SUBJECT: Curricular Guidelines: Pre-Clerkship Policy

I. PURPOSE AND SCOPE
   A. To inform the UH College of Medicine students, staff, and faculty of the guidelines for pre-clerkship curricular activities of the medical education program.
   B. To ensure that students have sufficient unscheduled time in their regular weekly schedule to complete independent learning and self-study required of them for participation and success in the pre-clerkship portion of the curriculum.
   C. To ensure the UH College of Medicine complies with the Liaison Committee on Medical Education (LCME) standards for the medical education program, including LCME Standard 6.3.

II. BACKGROUND
   The Mission of the new University of Houston College of Medicine (UHCOM) is to improve the overall health and healthcare of the population of Greater Houston, Texas, and beyond by educating a diverse group of compassionate physicians, conducting interdisciplinary research, providing high-value care, and empowering patient populations. The UHCOM Vision is to educate and graduate physicians who have a deep understanding of social determinants of health and who choose to practice primary care and other needed physician specialties in underserved communities. The new UH College of Medicine will do so by developing an interactive and practice-based pre-clerkship curriculum.

III. POLICY
   A. Overarching UH College of Medicine Curricular Principles
      1. The curriculum will be learning- and student-focused.
      2. All instructional activities will be objective-based, and learners assessed on those objectives.
      3. When appropriate, instructional activities will include a variety of teaching methodologies including patient-focused using cases, vignettes, simulations, etc. to demonstrate clinical relevance of content.
      4. There will be early clinical experiences in community-based clinics starting in Year I, Week 1 in the Longitudinal Primary Care course (LPC).
      5. Faculty will employ multiple learner-centered, active instructional strategies:
         a) Large group interactive sessions (including Team Based Learning and case-based interactive sessions)
         b) Small group case-based sessions (discussion groups, PBL, team-based cases)
         c) Simulated patients and simulation labs
         d) Self-directed learning
         e) Tutorials
         f) Formative assessments and feedback
      6. Community engagement will occur in all four (4) years through house-hold-centered care (component of LPC).
      7. There will be an integration of clinical and explanatory sciences within each course and across all four (4) years.
      8. Normalcy, health and wellness, human growth, development, and the life cycle will be emphasized in all courses.
9. Emphasis of differences in disease and treatment needs related to gender, ethnicity, and LGBTQ groups should be included when applicable.

B. Pre-Clerkship Course Design Guidelines
1. All course designs will be guided by desired student outcomes (Learning Objectives). Course design teams will determine acceptable evidence for those outcomes and then plan their learning experiences and instruction.
2. The “Clinical Anatomy and Human Development” course will provide foundation in clinically relevant anatomy, embryology, and histology with three (3) major summative assessments.
3. The “Scientific Foundations of Medicine” course will provide a clinically focused introduction to the various systems of human physiology with two (2) major summative assessments.
4. The subsequent organ system courses will incorporate the foundational sciences in the context of disease state, each with at least one (1) major summative assessment.
5. The two longitudinal courses (Longitudinal Primary Care-LPC and Physicians, Patients, and Populations—PPP) will be vertically integrated into all concurrent courses.
6. Cases and simulations presented in all courses will be representative of relevant, local patient populations.
7. Assessments will include both the customized NBME exam items, faculty-generated items, and other course-specific assessments linked to student learning objectives.
8. Basic science courses will provide weekly formative quizzes with feedback.
9. Instructional curricular delivery time (“contact hours”) will be approximately 22-24 hours per week on average:
   a. Four (4) hours LPC
   b. Four (4) hours PPP
   c. 14-16 hours in pre-clerkship courses
      i. No more than 2-3 hours large group traditional lecture time per week
      ii. 9-10 hours large or small group, interactive learning sessions per week
      iii. It is estimated that students will need 1-2 hours of preparation of review for all interactive sessions and labs, and for assignment completion. Based on these estimates, that student academic workload will average approximately 40 to 60 hours per week
10. Curricular sessions should be 45 minutes or less to allow for student breaks and transition to next session.
11. Students will have a minimum of three (3), usually four (4), half-days scheduled each week in which no courses take place.
12. Faculty should assign no more than two (2) hours preparatory work for every contact hour.
13. Professionalism is an expected component of every curricular activity.

IV. MONITORING OF THIS POLICY
A. The Office of Medical Education will monitor curricular guidelines in multiple ways, including the following:
1. Establish course schedules each semester
2. Reviewing session-planning forms that are submitted by faculty
3. Reviewing recorded classes
4. Assessing relevant items in student course evaluations
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### Approval History

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