Background
VTCSOM is committed to helping students achieve their academic and personal goals through high quality academic advising using a holistic approach to the student’s development. The goal of the academic advising system is for each student who matriculates at VTCSOM to successfully complete the medical curriculum and attain the degree of Medical Doctor. The objectives of the academic advising system are to provide:

• Early identification of students who are struggling with the academic demands of medical school
• Effective intervention for students who demonstrate academic deficiencies and/or who are required to remediate components of the curriculum
• Accessible resources to meet the individual needs of students including tutoring, advising, counseling, study and testing-taking guidance, and time management strategies

The Patient-Centered Curriculum at VTCSOM is integrated across all four years of medical school, is centrally managed, and provides students the foundational basic science knowledge and clinical knowledge and skills to enter into any residency program. Graduates have the added advantage of an educational program that provides in-depth experiences in research and interprofessional health care education and practice.

The curriculum is broken down into two main sequential phases (Phase 1: Years 1 and 2 and Phase 2: Years 3 and 4). Four educational Value Domains are woven throughout the two phases and include: Basic Science, Clinical Science, Research, and Interprofessionalism. A schematic diagram of the program is presented in the Appendix.

Phase 1 begins with a week-long Orientation to medical school followed by sequential 6-8 week blocks (which serve as our courses) with each Domain’s objectives being addressed within a given block. The blocks are “organ-systems” based with Year 1 being focused on “Normal Structure and Function of the Human Body” and Year 2 “Pathobiology”. Basic Science is learned in the context of patients (PBL cases) using a problem-based-learning-hybrid model. Phase 1 concludes with the Year 2 Research rotation and the Intensive Study Period for the USMLE Step 1 examination.

Phase 2 is comprised of clinical clerkships and electives that include clerkships in Emergency Medicine, Family Medicine, Internal Medicine, Neurology, Obstetrics and Gynecology, Pediatrics, Psychiatry, Radiology, and Surgery as well as Research rotations in both Year 3 and Year 4. Phase2 concludes with a two-part course entitled, “Transition to Residency” which is designed as a capstone experience to help with the transition into residency.
Phase 1 (Years 1 and 2) advising

Academic advising for students in Phase 1 is coordinated by the Senior Dean for Student Affairs in consultation with the Senior Dean for Academic Affairs, Director of Academic Counseling and Enrichment Services, the Assistant Dean for Research, the Associate Dean for Clinical Science - Years 1 and 2, and the Domain Director for Interprofessionalism.

The advising program begins at orientation. Students are given an overview of the curriculum and the means of assessment and are introduced to each of the domains. They work through a Problem Based Learning (PBL) case during the orientation week. The Director of Academic Counseling and Enrichment Services (ACES) conducts a session to provide an initial foundation for studying in medical school as well as resources available to assist students. Also during orientation, the school hosts a lunch session to give the new M1 class a chance to meet with the M2 class. During the lunch, the M2 class offers the new class advice on how to successfully navigate the transition to medical school. At this time, each M1 student is assigned an M2 student as a peer mentor.

After orientation concludes, the Director of Academic Counseling and Enrichment Services (ACES) meets with the M1 class to revisit some of the topics covered during orientation as well as further expand on strategies for effective study in medical school.

Each student will receive on-going support from the Senior Dean for Student Affairs as well as the Director of Academic Counseling and Enrichment Services. In addition to receiving details during orientation regarding the availability of support, students will also receive a bi-monthly Student Affairs Newsletter email which highlights student resources, events and services as well as a weekly Wellness Weekly newsletter highlighting ways to stay healthy during medical school. Personal or email contact with students is also made on an as needed basis, to provide guidance and resources.

The Block 1 PBL facilitators will meet with their assigned students at the mid-point of Block 1 in order to identify students who are having trouble assimilating into medical school. Mid-block assessment on the formative Integrated Clinical Exam (ICE) and NBME-type exam in Block I is also used to identify students at risk. Feedback regarding perceptions of students at risk in the Interprofessionalism, Clinical Science, and Research Domains will be obtained from the faculty at the midpoint of each block and shared at the BIC-1 meeting. These identified students meet with the Senior Dean for Academic Affairs, the Senior Dean for Student Affairs, and Director of Academic Counseling and Enrichment Services to discuss any difficulties.

Students are required to meet individually with their PBL facilitator at the halfway point and at the end of every block to discuss progress and to be given formative and summative feedback. The PBL facilitator should alert the Director of Facilitator Development who will work with the Director of Academic Counseling and Enrichment Services to conduct outreach to any student who is having academic difficulties. Students have an intra-block Standardized Patient (SP) encounter for each of the eight Phase 1 blocks. Students are made aware of performances on these encounters that fall below the given cutoff on the SP feedback assessment tool. Finally, these at-risk students will be identified during the mid-block BIC-1 meeting.

For students who have been identified as having academic difficulties during a block or need to remediate following a block, a meeting with the Senior Dean for Student Affairs and the Director of Academic Counseling and Enrichment Services to explore stresses or issues that may be contributing to the current academic difficulties is required. If necessary, a referral for further evaluation may be made.
Additionally, students have access to care providers via this link: this link is broken: I think we should link to our providers list instead:
http://www.ucc.vt.edu/academic_support_students/online_study_skills_workshops/index.html.

In order to ensure students receive the assistance they need when experiencing academic difficulties, students are encouraged to seek assistance if they: (a) are at risk of failing a course, (b) have achieved a borderline but passing performance, or (c) during the course of a block, instructors have identified learning difficulties. Students are also encouraged to self-identify and/or self-report academic difficulties if the student feels he/she is experiencing difficulty or may be at risk of failing a Block. This identification/reporting is ideally directed to the Senior Dean for Student Affairs or the Director of Academic Counseling and Enrichment Services but can also be directed to a faculty member, block director, the Director of Student Assessment, or the Senior Dean for Academic Affairs.

The primary objective of the VTCSOM remediation program is to help students identify weaknesses in knowledge, skills and attitudes within and across the four domains of basic science, clinical science, research and interprofessionalism uncovered by the assessment modalities. Students participate with faculty in developing a remediation plan to address these deficiencies and are then retested. The student’s remediation plan may include referral for evaluation of study skills, focused help from faculty to prepare for remediation, and/or a referral for tutoring. These services will be continued through the following blocks as needed. The indicator of success is advancement to the subsequent block or year of Phase 1.

Students who have remediated any component of assessment in a Block or who have failed one of these blocks are referred to the Senior Dean for Student Affairs and the Director of Academic Counseling and Enrichment Services for academic counseling. Self-referral is always possible for students. Students who fail two Blocks in the same academic year are referred to the Medical Student Performance and Promotions Committee (MSPPC) for a dismissal hearing.

Members of the faculty will be available to students for consultation or for supplemental instruction outside of scheduled course time during regular work hours by appointment. Tutors (including senior medical students and graduate students) in specific areas are available and requests for these services should be directed to the Director of Academic Counseling and Enrichment Services. Students who struggle can also request to be paired with a current attending faculty member who also once faced a personal or academic struggle. The partnership can give the student insight into how the faculty member navigated that moment in time successfully.

**Phase 2 (Years 3 and 4) advising**

The Associate Dean for Clinical Science- Years 3 and 4, along with the Senior Dean for Student Affairs, serves as the primary academic advisors for students during Phase 2. Other individuals involved in academic advising during Phase 2 include the Clerkship Directors (CD), the Physician Thought Leader Community (PTLC) Leaders, the Director of Academic Counseling and Enrichment Services, and the specialty-specific advisors.

For each of the required clerkships of four weeks or greater, the CD or designee, meets with each student at the mid-point of the rotation in order to give formative feedback. At that meeting the CD will have evidence of progress toward completion of the clerkship passport as well as assessments from various faculty members. Students considered at high risk will be identified to the Associate Dean for Clinical Science- Years 3 and 4. A separate meeting with the student, the CD, and the Associate Dean for
Clinical Science- Years 3 and 4 occurs where options and interventions for assuring successful completion of the clerkship are discussed and make a referral for evaluation and further academic support including testing, tutoring, or counseling, as needed.

Students in good academic standing who receive grades of Unsatisfactory (U) for any of the Assessment Components other than the composite of assessments will be assigned a time to repeat the examination or given a deadline for completing the incomplete component. The CD will provide guidance to the student on the best means of preparation for the completion of the task. For instance, students who are not successful at the end-of-clerkship OSCE will review the tape of the encounter with the Senior Director of Evaluation as well as the CD for specific feedback on the OSCE. Students who do not pass the written examination will be given resources for preparation prior to the remediation of the examination.

Students in good academic standing who receive grades of Unsatisfactory (U) for the composite of assessments will need to remediate the clerkship or elective and will be placed on academic probation. The terms of the remediation are determined by the Clerkship Director and Associate Dean for Clinical Science- Years 3 and 4. A remediation contract is created and is signed by the Clerkship Director, the student, and the Associate Dean for Student Affairs. The goals and objectives for the remediation will be communicated clearly to the student.

Training of the various advisors
The Physician Thought Leader Community Leaders have a yearly faculty development session at which time they are given information on, among other things, the academic advising expectations, remediation policies, and the resources available to students.

The specialty-specific advisors have as their primary responsibility assisting students with career counselling. They also serve as support for academic advising as described above during Phase 2. There is a yearly training session for specialty specific advisors at which time they are given information on, among other things, the academic advising expectations, remediation policies, and the resources available to students.

Preparation for USMLE Step 1, Step 2 CK, and Step 2 CS
VTCSOM provides a one-year subscription to the USMLE World Step 1 Question Bank beginning early in the 2nd year. We have a contract with The Step 1 Method, an outside vendor that provides on-site seminars and webinars aimed at assisting students with a study plan for preparing for USMLE Step 1. The school provides three NBME Comprehensive Basic Science Self-Assessments with expanded feedback. Students will be provided guidance from the Senior Dean for Students Affairs and the Director and Academic Counseling and Enrichment Services based on study progress. Students are expected to following basic study plan as laid out by Student Affairs and The Step 1 Method.

VTCSOM provides a one-year subscription to the USMLE World Step 2 CK Question Bank beginning early in the 3rd year. A Comprehensive Clinical Science Self-Assessment is administered during Assessment Week at the end of the 3rd year. The results of this practice test help to guide students in study for the USMLE Step 2 CK exam.

Students do a 10-station mock Step 2 CS exam during Assessment Week at the end of the 3rd year. The results of this practice test help to guide students in preparation for the USMLE Step 2 CS exam.