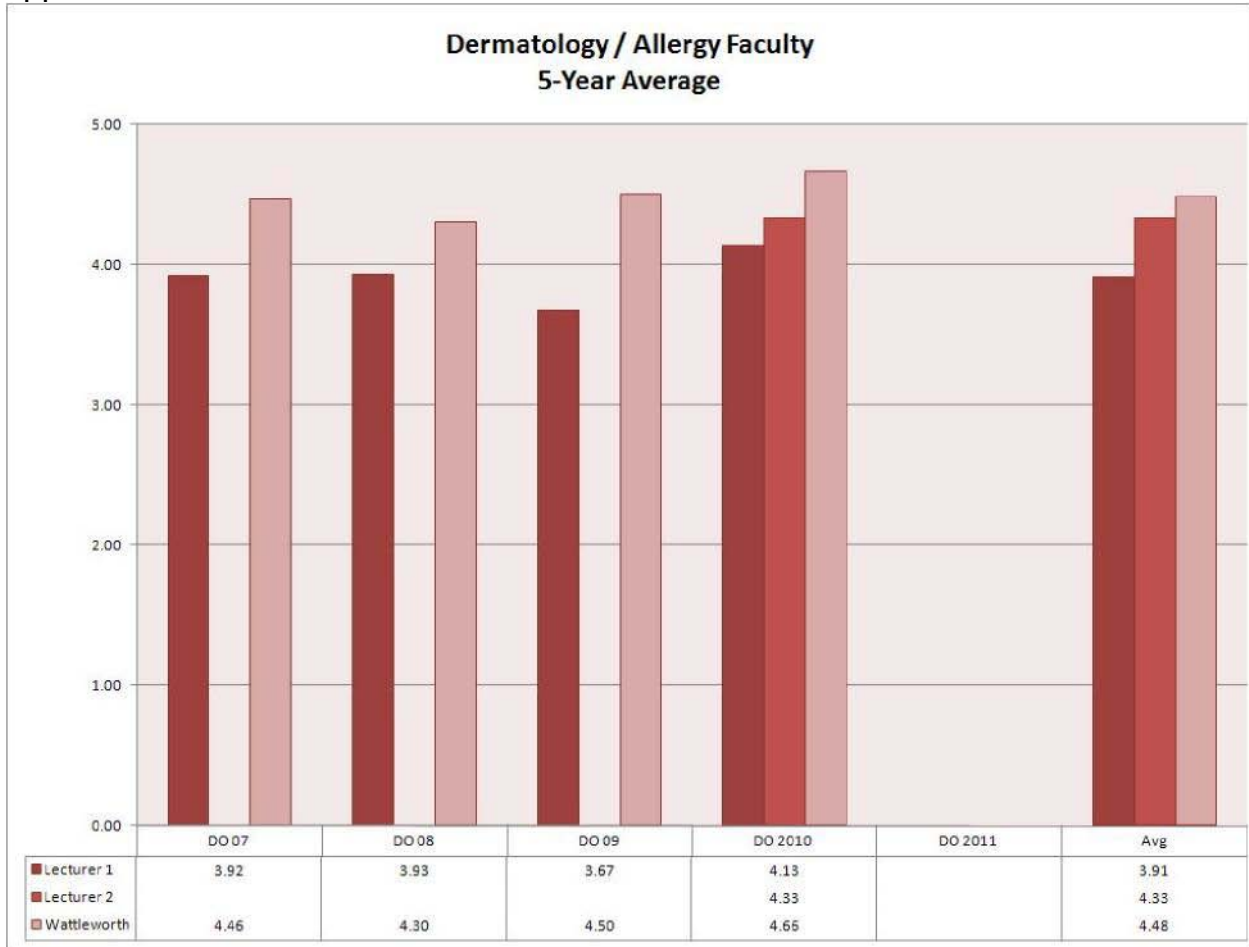
Appendix A-1



Appendix A-2



Appendix A-3



## Appendix B

Course_Name	Lecture_Title	Program	Type	Date	Hours	#Stdts.
Physical Diagnosis I	PDI I - Intro to Physical Diagnosis	DO/DPM	Lecture	1/3/07	1	268
Physical Diagnosis I	PD1 2 - The Medical Interview	DO/DPM	Lecture	1/4/07	1	268
Evidence Based Medicine	EBM Group Facilitation	DO	PBL	1/5/07	1	8
Physical Diagnosis II	PD II Endocrine DxR 1	DO	Lecture	1/5/07	1	205
Behavioral Medicine	BM/Psych 5 - Key Concepts of Death & Dying	DPM	Lecture	1/5/07	1	47
Physical Diagnosis I	PD1 3 - Medical History I	DO/DPM	Lecture	1/8/07	1	268
Physical Diagnosis I	PD1 4 - Medical History II - Review of Systms	DO/DPM	Lecture	1/8/07	1	268
Clin/Prev/Lab Med (CPLM) III	ENT DXR Case	PA	Lecture	1/9/07	1	42
Physical Diagnosis I	PD1 5 - Medical Documentation I	DO/DPM	Lecture	1/11/07	1	268
Physical Diagnosis II	PD II Endocrine DxR 2	DO	Lecture	1/12/07	1	205
Physical Diagnosis II	PD II Hem SPAL Review	DO	Lecture	1/12/07	1	205
Physical Diagnosis I	PD1 Lab 2	DO/DPM	Lab	1/22/07	2	32
Medical Ethics II	Inappropriate Doctor Patient Relationships Panel	DO	Lecture	1/22/07	2	220
Mental Illness in the Cinema	Anxiety Disorders	DO	Lecture	1/22/07	2.5	12
Physical Diagnosis I	PD1 6 - General Assessment & Exam Techniques	DO/DPM	Lecture	1/22/07	1	268
Physical Diagnosis I	PD1 Lab 2	DO/DPM	Lab	1/23/07	2	35
Physical Diagnosis I	PD1 Lab 2	DO/DPM	Lab	1/23/07	2	31
Physical Diagnosis I	PD1 Lab 2	DO/DPM	Lab	1/24/07	1	36
Clin/Prev/Lab Med (CPLM) III	PD Review - Optional	DPM	Lecture	1/24/07	2	42
Physical Diagnosis I	PD1 - SPAL 1.1 Preview	DO/DPM	Lecture	1/24/07	1	268
Physical Diagnosis I	PD1 Lab 2	DO/DPM	Lab	1/25/07	2	34
Evidence Based Medicine	EBM Group Facilitation	DO	PBL	2/1/07	1	8
Chronic Care	Group Meeting	DO	PBL	2/1/07	1	4
Physical Diagnosis I	SPAL 1.1	DO/DPM	SPAL	2/1/07	5	55
Physical Diagnosis I	PD1 Lab 3	DO/DPM	Lab	2/5/07	2	34
Physical Diagnosis I	PD1 Lab 3	DO/DPM	Lab	2/6/07	2	32
Physical Diagnosis I	PD1 Lab 3	DO/DPM	Lab	2/6/07	2	36
Physical Diagnosis I	PD1 Lab 3	DO/DPM	Lab	2/7/07	2	33
Physical Diagnosis I	PD1 Lab 3	DO/DPM	Lab	2/8/07	2	34
Physical Diagnosis I	PD1 Lab 3	DO/DPM	Lab	2/8/07	2	34
Physical Diagnosis I	PD1 Lab 3	DO/DPM	Lab	2/9/07	2	31
Physical Diagnosis I	PD1 Lab 3	DO/DPM	Lab	2/9/07	2	34
Reproduction	Reproduction 31 - Common Presentations in OB/Gyn	DO	Lecture	2/12/07	1	205
Physical Diagnosis I	PD1 Lab 4	DO/DPM	Lab	2/12/07	2	32
Physical Diagnosis I	PD1 Lab 4	DO/DPM	Lab	2/13/07	2	34
Physical Diagnosis I	PD1 Lab 4	DO/DPM	Lab	2/13/07	2	34
Physical Diagnosis I	PD1 Lab 4	DO/DPM	Lab	2/15/07	2	35
Physical Diagnosis II	PD II Endocrine SPAL Preview	DO	Lecture	2/15/07	1	205
Physical Diagnosis I	PD1 Lab 4	DO/DPM	Lab	2/15/07	2	34
Physical Diagnosis I	PD1 Lab 4	DO/DPM	Lab	2/16/07	2	36
Physical Diagnosis I	PD1 Lab 4	DO/DPM	Lab	2/16/07	2	31
Physical Diagnosis I	PD1 SPAL 1.2 Preview	DO/DPM	Lecture	2/16/07	1	268
Physical Diagnosis I	PD1 I Lab 6	DO/DPM	Lab	2/26/07	2	31
Physical Diagnosis I	PD1 I Lab 6	DO/DPM	Lab	2/27/07	2	35
Physical Diagnosis I	PD1 I Lab 6	DO/DPM	Lab	2/27/07	2	34
Physical Diagnosis I	PD1 I Lab 6	DO/DPM	Lab	2/28/07	2	34

Physical Diagnosis I	PD1 I Lab 6	DO/DPM	Lab	3/1/07	2	34
Physical Diagnosis I	PD1 I Lab 6	DO/DPM	Lab	3/1/07	2	35
Physical Diagnosis I	PD1 I Lab 6	DO/DPM	Lab	3/2/07	2	34
Physical Diagnosis I	PD1 I Lab 6	DO/DPM	Lab	3/2/07	2	35
Physical Diagnosis II	PD II Renal DxR 2	DO	Lecture	3/2/07	1	205
Physical Diagnosis I	PD1 Lab 7	DO/DPM	Lab	3/5/07	2	35
Physical Diagnosis II	PD II DxR 3	DO	Lecture	3/6/07	1	205
Physical Diagnosis I	PD1 Lab 7	DO/DPM	Lab	3/6/07	2	36

Physical Diagnosis I	PD1 Lab 7	DO/DPM	Lab	3/6/07	2	32
Physical Diagnosis I	PD1 Lab 7	DO/DPM	Lab	3/7/07	2	34
Evidence Based Medicine	EBM Group Facilitation	DO	PBL	3/7/07	1	8
Physical Diagnosis I	PD1 Lab 7	DO/DPM	Lab	3/7/07	2	31
Physical Diagnosis I	PD1 Lab 7	DO/DPM	Lab	3/8/07	2	34
Physical Diagnosis I	PD1 Lab 7	DO/DPM	Lab	3/8/07	2	32
Physical Diagnosis I	PD1 I Lab 6	DO/DPM	Lab	3/9/07	2	70
Physical Diagnosis I	PD1 Lab 7	DO/DPM	Lab	3/9/07	2	34
Medical Ethics II	Ethics II - Ethical & Legal Issues for Physicians	DO	Lecture	3/12/07	2	204
Physical Diagnosis I	PD1 Lab 8	DO/DPM	Lab	3/26/07	2	34
Physical Diagnosis II	PD II Renal SPAL	DO	Lab	3/27/07	5.5	6
Physical Diagnosis II	PD II Renal SPAL	DO	Lab	3/28/07	5.5	6
Physical Diagnosis I	PD1 Lab 9 - Harvey Lab In L-12	DO/DPM	Lab	4/2/07	2	31
Physical Diagnosis I	PD1 20 - Peripheral Vascular	DO/DPM	Lecture	4/2/07	1	266
Physical Diagnosis I	PD1 Lab 9 - Harvey Lab In L-12	DO/DPM	Lab	4/3/07	2	32
Physical Diagnosis I	PD1 Lab 9 - Harvey Lab In L-12	DO/DPM	Lab	4/3/07	2	34
Physical Diagnosis II	PD II Neurology DxR 2	DO	Lecture	4/3/07	1	202
Neurology	Neurology 26 - Common Neurologic Presentation in Primary Care	DO	Lecture	4/3/07	1	202
Physical Diagnosis I	PD1 Lab 9 - Harvey Lab In L-12	DO/DPM	Lab	4/4/07	2	36
Medical Ethics I		DO	PBL	4/4/07	1	14
Physical Diagnosis I	PD1 SPAL 1.2 Review	DO/DPM	Lecture	4/4/07	1	266
Physical Diagnosis II	PD II Neurology SPAL Preview	DO	Lecture	4/4/07	1	202
Physical Diagnosis I	PD1 Lab 9 - Harvey Lab In L-12	DO/DPM	Lab	4/5/07	2	31
Physical Diagnosis I	PD1 Lab 9 - Harvey Lab In L-12	DO/DPM	Lab	4/5/07	2	34
Physical Diagnosis I	PD1 Lab 9 - Harvey Lab In L-12	DO/DPM	Lab	4/6/07	2	35
Physical Diagnosis I	PD1 Lab 9 - Harvey Lab In L-12	DO/DPM	Lab	4/6/07	2	33
Physical Diagnosis I	PD1 Lab 10	DO/DPM	Lab	4/9/07	2	31
Physical Diagnosis I	PD1 Lab 10	DO/DPM	Lab	4/10/07	2	36
Physical Diagnosis I	PD1 Lab 10	DO/DPM	Lab	4/10/07	2	33
Physical Diagnosis I	PD1 Lab 10	DO/DPM	Lab	4/11/07	2	35
Physical Diagnosis I	PD1 Lab 10	DO/DPM	Lab	4/12/07	2	32
Physical Diagnosis I	PD1 Lab 10	DO/DPM	Lab	4/12/07	2	34
Physical Diagnosis I	PD1 23 - Female Genitalia	DO/DPM	Lecture	4/13/07	1	266
Physical Diagnosis I	PD1 Lab 10	DO/DPM	Lab	4/13/07	2	34
Physical Diagnosis I	PD1 Lab 10	DO/DPM	Lab	4/13/07	2	31
Physical Diagnosis I	PD1 25 - Anus, Rectum, Prostate	DO/DPM	Lecture	4/16/07	1	266
Physical Diagnosis I	PD1 Lab 11	DO/DPM	Lab	4/16/07	2	34
Physical Diagnosis I	PD1 24 - Male Genitalia	DO/DPM	Lecture	4/16/07	1	266
Physical Diagnosis II	PD II Neurology SPAL	DO	SPAL	4/17/07	5	49
Physical Diagnosis I	PD1 Lab 11	DO/DPM	Lab	4/18/07	2	34
Physical Diagnosis I	PD1 Lab 11	DO/DPM	Lab	4/19/07	2	31
Physical Diagnosis I	PD1 Lab 11	DO/DPM	Lab	4/19/07	2	33
Physical Diagnosis I	PD1 Lab 11	DO/DPM	Lab	4/20/07	2	31
Physical Diagnosis I	PD1 Lab 11	DO/DPM	Lab	4/20/07	2	31
Medical Ethics II	Ethics II - Ethical Dilemmas Encountered in Clinical Rotations & Practice	DO	Lecture	4/23/07	2	201
Intro to Medical Ethics I	Intro to Medical Ethics 11 - Classic Cases in Medical Ethics	DO	Lecture	4/25/07	2	208
Physical Diagnosis II	PD II Neurology SPAL Review	DO	Lecture	4/30/07	1	202
Physical Diagnosis I	PD SPAL 1.3 Preview	DO/DPM	Lecture	4/30/07	1	266
Physical Diagnosis II	PD II Capstone SPAL	DO	Lab	5/7/07	2.5	3
Dermatology/Allergy	Derm/Allergy 2 - Fungal & Parasitic Diseases of the Skin	DO	Lecture	5/7/07	1	202
Dermatology/Allergy	Derm/Allergy 3 - Geriatric Skin Problems	DO	Lecture	5/7/07	1	202
Dermatology/Allergy	Derm/Allergy 7 - Wound Management, Venous Ulcers & Burns	DO	Lecture	5/8/07	1	202
Dermatology/Allergy	Derm/Allergy 5 - Viral Disorders of the Skin	DO	Lecture	5/8/07	1	202
Physical Diagnosis I	PD1 Elective Lab 12 (1)	DO/DPM	Lab	5/9/07	3	60
Physical Diagnosis II	PD II Capstone SPAL	DO	Lab	5/10/07	4.5	6

Dermatology/Allergy	Derm/Allergy 10 - Cutaneous Changes in Peripheral	DO	Lecture	5/10/07	1	202
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# Standard-Setting Example #1

# Teaching and Evaluation

Revised 10/27/11

	Vascular Dx					
Physical Diagnosis I	Exam 3	DO/DPM	Exam	5/11/07	2	266
Physical Diagnosis I	Visual Recognition Exam	DO/DPM	Exam	5/21/07	4	266
Physical Diagnosis I	PD1 SPAL 1.3	DO/DPM	Lab	5/21/07	5	6
Physical Diagnosis I	PD1 SPAL 1.3	DO/DPM	Lab	5/22/07	5	6
Physical Diagnosis I	PD1 SPAL 1.3	DO/DPM	Lab	5/23/07	5	6
Physical Diagnosis I	PD1 SPAL 1.3	DO/DPM	Lab	5/24/07	2	3
Flex Care Training	MBTI	DO	PBL	7/25/07	8	0
Prev Med / Nutrition	PM/Nutrition 4: Health Screening of Men & Women	DO	Lecture	7/26/07	1	214
Flex Care Training	MBTI	DO	PBL	7/26/07	6	0
Prev Med / Nutrition	PM/Nutrition 5: ID & Screening of High-Risk Populations	DO	Lecture	7/26/07	1	214
Physical Diagnosis II	PD II - 2: Ordering Labs and X-Rays I	DO	Lecture	7/26/07	1	214
Physical Diagnosis II	PD II - 1: Intro to Physical Diagnosis II	DO	Lecture	7/26/07	1	214
Flex Care Training	MBTI	DO	PBL	7/26/07	3	0
Physical Diagnosis II	PD II - 3: Ordering Labs and X-Rays II	DO	Lecture	7/27/07	1	214
Physical Diagnosis II	Obstetrical Deliveries	DO	PBL	8/2/07	1	214
Physical Diagnosis II	Introduction to Simulation	DO	Lecture	8/6/07	1	214
MBTI	MBTI	DO	Lecture	8/13/07	2	16
Physical Diagnosis II	PD II - 7: Review of PALS	DO	Lecture	8/14/07	1	214
Physical Diagnosis II	PD II - 6: Review of ACLS	DO	Lecture	8/14/07	1	214
Physical Diagnosis II	PD II - 8: Incorporating the Team Leader Concept in Sim	DO	Lecture	8/16/07	1	214
Intro to Podiatric Medicine	Int Pod Med 4 Ethics	DPM	Lecture	8/22/07	1	59
Cardiorespiratory	CR 22: Heart Sounds	DPM	Lecture	8/23/07	1	55
Physical Diagnosis II	PD II - GI DxR 1	DO	Lecture	8/24/07	1	214
Intro to Podiatric Medicine	Int Pod Med 5 Dr/Pt Rel	DPM	Lecture	8/29/07	1	59
Physical Diagnosis II	PD II - GI DxR2	DO	Lecture	8/31/07	1	214
Cardiorespiratory	CR 34: Cardio DxR Case	DPM	Lecture	9/4/07	1	55
Cardiorespiratory	CR 33: Vascular Considerations in Podiatry	DPM	Lecture	9/4/07	1	55
Cardiorespiratory	CR 36: Harvey Heart Sounds Lab Presentation	DPM	Lecture	9/6/07	1	55
Cardiorespiratory	CR 35: Physical Diagnosis of the Cardiac System	DPM	Lecture	9/6/07	1	55
Behavioral Medicine	BM 20 Death & Dying: Tasks for Pt, Fam, Physician	DO	Lecture	9/7/07	1	216
Physical Diagnosis II	PD II - GI DxR 3	DO	Lecture	9/7/07	1	214
Physical Diagnosis II	PD II - GI SPAL Preview	DO	Lecture	9/7/07	1	214
Medical Ethics II	Assessing Decisional Capacity	DO	PBL	9/10/07	1	214
Cardiorespiratory	CR 45: Harvey Heart Sounds Practical Exam	DPM	Exam	9/10/07	1	55
Medical Ethics II	Assessing Decisional Capacity	DO	PBL	9/10/07	1	14
Cardiorespiratory	CR 43: Physical Diagnosis of the Respiratory System	DPM	Lecture	9/10/07	1	55
Gastrointestinal (GI)	GI 41 PD of GI System	DO	Lecture	9/11/07	1	214
Evidence Based Medicine	EBM Group Facilitation	DO	PBL	9/11/07	1	8
Physical Diagnosis II	OB simulation Lab	DO	Sim Lab	9/12/07	2	10
Biochemistry	BC 39 Clinical Correlation	DO/DPM	Lecture	9/19/07	1	284
Cardiovascular	Cardio 3 Heart Sounds	DO	Lecture	9/19/07	1	214
Cardiorespiratory	CR 52: Pulmonary Embolism	DPM	Lecture	9/21/07	1	55
Physical Diagnosis II	PD II Harvey Lab 1	DO	Lab	9/24/07	2	105
Cardiorespiratory	CR 51: Introduction to Anesthesia	DPM	Lecture	9/24/07	1	55
Cardiorespiratory	CR 53: Respiratory DxR Case	DPM	Lecture	9/24/07	1	55
Physical Diagnosis II	PD II Harvey Lab 1	DO	Lab	9/25/07	2	109
Physical Diagnosis II	PD II Harvey Lab 2	DO	Lab	9/25/07	2	107
Physical Diagnosis II	PD II Harvey Lab 2	DO	Lab	9/27/07	2	107
Physical Diagnosis II	PD II - Cardio DxR 1	DO	Lecture	9/28/07	1	214
Physical Diagnosis II	PD II - GI SPAL Review	DO	Lecture	10/2/07	1	213
Cardiovascular	Cardio 23 Common Cardio Presentation	DO	Lecture	10/5/07	1	213
Physical Diagnosis II	PD II - Cardio DxR 2	DO	Lecture	10/5/07	1	213
Physical Diagnosis II	PD II Harvey Rev Optional	DO	Lecture	10/5/07	1.5	213

Physical Diagnosis II	PD II Harvey Practical	DO	Lab	10/8/07	1.5	104
Physical Diagnosis II	PD II Harvey Practical	DO	Lab	10/9/07	1.5	109

# Standard-Setting Example #1

# Teaching and Evaluation

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Physical Diagnosis II	Cardio Sim Lab	DO	Sim Lab	10/10/07	4	10
Physical Diagnosis II	Cardio Sim Lab	DO	Sim Lab	10/11/07	4	10
Endocrine/Human Reproduction	Endo 22: DxR Case	DPM	Lecture	10/12/07	1	55
Physical Diagnosis II	PD II - Cardio SPAL Preview	DO	Lecture	10/12/07	1	213
DPM-10 DMU Optional	Cardio SPAL Preview	DPM	Lecture	10/16/07	1	55
Physical Diagnosis II	Cardio Sim Lab	DO	Sim Lab	10/17/07	3.5	10
Physical Diagnosis II	Cardio SPAL	DO	SPAL	10/22/07	6	43
Hematology	Hem 16: DxR Case	DPM	Lecture	10/23/07	1	55
Physical Diagnosis II	PD II - Resp DxR 1	DO	Lecture	10/26/07	1	213
Cardiovascular	Cardio Sim Lab	DO	Sim Lab	10/29/07	2	4
Cardiovascular	Cardio Sim Lab	DO	Sim Lab	10/29/07	2	5
Cardiovascular	Cardio Sim Lab	DO	Sim Lab	10/30/07	2	5
Cardiovascular	Cardio Sim Lab	DO	Sim Lab	10/30/07	2	5
Evidence Based Medicine	Group Facilitation	DO	PBL	10/31/07	1	7
Cardiovascular	Cardio Sim Lab	DO	Sim Lab	11/1/07	2	5
Cardiovascular	Cardio Sim Lab	DO	Sim Lab	11/1/07	2	5
Cardiovascular	Cardio Sim Lab	DO	Sim Lab	11/2/07	2	5
Physical Diagnosis II	PD II - Resp DxR 2	DO	Lecture	11/2/07	1	213
Cardiovascular	Cardio Sim Lab	DO	Sim Lab	11/2/07	2	5
Physical Diagnosis II	GI Make Up Sim Lab	DO	Sim Lab	11/5/07	2	5
Cardiovascular	Cardio Sim Lab	DO	Sim Lab	11/6/07	2	5
Cardiovascular	Cardio Sim Lab	DO	Sim Lab	11/6/07	2	5
Physical Diagnosis II	PD II - Respiratory SPAL Preview	DO	Lecture	11/7/07	1	213
Physical Diagnosis II	PD II - Cardio SPAL Review	DO	Lecture	11/7/07	1	213
Neurology	Neurology 25: DxR Case Presentation	DPM	Lecture	11/8/07	1	55
Cardiovascular	Cardio Sim Lab	DO	Sim Lab	11/8/07	2	5
Cardiovascular	Cardio Sim Lab	DO	Sim Lab	11/8/07	2	5
Cardiovascular	Cardio Sim Lab	DO	Sim Lab	11/9/07	2	5
Cardiovascular	Cardio Sim Lab	DO	Sim Lab	11/9/07	2	5
Physical Diagnosis II	PD II - Respiratory DxR 3	DO	Lecture	11/9/07	1	213
Respiratory	Resp 31: Common Resp Scenarios / Primary Care	DO	Lecture	11/12/07	1	214
DPM-10 DMU Optional	Respiratory SPAL Preview	DPM	Lecture	11/13/07	1	55
Physical Diagnosis II	Cardio SPAL	DO	SPAL	11/20/07	6	43
Physical Diagnosis II	PD II - Hem DxR 1	DO	Lecture	11/20/07	1	213
Cardiovascular	Cardio Sim Lab	DO	Sim Lab	11/27/07	2	5
Cardiovascular	Cardio Sim Lab	DO	Sim Lab	11/27/07	2	4
Physical Diagnosis II	PD II - Hem DxR 2	DO	Lecture	11/28/07	1	213
Cardiovascular	Cardio Sim Lab	DO	Sim Lab	11/28/07	2	5
Renal	21 DxR Case Presentation	DPM	Lecture	11/30/07	1	55
	Intro to Lab and X-ray	DPM	Lecture	11/30/07	2	55
Cardiovascular	Cardio Sim Lab	DO	Sim Lab	11/30/07	2	5
Cardiovascular	Cardio Sim Lab	DO	Sim Lab	11/30/07	2	5
Evidence Based Medicine	Group Facilitation	DO	PBL	12/10/07	1.5	7

Cardiovascular	Respiratory Sim Lab	DO	Sim Lab	12/11/07	2	4
Cardiovascular	Respiratory Sim Lab	DO	Sim	12/11/07	2	5

# Standard-Setting Example #1

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Physical Diagnosis II	PD II - Hem SPAL Preview	DO	Lecture	12/11/07	1	213
Physical Diagnosis II	Respiratory Sim Lab	DO	Sim Lab	12/12/07	2	5
Physical Diagnosis II	PD II - Hem DxR 3	DO	Lecture	12/13/07	1	213
Physical Diagnosis II	Respiratory Sim Lab	DO	Sim Lab	12/14/07	2	5
Hematology	44 Common Hematological Presentations	DO	Lecture	12/14/07	1	214
Physical Diagnosis II	Respiratory Sim Lab	DO	Sim Lab	12/14/07	2	5
Physical Diagnosis II	Heme SPAL	DO	SPAL	12/19/07	6	43
Gastrointestinal / Nutrition	27: DxR Case	DPM	Lecture	12/19/07	1	55
					396	
Physical Diagnosis II	Respiratory Sim Lab	DO	Sim Lab	1/7/08	2	5
Physical Diagnosis II	Respiratory Sim Lab	DO	Sim Lab	1/8/08	2	5
Physical Diagnosis II	Respiratory Sim Lab	DO	Sim Lab	1/8/08	2	5
Medical Ethics I	Research	DO	PBL	1/9/08	1	14
Physical Diagnosis I	PD Lab	DO/DPM	Lab	1/9/08	2	36
Physical Diagnosis II	Respiratory Sim Lab	DO	Sim Lab	1/10/08	2	5
Physical Diagnosis II	Respiratory Sim Lab	DO	Sim Lab	1/10/08	2	5
Physical Diagnosis II	Endocrine DxR 1	DO	Lecture	1/11/08	1	214
Pediatrics	Pediatric Sim Lab	DO	Sim Lab	1/14/08	1	12
Evidence Based Medicine	Group Facilitation	DO	PBL	1/14/08	2	8
Clinical Patient Assessment	DxR ENT	PA	Lecture	1/15/08	1	45
Physical Diagnosis II	Respiratory Sim Lab	DO	Sim Lab	1/15/08	2	3
Physical Diagnosis II	Respiratory Sim Lab	DO	Sim Lab	1/15/08	2	5
Physical Diagnosis II	Endocrine DxR 2	DO	Lecture	1/16/08	1	214
Physical Diagnosis II	Hem SPAL Review	DO	Lecture	1/16/08	1	214
Physical Diagnosis I	PD Lab	DO	Lab	1/16/08	2	36
Physical Diagnosis II	Respiratory Sim Lab	DO	Sim Lab	1/18/08	2	5
Physical Diagnosis II	Respiratory Sim Lab	DO	Sim Lab	1/18/08	2	5
Physical Diagnosis II	Respiratory Sim Lab	DO	Sim Lab	1/22/08	2	5
Physical Diagnosis II	Respiratory Sim Lab	DO	Sim Lab	1/22/08	2	5
Clinical Patient Assessment	DxR - Cardiac	PA	Lecture	1/22/08	1	45
Physical Diagnosis I	ENT Lab	DO	Lab	1/23/08	2	36
Physical Diagnosis I	ENT Lab	DO	Lab	1/23/08	2	36
Mental Illness and the Cinema	Anxiety Disorders	DO	Lecture	1/28/08	2.5	16
Physical Diagnosis II	Respiratory Sim Lab	DO	Sim Lab	1/28/08	1	8
Physical Diagnosis II	Respiratory Sim Lab	DO	Sim Lab	1/28/08	1	7
Clinical Patient Assessment	DxR - Respiratory		Lecture	1/29/08	1	45
Physical Diagnosis II	Sim Lab	DO	Sim Lab	1/30/08	1.5	5
Evidence Based Medicine	Group Facilitation	DO	PBL	1/31/08	1.5	8
Physical Diagnosis II	Endocrine Sim Lab	DO	Sim Lab	2/1/08	1	5
Physical Diagnosis II	Endocrine Sim Lab	DO	Sim Lab	2/1/08	1	5
Physical Diagnosis II	Endocrine Sim Lab	DO	Sim Lab	2/4/08	1	5
Physical Diagnosis II	Endocrine Sim Lab	DO	Sim Lab	2/4/08	1	5
Physical Diagnosis II	Endocrine Sim Lab	DO	Sim Lab	2/5/08	1	5

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# Standard-Setting Example #1

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Clinical Patient Assessment	DxR Respiratory	PA	Lecture	2/5/08	1	45
Physical Diagnosis I	Eye Lab	DO	Lab	2/6/08	2	36
Physical Diagnosis II	Respiratory Sim Lab	DO	Sim Lab	2/7/08	2	3
Physical Diagnosis II	Respiratory Sim Lab	DO	Sim Lab	2/7/08	2	5
Physical Diagnosis II	Endocrine Sim Lab	DO	Sim Lab	2/11/08	1	5
Physical Diagnosis II	Endocrine Sim Lab	DO	Sim Lab	2/11/08	1	5
Clinical Patient Assessment	DxR Neuro	PA	Lecture	2/12/08	1	45
Physical Diagnosis II	Endocrine Sim Lab	DO	Sim Lab	2/12/08	1	5
Physical Diagnosis II	Endocrine Sim Lab	DO	Sim Lab	2/12/08	1	5
Physical Diagnosis I	Skin Lab	DO	Lab	2/13/08	2	36
Physical Diagnosis II	Endocrine Sim Lab	DO	Sim Lab	2/15/08	1	5
OB / Gyn	OB/Gyn DxR	DO	Lecture	2/15/08	1	213
Physical Diagnosis II	Endocrine Sim Lab	DO	Sim Lab	2/15/08	1	5
Physical Diagnosis II	Endocrine SPAL Preview	DO	Lecture	2/15/08	1	214
PD II and PA Clinicals	DxR - Renal #1	DO/PA	Lecture	2/22/08	1	259
Physical Diagnosis II	Endo/HR SPAL	DO	SPAL	2/26/08	6	6
PD II and PA Clinicals	DxR - Renal #2	DO/PA	Lecture	2/27/08	1	259
Physical Diagnosis II	SPAL	DO	SPAL	2/27/08	1	10
Physical Diagnosis I	Abdomen Lab	DO	Lab	2/27/08	2	36
Physical Diagnosis II	SPAL	DO	SPAL	2/28/08	6	6
Physical Diagnosis II	SPAL	DO	SPAL	2/29/08	6	6
Physical Diagnosis II	Endocrine Sim Lab	DO	Sim Lab	3/3/08	2	5
Physical Diagnosis II	Endocrine Sim Lab	DO	Sim Lab	3/4/08	1	5
Physical Diagnosis II	Endocrine Sim Lab	DO	Sim Lab	3/4/08	1	5
Intro to Medical Ethics	Classic Cases in Medical Ethics	DO	Lecture	3/5/08	2	215
PD II and PA Clinicals	DxR - Renal #3	DO/PA	Lecture	3/7/08	1	259
Physical Diagnosis I	SPAL 1.2	DO/DPM	SPAL	3/10/08	3	3
Medical Ethics II	Ethics II Professionalism: Ethical Dilemmas in Clinical Rotations & Practice	DO	Lecture	3/24/08	1	214
Medical Ethics II	Ethics II Professionalism: Ethical Dilemmas in Clinical Rotations & Practice	DO	Lecture	3/24/08	1	14
Physical Diagnosis II	Sim Lab 5 - R.W./Hoff	DO	Sim Lab	3/24/08	2	5
Physical Diagnosis II	Renal SPAL Preview	DO	Lecture	3/25/08	1	214
Physical Diagnosis II	Renal SPAL Taping	DO	SPAL	3/25/08	1	1
Physical Diagnosis II	Sim Lab 5 - R.W.	DO	Sim Lab	3/31/08	2	5
Physical Diagnosis II	Sim Lab 5 - R.W.	DO	Sim Lab	3/31/08	2	5
Physical Diagnosis II	Renal SPAL	DO	SPAL	4/1/08	5.5	5
Physical Diagnosis II	Neurology DxR 1	DO	Lecture	4/1/08	1	214
Physical Diagnosis II	Renal SPAL	DO	SPAL	4/2/08	1	1
Medical Ethics I	Introduction to Spirituality	DO	PBL	4/2/08	1	14
Medical Ethics I	Introduction to Spirituality	DO	PBL	4/2/08	1	1
Physical Diagnosis I	PD Lab	DO	Lab	4/2/08	2	36
Physical Diagnosis II	Renal SPAL	DO	SPAL	4/3/08	5.5	5
Physical Diagnosis II	Sim Lab 5 - R.W.	DO	Sim Lab	4/7/08	2	5
Physical Diagnosis	PD 1.3 Preview Taping	DO	Lecture	4/7/08	1.5	273
Physical Diagnosis II	Neurology SPAL Preview	DO	Lecture	4/8/08	1	214
Medical Ethics II	Wit Film Project	DO	PBL	4/21/08	2	14
Physical Diagnosis II	OB Sim Lab	DO	Sim Lab	4/21/08	2	5

Intro to Medical Ethics	Medical Mistakes	DO	Lecture	4/23/08	2	215
Physical Diagnosis II	Neurology SPAL Review	DO	Lecture	4/30/08	1	214
Physical Diagnosis I	Preview 1.3	DO/DM	Lecture	5/2/08	1	273



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Physical Diagnosis I	Exam III	DO/DPM	Exam	5/2/08	2.5	273
Physical Diagnosis II	Sim Lab 5 - R.W./Flood	DO	Sim Lab	5/2/08	2	10
Physical Diagnosis II	Sim Lab 5 - R.W./Flood	DO	Sim Lab	5/2/08	2	10
Physical Diagnosis II	Capstone SPAL	DO	SPAL	5/5/08	5.5	6
Physical Diagnosis	PD 1.3 training	DO	Lecture	5/6/08	1	273
Physical Diagnosis	PD 1.3 training	DO	Lecture	5/7/08	1	2
Physical Diagnosis II	Capstone SPAL	DO	SPAL	5/7/08	5.5	6
Physical Diagnosis II	Capstone SPAL	DO	Lecture	5/8/08	1	1
Dermatology/Allergy	Derm 9 Viral Disorders of the Skin	DO	Lecture	5/8/08	1	214
Physical Diagnosis II	Capstone SPAL	DO	Lecture	5/8/08	2	3
Dermatology/Allergy	Derm 12 Wound Management, Ulcers/Burns	DO	Lecture	5/9/08	1	214
Dermatology/Allergy	Derm 13 Fungal/Parasitic Disease	DO	Lecture	5/9/08	1	214
Dermatology/Allergy	Derm 14 Geriatric Skin	DO	Lecture	5/9/08	1	214
Dermatology/Allergy	Derm15 Cutaneous Changes in Peripheral Vascular Disease	DO	Lecture	5/12/08	1	214
Medical Ethics II	SPAL Review	DO	PBL	5/12/08	2	14
Physical Diagnosis II	Capstone SPAL	DO	SPAL	5/12/08	1	1
Dermatology/Allergy	Exam Make Up	DO	Exam	5/14/08	2	1
Dermatology/Allergy	Exam	DO	Exam	5/14/08	2.5	214
Pt Mgmt - Neuromuscular Sys	End of Life	DPT	Lecture	5/16/08	2	47
Physical Diagnosis I	SPAL 1.3	DO/DPM	SPAL	5/20/08	3	3
Physical Diagnosis I	SPAL 1.3	DO/DPM	SPAL	5/21/08	2.5	3
Physical Diagnosis I	SPAL 1.3 Make Up	DO/DPM	SPAL	5/27/08	2	2
Prev Med / Nutrition	PM/Nutr 2 - Health Screening of Men & Women	DO	Lecture	7/23/08	1	212
Physical Diagnosis II	PD II -1 - Intro to Physical Diagnosis	DO	Lecture	7/24/08	1	212
Prev Med / Nutrition	PM/Nutr 4 - ID & Screening of High-Risk Populations	DO	Lecture	7/24/08	1	212
PA Program	Living Anatomy Lab	PA	Lab	7/30/08	4	48
Physical Diagnosis II	PD II - 2 - Ordering Labs & X-Rays I	DO	Lecture	8/4/08	1	212
Physical Diagnosis II	PD II - 3 - Ordering Labs & X-Rays II	DO	Lecture	8/5/08	1	212
Medical Ethics II	Conflict of Interest	DO	PBL	8/11/08	2	16
Physical Diagnosis II	PD II - GI DxR 1	DO	Lecture	8/19/08	1	212
Medical Ethics I	Setting the Stage	DO	PBL	8/20/08	2	16
CardioRespiratory	CardioResp 17 - Heart Sounds	DPM	Lecture	8/21/08	1	60
Physical Diagnosis II	PD II - GI DxR 2	DO	Lecture	8/25/08	1	212
Intro to Podiatric Medicine	Intro to Pod Med 6 - Ethics	DPM	Lecture	8/27/08	1	57
Intro to Podiatric Medicine	Intro to Pod Med 7 - Fundamentals	DPM	Lecture	8/27/08	1	57
CardioRespiratory	CardioResp 30 - Vascular Considerations in Podiatry	DPM	Lecture	9/2/08	1	60
CardioRespiratory	CardioResp 31 - Cardio DxR Case	DPM	Lecture	9/2/08	1	60
Lower Extremity Dermatology	LE Derm 4 - Parasitic Disease of the Skin	DPM	Lecture	9/3/08	1	53
CardioRespiratory	CardioResp 36 - PD of the Cardiac System	DPM	Lecture	9/4/08	1	60
Physical Diagnosis II	PD II - GI DxR 3	DO	Lecture	9/4/08	1	212
Lower Extremity Dermatology	LE Derm 9 - Geriatric Skin Problems	DPM	Lecture	9/5/08	1	53
Medical Ethics II	Decisional Capacity	DO	PBL	9/8/08	2	16
Gastrointestinal (GI)	GI 39 - PD of GI System	DO	Lecture	9/10/08	1	212
CardioRespiratory	CardioResp 41 - PD of the Respiratory System	DPM	Lecture	9/10/08	1	60
CardioRespiratory	CardioResp 44 - Respiratory DxR Case	DPM	Lecture	9/10/08	1	60
CardioRespiratory	CardioResp 43 - Harvey Heart Sounds Lab Presentation	DPM	Lecture	9/11/08	1	60
Lower Extremity Dermatology	LE Derm 15 - Cutaneous Changes in Peripheral Vasc Dis	DPM	Lecture	9/11/08	1	53
Physical Diagnosis II	PD II - GI SPAL Preview	DO	Lecture	9/15/08	1	212
CardioRespiratory	CardioResp 48 - Intro to Anesthesia	DPM	Lecture	9/15/08	1	60
CardioRespiratory	CardioResp 50 - Pulmonary Embolism	DPM	Lecture	9/16/08	1	60
CardioRespiratory	Harvey Review	DPM	Lecture	9/16/08	1.5	60

Biochemistry	BC 39 - Clinical Correlation	DO/DPM	Lecture	9/19/08	1	294
Cardiovascular	Cardio 2 - Heart Sounds	DO	Lecture	9/19/08	1	212

(Last Revised 6/15/07)

CardioRespiratory	CardioResp- Harvey Heart Sounds Practical Exam	DPM	Exam	9/19/08	1	60
Clin/Prev/Lab Med (CPLM II)	EKG/Heart Sounds Practical & Written Exam	PA	Exam	11/11/08	2	46
Clin/Prev/Lab Med (CPLM II)	Resp-DxR #3	PA	Lecture	11/13/08	1	46
Physical Diagnosis II	PD II - Respiratory DxR 2	DO	Lecture	11/14/08	1	211
Renal	Renal 18 - DxR Case Presentation	DPM	Lecture	11/19/08	1	60
Cardiovascular	Cardio Harvey Practical Review	DO	Lab	11/19/08	1	1
Physical Diagnosis II	PD II - Hem DxR 1	DO	Lecture	11/20/08	1	211
Physical Diagnosis II	PD II - Hem DxR 2	DO	Lecture	11/24/08	1	211
Clin/Prev/Lab Med (CPLM II)	Endocrine DxR	PA	Lecture	11/24/08	1	46
Cardiovascular	Cardio Harvey Practical Remediation	DO	Exam	11/25/08	1.5	1
Medical Ethics I	End of Life Care	DO	PBL	12/3/08	1	220
Medical Ethics I	End of Life Care	DO	PBL	12/3/08	1	10
Physical Diagnosis II	PD II - Resp SPAL Review	DO	Lecture	12/5/08	1	211
Physical Diagnosis II	PD II- Hem SPAL Preview	DO	Lecture	12/8/08	1	211
Clin/Prev/Lab Med (CPLM II)	Cardiac DxR #1	PA	Lecture	12/9/08	1	46
Hematology / Oncology	Hem 36 - Common Hematological Presentations	DO	Lecture	12/11/08	1	211
Physical Diagnosis II	PD II - Hem DxR 3	DO	Lecture	12/12/08	1	211
GI / Nutrition	GI/Nutr 27 - DxR Case	DPM	Lecture	12/15/08	1	60
Clin/Prev/Lab Med (CPLM II)	Cardiac DxR #2	PA	Lecture	12/18/08	1	46
						246.5

Appendix C

<b>COMPLEX LEVEL 1</b>			
<b>History &amp; Physical</b>	<b>National Mean</b>	<b>DMU</b>	
1998-1999	500	492	
2004-2005	526	538	
2005-2006	531	539	
2006-2007	500	507	
2007-2008	508	531	
<b>COMPLEX LEVEL 2</b>			
		<b>National Mean</b>	<b>DMU</b>
1998-1999	History & Physical	533	517
	Family Medicine	533	537
2004-2005	History & Physical	533	578
	Family Medicine	554	606
2005-2006	History & Physical	497	501
	Family Medicine	504	511
2006-2007	History & Physical	504	518
	Family Medicine	508	525
2007-2008	History & Physical	514	532
	Family Medicine	519	549

Appendix D – Letters of Recommendation

## Appendix E

## Family Practice Evaluation Comments from Class of 2010- Student/Preceptor

Relates well to patients. Very good at diagnosis and OMM related problem. Very good student, assignment with accuracy and completeness.
(Student) is very academic. He looks up topics and presents them very well. He handles himself with much poise and this is impressive for a 3rd year student. He communicates very well and my staff, patients and I enjoyed having him here.
Very good in taking history focusing on preventing problems. Good rapport with patients.
Overall, outstanding! Excellent knowledge, motivation, endurance, compassion and people skills. Tessie is always in a good mood! An exceptional student. She functions at the level of a resident more and more!
Good history taking, PE skills. Concise pertinent oral presentations. ...then most (esp. for 1st rotation.)
(Student) demonstrated excellent rapport with patients, staff and residents. History and Physicals, as well as progress notes, were detailed and focused. He was above level for a 3rd year student on his first rotation.
Enjoyed having her. Presented herself well to patients and established rapport quickly. Good sound medical knowledge in spite of just starting clinical rotations. Well liked by staff and easy to get along with. Punctual and reliable.
This was (Students) first clinical rotation. He demonstrates a good fund of basic medical knowledge beyond his peers. He is open to constructive criticism and quickly integrates new knowledge and skills. He is personable and relates well with both patients and staff. He has an obvious comfort in patient
Gets along well with staff. Is considered knowledgeable and advanced beyond usual expectations for MS3, will make an excellent physician.
One of best students to rotate with me. I hope she can come back next year for a 4th year rotation.
(Student) is bright and enthusiastic and hard working. She is self motivating and learns quickly. She is doing great for where she is in her education process. Great personality. Gets along well with patients and staff members. Develops a rapport with patients, respectful. Followed up with cases in office with reading and conversation. Eager to learn with good base of knowledge.
(Student) is an excellent medical student. She excelled on her first clinical rotation. She is very flexible, is able to separate her educational needs and the needs of the patients. She was willing to take on tasks as they became available, i.e went to the emergency department to do an H&P. She showed great initiative and has an excellent understanding of the health care system and the characteristics of family medicine.
He is very empathetic and poised around the patients. His notes are thorough yet concise.
Excellent history and physical exam skills. Good precise progress notes.
Enjoyed having him here. Good basic knowledge in spite of limited clinical experience. Good rapport established quickly with patients and good interactions
Above average in knowledge base, advances skills effectively.
Exceptional communication skills and empathy with patients. Advanced ability in history and physical exams.
Good communication skills/motivated. will make excellent resident for any program.
Good history taking skills. Eager and motivated to learn. Pleasant and cooperative. Well liked by residents, staff, patients and families. Asked great
Good initiative and self-learning. Eager to research new topics. Gains patient trust easily and develops relationships.
(Student) has a strong motivation to learn and perform well. He asks appropriate questions and implements the knowledge that he gains from them.
This student was advanced for training. This early in his career he was already asking advanced questions and showing that he understood the processes we were seeing. He has exceptional hand skills and procedurally is advanced. Worked well as part of the office team.
Very professional, strong knowledge base, very self motivated and willing to perform independent work. Well above average for her level of training. Shows strong commitment to osteopathic profession and integrates the osteopathic philosophy in every day medicine.
Excellent. Very pleasant. Has wonderful interpersonal skills. Well loved by patients. Has self directed learning and researches on new topics and presents them to me spontaneously. Very efficient and concise in history taking. Able to work independently. has a strong desire to learn.
(Student) does a wonderful job of doing thorough history and physicals. She listens to patients. She has a positive attitude and was a pleasure to work with
Very personable, easy to work with. Good rapport with patients. Overall good knowledge base.
Organized, good overall knowledge base, actively pursues details, compassionate, good bedside manner.
Excellent communication skills. Team player, excellent bedside manners. I had several compliment remarks by many patients. All my staff enjoyed having (student). She will be excellent in Primary Care specialty.
Good knowledge base. Performs above level of most 3rd year students. Well-liked by patients and staff.
Strengths in OMT, very thorough histories and physicals elicits subtle finding, good team member. Very cooperative. Great improvement in differential diagnosis
(Student) demonstrates one of the best work ethics I have seen so far in a med student. She consistently sought out opportunities to learn. She is extremely professional and receptive to comments. Her medical knowledge is at the level of a 4th year student. I would highly recommend her for any future residency.