The impact of curriculum alignment on the improvement of Embryology: A constructivist perspective

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Background: Nowadays higher education is learning-oriented and means that the student should be cognitively active. It also implies the professor as a teaching agent who, in part, facilitates an adequate teaching context by aligning competencies, teaching/learning activities and assessment which, in turn, will contribute to deeper learning and the development of metacognitive skills.

Summary of Work: The study consisted of the implementation of a teaching project. A likert-type questionnaire and an open-ended sentence survey were administered to a sample of 480 students in the first year.

Summary of Results: The effectiveness of the aligned program in terms of deeper learning was confirmed since 63% of the students’ responses pointed out that they could take active part in tasks related to critical thinking as well as decision-making skills compared to traditional lecture attendance. Professors’ efficacy was considered highly-valued by 78% preference due to the clarity of expected competencies.

Discussion and Conclusions: In an aligned program, students work on tasks meaningfully as a response to structured expectations allowing a convenient class atmosphere. When dealing with content to reflect, formulate hypotheses and evaluate decisions made by students, a high level of understanding and the use of peer and self-evaluation are promoted. Professors, then, play an outstanding role by choosing what needs to be done based on a purpose so that students may have the opportunity to experience academic success when realizing they have attained an expected goal.

Take-home messages: Curriculum alignment not only provides tools to facilitate academic processes but also offers a perspective oriented towards a coherent use of time and resources within an innovative course program.

The “Oral Case Presentation Training Programme” (OCPTP) is designed for the above purposes.

Summary of Work: OCPTP contains lecture, on-line video self-learning, practice training, and midterm/final presentation assessments with real-time feedback. Medical students who completed the training programme from September, 2013 to January, 2014 were enrolled. Forms were designed to assess performance on the oral case presentation. Chi-square, paired t, independent t tests and logistic regression analysis were applied for analyzing the results.

Summary of Results: Eighty-four 5th grade medical students (39 female, 45 male) were enrolled. In the midterm assessment, the average score was 73±11 (49-100). The students performed better in the presentation of chief complaints, attitude, and time control, than in presentation of physical examination findings, assessments, and plans. The logistic regression analysis showed that the performance in organization was the predictor of the pass of the midterm assessment (p< 80) had joined the final assessments. The paired t-test showed all 61 students had better performance in all fields in the final assessment than in the midterm (p<0.05).

Discussion and Conclusions: The OCPTP is useful for achieving the goals of enhancing students’ performance on oral case presentation.

Take-home messages: A well-designed training programme, including lecture, video, practice training,
midterm/final oral case presentation assessments and real-time feedback, will show the students’ weak points, improve their performance, and assist their learning.

**9EE3 (21733)**

**Training programs in hospitals affiliated to Semnan University of Medical Sciences**

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**Kian Norozi**, University of Social Welfare & Rehabilitation, Sciences (USWR), Nursing, Tehran, Iran  
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**Fathiyeh Mortazavi**, Shahid Beheshti University of Medical Sciences, Medical Education, Tehran, Iran

**Background:** The aim of this study is to identify and prioritize the training need assessment of nurses working at ICU in subsidiary hospitals of Semnan University of medical sciences in order to design the in-service training program for them.

**Summary of Work:** Being a cross-sectional and descriptive study including two phases of identifying and prioritizing of training needs of ICU nurses, it was conducted by a close-ended questionnaire for collecting data in both phases. The knowledge and skill of the phase and a multiple-choice scientific test plus a checklist for measuring the knowledge and skill of the nurses in ICU in the second phase. Census method was used for collecting data in both phases.

**Summary of Results:** Results indicated that cardiac monitoring, diagnosis of dysrhythmias and taking immediate measure at the time of fetal dysrhythmias occurrence (71.11%), monitoring the parameters of ventilator with regards to patient’s respiratory status (70.80%), arterial blood gas sampling and the way it is interpreted (69%), cardiopulmonary resuscitation (CPR) for adults (66.66%), airway maintenance, oxygenation and enthetobiosis (66.66%), planning, implementing and evaluating the comprehensive skin care program (60.01%), pharmacotherapy, injection of drugs with positive in tropic (Adrenalin, Atropine, Dobutamin) (57.90%), cardinal Venus pressure (CVP) and establishing a flow rate of medicines with regards to physician’s prescription (52.22%) were the high-priority training needs of the nurses successively.

**Discussion and Conclusions:** To improve the quality of training programs and upgrading the knowledge, skill and attitude of nurses working at ICU, the significance and the weight of each training titles should be determined according to the standards and the continues in-service training plan along with nurses’ training needs and duties.

**9EE4 (22175)**

**Analysis of significant prerequisities for effective modernization of MD programs considering European understanding of “Harmonization”**

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**Background:** David Tvildiani Medical University (DTMU) and Akaki Tsereteli State University (ATSU) are modernizing MD Programs in the framework of TEMPUS Project “Establishment of the Supra-Regional Network of the National Centres in Medical Education, focused on PBL and Virtual Patients”. Recent education reforms in Georgia enabled us to organize programs variously. The only “strict” requirement for MD Programs is learning outcomes (harmonized with MEDINE2 requirements). In presence of such status quo the present MD programs of two universities differed substantially.

**Summary of Work:** The aim was to identify the extent of specificities/differences of using the same received resources for modernization by two universities. We analyzed programs; focus, aims, relevancy of content of modernization for possibilities of realistic implementation of planned changes.

**Summary of Results:** Focus of modernization for DTMU is at Basic Sciences study stage, while for ATSU on entire program (6 years) “vertical”. Regarding content of modernization: DTMU personalizes (directing to particular case) study materials organized by Organ Systems, that especially helps understanding of basic/clinical sciences, and also develops professional/practical skills. Main content of modernization at ATSU considers deep understanding of professionalism and at “clinical sciences” stage, analyzing basic aspects of clinical issues.

**Discussion and Conclusions:** MD program modernization in DTMU and ATSU is based on the analysis of differences in prerequisities (Programs’ organization, levels of integration, experience, HR etc.); Focus, aims (targets), content and other issues of modernization is justified; “fitness for purpose”, as well as “fitness of purpose” is guaranteed.

**Take-home messages:** Real European understanding of “harmonization” is the best prerequisite of modernization and successful implementation of MD programs’ for medical schools.
9EE5 (21731)
A longitudinal framework for professional identity formation

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Background: Medical education literature emphasizes the development and assessment of professional identity formation (PIF), but there is no consensus about how to accomplish this. PIF has been described as the transformational process during the transition from student to physician. We developed a longitudinal framework for PIF with strategies for its promotion and assessment.

Summary of Work: Using a modified Delphi technique, an interdisciplinary group of undergraduate university and medical educators identified key aspects of PIF. Through an iterative process, the team synthesized these aspects into a framework of domains and subdomains across the premedical-medical education continuum. Teammate pairs identified literature-based strategies to support and assess each PIF subdomain at three developmental stages. After vetting with medical educators and peer review, the team converted the framework to a searchable web-based format.

Summary of Results: The framework describes 6 domains of PIF: 1) Attitudes; 2) Habits; 3) Perceptions; 4) Personal Characteristics; 5) Relationships; 6) Responsibilities. These are subdivided into 30 subdomains across 3 longitudinal stages: 1) Transition; 2) Early developing professional identity; 3) Developed professional identity. For each subdomain and stage, the framework identifies strategies for promoting (e.g., community service learning) and assessing (e.g., portfolios, reflective writing) PIF, plus resources and references.

Discussion and Conclusions: This framework describes the complex nature of physician PIF across three developmental phases representing the premedical-medical education continuum, and suggests curricular strategies to promote and assess PIF. This framework is being utilized to develop multi-institutional programs bridging premedical and medical education. Further evaluation of the framework is planned.

Take-home messages: This longitudinal framework may facilitate curriculum and program development for PIF.

9EE6 (23034)
Learning in the 21st century: Identifying the gap between the expectation and the reality

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Background: Frenk et al (2010) propose that medical graduates in the 21st century should not only be experts or professionals but also change agents. They also recommend instructional reforms into the level of transformative learning. In order to achieve these expectations, it would be wise to, firstly, conduct situational analysis of how students actually are.

Summary of Work: A qualitative inquiry was used to study the nature of pre-clinical learning. Data were saturated after 24 students were interviewed. The data acquired were transcribed verbatim and thematically coded into a huge mind-map covering what student motivations and preferences are; what factors influence their learning; and how they learn in each setting. The result from the first round was then used to design the 10-page, 98-item questionnaires – which were distributed to the 3rd year students at Chulalongkorn medical school in November 2013.

Summary of Results: 30% of the respondents were uncertain if they would like to be doctors or not. Parents seemed to have considerable influence on student's career choice, at least one-third of them. There was substantial variation among the respondents regarding: their goals of pre-clinical learning; the content which motivates or demotivates their eagerness to learn; note-taking behaviours; learning styles used in small group learning; and how frequent they perform information search and self-revision. Based on many questions, approximately 60% of the respondents seemed to be comfortable being passive learners. Some even showed negative attitude towards active learning.

Discussion and Conclusions: Students are not homogeneous in many aspects.

Take-home messages: There is no single teaching method which will please every student. Careful instructional design is required in order to deal with this level of diversity.
**ABSTRACT: SESSION 9EE**

**TUESDAY 2 SEPTEMBER: 1600-1730**

**9EE7 (20700)**

**10 Approaches to Academic Development (AD) for the Basic Medical Sciences: achieving quality with large classes**

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**Background**: Since it opened in 1976, St. George’s University has placed over 13,000 M.D.s in over 50 countries around the world. Every year in January and August, St. George’s admits more than six hundred students to the M.D. program. In January 2014, 98.5% of St. George’s students who took the USMLE Step 1 for the first time passed. Despite the size of the class, both the first-time Step 1 pass rate and average score have risen steadily each year. How is this possible with a large class? Critics of the large-class approach refer to it disparagingly, yet St. George’s graduates compete favorably.

**Summary of Work**: We identified and critically analyzed ten academic development (AD) approaches that are used by the St. George’s School of Medicine to ensure that students are retained and engaged with the program.

**Summary of Results**: The approaches that were identified were:

1. Pre-med strategies.
2. Strategies for supporting under-prepared students.
3. Orientation strategies.
4. Academic Advising.
5. Learning strategies for the Basic Sciences.
7. Strategies for large-class teaching.

Each of the approaches engage and empower students to take control of their own learning (Lefcourt 1976) through self management, problem solving (Norman and Schmidt 1992), reflective thinking (Flavell 1979, Johnson and Johnson 1998), and collaborative learning (Kanthan and Mills 2007).

**Discussion and Conclusions**: Instead of providing students with support strategies that encourage dependency, academic development at St. George’s focuses on developing students’ autonomy and resilience (Haney et al. 2011). These enable students to cope with large classes.

**Take-home messages**: It is possible to teach students effectively even in large classes if a school collectively adopts the goal of developing students’ learning autonomy. (Little 1995).

**9EE8 (22144)**

**Implementation of an Obligatory Mobility Window in a Bachelor Program Molecular Medicine**

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**Background**: Mobility during the study period plays a key role for the future career. Triggered by the DAAD Bachelor Plus Program, the three year Bachelor Program “Molecular Medicine” has been changed in 2011 into a 4 year Bachelor Program with an Obligatory Mobility Window abroad.

**Summary of Work**: The Obligatory Mobility Window has been implemented in the 3rd study year. International partners for exchange have been found, a mentoring program for Incoming students and tools for recognition of qualifications have been elaborated.

**Summary of Results**: The mobility window can be used both for studying and for practical courses or the combination of both. The stay abroad offers students the opportunity to deepen their knowledge in areas they are interested in, including cutting-edge topics, interdisciplinary qualifications and studies outside their major. Each student chooses the subjects on their own and gets their individualised curriculum. Upon successful completion of these courses students receive 60 ECTS.

**Discussion and Conclusions**: Overall the change has been quite successful. We requested students’ reports from abroad that contained mostly positive experiences. The Bachelor Program of Molecular Medicine has become more attractive for applicants and their number has steadily increased. In 2013 we have got 17 % more applications compared to the application period in 2010 (2008: 269 applicants; 2012: 765 applicants).

The authors do appreciate being part of the MEDINE2 project which is the origin of this case study.

**Take-home messages**: Mobility is important for personal development and employability. The change from the three year Bachelor Program to the four year with the mobility window is absolutely worth it.
9EE9 (22409)
Studying with SPIRiT: Student Orientation with an individualized curriculum based on student needs in Tübingen

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Elena Lebherz, Eberhard Karls University of Tübingen, Faculty of Medicine, Tübingen, Germany
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Background: Nowadays, lots of students face different obstacles related to their social and economic background which may cause problems for their regular course of studies. The medical faculty of Tübingen (MFT) has therefore established a student-oriented service for students with those special needs: the „individualized curriculum“, an individualized schedule of compulsory courses. For this, the MFT is applying SPIRiT (Student-oriented, Practice-based, International and Research-driven study in Tübingen).

Summary of Work: An individualized curriculum is required by about one third of the clinical students per semester: pregnant students, students with children or other family commitments (student-oriented), tutors (practical-based), exchange students (international) or students doing research-work (research-driven). The office of student affairs plans the individualized curriculum in liaison with the affected students and offers support.

Summary of Results: Giving them the chance to plan their own curriculum creates a sense of responsibility and identification of students with the MFT. Scheduling the individualized curriculum is very time consuming and highly complex. Therefore, good time management and collaboration of different departments is needed, as well as additional staff specializing in this area.

Discussion and Conclusions: Individualized curriculum is an efficient tool to increase the mobility and to make the curriculum more family friendly. Furthermore, it enables students to combine their studies with their tutor jobs without prolongation of their study period. The authors appreciate being part of the MEDINE2 project which is the origin of this case study.

Take-home messages: An individualized curriculum fulfills the responsibility a university has towards its students by helping them conclude their studies to their best abilities.

9EE10 (22328)
Evaluating the student-centeredness of a programme: A new mixed-methods approach

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Background: There is increasing interest in student-centred learning (SCL) for medical education courses. Existing evaluations of student-centeredness usually only consider the learner’s perspective but for staff development it is essential to also identify the teacher’s perspective. An important aspect is to identify any differences between the espoused theories of teachers and their theories in use that impact on how the programme is delivered. This requires an in-depth approach to evaluation.

Summary of Work: Using a case study of an integrate basic since course, we evaluated the student-centeredness by combining a student focus group and 34 hours of classroom observation (to identify the use of theories in practice) with seven individual teacher interviews (to identify espoused theories). Data was analysed using the framework of Weimer’s five characteristics of SCL.

Summary of Results: The 3 methods identified different elements of student centeredness. Interviews revealed that teachers were aware of the importance of engaging and motivating students and of passing responsibility on to students. Students in the focus group considered that the course had a focus on enhancing student learning. The classroom observations confirmed the teacher’s perceptions of their approach to SCL.

Discussion and Conclusions: There was congruence between the espoused theories of teachers and their theories in use. The mixed methods approach to evaluation was a useful technique for identifying the student centeredness of the course. Combining classroom observations and interviews (teachers and students) provides a useful and feasible in-depth evaluation of the extent of a course’s student-centeredness in undergraduate medical education.

Take-home messages: This new mixed-methods approach to evaluation can be of use to inform staff development and can be applied in other (medical) education institutions.
Gender based analysis of user behaviour in a web-based "Learning Opportunities, Objectives and Outcome Platform" (LOOOP)

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Background: To meet the requirements of the increasing complexity and modular structures of all five undergraduate curricula, a web-based “Learning Opportunities, Objectives and Outcome platform” (LOOOP) was developed and implemented at Charité – Universitätsmedizin Berlin. This platform is used for curriculum development and curriculum mapping including communication of all timetables, outcomes, content and objectives to students and teachers. Aim of this study was to investigate usage behavior and acceptance of LOOOP by students.

Summary of Work: Anonymised registration data were analysed concerning usage of LOOOP by 1062 students, currently enrolled in our standard curriculum during winter semester 2013/14. Gender of students was considered as a factor for usage.

Summary of Results: 789 students (74%) signed in voluntarily for usage of LOOOP (456 female and 333 male). 695 students of this user group (88%) enrolled in their respective degree course, (403 female and 292 male). 399 of these students (57%) extracted special information for their specific semester study group (228 female and 171 male). Thus, relation of men and women was the same in all examined groups (about 42% men) and no significant differences could be detected.

Discussion and Conclusions: Usage of LOOOP is well accepted by female and male students. This data support the theses that web-based presentation of curriculum maps is an effective tool to address the needs of students of so called generation Y.

Take-home messages: “Time and effort spent developing and maintaining the curriculum map will prove to be rewarding. No good curriculum can afford to be without one.” (RM Harden, 2001, Med Teach. 23(2):123-137.

Competence-oriented curriculum mapping – a web-based database as a powerful tool for curriculum development

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Background: In Germany, a National Competence-Based Catalogue of Learning Objectives for Medical Education (NKLM) is currently being developed. The NKLM definition of competencies is based on the CanMEDS roles. The NKLM provides a framework for analysing existing curricula and identifying their strengths and gaps. In order to deal with the complexity and amount of data involved, a tool is needed which allows for easy analysis of the data with varying research questions and visualisation of results.

Summary of Work: Using PHP and MySQL, we developed a web-based database-driven application into which curricular data were entered from 4 medical faculties in Baden-Wuerttemberg (with 96 to 125 courses each) and mapped against the NKLM roles. Faculty members and educators participated in gathering the data. Exported data are compatible with standard analysis software (e.g. SPSS).

Summary of Results: Statistical data analysis with SPSS is used to reveal the competence profiles of each of the 4 faculties. The development of each competence role throughout the course of study can be visualized. Equally, individual modules or topics in the curriculum can be extracted to show to what extent competences are implemented in them. Furthermore, curricular gaps and redundancies within the competence profile can be identified and visualised as a basis for systematic curriculum development.

Discussion and Conclusions: We present a powerful tool for competence-based curriculum development. Its strength lies in the easy visualisation of data under different aspects and perspectives. Faculty and students profit from increased transparency. Curriculum development and continuous quality analysis are facilitated.
9EE13 (21611)
Valuing identity: Critical discourse analysis of online participants ‘identity text’

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**Background:** Social constructivist theories state that we construct and reconstruct our identities based on experiences. Educational policies pertaining to curriculum tend to operate in a one-size-fits-all manner and reflect the perspectives and priorities of the dominant group. This holds true for e-learning platforms too. On face value policies support diversity but generally do not encourage discussion pertaining to individual identity.

**Summary of Work:** An identity affirmation tool ‘Identity Text’ was introduced as part of an online module for an international health professions education fellowship program conducted by FAIMER training faculty to act as research scholars and change agents. Participants were asked to describe evolution of their identity over time as an educator. We undertook Critical Discourse Analysis using Gee’s tools to analyze the discourse.

**Summary of Results:** Participants described conscious and subconscious transformation in identity secondary to struggles with power dynamics and social demands; the impact of family, peers and country of origin.

**Discussion and Conclusions:** Letting go of the need to keep contributions ‘culture free’ makes it easier to talk (write). Encouraging learners to share their stories help others understand their circumstances and driving forces perhaps encouraging a sense of a strong community which in turn fosters a willingness to share ideas. As educators we make instructional choices that send messages to learners about the broader societal pattern of devaluation of identity. Identity text is a valuable tool to counter this trend.

**Take-home messages:** Identity validation is crucial for promotion of diversity.

9EE14 (22444)
Modernization of MD Curriculum Based on Current Challenges and Needs of the Medical Education Reform In Georgia

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**Background:** This work deals with the changes held at ATSU Faculty of Health Care for the modernization of undergraduate medical education program. Modernization includes: Problem-based learning, enhancement of the integration of basic biomedical, behavioral and social sciences with clinical sciences in the medical program or new settings for and other innovations in clinical training.

**Summary of Work:** At ATSU our foreign colleagues proposed a problem-based learning (530519-TEMPUS-1-2012-1-UK-TEMPUS-IPCR-“Establishment of the Supra-Regional Network of the National Centres in Medical Education, focused on PBL and Virtual Patients”) the so-called CASE STUDIES, this is one of the best examples. The introduction of PBL Teaching Method into our curriculum of MD, is preceded by a preparatory period, such as renewal of the curriculum, teacher development, Satisfaction of material, technical base requests.

**Summary of Results:** Modernization of MD curriculum based on raising of integrity and structure of program teaching/learning/assessment of Basic Medical Sciences in clinical relevance and context; that in summary improves not only students (graduates) employability, but will have impact on patient’s safety and on improvement of quality in health care services.

**Discussion and Conclusions:** Main principles to redesign the curriculum: teacher oriented – student oriented; information oriented – integrated, course based – problem based, hospital oriented – first aid oriented; Our project “Establishment of the Supra-Regional Network of the National Centers in Medical Education, focused on PBL and Virtual Patients” as many others stimulate the team to improve the knowledge about new curricula implementation pathways and indicators of impact on development.

**Take-home messages:** For external audiences our new curriculum we use workshops/reports/conferences/one to one format focused on medical specialties and/or medical education (ex. AMEE) and education in general (ICERI). One most important aspect of above mentioned is to use this meetings/communications for development of future relationships and collaborations on interested item/issue.
9EE15 (22697)
Webbased, interactive, simultaneous, aligned scheduling in different undergraduate medical curricula

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Background: Charité – Universitätsmedizin Berlin runs six undergraduate curricula with in total 7000 students. Generation of all schedules pursues the aim to obtain best possible occupancy for faculty and available patients and to create an accomplishable timetable for students. Introduction of our new competency based, interdisciplinary curriculum induced a foreseeable, huge increase of planning effort.

Summary of Work: All planning processes were standardized, transferred into a custom-made software and exactly defined by the latest legwork and the earliest demand during three different planning phases:
1.) The initial planning phase
2.) The coordinating planning phase
3.) The finalizing planning phase.
Each of these three planning phases is limited by an individual time frame and comprises an intensive, webbased interaction with all 125 clinics and departments on the basis of former curriculum development in our webbased Learning Opportunities, Objectives and Outcome Platform (LOOP).

Summary of Results: Number of planned courses increased from 28,000 in 2011 to 76,000 in 2013 with identical staffing. Total need for planning was kept constant at 14 weeks (6 weeks for phase 1 and 4 weeks for phase 2 and 3, respectively). All schedules are available online in LOOP i.e. in I-Cal format for students and faculty.

Discussion and Conclusions: Although the number of courses increased by factor 2.7 within two years, the renewed, generalizable processes enabled the generation of well-balanced, aligned, interdisciplinary schedules for faculty and students with the same recourses and within the same time.

Take-home messages: Establishing webbased, interactive processes increase effectivity and efficiency of timetabiling.

9EE16 (21111)
The MERC at CORD Scholars' Program in Education Research at 5 Years

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Background: There is a pressing need for professional development opportunities in education scholarship designed for the clinician educator. The MERC at CORD program was created 5 years ago to meet this need for practicing emergency medicine (EM) educators in the USA.

Summary of Work: 20-35 clinical faculty participate in a year-long program annually consisting of 6 MERC workshops (two each at three separate meetings) and a mentored, multi-institutional education research project. Breakout sessions at the MERC workshops are used to apply learned concepts directly to the research project.

Summary of Results: Over a 5 year period, MERC at CORD has enrolled 149 EM faculty. To date, 83 participants (56%) have earned MERC Diplomat status by completing all 6 workshops, 52% (43) of which completed their project becoming “Scholars”. Post survey results reveal that participants believe that their education research skills improved significantly as a result of the program. When asked about additional value derived from the program, the most common answer pertained to the ability to network within the program facilitating participants' ability to develop relationships with potential collaborators and mentors. Projects developed at MERC at CORD have resulted in 34 abstracts presented at national meeting and 3 peer-reviewed publications to date.

Discussion and Conclusions: The MERC at CORD Scholars' Program appears to be an effective means of improving skills and knowledge related to education scholarship. In addition, the program may facilitate further individual development in this area by fostering a community of like-minded collaborators and mentors.