

Paul L. Foster School of Medicine

Syllabus

Pre-Clerkship Preparation Course (PICE)

PICE 7001

Academic Year 2018-2019

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Course Description

The Clerkship Preparation Course (PICE) is designed to ensure that students have acquired the skills necessary for lifelong learning and ensure readiness for the next stage of the curriculum. In order to achieve this goal, PICE is designed to assist you in:

- integrating your basic sciences knowledge,
- ensuring you have the needed clinical skills for clerkships, and
- enabling you to demonstrate the self-directed learning skills needed by practicing physicians.

The majority of the course time is self-directed learning time. Passing the course prepares the student for their clinical curriculum and Step 1 of the USMLE.

Grading System

Passing this course requires a passing grade in <u>each</u> of the following components:

- ACLS Training & Certification Exam
 - o Qualifying pretest (with passing score) submitted in Canvas by 4PM
 - o Participation
 - o Certification Exam
- Self-Directed Learning (SDL) Plan
- Tankside Grand Rounds
- Comprehensive Basic Science Exam (CBSE)
- Professionalism

A failure in any component will result in a failing grade for the course and referral to the Grading and Promotions Committee. If a failure results in a delay in starting the student's M3 year, a notation to that effect will be placed in the student's MSPE.

Important Dates

Date:	Activity/Deadline:	Location:*
25 Feb 2019	Orientation	MEB 1100
25 Feb 2019	Required Comprehensive Basic Science Exam (CBSE)	MEB 1100/1200
6 Mar 2019	Tankside Grand Rounds	TBD
7 Mar 2019	Self-Directed Learning Plan Approval By College Master (due by 11:59 PM)	CANVAS upload
8 March 2019	Spring Holiday	
12 Mar 2019	ACLS Qualifying pretest score ≥ 80% (due by 4 PM)	CANVAS upload
14 Mar 2019	ACLS Video/Lecture	MEB 1100
15-20 Mar	ACLS Practical and Mega Code (by College) = 1 day each	Texas Tech Regional Simulation Center
2019	college	
21 Mar 2019	ACLS Review and Certification Exam 8-12	MEB 1100
29 Mar 2019	Required CBSE	MEB 1100/1200
29 Mar 2019	Course Ends	NA
5pm		

Date:	Activity/Deadline:	Location:*
12 April 2019	CBSE Retake opportunity 1	MEB room TBD
26 April 2019	CBSE Retake opportunity 2	MEB room TBD
10 May 2019	Remediation for any element not achieved by this date will	NA
	result in an F on the transcript.	

^{*}room locations subject to change

Please note that in addition to the requirements for this course, student affairs will be requiring you to complete other activities in preparation for the M3 year.

Competencies, Program Goals and Objectives, and Outcome Measures

The Paul L. Foster School of Medicine education program goals and objectives are outcome-based statements that guide instruction and assessment as you develop the knowledge and abilities expected of a physician. All elements of the PLFSOM curriculum are derived from and contribute to the fulfillment of one or more of the medical education program's goals and objectives, which can be found at PLFSOM PGOs. PICE is designed to meet the following PLFSOM Medical Education Program Goals and Objectives:

Patie	ent Care	
Educ	cational Program Objectives	Outcome Measures
1.1	Gather essential information about patients and their conditions through history taking, physical examination, and the use of laboratory data, imaging studies, and other tests.	Exam – Licensure, Clinical Performance (ACLS certification)
1.2	Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment.	Exam – Licensure, Clinical Performance (ACLS certification)
1.3	For a given clinical presentation, use data derived from the history, physical examination, imaging and/or laboratory investigation to categorize the disease process and generate and prioritize a focused list of diagnostic considerations.	(ACLS certification)
1.5	Recognize a patient requiring urgent or emergent care, and initiate evaluation and management.	Exam – Licensure, Clinical Performance (ACLS certification)
1.6	Describe and propose treatments appropriate to the patient's condition and preferences.	Exam – Licensure, Clinical Performance (ACLS certification)
Knov	wledge for Practice	
Educ	cational Program Objectives	Outcome Measures
2.1	Compare and contrast normal variation and pathological states in the structure and function of the human body across the life span.	 Exam – Licensure, Clinical Performance (ACLS certification) Exam – Nationally Normed/Standardized, Subject (NBME CBSE) Narrative Assessment (Tankside Grand Rounds Rubric)

2.2 Apply established and emerging foundational/basic science principles to health care. 2.3 Apply evidenced-based principles of clinical sciences to diagnostic and therapeutic decision-making and clinical problem solving. 2.4 Apply principles of epidemiological sciences to the identification of health problems, risk factors, treatment strategies, resources, and disease prevention/health promotion efforts for patients and populations. 2.5 Apply principles of social-behavioral sciences to patient care including assessment of the impact of psychosocial, cultural, and societal influences on health, disease, care seeking, adherence and barriers to care. Practice-Based Learning and Improvement Educational Program Objectives 3.1 Identify and perform learning activities to address gaps in one's knowledge, skills and/or attitudes. Practice-Based Learning and Improvement Educational Program Objectives 4.1 Communicate effectively with patients and families across a broad range of socioeconomic and cultural backgrounds. 4.2 Communicate effectively with colleagues and other health care professionals. 4.3 Communicate with sensitivity, honesty, compassion and empathy. 4.4 Maintain comprehensive and timely medical records. Professionalism Educational Program Objectives 5.1 Demonstrate accountability to patients and records. Professionalism Educational Program Objectives 5.2 Demonstrate accountability to patients and records. Professionalism Educational Program Objectives 5.3 Demonstrate accountability to patients and respect for all people. 5.4 Demonstrate accountability to patients and respect for all people. 5.5 Demonstrate accountability to patients and enumer and respect for all people. 5.6 Exam — Nationally Normed/Standardized, Subject (NBME CBSE) Exam — National		
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5.6 Demonstrate honesty in all professional and academic interactions. • Narrative Assessment (Course)		,
		foundational/basic science principles to health care. Apply evidenced-based principles of clinical sciences to diagnostic and therapeutic decision-making and clinical problem solving. Apply principles of epidemiological sciences to the identification of health problems, risk factors, treatment strategies, resources, and disease prevention/health promotion efforts for patients and populations. Apply principles of social-behavioral sciences to patient care including assessment of the impact of psychosocial, cultural, and societal influences on health, disease, care seeking, adherence and barriers to care. tice-Based Learning and Improvement cational Program Objectives Identify and perform learning activities to address gaps in one's knowledge, skills and/or attitudes. Therefore the program objectives Communicate effectively with patients and families across a broad range of socioeconomic and cultural backgrounds. Communicate effectively with colleagues and other health care professionals. Communicate with sensitivity, honesty, compassion and empathy. Maintain comprehensive and timely medical records. essionalism cational Program Objectives Demonstrate sensitivity, compassion, integrity and respect for all people. Demonstrate accountability to patients and

5.7	Meet professional and academic commitments and obligations.		Jarrative Assessment (Tankside Grand Lounds Rubric)	
Inter	professional Collaboration		·	
Educ	cational Program Objectives	Outo	ome Measures	
7.1	Describe the roles of health care professionals.		xam – Licensure, Clinical Performance ACLS certification)	
7.2	Use knowledge of one's own role and the roles of other health care professionals to work together in providing safe and effective care.	 Exam – Licensure, Clinical Performance (ACLS certification) Narrative Assessment (Tankside Grand Rounds Rubric) 		
7.3	Function effectively both as a team leader and team member.	 Exam – Licensure, Clinical Performance (ACLS certification) Narrative Assessment (Tankside Grand Rounds Rubric) 		
7.4	Recognize and respond appropriately to circumstances involving conflict with other health care professionals and team members.	Exam – Licensure, Clinical Performance		
Pers	onal and Professional Development			
Educ	cational Program Objectives		Outcome Measures	
8.1	8.1 Recognize when to take responsibility and when to seek assistance.		 Exam – Licensure, Clinical Performance (ACLS certification) 	
8.5	8.5 Demonstrate the ability to employ self-initiated learning strategies (problem definition, identification of learning resources and critical appraisal of information) when approaching new challenges, problems or unfamiliar situations.		 Narrative Assessment (Self-Directed Learning Plan Rubric) Self-Assessment (Self-Directed Learning Plan Rubric) Narrative Assessment (Tankside Grand Rounds Rubric) 	

Course Elements

ACLS (Advanced Cardiovascular Life Support)

Required Materials: ACLS Provider Manual (provided prior to the course start date)

Welcome to the ACLS Provider Course offered by the Texas Tech University Health Sciences Center Regional Simulation Center. This program is designed to review, organize and prioritize the skills and cognitive knowledge needed to handle a variety of cardiopulmonary emergencies. A primary focus of this course is on the resuscitation aspects of the patient in cardiac arrest and post arrest situations. ACLS training is expected to assist students in their preparation for work in the wards and clinics. ACLS certification is required by most residencies and some M4 away rotations. Certification is good for 2 years, after which an individual must renew their certification (a half day course). The specific goals/objectives for the ACLS course include the following:

- Apply the principles of ACLS based on evidence-based principles from the AHA guidelines.
- Recognize and initiate early management of periarrest conditions that may result in arrest.
- Demonstrate proficiency in providing BLS care.

- Recognize and manage respiratory arrest.
- Recognize and manage cardiac arrest.
- Recognize and initiate early management of ACS, including appropriate disposition.
- Recognize and initiate early management of stroke, including appropriated disposition.
- Demonstrate effective communication as a team member or team leader.
- Recognize the impact of team dynamics on overall team performance.

There is a prequalifying exam for ACLS training (administered asynchronously) which students will be required to pass and submit in Canvas by 4:00 PM March 12th. On page ii of the Manual you will find the ACLS student website which contains the self-assessment and pass code which will allow you to log on into the site. From there click on the Pre- course assessment and follow the instructions. You need to obtain a score of at least 80% to be eligible to participate in our ACLS Class. Those not passing the prequalifying exam before the primary didactic session will be denied entry and required to remediate on their own. To facilitate entry, please make sure to print out your exam results and bring it with you to class.

The primary didactic session begins at 8:00 a.m. in Room 1100 at the MEB. Please make sure to bring your ACLS Provider Manual with you to class as it is required for this course. Students not in attendance for the entire didactic session will not be allowed to take part in the psychomotor aspect of this course or be allowed to take the ACLS Written Exam. With such a large number of students it is imperative that you arrive no later than 7:45 a.m. as you will need to sign in and provide your ACLS Pre-Test. Those arriving after 8:15 will not be allowed entrance into the session.

The psychomotor components will be held at the Texas Tech Regional Simulation Center located on the 2nd floor of the Gayle Greve Hunt School of Nursing Building. We will begin each session in room 105 then divide into smaller groups for the skills practice and mega-code evaluations. Business casual required. No shorts, flip-flops or tank tops will be allowed. You will be grouped by college. Take note of when your college is scheduled to attend the psychomotor portion of this program. Please stay in your group; do not switch with other students or attend on a different day.

The final Review and Written Examination will be held back in the MEB Room 1100. Only those who attended both the Primary Didactic Session and passed their Mega-Code Testing segment will be allowed to sit for the Written Examination (note, normal test procedures apply). A minimum score of 84% is required by the AHA for certification. Any student who fails the test will be required to remediate the exam. A student may pass this element of PICE without passing the certification exam provided that the faculty note appropriate preparation, effort, and professionalism.

Remediation: Any student needing to remediate the course for missing a required submission of the pretest or session, will need to remediate this element of the course at their own expense and provide the course directors with proof of completion prior to May 10th. If remediation results in a delay in starting the student's M3 year, a notation to that effect will be placed in the student's Medical Student Performance Evaluation (MSPE). A failure resulting from inadequate preparation or effort will result in a fail for the course and a referral will be made to the Grading and Promotions Committee.

Tankside Grand Rounds (TSGR)

TSGR is designed to have students integrate their basic science knowledge in the context of clinical presentation schemes and relevant findings from a donor cadaver. In addition, this element is designed to assess students' ability to employ self-initiated learning strategies, work within a team, and communicate

effectively with peers and other health-care professionals. TSGR is a team-based oral presentation activity in which anatomy teams will present their cadaveric findings to their student peers and faculty. Basic science and clinical faculty judge team presentations using the TSGR grading rubric provided in the Appendix. The course director will compile these to create a final judgement of pass or remediation required.

Data for TSGR comes from the cadavers in the anatomy labs and from pathology labs held three times during the M1 year. Students will be assigned to one of 24 "tank" teams. Two teams will be assigned to each cadaver. Teams sharing a cadaver may work together to create their presentations but each team will be expected to fully present, explain, and answer questions about their cadaver.

During anatomy labs, students will want to pay attention to any discussions specific to their cadaver and take extra notes to assist in their presentation development. Teams can find the additional needed data about their cadaver in the DEMR, which contains the dissection notes and images.

Biopsies will be taken during one of three pathology labs. These labs will occur on the last Thursday of the GIS, CVR and Renal units. In some cases, appropriate biopsies may be delayed to ensure the quality of teaching in later units is not diminished. Working with the pathology faculty, teams may take additional biopsies at the end of the renal unit. The number of biopsies will be at the discretion of the pathology faculty.

For excused absences, a student will be required to individually give the entire presentation to a faculty panel. As part of the presentation, the student should be prepared to discuss his/her contributions to the presentation and answer questions on all aspects of the case.

If a group or individual receives a grade of 'remediation required', the faculty will create a remediation plan specific to the weaknesses observed. This may include presentation of another case or preparation of other elements for presentation.

Self-Directed Learning (SDL) Assessment

Recommended Material

1. Brown PC, Roediger III HL, McDaniel MA. *Make It Stick: The Science of Successful Learning*. Harvard University Press; 2014.

Medicine is a rapidly advancing field that requires the effective acquisition of new knowledge and skills by medical professionals at all stages of education, training and practice. As such, self-directed lifelong learning is a crucial skill for today's medical graduates. Self-directed learning (SDL) is a process where the learner identifies their learning needs, creates learning objectives or goals, identifies appropriate resources to help in their learning, chooses learning strategies appropriate for the learning objectives, implements their plan, and then assesses the outcomes. For the SDL portion of this course, students are required to create and present a plan to their college master (or other faculty member as may be designated by the Assistant Dean for Basic Science Instruction) for review and approval.

The plan should *analyze* the available information on your performance and identify the major areas of learning that you will concentrate on in order to pass STEP 1 and to complete your preparation to be a clerk. You will also be required to identify and appraise appropriate resources and choose the learning strategies that you intend to use. The SDL plan must include the items listed in the Learning Plan (see Appendix: 'Learning Plan Required Elements'). Note that while we acknowledge that most students will

want to include First Aid for Step 1 as one of their resources, students are expected to identify a broad array of high-quality resources, which may include faculty consultations.

Plans will be reviewed with your college master or designated faculty member (See Appendix: 'Self-Directed Learning PLAN Rubric). When your college master signs off on the plan, you will be required to submit (through CANVAS) a signed copy of the rubric and the plan (with all documents) to the course director, who will review it for completeness. In the event that a plan is not complete, you will need to revise and resubmit it. Late submission will constitute a failed assignment and a professionalism concern. Failure to complete the assignment will result in a failing grade until the plan/revision is completed and, at the discretion of the course directors, a remediation assignment is completed.

Comprehensive Basic Science Exam (CBSE)

The National Board of Medical Educators' CBSE is the final event of the course. Scores are considered indicative of whether you are prepared to pass USMLE Step 1. All students are required to take both the CBSE at the beginning and end of the course. Any student who does not take the exam, or does not make a good faith effort to pass the exam (based on exam performance analytics), will receive a notation of concern regarding professionalism (related to failure to adequately engage in the curriculum), which may be reflected in their MSPE -- and may be referred to the Grading and Promotions Committee on this basis.

Any student not receiving a CBSE score of 67, which is a generous approximation of a near-passing score on USMLE Step 1 may attempt the exam again. There are 2 opportunities to do so scheduled following the course end date. If a student receives a 67 on the exam, they are no longer eligible for later opportunities to take the exam

Professionalism

This course includes assessment of your professionalism in a manner similar to a clerkship course. Failure to receive a satisfactory rating on any aspect of professionalism may result in referral to GPC and/or failure of the course regardless of performance in other areas. Any significant breach of professionalism or multiple smaller breaches of professionalism may result in an unsatisfactory rating. Your professionalism grade will include attendance at required sessions and communication with faculty. Sessions with required attendance will be highlighted by a star on the curriculum calendar view.

For clarification on what general categories of behavior are considered unprofessional, please see Mak-van der Vossen M, van Mook W, van der Burgt S, et al. Descriptors for unprofessional behaviours of medical students: a systematic review and categorization. BMC medical education. 2017;17(1):164. The following table from Mak-van der Vossen et al is the one used in writing final professionalism narratives for the course:

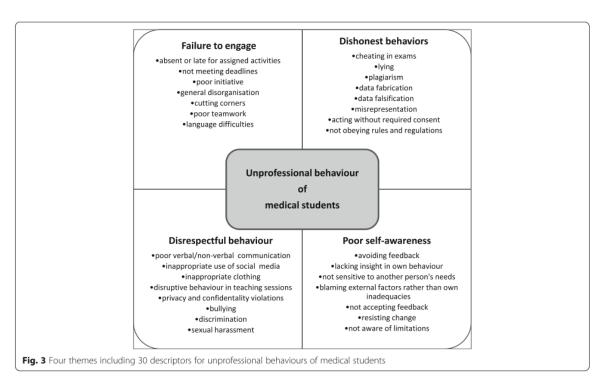
Course Policies and Procedures

Professionalism, Plagiarism and Copyright Policies

In PICE, as with all other courses in the Paul L. Foster School of Medicine, we expect students to behave in a professional manner, adhere to the Student Honor Code and adhere to published policies related to

Mak-van der Vossen et al. BMC Medical Education (2017) 17:164

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plagiarism and copyright protection. These policies are described in detail in the TTUHSC PLFSOM Medical Student Handbook. Students who do not behave in a professionally acceptable way and in accordance with these policies are subject to disciplinary action. Consequences may include failing the course and dismissal from PLFSOM (see TTUHSC PLFSOM Medical Student Handbook).

Dress Code

Standard street clothes are appropriate for all EXCEPT the following events:

- ACLS for Mega code: ATACS compliant or scrubs
- OSCE: ATACS compliant
- Tankside Grand Rounds: ATACS compliant

You may find the ATACS dress policy at http://elpaso.ttuhsc.edu/som/atacs/_documents/ATACS%20Center%20Dress%20Code.pdf

Attendance/Participation Policies

You are expected to be present, to be prepared, and to be on time for all required PICE activities. Unless otherwise specified, activities begin on the hour.

Required Sessions

Sessions with required attendance will be highlighted by a star on the curriculum calendar view. In regard to required sessions, non-compliance with the PICE punctuality and attendance policy will have consequences that are reflected in your academic record. These consequences may include: required remediation; documentation in the student's academic record and e-Portfolio; and reporting to the Associate Dean of Student Affairs, the Associate Dean of Medical Education, and the PLFSOM Grading and Promotion Committee.

Assessments

Tardiness for an assessment is disruptive, unprofessional, discourteous, and strongly discouraged. If you arrive up to 10 minutes late for a graded activity, you will be permitted entry to the assessment area entirely at the discretion of the chief proctor and with regard to the effect that such entry may have on the students already present in the assessment environment. Students who are permitted late entry to the assessment must finish at the scheduled end time. Students who arrive more than 10 minutes late for an assessment will be denied entry and recorded as a fail for the exam. An unexcused absence from a summative assessment will result in an initial grade of 'Fail' for the course. Excused absences are granted through the Office of Student Affairs (see 'Absences' below).

Be aware that assessments are provided under secure testing conditions and students are not permitted to copy, reproduce, transmit or distribute these items outside of the testing environment. This includes discussing the contents with other students. Any breach of this security, including failure to report a known offence, is a direct violation of the Code of Professional and Academic Conduct as described in the PLFSOM Student Handbook.

Absences

An unexcused absence will be considered a fail on any required activity or exam. Excused absences are granted through the Office of Student Affairs and include the following: documented illness; approved personal or family emergency; approved religious observance; approved professional commitment (see 'Attendance Policies' in the PLFSOM Student Handbook). If you wish to obtain an excused absence you must contact the Office of Student Affairs by submitting a request to plfabsence@ttuhsc.edu within 7 days of the occurrence. No credit will be given to any graded exercise missed without approval by the Office of Student Affairs.

Disability Support Services

TTUHSC EP is committed to providing equal access to learning opportunities to students with documented disabilities. To ensure access to this course, and your program, please contact the Director of Disability Support Services (DSS), Dr. Tammy Salazar, to engage in a confidential conversation about the process for requesting accommodations in the classroom and clinical setting. Accommodations are not provided

retroactively so students are encouraged to register with DSS as soon as possible. More information can be found on the DSS website: http://elpaso.ttuhsc.edu/studentservices/disability-support-services.

Appendix

Tankside Grand Rounds Grading Rubric

CATEGORY	4	3	2	1
Presentation skills	Professional level presentation	Satisfactory presentation	Adequate presentation, but lacks detail	Poor quality presentation which lacks detail
Picture utilization	Pictures labeled as to site, supportive of findings, with good understanding of their significance	Pictures labeled as to site, supportive of findings, and explanations show some lack of understanding	Pictures labeled as to site, not supportive of findings, and lack of understanding of their significance.	Pictures not labeled as to site, not supportive of findings and no understanding of their significance
Comprehension	to accurately	Students are able to accurately answer most questions about the case	Students are able to accurately answer a few questions about the case	Students are unable to accurately answer questions about the case
Preparedness	Students are completely prepared and have obviously rehearsed	Students seem pretty prepared but might have needed a couple more rehearsals	The students are somewhat prepared, but it is clear that rehearsal was lacking	Students don't seem at all prepared to present.
Content	Shows a full understanding of the case	Shows a good understanding of the case	Shows a good understanding of parts of the case	Does not seem to understand the case very well
Basic science content	Able to clearly explain basic science content relevant to their case	Explains some of the basic science content relevant to their case	Not much basic science material is explained, but can answer basic science questions	Not much basic science in presentation and /or can't answer basic science questions correctly
Collaboration with peers		Group has worked together to prepare the presentation, but only a few can answer questions about the case	A few of the group worked together to prepare and present the case; others did not participate	Group did not work together to prepare or present the case.

Scheme	An appropriate	An appropriate	Scheme utilization is	No evidence of
utilization		scheme is utilized and		utilization of a
atmzation			incorporation into the	
	-			
	,	into the presentation	presentation is	incorporation into the
	presentation		minimal.	presentation
Correlation of	Cause of death is	Some correlation of	Minimal correlation	No correlation
findings with	very well	gross and microscopic	between cause of	between cause of
cause of death	correlated with	findings with cause of	death and gross and	death and gross and
	gross and	death is attempted	microscopic findings	microscopic findings
	microscopic		is attempted	is attempted
	findings			
Recent	Major diagnosas	Major diagnosas ara	Evidence of active use	No ovidence of
	Major diagnoses	Major diagnoses are	Evidence of active use	
reference	are researched	researched and		research into the
materials	and the results	somewhat logically		major diagnoses
	are incorporated	incorporated into the	incorporation into the	and/or no
	logically into the	presentation	presentation is	incorporation into the
	presentation		minimal	presentation
Slides easy to	Order of	Order of presentation	Presentation is hard	Presentation does not
read and follow	presentation is	is logical, but slides	to follow and/or	make sense and/or
	logical and slides	are crowded or hard	slides are crowded or	slides are crowded or
	are easy to read	to read	hard to read	hard to read
	and not crowded			

Notes for faculty (questions to ask – not to share with students)

Comments for the team to receive:

Learning Plan Required Elemen Name:	ts		
Background:			
CBSE Performance Summary: (attac	h most recent for	mative CBSE Pe	erformance Profiles)
Unit Test Performance:			
Provide your unit test scores here (f	ound in your e-Po	ortfolio)	
SPM Discipline Performance Informa	ation (from e-Por	tfolio):	
Discipline	Your Average %	Class Average %	Number of Items
Anatomy			
Behavior			
Biochemistry			
Cell and Molecular Biology			
Embryology			
Histology			
Immunology			
Medical Genetics			
Microbiology			
Neuro-anatomy			
Neuroscience / Special senses			
Nutrition			
Pathology			
Pharmacology			
Physiology			
Scheme			
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Self-Assessment:

<u>Discuss</u> the following

- The areas that will yield the greatest improvement in your STEP 1 scores and why you have chosen these areas.
- The clinical presentation(s) that you most need to improve your understanding of before you reach the clinic. Please <u>discuss</u> why you believe you need to improve your understanding in these areas.

Please note that "I need to study everything" will require explanation and a plan to strategically prioritize areas based on their relative weakness, organ system weaknesses, and the data from prior CBSEs

Learning Strategies:

Identify study tasks/techniques (besides reading) that you will be utilizing and discuss how they meet your identified learning needs. You may want to consider your learning styles and/or how you will manage stress, though these are not required elements.

Printed name	Signature	
Faculty Reviewer:		
College:		
Student Name:		
Self-Directed Learning (SDL) Plan Rubric		
How will you know you are successful in meetin	g your learning objectives?	
Outcomes:		
, , ,	i CE3	
Identify and discuss why you chose these resou	rces	
Resources that you plan to use:		

Please note that all items must reach an acceptable level in order to be considered approved.

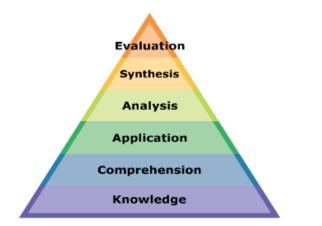
	Acceptable	Unacceptable
CBSE performance summary	Student has included most recent CBSE performance profiles	CBSE performance profiles are not attached
Unit Grades	Student provided unit grade performance data	Student did not provide unit grade information.
SPM Discipline Performance Information Self-assessment summary	Student has included a table showing cumulative discipline-specific performance data for summative assessments. Student has written a detailed reflective summary Identifies one or more areas for focused improvement Is substantiated by CBSE and summative assessment data.	Table is incomplete or missing. Student has not written a detailed self-assessment summary The self-assessment is cursory/incomplete Link to data lacking/unclear.
Learning Goals	Student has clearly articulated learning goals that are derived from their self-assessment	Learning goals are unclear or incongruent with self-assessment summary.
Learning Strategies	Student has identified appropriate learning tasks to achieve these goals.	Learning strategies are unclear or misaligned with goals.

Resources	Student has identified appropriate high quality resources to support learning goals.	Resources not identified or are of questionable quality.

Comments:

Bloom's Taxonomy

You may find it useful to think about your self-directed learning goals in terms of Bloom's Taxonomy. Bloom created a taxonomy of learning that arranges knowledge from the lowest level to the level of expert. This has been modified to show the actions that reflect levels of learning. The action verbs used in learning objectives are useful ways of determining the level of learning. The NBME is moving its tests away from the lower levels and into the level of applying and analyzing.



Evaluating

Analyzing

Applying

Understanding

Remembering

Figure 1: Original Bloom's Taxonomy

Figure 2: Bloom's Taxonomy as Actions

Category	Remembering	Understandin g	Applying	Analyzing	Evaluating	Creating
Bloom's Definition	Exhibit memory of previously learned material by recalling facts, terms, basic concepts, and answers.	Demonstrate understandin g of facts and ideas by organizing, comparing, translating, interpreting, giving descriptions, and stating main ideas.	Solve problems to new situations by applying acquired knowledge, facts, techniques and rules in a different way.	Examine and break information into parts by identifying motives or causes. Make inferences and find evidence to support generalization s.	Present and defend opinions by making judgments about information, validity of ideas, or quality of work based on a set of criteria.	Compile information together in a different way by combining elements in a new pattern or proposing alternative solutions.
Verbs	Choose Define Find How Label List Match Name Omit Recall	Classify Compare Contrast Demonstrate Explain Extend Illustrate Infer Interpret Outline	Apply Build Choose Construct Develop Experiment with Identify Interview Make use of	Analyze Assume Categorize Classify Compare Conclusion Contrast Discover Dissect Distinguish	Agree Appraise Assess Award Choose Compare Conclude Criteria Criticize Decide	Adapt Build Change Choose Combine Compile Compose Construct Create Delete

Remembering	Understandin	Applying	Analyzing	Evaluating	Creating
	g				
	Relate	Model	Divide		Design
Select	Rephrase	Organize	Examine	Defend	Develop
Show	Show	Plan	Function	Determine	Discuss
Spell	Summarize	Select	Inference	Disprove	Elaborate
Tell	Translate	Solve	Inspect	Estimate	Estimate
What		Utilize	List	Evaluate	Formulate
When			Motive	Explain	Happen
Where			Relationships	Importance	Imagine
Which			Simplify	Influence	Improve
Who			Survey	Interpret	Invent
Why			Take part in	Judge	Make up
			Test for	Justify	Maximize
			Theme	Mark	Minimize
				Measure	Modify
				Opinion	Original
				Perceive	Originate
				Prioritize	Plan
				Prove	Predict
				Rate	Propose
				Recommend	Solution
				Rule on	Solve
					Suppose
					Test
					Theory
				1 3.100	Maximize
					Minimize
					171111111120
	Show Spell Tell What When Where Which Who	Relate Select Rephrase Show Spell Summarize Tell Translate What When Where Which Who	Relate Relate Model Select Rephrase Organize Show Show Plan Spell Summarize Select Tell Translate Solve What Utilize When Where Which Who	Relate Select Rephrase Show Show Show Plan Select Tell Translate What Where Which Why Why Select Rephrase Organize Sexamine Function Select Inference Inspect Utilize Solve Utilize Simplify Survey Take part in Test for	Relate Select Rephrase Organize Show Show Show Plan Function Spell Summarize Tell Translate What When Where Which Who Why Tell Who Who Who Who Who Why Tell What Who Who Who Who Who Who Why Tell Translate

Anderson, L. W., & Krathwohl, D. R. (2001). A taxonomy for learning, teaching, and assessing, Abridged Edition. Boston, MA: Allyn and Bacon.