

DEC 0 8 2003

December 4, 2003

TRANSMITTAL

- TO: Rebecca Scott Senate Council
- FROM: Cathy Owen

At its meeting on November 25, 2003, the Academic Council for the Medical Center approved, and recommends approval by the Senate Council, for the proposal from the College of Medicine to change the graduation requirements in the College of Medicine. Attached are the materials to implement this change.

Thank you for your attention to this matter.

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attachments

c: Emery A. Wilson, M.D. C. Darrell Jennings, Jr., M.D. Jacque Hager Office of the Provost 106 Gillis Building Lexington, KY 40506-0033 (859) 257-2911 Fax: (859) 257-1333 Email: provost@email.uky.edu www.uky.edu October 10, 2003

MEMORANDUM

TO: Cathy Owen

FROM: Wanda Whitehouse Office of Academic Affairs

Attached is a request for change in the College of Medicine graduation requirements. A memo regarding this change has been sent to duplicating and the mailroom for distribution to the proper people. Please ask Dr. Todd Cheever (3-5261) to the Council meeting. It is felt he will have information that we do not have and could better answer any questions.

Thanks

UNIVERSITY OF KENTUCKY

October 1, 2003

MEMORANDUM

David S. Watt, PhD Associate Provost for Academic Affairs Chair, Academic Council for the Medical Center

FROM: Emery A. Wilson, M.D. Dean and Associate Vice President for Clinical Services

Request for Change in College of Medicine Graduation Requirements

The Faculty Council of the College of Medicine has approved and submits for your consideration and approval the following new course application(s):

Change in College of Medicine Graduation Requirement

<u>Description</u>: The present policy of the United States Medical Licensing Examination (USMLE) requires only that students have a passing score on a written examination to graduate from medical school. <u>Justification</u>: The United States Medical Licensing Examination (USMLE) has issued a new policy, effective with the Class of 2005, requiring medical students to have passing scores on both a written examination and a clinical skills examination in order to receive their diplomas.

Dean and Associate Vice President for Clinical Services College of Medicine MN 150 Chandler Medical Center 800 Rose Street Lexington, KY 40536-0298 (859) 323-5567 Fax: (859) 323-2039 E-mail: ewilson@uky.edu www.uky.edu



October 1, 2003

MEMORANDUM

Dean and Associate Vice President for Clinical Services College of Medicine MN 150 Chandler Medical Center 800 Rose Street Lexington, KY 40536-0298 (859) 323-5567 Fax: (859) 323-2039 E-mail: ewilson@uky.edu

Deans, Department Chairs and Members of the University Sendterwuky.edu

FROM: Emery A. Wilson, M.P. Dean and Associate Vice President for Clinical Services

Request for Change in College of Medicine Graduation Requirements

The Faculty Council of the College of Medicine has approved and submits for your consideration and approval the following request:

Change in College of Medicine Graduation Requirement

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August 28, 2003

MEMORANDUM

TO:

David Watt, PhD Associate Provost, Academic Affairs

FROM: Emery Wilson, M Dean

Via

C. Darrell Jennings, M.D. Chair, College of Medicine Curriculum Committee

RE: Change in College of Medicine Graduation Requirement

The United States Medical Licensing Examination (USMLE) has issued a new policy effective with the graduating class of 2005. This policy requires students to have a passing score on both a written examination and a clinical skills examination. Passage of a clinical skills exam is a requirement for licensure by all 50 states. In order for students to comply with the new policy, students must fly or drive to a clinical skills testing site; closest testing location for our students is either Chicago, IL or Atlanta, GA.

In order for students to receive financial assistance in the form of federal loans to cover the cost of taking the clinical skills exam and transportation to and from the testing site, the clinical skills exam must be made a part of graduation requirements. Further, the Third and Fourth Year Course Directors' Committee, the Student Progress and Promotion Committee, and the Curriculum Committee embrace the concept of clinical competency assessment for all physicians. Therefore, the College of Medicine is requesting a change in graduation requirements:

Old requirement for graduation from the College of Medicine

Passing scores on both the Step 1 (taken at the end of Year 2) and Step 2 written examinations. Students have from the end of their third year through December 31 of their senior year to pass Step 2. Students have three attempts to pass before dismissal, with appeals.

College of Medicine

Chandler Medical Center Associate Dean for Academic Affairs and Administration MN-104, UKMC Lexington, KY 40536-0298 (859) 257-5286 Fax: (859) 323-2076 www.uky.edu Page 2 Memo-Change in College of Medicine Graduation Requirement August 28, 2003

New requirement for graduation from the College of Medicine

Passing scores on both the Step 1 written examination (taken at the end of Year 2), and Step 2 written examination and clinical skills examination. Students have from the end of their third year through December 31 of their senior year to pass both parts of the Step 2 examination. Students have three attempts to pass before dismissal, with appeals. Students are not required to take Step 2 examinations in any particular order.

APPROVAL:

German m.D.

College of Medicine Chrriculum Committee C. Darrell Jennings, M.D., Chair

A.

College of Medicine Faculty Council Thomas Kelly, Ph.D., Chair

Dean, College of Medicine Emery Wilson, M.D.

2004 USMLE"

bulletin of information

A Joint Program of the Factoration of State Medical Boards of the United States, Inc., and the National Board of Medical Examineral[®]



EXAMINATION CONTENT

Step 2 Clinical Skills (CS)

Step 2 CS assesses whether an examinee can demonstrate the fundamental clinical skills essential for safe and effective patient care under supervision. These clinical skills include taking a relevant medical history, performing an appropriate physical examination, communicating effectively with the patient, clearly and accurately documenting the findings and diagnostic hypotheses from the clinical encounter, and ordering appropriate initial diagnostic studies.

Step 2 CS uses standardized patients, i.e., people trained to portray real patients. Examinees are expected to establish rapport with the standardized patients, elicit pertinent historical information from them, perform focused physical examinations, answer questions, and provide counseling where appropriate. After each interaction with a standardized patient, examinees record pertinent history and physical examination findings, list diagnostic impressions, and outline plans for further evaluation, if necessary. The cases cover common and important situations that a physician is likely to encounter in a general ambulatory setting.

Further details on the design and content of Step 2 CS will be provided at the USMLE website.

Step 3

Step 3 is organized along two principal dimensions: clinical encounter frame and physician task, as shown at the right. Step 3 content reflects a data-based model of generalist medical practice in the United States.

Encounter frames capture the essential features of circumstances surrounding physicians' clinical activity with patients. They range from encounters with patients seen for the first time for nonemergency problems, to encounters with regular patients seen in the context of continued care, to patient encounters in (life-threatening) emergency situations. Encounters occur in clinics, offices, skilled nursing care facilities, hospitals, emergency departments, and on the telephone. Each test item in an encounter frame also represents one of the six physician tasks. For example, initial care encounters emphasize taking a history http://www.usmle.org Sample Step 3 test materials and further information on Step 3 test content are available from your registration entity and at the USMLE website.

Table 3: USMLE Step 3 Specifications*

Clinical Encounter Frame

20%-30%	Initial care
50%-60%	Continued care
15%-25%	Emergency care

Physician Task

8%-12%	Obtaining history and performing, physical examination
8%-12%	Using laboratory and diagnostic studies
8%-12%	Formulating most likely diagnosis
8%-12%	Evaluating severity of patient's problems
8%-12%	Applying scientific concepts and mechanisms of disease
45%-55%	 Managing the patient health maintenance clinical intervention clinical therapeutics legal and ethical issues
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* Percentages may be changed without notice.	

and performing a physical examination. In contrast, continued care encounters emphasize decisions regarding prognosis and management.

High-frequency, high-impact diseases also organize the content of Step 3. Clinician experts assign clinical problems related to these diseases to individual clinical encounter frames to represent their occurrence in generalist practice.

OVERVIEW

assessment of physicians assuming independent responsibility for delivering general medical care.

Examination Committees

Examination committees composed of medical educators and clinicians prepare the examination materials. Committee members broadly represent the teaching, practicing, and licensing communities across the United States. At least two of these committees critically appraise each test item or case. They revise or discard any materials that are in doubt.

Ownership and Copyright of Examination Materials

The USMLE parent organizations, the FSMB and NBME, own the examination materials used in the USMLE. The examinations are copyrighted. If you reproduce and/or distribute any examination materials, by any means, including memorizing and reconstructing them, without explicit written permission from the parent organizations, you violate the rights of the FSMB and NBME. In addition to actions described on page 25, the FSMB and the NBME will use every legal means available to protect USMLE copyrighted materials and secure redress against those who violate copyright law.

USMLE Step 2 Clinical Skills (CS) Examination

A clinical ski!'s examination was part of the original design of USMLE. The NBME was charged with including a test of clinical skills using standardized patients when such an examination was shown to be valid, reliable, and practical. NBME research and the work of other organizations administering clinical skills examinations demonstrate that clinical skills examinations measure skill sets different from those measured by traditional multiple-choice questions. Mastery of clinical and communication skills, as well as cognitive skills, by individuals seeking medical licensure is important to the protection of the public.

Implementation of the clinical skills examination will occur in the second or third quarter of 2004. The clinical skills examination will be a separate component of Step 2, and will be referred to as Step 2 Clinical Skills, or Step 2 CS. The current Step 2 will be referred to as the Clinical Knowledge Component, or Step 2 CK. In order to be eligible to register for USMLE Step 3, students and graduates of LCME- or AOA-accredited medical schools will be required to not only meet current examination requirements (i.e., passing Step 1 and passing Step 2 CK) but also to pass Step 2 CS if they: (a) have graduation dates in 2005 or later, or (b) have graduation dates prior to 2005 and have not passed the CK component of Step 2 taken on or before June 30, 2005.

When Step 2 CS is implemented, it will replace the Clinical Skills Assessment (CSA*) administered by the ECFMG and required for ECFMG certification of international medical graduates.

In order to be eligible to register for USMLE Step 3, international medical graduates will be required to not only meet current requirements (i.e., passing Step 1 and Step 2 CK and being certified by ECFMG), but also to pass Step 2 CS. However, international medical graduates who have passed the ECFMG CSA will not be required to pass Step 2 CS to register for USMLE Step 3.

To be eligible to register for Step 3, ECFMG-certified international medical graduates who have not passed the ECFMG CSA, as well as individuals who successfully complete a "Fifth Pathway" program, may also be required to pass Step 2 CS. These individuals should monitor the USMLE website for the effective date of this requirement.

You are responsible for determining whether this requirement applies to you, based on the rules stated in the paragraphs above.

This bulletin is written to include information available at the time of publication regarding the CS component of Step 2. As additional information about the implementation of Step 2 CS becomes available, details will be provided at the USMLE and your registration entity's websites.

Computer-Based Testing (CBT)

Parts of the USMLE are administered by computer. Prometric[®], part of The Thomson Corporation, provides scheduling and test centers for the USMLE. Step 1 and Step 2 Clinical Knowledge Component are given around the world at Prometric Test Centers (PTCs). Step 3 is given at PTCs in the United States and its territories.

APPLYING FOR THE TEST AND SCHEDULING YOUR TEST DATE

Obtaining an Eligibility Period for Step 1 and Step 2 CK

When applying for Step 1 or Step 2 CK, you must select a three-month period, such as January-February-March or February-March-April, during which you prefer to take the Step. A Scheduling Permit with instructions for making an appointment at a Prometric Test Center will be sent to you after your registration entity processes your application and determines your eligibility. The Scheduling Permit specifies the three-month eligibility period during which you must complete the examination. If the processing of your application is not completed in time to allow your preferred three-month period to be assigned, you will be assigned to the next threemonth period. Allow approximately four weeks for processing of your application. On receipt of your Scheduling Permit, you are able to contact Prometric immediately to schedule a test date.

Prometric schedules testing appointments for Steps 1 and 2 CK up to six months in advance of the assigned eligibility period. If your application is submitted more than six months in advance of your requested eligibility period, it will be processed, but your Scheduling Permit will be sent no more than six months before your assigned eligibility period begins.

Details about eligibility periods, locations of test sites, and scheduling for Step 2 CS, when determined, will be provided at the USMLE website and the website of your registration entity.

If you are unable to take the test within your eligibility period, contact your registration entity to inquire about a contiguous three-month eligibility period extension. A fee is charged for this service. Visit your registration entity's website (see page 26) for more information. If you do not take the test within your eligibility period and wish to take it in the future, you must reapply by submitting a new application and fee(s).

Testing Regions

Step 1 and Step 2 CK are administered in the United States and Canada and in more than 50 other countries. International testing locations are distributed among defined international testing regions. These regions are noted in ECFMG application materials along with instructions for choosing a region and paying the additional international test delivery surcharge. Within each region, Prometric has a central scheduling office known as the "Regional Registration Center" to contact for scheduling test dates.

http://www.prometric.com Use the Prometric Test Center Locator for up-to-date information on the locations of Prometric Test Centers.

Step 2 CS will be delivered at regional test sites within the United States.

Obtaining an Eligibility Period for Step 3

Step 3 eligibility periods are assigned once your application has been processed and approved. In deciding when to apply for Step 3, allow approximately two to four weeks for processing. Time for processing will vary depending on the particular medical licensing authority and the volume of applications. Upon complete processing of your Step 3 application and confirmation of eligibility, a Scheduling Permit is sent to you with instructions for making an appointment at a Prometric Test Center. On receipt of your Scheduling Permit, you should contact Prometric immediately to schedule the test dates. The Scheduling Permit specifies the eligibility period (beginning immediately and extending for approximately 90 calendar days) during which you must complete the examination. If you are unable to take the test within your eligibility period, contact the FSMB to inquire about a contiguous threemonth eligibility period extension. A fee is charged for this service, and some restrictions may apply. Visit the FSMB website (http://www.fsmb.org) for more detailed information. If you do not take the test within your original or extended eligibility period and wish to take it in the future, you must reapply by submitting a new application and fee(s).