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Innovation in Education

Poster Title
Developing a case-based curriculum for the Integrated Neurology and Medicine

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Objective:
The objective of our study is to develop a multi-disciplinary case-based curriculum for medical students in the integrated Neurology and Medicine Clerkship.

Background:
The Yale School of Medicine has developed a new curriculum that is set to launch in the summer of 2015. The overarching goals of this curriculum include: health promotion and disease awareness, mechanisms and treatment of disease, clinical reasoning, patient care, professionalism and communication, responsibility to society, creating and dissemination of knowledge, and physician as scientist. One of the guiding principles of the new curriculum is integration. With an emphasis on multidisciplinary medicine, the clerkships will be divided into four major blocks, each of which will combine medical specialties. Neurology and Medicine will be combined in the clerkship entitled, “Medical Approach to the Patient.” We sought to develop an integrated case-based series for students in the “Medical Approach to the Patient” clerkship, focusing on patients with chief complaints that commonly present to both neurologists and internists. The goal of the series is to promote clinical reasoning skills as students explore both medical and neurologic diagnoses, hone differential diagnoses, and carefully select diagnostic testing in a socially responsible fashion.

Methods:
A working group of Internists, Neurologist, Neurology residents, and medical students defined the “Top Ten” chief complaints included in the series. We established learning objectives, which included:

1. Establish a differential diagnosis for the chief complaint.
2. Differentiate between etiologies that must be ruled out, and etiologies that are most likely.
3. Prioritize appropriate diagnostic testing.
4. Recognize the limitations of diagnostic tests.
5. Additional objectives pertaining to the chief complaint.

We developed a standardized format for the cases, and held a pilot session with students on Neurology and Internal Medicine Clerkships. The students provided verbal feedback in a short focus group session immediately following the session.

Results
The session was conducted over an hour. During the feedback session, all students agreed that the session was outstanding. Suggestions for the session included: developing a template for students to take notes on, and revisiting the differential diagnosis lists and diagnostic testing prioritization at the end, in order to provide an expert opinion.

Conclusions
In this study, we were able to develop a case-based, integrated, multidisciplinary curriculum, develop a teaching strategy that emphasized student participation, pilot a case-based session, and receive formal feedback on the session through a focus group. We plan to integrate the feedback into another pilot session. We will then launch our curriculum in July 2015 and collect prospective feedback from the students throughout the year.