

Medical Ethics Suggestions - University of Louisville School of Medicine

AAMC-OSR Listserv Responses

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Initial email read:

Hello all,

I'm from the University of Louisville School of Medicine, and we are looking for ways to improve our Medical Ethics curriculum. We currently use a small group set-up, discussing cases (often outdated), that seem to fall flat. We would like a different perspective on how your school approaches the topic of Medical Ethics...

1. How does your school organize and present Medical Ethics?
2. When and how often are these sessions/classes/etc?
3. Any other creative, dynamic suggestions on how to "spice-up" Medical Ethics?

Thanks for your help!

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Medical School	Name	Contact information	Response
University of Alabama, Birmingham	Elizabeth Ma MS2	elizma@uab.edu	<p>1. Ethics is mainly integrated into our modules, so for example, we had a discussion of brain death in neuro, and a think about ventilators in pulmonary (I think...). We also had a trial co-enrolled course of ethics, but don't think that took off as well.</p> <p>2. They were literally 1 class per module or so</p> <p>3. Case studies w/ class participation are pretty good, or at least some history/background to draw people's interest. For example, why is the question of when you pronounce someone brain dead so important? Part of the reason is because organ donation is so much more common now.</p>
Virginia Tech Carilion School of Medicine	Matt Joy- MS3	mtjoy@carilionclinic.org	<p>We have integrated our medical ethics curriculum into two of the four learning domains at our school (basic science, clinic science, research, and interprofessionalism). We discuss clinical trials, IRB, HIPPA, and the history of human subjects research in our research domain lecture series during the first year (2x 1.5 hour lectures per week in year 1). We also have a bioethics course as part of our interprofessionalism domain which includes local nursing and PA students. In this course we discuss some of the precedent setting cases in medical ethics as well as more current topics like views on death and dying and the "rationing" of health care services. This course is part of the M2 curriculum and was well received in this format (1x 2.5 hour lecture per week in year 2). Finally we have a course on narrative medicine presented by a humanities professor from our partner undergrad institution, Virginia Tech, that also touched on issues in medical ethics and how they affect social views of the practice</p>

			<p>of medicine. For that course we read the book, "The Spirit Catches You and You Fall Down" and discussed in small groups the implications of that story on the practice of modern western medicine. Just as an aside, I would highly recommend that book to any medical student, particularly those interested in the affects of cultural diversity on doctor-patient interactions.</p> <p>I think the most interesting sessions were those where we had access to a facilitator with a solid understanding of the ethical issue being discussed that could play the devil's advocate with the group and get us to really think critically about both sides of the argument. Some groups also enjoyed role playing different ethical conundrums.</p>
Oklahoma College of Medicine	Phil Bonney MS2	Phillip-Bonney@ouhsc.edu	<p>At the University of Oklahoma College of Medicine, we have ethics in the fall of second year. We have 10 sessions on Mondays that consist of 1 hour of lecture and 1 hour of small group discussion. Our cases are fairly current and fairly interesting. I don't really have any suggestions besides to update your cases. The best ones we had were recent cases from hospitals on our campus.</p>
University of Mississippi Medical Center School of Medicine	Jonah Gunalda MS3	jgunalda@umc.edu	<p>This is a great topic, and one of much frustration for a lot of schools.</p> <p>At the University of Mississippi Medical Center, we have a student-run medical ethics council that I chaired last year. Here's how it works. I solicited interest among my class (M2s) and organized people into groups. Each group was responsible for hosting a monthly ethics meeting at which a speaker would come and facilitate discussion about a relevant ethical issue. Speakers were chosen from among campus faculty as well as from outside the institution. For example, our state president of Medicaid came and spoke at one meeting. The students in charge of the meetings were responsible for scheduling the event, booking a venue, contacting a speaker, advertising on campus, and lining up lunch (which is when our meetings were held). Sounds like a lot of responsibility, but the students handled it really well.</p> <p>The meetings were open to anyone on campus, and it was mostly an open forum format. So discussion among students, faculty, and physicians was quite interesting. This set up worked for us, and I feel like it's a fresh way to bring medical ethics into the classroom in a new way.</p>
Baylor	Jacqueline Guidry	jaguidry@bcm.edu	<p>1. During our basic science courses in the spring of first year, we have a course clock that includes a medical ethics course. We have lecture daily (or almost daily) for about 1.5 months and then a multiple choice test at the end. There are also small groups throughout the course that have required participation.</p>

			<p>2. For 1.5 months in spring of first year, 4-5 days per week for an hour plus 1-2 small group sessions that are about 2-3 hours in duration.</p> <p>3. We also have an elective ethics track for students that are more interested, which entails (1) a monthly seminar for three hours in the evening throughout second year, (2) a medical ethics clinical elective where the medical student participates on a hospital ethics board, and (3) a research project on an ethics based topic during fourth year.</p>
UT Memphis	Sam Seyler	samseyler@gmail.com	<p>Here at UTHSC in Memphis, we present Medical Ethics in the context of our Principles of Clinical Medicine class that runs throughout our first two years. We have a couple of baseline lectures describing the various aspects of ethics (beneficence, fiduciary responsibilities, non-maleficence, etc), and then we apply them in a couple of team-based learning activities (working through problems/scenarios in small groups). I found it particularly helpful to have a J.D. that advises hospitals on the legal and ethical issues that may arise.</p>