Upcoming Faculty Development Events

December 14, 2006

Networking Breakfast

Speakers:

Paul Marantz, M.D., M.P.H.
Associate Dean for Clinical
Research Education

Harry Shamoon, M.D.
Associate Dean for Clinical and
Translational Research

Focus on:

Building a Clinical Research Career

January 30, 2007

Davidoff Education Day 2007

Keynote Speaker:

Allen M. Spiegel, M.D.
The Marilyn and Stanley M. Katz Dean
Albert Einstein College of Medicine

Focus on:

Translational Education: Bench Research
and the Bedside

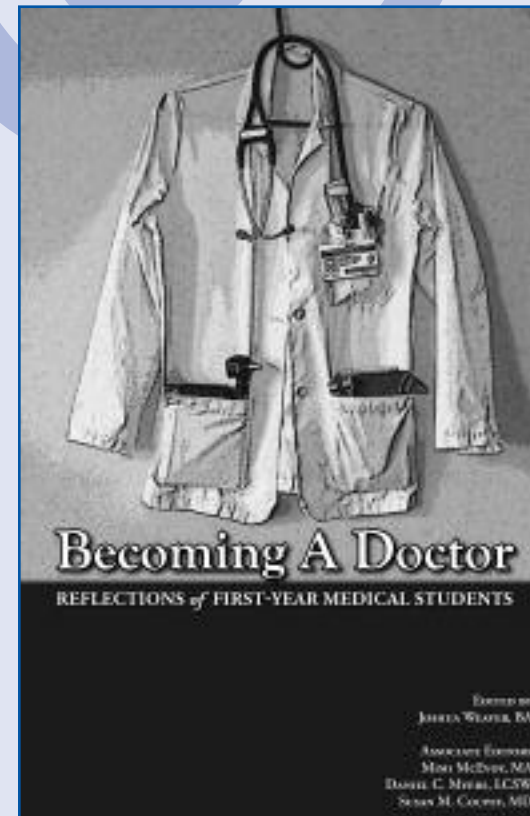**Save these dates now…and be sure to watch for the E-mail invitations coming soon!**

"BECOMING A DOCTOR": A Project Linking Humanism with Medicine

By Penny Grossman, Ed.D., M.P.H.

Cover photo by Joshua Weaver

It all began with a brief listing in the book of summer projects available to students compiled by **Albert Kuperman, Ph.D.**, Associate Dean for Educational Affairs. **Mimi McEvoy, M.A.**, Co-Director of the Introduction to Clinical Medicine Program, was looking for a "literary minded" student to spend the summer editing a group of reflective essays written by first-year ICM students about some aspect of their observation of the relationship between physicians and patients, or their development as professionals. The assembled essays, 430 in all, represented the work of three classes of students, the Classes of 2005, 2006, and 2007, who had granted their permission to participate in the project. The project's ultimate aim was to publish a collection of the best student essays in a small volume for the benefit of incoming and prospective Einstein students, faculty, and even the public at large.

After interviewing a number of interested students, Mimi McEvoy, together with **Susan Coupey, M.D.**, ICM Program Director, and **Daniel C. Myers, L.C.S.W.**, also an ICM Co-Director, chose **Joshua Weaver**, a member of the Class of 2007, as editor for the project. Now a fourth-year student aiming for a career as a neurologist, Josh Weaver was a graduate of Harvard who had majored in Cognitive Neuroscience and had, as he puts it, "a strong interest in connecting literature and science," nurtured by taking undergraduate courses with Dr. Robert Coles.

Josh began the summer reading all 430 essays, with students' names removed to maintain objectivity. The group of essays was then divided and read in groups by Josh and the three ICM faculty co-editors. Using two simple criteria – the essays had to be both interesting and well written – the pool of essays was narrowed to 80 and read again by all editors. Then, by consensus of all the editors, 41 essays were chosen for inclusion in the publication. Josh spent the remainder of that summer – and beyond – editing the essays with their student authors' names revealed, but with all names of hospitals and identified faculty members removed. Interestingly, all three classes are represented roughly evenly in the final cut. According to Josh, the essays are "full of hope and untainted by cynicism." This may be because, unlike similar collections of student essays, this one features the work of first-year students. All editors are pleased that this student work highlights the important work accomplished in the Introduction to Clinical Medicine Program.

With partial funding from the **George Washington Institute for Spirituality and Health** in place, the project received substantial additional funding – and the Presidential Grant – from the **Arnold P. Gold Foundation for Humanism and Medicine**. The 138-page volume is to be published by the Bronx Design Group under the title "Becoming a Doctor: Reflections of First-Year Medical Students," and will be available in early December.

Joshua Weaver, Class of 2007

Some Excerpts from the Book:

Chapter 3: Role Models
Grief and Lost Possibilities
By Elizabeth Brant

"Mr. G. reminded me of what I already knew: that time is mercilessly irretrievable. For something as foolish as procrastination, I had deprived myself of the chance to comfort him, to ease his loneliness, to know him better—all things that I could have done even with only my rudimentary medical knowledge. I was – and am – saddened and guilty to know that Mr. G. died without the slightest idea of how powerfully he affected me. While he may have thought no one really cared about his death, I grieve the loss of him."

Chapter 5: Caring and Compassion
Looking Past the Want to Answer the Need
By Laura Arigo

"I was awed at Dr. C's skill! She neither gave false hope, nor took hope away. She gave Alice a realistic goal, one that she could both believe and accept. The lines on Alice's face softened, her breathing slowed, and a shy smile returned to her face. Her husband was so grateful that he took the doctor's hand and kissed it. I could feel the tension subside, and as we left the room I saw that it was once again a place of serenity."

Chapter 6: Professional Ethics
The White Coat Privilege
By Lindsay Stanton

"The day we don our white coats we become something new. Not just medical students, but student doctors. We are accepted as such both by physicians and by our patients. The white coats give us the authority to jab people with needles, ask them to disrobe, and find out how often they have sex. We are still the same people we were eight months ago, and yet what we previously could have been arrested for is now part of our 'learning experience.'"

Chapter 7: Personal Growth
I Am Not My Patient
By Ann Lewis-Zeidner

"I was surprised at how invested I became in my patient, not only in the purely clinical aspects of her care, but in her life as well. I did not know I would grow attached to her, nor did I expect to think about her outside of the clinic. I assumed having some clinical duties would shield me from caring too much. Now I have a bigger picture of what it means to provide good care to a patient. It means balancing pure empathy with practical science. It means remembering why the patient has come to see you. And for me, it will also mean understanding that limits are not failures."

The LCME Is Coming! Einstein Prepares for December Site Visit

For the past 18 months, Einstein has engaged in a period of intense self-study in preparation for the December accreditation site visit by the **Liaison Committee on Medical Education**, or LCME. This self-study process has involved faculty at all ranks – from department chairs to junior faculty – administrators, residents involved in the education of medical students, as well as the students themselves.

Shirley P. Levine, M.D., Professor of Medicine and Co-Chair of the Division of Education (DOE), has served as LCME Self-Study Coordinator for the upcoming accreditation site visit to our campus on December 3-6, 2006. She has been assisted in this process by **Penny Grossman, Ed.D.**, Assistant Dean for Educational Resources, as Co-Coordinator. **Edward Burns, M.D.**, Executive Dean, heads Einstein's LCME Institutional Task Force, a roster of department chairs, senior and junior faculty, students, deans, administrators and others, most of whom will meet with the site visitors when they come. In addition, a small group of committed students has worked independently to create and administer their own Student Survey, the results and analysis of which were submitted to the LCME in early September, together with a 47-page **Institutional Self-Study Report** and an extensive database covering all aspects of educational activity at AECOM. The involvement of nearly 150 individuals in the self-study, many of them serving in multiple roles, has stimulated widespread interest in the accreditation process among all segments of the Einstein community.

While it has been important for us at Einstein to search out areas where improvements can be made, it is equally important to celebrate our successes. We approach this site visit with a number of strengths, the result of our last LCME site visit in 1999. These include the organizing of a successful Division of Education Retreat, held immediately after the last site visit, the subsequent reorganization of the DOE, the ongoing construction of a new research building, the leasing of space for a new Clinical Skills Center in the Van Etten building, and the renovations of the Riklis Auditorium, the Max & Sadie Lounge, and the Gottesman Library.

As we approach our LCME site visit, the events surrounding our 50th anniversary year just past have stimulated the entire Einstein community to reflect with great satisfaction on past accomplishments in education, research, and patient care, even as we look ahead to a future with new challenges and new leadership in the person of our new Dean, **Allen M. Spiegel, M.D.** It is with this spirit of pride in our past and confidence in our future that we prepare for the LCME site visit.

All About the LCME …

Q: *Who accredits the 125 U.S. medical schools, and what standards do they use?*

A: In the U.S., the accreditation status of programs leading to the M.D. degree is determined solely by the LCME. To be accredited, programs must meet the national standards described by the LCME in its document *Functions and Structure of a Medical School*, to be found on the LCME website: www.lcme.org

Q: *Who are the members of the LCME?*

A: The 17 members of the LCME are medical educators and administrators, practicing physicians, medical students, and members of the public. The Association of American Medical Colleges (AAMC) and the Council on Medical Education of the American Medical Association (AMA) each appoint six professional members.

Q: *Who are the LCME site visit team?*

A: Team members are a mix of basic science and clinical educators and practitioners. Members of the LCME also serve as voluntary peer evaluators. The members of the site team serve without compensation.

Q: *What is the period of accreditation?*

A: The standard period of accreditation is eight years. (Beginning in 2002, the LCME began phasing in the change of term from seven to eight years.) Toward the end of the accreditation period, and in advance of the subsequent evaluation, fully accredited programs compile a medical education database and conduct an institutional self-study in preparation for the next site visit.

Q: *Why is accreditation important?*

A: LCME accreditation is required for schools to receive federal grants for medical education and to participate in federal loan programs. Students and graduates of LCME-accredited medical schools are eligible to take the USMLE Steps 1, 2, and 3 licensing examinations, prerequisites for medical licensure in most states.

Computer-Based Education: It's Nice to Share, But…

Christopher Cimino, M.D., Assistant Dean for Educational Informatics, recently initiated an e-mail dialogue with students on issues surrounding the recording of faculty lectures. Dr. Cimino is well qualified to discuss these complicated issues, by virtue of the multiple roles he plays at Einstein: as a contributor to school policy making; as an administrator concerned with technical support issues, and as a faculty member who lectures in the second-year Nervous System & Human Behavior course.

According to Dr. Cimino, it has become apparent that recording and sharing of recordings is more widespread than previously thought. The following questions and answers should help to address the important issues raised by this practice:

Q: *Is recording and playback of lectures an educationally sound idea?*

A: There is no one right answer to this question. People learn in different ways, and for some people, recordings can be useful educational tools, while for others they can be a substitute for using better methods. As anyone who has gone through a transcript knows, there are misspoken words and garbled parts in any lecture. The information is not 100% accurate and so should not be a replacement for the experience of attending the lecture. Most faculty I have spoken with do not oppose the use of lecture recording as a supplement to learning and do not fear that it will lead to poor attendance. However, not all faculty are in agreement with this, nor is agreement with this principle the same as agreeing to be recorded.

Q: *Can Einstein force the faculty to allow you to record their lectures?*

A: The short answer is "no." Most academic institutions want to promote scholarship and academic freedom, and, in most cases, faculty members own the materials they write. This could become a potential legal issue if one faculty member accuses another of stealing his or her material and using it in another course. Key to this becoming a legal issue is whether there are "damages," either because material is sold for profit or because there is damage to a faculty member's reputation.

There is no specific policy about presentations but most reasonable people would agree that copyright and authorship protections apply to presentations as well. To the best of my knowledge, recording and transcribing of lectures has occurred at AECOM without any problems. This is not seen as a big issue, primarily because this material never surfaces anywhere that it can attract faculty attention. However, a transcription is one thing and an audio recording is quite another, especially when the audio recording is being shared electronically.

Q: *What assistance should Einstein provide to make it easier for students to record and share lectures?*

A: The faculty are actively discussing this. From a technical point of view, there are things that could be done to make things easier. Some students are using RestStop, but this is a bad idea for two reasons: students off campus can't get to it, and anybody on campus can get to it, including non-

> ## For some people, recordings can be useful educational tools, but they should not be replacement for the experience of attending a lecture.

students and non-faculty. The risk is that material can be stolen and used for other purposes. Imagine these recordings appearing on YouTube or iTunes University. If you don't think the College should be upset by a situation like this, imagine for a moment your first-year ICM video interviews ending up on YouTube. In the case of faculty materials, there is public embarrassment (preparing a lecture for 180 students and having it broadcast to the world) and theft of intellectual property. Teaching is what we do: if it occurs without recognition of our efforts and contributions, we've lost something.

Some alternatives include making it easy for students to post material directly to the course web site, or collecting and tracking information about which faculty members are willing to have their recordings shared and which are not. Faculty members who are debating this issue have many legitimate concerns that need to be addressed. I predict they will eventually reach a position that is of benefit to the students, but it may take a while to get there.

Q: *What is the student's legal standing in relation to the faculty whose lecture is being recorded?*

A: There is a significant amount of gray area here that hinges on that issue of "damages." If you record the lecture for yourself and play it back, not only is there no real damage, but no one will know about it and you are fairly safe. If you record the lecture and then produce a transcript, which is then distributed, there is still not much damage since the transcript is not that valuable. However, when a student records something and distributes it electronically, it suddenly becomes much easier to distribute widely even if it wasn't perceived as very valuable. The wider the distribution, the greater the perceived value. This suggests that it could have been sold and damage has been done.

For something like an AECOM lecture, there is a defined population from which the sharing could be initiated. If something gets out to the outside world and a faculty member takes offense and hires a lawyer, he or she would not have to prove how it got there, only that a specific student created the recording and was careless. In other words, if you steal a lecture and someone else steals it from you, then you would still be responsible. And it wouldn't matter if you didn't know how it was stolen from you. Did I mention that RestStop is completely open to everyone on campus?

So what can you do legally to protect yourself? I would go to each lecturer for every lecture (even if you have recorded them before) and at the beginning or end of the recording capture their voice on tape agreeing to have their lecture recorded and distributed among the students. You will get their permission more readily if you explain clearly how you intend to limit and protect the distribution of this recording. Having taken that first step to protect yourself, you then need to protect the recording itself from being stolen and distributed further than was originally agreed to. Good first steps are including information within the recording about whose recording it is and to whom it should be distributed, and simply stating it is copyrighted.

> ## A transcription of a lecture is one thing and an audio recording is quite another-- especially when the audio recording is being shared elec-

Placing such information within the recording is not sufficient. You should also have a text file in the same folder as the recording or recordings that provides as much detail as possible about what has been recorded, when it was recorded, who has permission to use it, and for what purpose. For example:

The copyright for the material in this folder is held by individual presenters and is included here by their permission which restrict their use to medical students at the Albert Einstein College of Medicine (AECOM). This material can be freely shared among AECOM students BUT MUST ALWAYS BE ACCOMPANIED BY THIS NOTICE. Included in this collection are the following items: presenter:…… date:……recorded by:……

Q: *What is your ethical and moral standing in relation to the faculty whose lecture you are recording?*

A: As a lecturer myself, I suspect most lecturers could care less about the legal issues, until something actually appears somewhere on the web. Then they will care a lot. But faculty do care about having an atmosphere of collegiality and mutual respect with students. Although I knew that the recording issue was "out there," I was quite disturbed to discover it was already happening with *my* lectures, with little thought or concern from students about how I would feel about it. I suspect there are other faculty members who may go beyond disturbed and become angry. I can easily envision faculty refusing to lecture, "unless something is done about this" and forcing the entire debate about sharing in the other direction.

So has the joint community of students and faculty been damaged? I would say yes, somewhat. Will it be damaged more if this continues? Certainly. But I would also make the argument that we should consider some of these actions as missteps by enthusiastic students who hadn't thought out the consequences of some of their actions. Having now been made aware of these issues, students can use some or all of the ideas listed here to convince the faculty to reach a consensus faster and make this kind of sharing easier for students.

Q: *What is the student role in making progress on this issue?*

A: Get permission. Document the permission you get. Protect the material you are recording.

Use Depot instead of RestStop. It is a little more complicated to use, but it is more secure and can be easily shared with students off campus. Bring them into the community and don't ignore them. Go to http://www.aecom.yu.edu /ritdept/documentsandforms.ae or http:// depot.aecom.yu.edu for instructions.

Continue the dialogue. Respect faculty wishes if they do not want to be recorded, but find out why they feel that way – but not right before they are about to lecture.

Of course, there is the sticky issue of what to do if you play by the rules but other students don't. Maybe such an action doesn't seem as though it will harm you personally, but it will harm the community — maybe not today or even this year, but eventually.

Editor's Note: Dr. Cimino welcomes further dialogue on this issue. He can be reached by e-mail at cimino@aecom.yu.edu. Students may also use the anonymous drop box.

Einstein Announces Faculty Mentoring Award Program

The **Faculty Mentoring Working Group** of the Education & Faculty Support Committee (Division of Education) is delighted to announce the first annual Einstein **Faculty Mentoring Award**. This award has been instituted to recognize the significant impact of mentoring on the career development and success of our faculty. Guidelines for the Faculty Mentoring Award and the nomination process are provided below.

Eligibility: The award will be given to a senior member of the AECOM faculty (associate professor or professor), who has successfully mentored junior AECOM faculty. Two awards will be given each year: one to a faculty member whose primary appointment is in a basic science department, and one to a faculty member whose primary appointment is in a clinical department. (For this purpose, the Department of Pathology will be identified as a clinical department.)

The mentor should have demonstrated:

- Commitment to mentoring clinical and/or basic science faculty throughout his/her career
- Guidance of mentee's clinical and/or basic science projects
- Willingness to advise mentees on activities critical to professional success, including (but not limited to) grant writing, manuscript preparation and submission, oral presentations, teaching skills, etc.
- Continuing interest in the professional advancement, career choices, and career development of current and former mentees, including sponsorship for various positions
- Willingness to share knowledge of current institution and promotion practices
- Successful mentoring of a number of mentees; sensitivity to the diversity of mentees (e.g., women and underrepresented minorities)
- Professional achievement

Nominating Process: The nominating mentee will be an AECOM faculty member at any level of development, who has benefited from sustained and successful mentoring.

It is anticipated that the primary nominator (mentee) will work together with the mentor to assemble the nomination package.

It is preferred that all materials be assembled as Word attachments and submitted via a single e-mail to the Office of Educational Resources no later than Tuesday, January 2, 2007. The e-mail address is oer@aecom.yu.edu. Please mark the e-mail with the subject line of "Mentoring Award," and include the last name of the nominated mentor in the title of the attachment. Materials sent in hard copy must be submitted together in one packet to:

Ms. Adele Civitano
Office of Educational Resources
AECOM, Belfer Room 206
1300 Morris Park Avenue, Bronx, NY 10461

The nomination package should include:

(1) Nominating letter from the mentee not to exceed two pages, with

- nominee's name and title, institutional affiliation, mailing address, e-mail address, contact phone numbers
- succinct career history of mentor, emphasizing his/her professional contributions
- statement describing how the mentor has affected the career of the primary nominator (mentee)

(2) Full CV (not NIH biosketch) of the mentor, including

- education
- all positions held
- publications
- committee service
- teaching and invited lectures
- other professional activities
- awards and honors

(3) List of former and current mentees, including their position with the mentor and their subsequent positions

(4) and (5) Two additional letters of nomination, not to exceed one page each, from mentees other than the nominator. These mentees need not be current AECOM faculty. Each letter must include

- mentee's current position
- a brief narrative of mentee's career history relevant to the mentoring received
- statement describing how the mentor has affected the career of the mentee

Please remember the deadline: January 2, 2007.

New Study Space Opens in the D. Samuel Gottesman Library

By Judie Malamud, M.L.S.

You may have noticed construction taking place on the first floor of the Library. This construction represents Phase 1 of a total renovation of the Library's main floor, starting with the newly completed **Beren Center for Information Technology.** Access to that room only will be 24 hours a day, seven days a week, for student use. Complete with a variety of seating/study options, including booths, tables and chairs, high stools and counters to accommodate differing study modes, the

room is still a work in progress. New lighting and flooring have also been installed. Even before a formal announcement of its completion, the room has been filled with students around the clock!

Over the next few weeks, we will be adding new computers on the counters under the colored glass windows. The online print stations will be moved to the counter near the entrance. Other enhancements will include artwork, live plants, and larger trash receptacles. Wireless and wired technology is in place for network and web access. WALNET is available for use by students with wireless-enabled laptops. Special thanks to all those who worked on the project, including **Pat McGuire** and **Paul Saltzman**, who oversaw its completion on schedule.

Phase 2 renovations will start at the back of the reading room on the main floor, where shelving will be removed and five group study rooms are to be constructed, complete with plasma screens. Phase 3 will transform the former Periodicals Room into a glass-enclosed "quiet" area. Phase 4 will include a total makeover of the main section of the reading room, with multiple types of seating, such as study tables, carrels, and leisure seating. New furniture, carpeting and lighting will be added. The final phase will be a total refurbishing of the Reference and Circulation Desk areas at the Library entrance, which will be combined into one service area.

We are committed to making the Library a place that students will find inviting and conducive to learning, whether they are studying alone, in groups, or just socializing. Updates and pictures of the ongoing project can be found at: http://library.aecom.yu.edu/library/renovation.htm

> **"It's a Saturday morning and I'm sitting in the new study space by the library. There is pin-drop silence (except for my typing!), and I'm getting some wonderful data analysis thesis work done. A big thank you to the administration for setting this change in motion. I'm sure it is much appreciated by many students."**

AECOM Launches a New Course

By Eric H. Green, M.D., M.Sc.

"How do I discuss medical errors with patients and colleagues?" "Why doesn't everyone receive those preventive services that are available and recommended?" "How can I function as part of a health care team?" "How can I try to balance the demands of patients with those of my family?" These questions are voiced frequently by practicing physicians in casual conversations with colleagues, at advanced CME seminars, or in the middle of the night while reading a journal article or reviewing the events of the day. And, starting with the class of 2008, they have been included formally as part of the third-year curriculum at AECOM.

In 2004, **Dr. Albert S. Kuperman,** Associate Dean for Educational Affairs, charged the faculty to enhance the teaching of communication, ethics, humanism, population health, prevention and professionalism during the four-year medical school curriculum. In response to this call, he formed two new committees under the umbrella of the Division of Education. These committees, the Ethics, Humanism & Professionalism Committee, chaired by **Dr. Steven Martin**, and the Clinical Prevention & Population Health Committee, chaired by **Dr. Paul Marantz**, included faculty and students from both AECOM and its major teaching affiliates. After a review of our current four-year curriculum and AECOM's needs in each of these areas, each committee independently came to the same conclusion: the most effective way to enhance the educational experience was to focus on the clinical years. This led to the creation of a new, interdisciplinary longitudinal third-year clerkship. After close review by the DOE and the Dean's office, a decision was made to launch the **Patients, Doctors, and Communities** course (PDC) for the class of 2008.

The course steering committee, headed by Drs. Marantz and Martin and assisted by Drs. Christopher Cimino, Eric Green, Deborah Swiderski, and Ms. Mimi McEvoy, has spent over a year planning PDC. The goals for the course are for our students to develop:

- A personal understanding of, and commitment to, the professional values and role of a physician.

- The knowledge, skills, and attitudes to care for individual patients in the context of the communities and populations of which they are part.

- The skills needed to sustain themselves as physicians who strive to practice the highest ideals of doctoring.

These goals are being realized using a small-group teaching format with an innovative curriculum that integrates these important topics into the intense clinical learning of the third year. Students are assigned to groups of 6-8 and meet with a dedicated faculty facilitator for a two-hour seminar at the AECOM campus once or twice per month. Group assignment is not linked to clerkship rotation, so that groups can experience the universality of many of these topics across clinical disciplines. Seminars began in March of the second year and will extend until the conclusion of the third year.

Both the structure and the content of the curriculum promote innovation. Students are given assignments prior to each seminar that require them to examine or expand their clinical experiences in new ways. For example, they may be asked to add a set of interview questions about health beliefs to the required history format, or to write a short reflective paper about their expectations about how medical teams function on hospital wards. These assignments are then integrated into the seminars, along with didactic instruction and skill practice. Each seminar is devoted to one topic framing a group of closely linked learning objectives, often reaching across more than one of the broad topic areas of Ethics, Humanism, Professionalism, Population Health and Prevention. Examples of seminar topics include: Behavior Change, Health Beliefs, The Population Health Perspective, Informed Consent, and Health Care Teams.

The seminars are led by a core group of 20 faculty facilitators, including experienced clinical teachers from the departments of Family and Social Medicine, Medicine, Neurology, Obstetrics & Gynecology and Women's Health, Pediatrics, Psychiatry and Behavioral Sciences, and Surgery, eight of whom are current or former chairs or assistant or associate deans. Over the 15 months of the course we expect our students and faculty to form a close-knit learning community, and hope that our faculty will become mentors to our students. For the faculty, this represents a unique opportunity to guide a group of students along the developmental ladder of the third year unconstrained by the short duration of discipline-specific clerkships.

This innovative curriculum has already begun to receive national recognition. AECOM received one of nine K07 awards from the NIH (with Dr. Marantz as principal investigator), designed to enhance the teaching of prevention, ethics, professionalism, population health, communication, and similar disciplines in undergraduate medical education. The grant proposal uses the PDC course as a major venue to spearhead its educational initiatives, and includes a major focus on evaluating the impact of this curriculum on students, faculty, and the institutions that comprise Einstein's educational program. In the long term, the combination of the NIH-funded activities and the new PDC course will enhance our medical students' education across the entire four-year curriculum.

Two New Mentoring Programs Help Students with Career Choices

Generalist Careers Pathway Program

By Lisa Matthews, M.P.H.

The **Generalist Careers Pathway Program** (GCP), a new program at AECOM, seeks to provide AECOM medical students, especially those interested in careers in primary care, with career guidance and advice. The GCP is a HRSA-funded program, which was awarded to the **Department of Family and Social Medicine** for pre-doctoral training in primary care. Each interested student is assigned a mentor who is a practicing primary care physician – a pediatrician, a general internist, or a family physician – within the AECOM system. The mentor's role is to support, encourage, and foster a student's interest in primary care throughout his or her undergraduate medical education. Mentors meet with the student approximately once per month to discuss such topics as school, career, and life. Students enrolled in the program are expected to attend monthly meetings where topics relevant to primary care practice are discussed.

The program is open to any AECOM student. The student does not have to commit to a primary care career, but will have the opportunity to gain extra exposure to primary care. The GCP Program offers:

- A mentor for the duration of your time in medical school.
- Clinically relevant discussions, lectures, workshops.
- Primary Care research opportunities.
- Opportunity to attend academic primary care meetings.

Unlike the Generalist Mentorship Program, which is a clinical selective of the first-year Introduction to Clinical Medicine course, this program is not part of the formal curriculum and spans all four years of medical school. Currently, 25 first-year students are enrolled in this program. Core faculty members are **Drs. Darwin Deen, Lisa Rucker, Diane Indyk,** and **Maria Santos**. For more information, contact Lisa Matthews, Department of Family & Social Medicine: **lmatthew@aecom.yu.edu.**

Surgery Clerkship Shadow Program

By Rosangela Foitl, B.S.

Responding to pre-clinical student interest and in an effort to support the medical school's goals of promoting professionalism and mentoring, the Surgery Clerkship launched the school's first pre-clinical student Shadow Program. This program provides an opportunity for pre-clinical students to spend a day working with a third-year student on a clinical surgical rotation. According to **Dr. Thomas Weber**, Surgery Clerkship Director, the goals of the program are to allow pre-clinical students an opportunity to observe first hand the duties and educational environment of students currently rotating in the Surgery Clerkship. "In addition and very importantly," Dr. Weber adds, "the Shadow Program also provides an opportunity for third-year students to take a more junior student colleague under their wings." In this way the Shadow Program enriches the educational experience of pre-clinical students and provides the third-year students with valuable mentoring experience.

The Surgical Clerkship's first Shadow student, **Michael Hannon**, Class of 2008, spent an exciting day under the mentorship of **Nelya Brindzei**, now a fourth-year student, at the Weiler Hospital. Michael's experience included attending 5:30 am rounds with the entire surgical team, visiting patients assigned to mentors Nelya Brindzei and **Eric Varma**, Class of 2006, and observing several cases – up close – in the Weiler operating rooms. Writing of his experience, Michael noted: "This experience has encouraged me to redouble my studying efforts so that I might have an opportunity to pursue surgery." His student mentors wrote that the experience "gave us fresh insight into just how much we had learned on our rotation and how much we had to offer as mentors to our more junior colleagues."

In November of 2006, the Surgery "Shadowing Program" expanded to Jacobi Medical Center, General and Trauma Surgery, with help from **Dr. Melvin Stone**, Site Director of the Surgery Clerkship at Jacobi Medical. The Plastic Surgery service at Jacobi Medical Center has also embraced the Shadowing Program, under the leadership of **Dr. Ralph Liebling**, Director of Plastic and Reconstructive Surgery.

Grants For Excellence in Medical Education

Einstein's Division of Education (DOE) is pleased to announce the fifth year of its Grants for Excellence in Medical Education program. The purpose of this program is to stimulate faculty to undertake long-term projects that have the potential to effect significant change and improvement in the education of medical students. Grant-supported projects may deal with virtually any aspect of medical education including instructional strategies, educational applications of information technology, integration of new topics/disciplines into the curriculum, performance/knowledge assessment or extracurricular student activities such as research, community service and international health. Projects may involve modifications of existing courses and clerkships, the planning and development of new ones or transference of programs already developed at other medical schools.

The awards will be made in 2007 in amounts of up to $7500, each with starting dates of July 1 to September 1. The award may be used by the grantee for a minimum period of one year from the start date to a maximum period of three years. The grant funds are intended for use to support the approved project, e.g., computer hardware or software, books, travel, or statistical consultation. Grant funds cannot be used for grantee's salary support.

The grantee will be expected to submit a written progress report to the DOE at the conclusion of each project year.

Application Procedure

The proposal should consist of the following:

- Face page with name, title, academic department.
- Describe (in 3-4 typewritten pages) the aims and objectives, rationale, plans and methods, and expected educational outcome.
- Construct a timetable for each phase of the project, keeping in mind that the project may span a period of 1-3 years.
- Describe how you will evaluate the success of the project and the degree of achievement of the expected outcome.
- Attach a CV.
- Mail proposal by **April 15, 2007** to Albert S. Kuperman, Ph.D., 209-Belfer, Albert Einstein College of Medicine, 1300 Morris Park Avenue, Bronx, NY 10461.

Review Process and Notification of Award

Applications will be reviewed by an *ad hoc* committee of the DOE, and awards will be announced by **May 15, 2007**.

For additional information or clarification, contact Dr. Albert S. Kuperman via telephone (718-430-3371), telefax (718-430-8825) or E-mail (kuperman@aecom.yu.edu).