



TEXAS TECH UNIVERSITY
HEALTH SCIENCES CENTER
EL PASO

Paul L. Foster School of Medicine

CEPC MEETING AGENDA

5:00 PM - 6:30 PM

04/08/2024

CHAIR:

Dr. Maureen Francis, MD, MACP, MS-HPed

VOTING MEMBERS:

Colby Genrich, MD; Fatima Gutierrez, MD; Houriya Ayoubieh, MD; Jessica Chacon, PhD, Munmun Chattopadhyay, PhD; Patricia Ortiz, MD; Khanjani Narges, MD, PhD; Dale Quest, PhD; Wajeeha Saeed, MD; Marwaha Komal, MD

EX-OFFICIO:

Lisa Beinhoff PhD; Martin Charmaine, MD; Tanis Hogg, PhD; Jose Lopez; Neha Sehgal DO

STUDENT REPRESENTATIVES:

Lee Spencer MS1 (Voting); Sam Aldous (Ex Officio); Katherine Asmis MS2 (Voting); Joshua Salisbury MS2 (Ex Officio); Rowan Sankar MS3 (Voting); Nikolas Malize MS3 (Ex Officio); Whitney Shaffer MS4 (Voting); Rohan Rereddy MS4 (Ex Officio)

INVITED/GUESTS:

Richard Brower, MD, FAAN; Thwe Htay, MD; Priya Harindranathan, PhD.

REVIEW AND APPROVAL OF MINUTES

Minutes Attached

ANNOUNCEMENTS

Presenter(s): Dr. Francis

ITEMS FROM STUDENT REPRESENTATIVES

Presenter(s): Students

ITEM I Curriculum as a Whole Review – Team II

CEPC 04/08/2024

Presenter(s):

ITEM II Syllabi Updates

Presenter(s): Dr. Sehgal

ITEM III Grade Appeal and Complaint Policy

Presenter(s): Dr. Francis

ITEM IV Clerkship Director Updates

Presenter(s): Dr. Francis

- New NICU Co-Director
- New SICU Director

ADJOURN

CEPC Monthly Meeting Minutes

5:00 PM - 6:30 PM

04/08/2024

MEMBERS IN ATTENDANCE:

Maureen Francis, Colby Genrich, Dale Quest, Patricia Ortiz, Jessica Chacon, Khanjani Narges, Tanis Hogg, Lee Spencer, Sam Aldous, Houriya Ayoubieh, Katherine Asmis, Joshua Salisbury, Munmun Chattopadhyay, Martin Charmaine, Nikolas Malize, Neha Sehgal, Marwaha Komal, Jose Lopez, Wajeeha Saeed

MEMBERS NOT IN ATTENDANCE:

Fatima Gutierrez, Whitney Shaffer, Rowan Sankar, Rohan Rereddy, Lisa Beinhoff

PRESENTERS/GUESTS IN ATTENDANCE:

Richard Brower, Thwe Htay, Priya Harindranathan, Corina Bustillos

INVITED/GUESTS NOT IN ATTENDANCE:

REVIEW AND APPROVAL OF MINUTES

CEPC 04/08/2024

Dr. Francis CEPC Chair

- Having met quorum, the meeting minutes from the March 11, 2024 meeting were voted on and approved as presented.

Decision:

- Dr. Quest moves the motion for approval.
- Dr. Chattopadhyay seconds the motion.
- No objections: Motion was approved.

ITEMS FROM STUDENT REPRESENTATIVES

MS1/MS2/MS3/MS4

- MS1 – no issues to report.
- MS2 – Katherine Asmis asked about the possibility of her class being able to take two shelf exams early. Dr. Francis explained that the recently reviewed clerkship policies address this question, affirming that the option is open to students. Student can either opt for the early exam opportunity or retain the shelf exam within the two-week testing period. As the third-year students transition to fourth-year, ten of them were selected, with Dr. Martin's assistance, to serve as block chiefs. They will offer their perspectives on whether to pursue early testing or not.
- MS3 – Nick Malize noted that there are no issues, students are getting ready for the Step 2.
- MS4 – Not present, they are getting ready to graduate.

ITEM I Curriculum as a Whole Review – Team I

Presenter(s): Dr. Marwaha and Dr. Ortiz

Presented an overview of the process

*Please see attached report.

- Dr. Marwaha highlighted the team's task of reviewing two PGOs: Patient Care 1.1 – 1.8 and Professionalism 5.1 – 5.7. The team found that learning objectives are adequately linked to goals and objectives across courses and sessions. The curriculum employs a wide range of effective teaching methods to engage students in achieving patient



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care objectives, including an extensive mix of active learning strategies. Additionally, there is excellent quality and frequency of formative assessments to aid students in meeting learning objectives. Dr. Marwaha noted that student would not be able to graduate if there were significant deficiency.

- The team found the following weaknesses regarding patient care:
 - In Colloquium, 1.1 is solely assessed through participation
 - In Colloquium, 1.2 is only evaluated through participation in facilitated discussions
 - Colloquium does not cover 1.3
 - In the pre-clerkship curriculum, 1.4 is mapped to Colloquium III and IV
- The recommendations are as follows:
 - For Patient Care 1.1: Suggested implementing an objective assessment method for Colloquium I and II. Recommend aligning this assessment with Colloquium III and IV. Also, proposed removing the term "weekly summative exam" from SPM mapping.
 - For Patient Care 1.2: Recommend investigating the use of a rubric for objective assessment or a narrative review during colloquium sessions for outcome evaluation. Highlighted that MSC I-II currently relies on participation (procedural skill-building activities with feedback) as an outcome measure. Suggested exploring the inclusion of narrative review if feasible. Align these suggestions with Med Skills III and IV. Stress the significance of offering summative feedback. Also, propose eliminating the term "weekly summative exam" from the SPM mapping.
 - For Patient Care 1.3: Recommend mapping this PGO to the colloquium. Noted the lack of objective performance measures in



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- MSK aside from the ACLS exam. Also, suggest removing the term "weekly summative exam" from the SPM mapping.
- For Patient Care 1.4: Recommend considering the option of mapping it to MSC-III and IV, in addition to colloquium I and III.
 - Regarding professionalism, the team observed sufficient linkages between all seven subcomponents and their respective learning objectives for each goal. The team observed a decent variety of effective assessment methods. However, due to the subjective nature of professionalism assessment, there's a possibility that students could graduate with deficiencies in this area. Additionally, the team highlighted the excellent coverage of significant aspects within the professionalism domain.
 - Some weaknesses identified include missing objectives under professionalism in MS2 – PRO-5.2 and PRO-5.5. Moreover, while evaluations of students' professionalism are conducted in MS1 and 2 using tools like the SP check-list and Colloquium professionalism rubric, there's limited or no self-reflection opportunity for students.
 - Ideas/Recommendations involve enhancing linkages to track activities more effectively and identifying innovative methods for teaching and assessing professionalism.
 - Dr. Francis expressed concern about how Colloquium maps to patient care competences, emphasizing the need to avoid over-mapping anything not required for the course. She stressed the importance of critically examining mapping decisions, noting that while domains overlap in Colloquium, the group must determine how to map them effectively. She announced plans to distribute the team's recommendations to phase committees, aiming to have a summary available by the end of June to address gaps and plan next steps.

- Dr. Chacon moves the motion for approval.
- Dr. Ayoubieh seconds the motion.
- No objections: Motion was approved.

ITEM II Syllabi Updates – Clerkship

Presenter(s): Dr. Sehgal

Presented AY 24-25 MS3 Clerkship Syllabi Updates

*Please see attached report.

- Dr. Sehgal informed that the clerkship team held a retreat in Spring to review courses longitudinally and implement subtle changes in both blocks. She mentioned that she has summarized all the changes requested by the clerkship directors. Also, she noted that the document layout was unified to make it easier for students to navigate.
- In Internal Medicine, there aren't any big changes to the syllabus content. Faculty just want to focus more on engaging didactics instead of assignments. They've added one more office visit assessment.
- In Psychiatry, they're only requesting to reduce the number of comprehensive evaluations from four to two, and progress notes from six to four. These changes come from student feedback on the course.
- Dr. Francis wondered if students' growth would still be noticeable if the number of comprehensive evaluations decreased from four to two during the clerkship. Dr. Ortiz, the psychiatry clerkship director, clarified that students would still be writing notes and receiving feedback from faculty and residents, but they would have to decide what they submit for assessment
- Family Medicine – No changes.



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- Neurology – Changes regarding students' attendance were made. Students should attend Morning Report to hear about cases and meet residents in clinic. Also, students requested a mix of day and evening shifts.
- Emergency Medicine – No changes.
- Ob/Gyn – Students are now expected to present during sign-out sessions beside morning report. Additionally, Gyn/Onc rotations were added to palliative care experiences, and students will engage in diagnostic imaging during tumor board presentations in the Gyn/Onc rotation.
- Pediatrics – Transparent group OSCE (telephone medicine) was removed as it's no longer offered. Adolescent medicine was removed due to the specialist's departure, and colic and other requirements were also removed.
- Dr. Francis pointed out that removing telephone medicine could leave a gap in teaching third-year students. She suggested bringing all requests back to the Year 3 and 4 Committee for further discussion. Dr. Sehgal mentioned seeking additional insights and clarifications from Drs. Kato and Sidhu. Dr. Francis agreed that the requested changes should be clarified and revisited by this committee before the final approval.
- In Surgery, faculty for sub-specialties and protected didactic time were added. Dr. Francis asked if these additions were for sub-specialty selectives in surgery, which Dr. Sehgal confirmed. She explained that protected didactic time occurs during the 5-week surgery rotation, allowing students to participate in resident didactics. Dr. Francis raised concerns about comparability across sites, particularly for students at William Beaumont Army Medical Center in the spring semester who may not be able to attend. Dr.

Sehgal agreed to clarify with clerkship directors about the didactics duration and comparability issues.

- OPSEF: Emergency medicine – no changes
- OPSEF: Family Medicine Longitudinal – no changes
- Dr. Sehgal presented new topics discussed during the clerkship retreat, noting that objectives are still not aligned with PGOs. Dr. Francis pointed out that palliative care could be integrated across specialties and taught as a combined didactic. Dr. Ortiz raised questions about including wellness sessions in schedules. Dr. Sehgal explained that wellness is still in a pilot phase, collecting student feedback. Dr. Francis proposed giving more time to review didactics to ensure nothing essential is overlooked. She suggested leaving the final decision about the approved didactic list to the Year 3 and 4 Committee, with updates provided by Dr. Sehgal and herself. The committee agreed to this approach.

ITEM III and IV

Presenter(s): Dr. Francis

Grade Appeal and Complaint Policy

*Please see attached report.

- Dr. Francis explained that a new policy was developed and, due to time constraints, it would be sent for asynchronous voting along with the CVs of the NICU Co-Director and the new SICU Director. Both agenda items were approved asynchronously and electronically.

Adjourned

Meeting adjourned at 6:30pm

health
is
here.



Curriculum as a Whole Review

TEAM 2

CEPC MEETING
APRIL 08, 2024

Curriculum as a whole – Review Phase Planning

- Process: Based on a ‘top-down’ evaluation of educational program goals and objectives
- Presented over a series of four CEPC meetings
 - March through June 2024
- Conclusion with summary report by Associate Dean for Medical Education with specific findings for each competency domain
 - July 2024
- Review team evaluation to be based on the following data provided by the OME:
 - **Curriculum mapping report**
 - CURRICULUM REPORT
 - ASSESMENT REPORT
 - The Annual Program Evaluation Report for Pre-clerkship and Clerkship – presented in Fall 2023
 - Course/clerkship reviews presented over the last 2 years
 - Syllabi for courses and clerkships
 - Subcommittees reports – presented in fall 2023
 - Student evaluations of curriculum as a whole – 2023 GQ and Y2Q and in-house evaluations

Curriculum as a whole – Review Phase

Team 2

- Patient Care (1.1 – 1.8)
- Professionalism (5.1 – 5.7)

Patient Care (1.1 – 1.8)

Curriculum as a whole – CONTENT

- Does the educational program have adequate learning objective linkages for each goal and its objectives?
- ***Yes, Adequate learning objective linkages for each goal and its objectives***

- To what extent does the curricular phase/whole curriculum use a variety of effective teaching methods in order to engage students in attaining the learning objectives?
 - **The whole curriculum uses a wide variety of effective teaching methods to engage students in attaining this objective.**
 - **Examples: Demonstration, Discussion, Simulation, Workshop, Independent learning, etc.**

- What active learning strategies are used during the curricular phase?
 - **An extensive mix of active learning strategies, from simple to complex, is being used.**
 - **Simulation, Games, small group discussions**

- Are there opportunities for self-directed learning?
 - **Yes, there are opportunities for self-directed learning.**

Curriculum as a whole – ASSESSMENT METHODS

- Evaluate the quality and frequency of formative assessment for assisting students in attaining the learning objectives.
- **Excellent quality and frequency of formative assessment for assisting students in attaining the learning objectives. (There is a process, planning, verifying learning and involves student).**
- To what extent does the curricular phase/whole curriculum use a variety of effective assessment methods in order to ensure that learners have achieved competency in each PGO?
- **There is extensive use of a variety of effective assessment methods in order to ensure that learners have achieved competency in each PGO.**
- Are the assessment methods appropriate for the PGO? **Yes, the assessment methods are appropriate for the PGO.**
- Is narrative assessment used when the circumstances allow?
- **Yes, narrative assessment is used when the circumstances allow.**
- Does the educational program adequately assess each PGO?
- **Yes, the educational program adequately assesses each PGO and student's performance.**

Curriculum as a whole – STUDENT PERFORMANCE

- Would it be possible for a student to graduate from PLFSOM with deficiencies in any of the goal/competency domains?
 - **Yes**
- Would the school know if a student were deficient in any of the goal/competency domains and, if so, how?
 - **Yes**
- Summarize student perceptions of the utility of the medical education program objectives
 - **Good (>90% satisfaction Fall 2023) except in: M1 SCI, M2 SCI, M3 Neuro**

Summary of the review

Identify **strengths** in teaching and assessment for each competency domain and PGO

- Strength:

Patient care: **Extensive variety of learning methods and effective assessments.**

Summary of the review

*Identify and prioritize programmatic **weaknesses** in teaching and assessment for each assigned competency domain and PGO*

Weakness:

- 1.1: In colloquium, it is assessed based on participation only.
- 1.2: In the colloquium, it is assessed based on participation (facilitated discussion) only
- 1.3: It is not addressed in the colloquium.
- 1.4: In the pre-clerkship curriculum, it is mapped to colloquium III and IV only.

Summary of the review

Provide *ideas/recommendations* for improvement and tracking of identified weaknesses

Patient care 1.1: Colloquium I and II could employ some objective assessment method. This objective could also be mapped to Colloquium III and IV. Remove the wording 'weekly summative exam' from SPM mapping.

Patient care 1.2: Explore the possibility of using some rubric for objective assessment or a narrative review in colloquium for outcome measure. Also, MSC I-II uses participation (procedural skill-building activities with feedback) as an outcome measure. If time permits, they may use this opportunity for narrative review also. Map to med skills III and IV. Give summative feedback. Use something similar to OSCE. Remove the wording 'weekly summative exam' from SPM mapping.

Patient care 1.3: Map to the colloquium. This PGO has no objective performance measure in MSK other than the ACLS exam. Remove the wording 'weekly summative exam' from SPM mapping.

Patient care 1.4: Explore the possibility of mapping this PGO to MSC-III and IV and colloquium I and II. Currently, their syllabi do not map this PGO at the course level.

Professionalism (5.1 – 5.7)

Curriculum as a whole – **CONTENT**

- Does the educational program have adequate learning objective linkages for each goal and its objectives?

Yes, under professionalism there are 7 subcomponents and each one has adequate learning objective linkages for each goal and its objectives.

Curriculum as a whole – TEACHING METHODS

- To what extent does the curricular phase/whole curriculum use a variety of effective teaching methods in order to engage students in attaining the learning objectives?

Professionalism is divided in 7 subcomponents and each component provides case-based learning, clinical experience, team based learning, independent learning, patient presentation as well as discussion in large group (>13); the instructional method is different depending on which program the students are under or year of the students.

- What active learning strategies are used during the curricular phase?

Depending on the areas of learning: patient presentation, inpatient-clinical experience, simulation, discussions, and reflections.

- Are there opportunities for self directed learning?

Yes, self directed learning opportunities are present, but there is still room for improvement specifically in MS1/2 years.

Curriculum as a whole – **ASSESSMENT METHODS**

- Evaluate the quality and frequency of formative assessment for assisting students in attaining the learning objectives.
 - **Fair to Good in Pre-clinical years: Colloquium (5.1, 5.2, 5.4) and Medical Skills (5.1, 5.2), Event cards**
 - **Good to excellent in Clerkship years (5.5 only mapped in IM NBME)**
- To what extent does the curricular phase/whole curriculum use a variety of effective assessment methods in order to ensure that learners have achieved competency in each PGO?
 - **Fair: Gradebook assessments, Learning events, Assessment form items**
- Are the assessment methods appropriate for the PGO? **Yes but there is always room for improvement**
 - Is narrative assessment used when the circumstances allow? **Yes, in colloquium.**
- Does the educational program adequately assess each PGO? **Yes**

Curriculum as a whole – **STUDENT PERFORMANCE**

- Would it be possible for a student to graduate from PLFSOM with deficiencies in any of the goal/competency domains?
 - **Possible yes, due to the subjective nature of this competency.**
- Would the school know if a student were deficient in any of the goal/competency domains and, if so, how?
 - **Yes, assessments would indicate deficiencies**
- Summarize student perceptions of the utility of the medical education program objectives
 - **Good (>90% satisfaction Fall 2023) except in: M1 SCI, M2 SCI, M3 Neuro**

Summary of the review

*Identify **strengths** in teaching and assessment for each competency domain and PGO*

Excellent distribution of significant areas to consider under professionalism.

Most of the domains are covered throughout the curriculum.

Various methods used to teach and assess.

Summary of the review

*Identify and prioritize programmatic **weaknesses** in teaching and assessment for each assigned competency domain and PGO*

- Each department adapted different instructional methods, which may show some discrepancies in learning.
- Teaching and Assessment methods are limited- need to brainstorm creative ways to expand use of narrative and/or other assessment tools
- MS 1/2 years have missing linkages although the learning opportunity may already exist

Summary of the review

Provide *ideas/recommendations* for improvement and tracking of identified weaknesses

- Improve linkages to better track activities
- Brainstorm innovative ways to teach and assess professionalism
 - Minimize subjectivity?
 - How do we make sure no one falls “through the cracks?”



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FOSTER SCHOOL OF MEDICINE

AY 24-25 MS3 Clerkship Syllabi Updates

OFFICE OF MEDICAL EDUCATION

DR. NEHA SEHGAL
ASSISTANT DEAN, CLINICAL INSTRUCTION

The following were updated in all MS3 Clerkship Syllabi:

- ❑ Academic Year & Clerkship Directors
- ❑ Formatting – font and document layout
- ❑ Grammatical errors
- ❑ Insertion of header & footer
- ❑ Quick Guide layout – Appendix B

M&M: Internal Medicine

AY24-25 Clerkship Director – TBA

AY24-25 Clerkship Assistant Director – Dr. P. Acharya

Updates requested

- Syllabus: No change
- Didactic objectives & topics – Appendix A: No change
- **Quick guide** – Appendix B: See table below
- OpLogs – Appendix C: No change
- Assessments – Appendix D: No change

<u>Original</u>	<u>Change made</u>	<u>Reasoning</u>
ECG #1-5 exams on Qstream and EKG Memo	Activity transitioned from assignment to interactive sessions during didactics with 20 case studies to work through with faculty.	Increase student engagement, provide immediate feedback. Content is still being provided but changed from assignment to interactive lecture series.
No office visit assessment	One office visit assessment added	Provide student with structured feedback from office visit/ambulatory experience

M&M: Psychiatry

AY24-25 Clerkship Director – Dr. P. Ortiz

AY24-25 Clerkship Assistant Director – Dr. S. Michael

Updates requested

- Syllabus: No Change
- Didactic objectives & topics – Appendix A: No change
- **Quick guide** – Appendix B: see table below
- OpLogs – Appendix C: No change
- Assessments – Appendix D: No change

<u>Original</u>	<u>Change made</u>	<u>Reasoning</u>
Four comprehensive psychiatry evaluations	Two comprehensive psychiatry evaluations	As requested by several students on course assessments to streamline assignments
Six progress notes	Four progress notes	As requested by several students on course assessments to streamline assignments

M&M: Family Medicine

AY24-25 Clerkship Director – Dr. C. Genrich

AY24-25 Clerkship Assistant Director – TBA

Updates requested

- Syllabus: No change
- Didactic objectives & topics – Appendix A: No change
- Quick guide – Appendix B: No change
- OpLogs – Appendix C: No change
- Assessments – Appendix D: No change

M&M: Neurology

AY24-25 Clerkship Director – Dr. S. Yerram

AY24-25 Clerkship Assistant Director – Dr. F. Sheriff

Updates requested

- Syllabus: No change
- Didactic objectives & topics – Appendix A: No change
- **Quick guide** – Appendix B: See below
- OpLogs – Appendix C: No change
- Assessments – Appendix D: No change

<u>Original</u>	<u>Change made</u>	<u>Reasoning</u>
Ambulatory Clinics in Quick-Guide	Students who are assigned to Ambulatory a.m. clinic will be required to attend Morning report in UMC 3 rd floor (Neuro-ICU) at 7:30 a.m. – afterwards they can report to their clinics in Clinic building.	Suggested by Dr. Cruz. Gives students a chance to hear about cases and meet with residents who will be in clinic.
Inpatient rotation assignment-Quick guide	Students will have a combination of day and evening shifts .	Per student comments & evaluations-they did not like to be on evening shift all week-They will now have a combination of day and evening shifts.

M&M: Emergency Medicine

AY24-25 Clerkship Director – Dr. M. Parsa

AY24-25 Clerkship Assistant Director – Dr. P. Popieluszko

Updates requested

- Syllabus: No change
- Didactic objectives & topics – Appendix A: No change
- Quick guide – Appendix B: No change
- OpLogs – Appendix C: No change
- Assessments – Appendix D: No change

OPSEF: Ob/Gyn

AY24-25 Clerkship Directors – Dr. K. Welshans

AY24-25 Clerkship Assistant Director – TBA

Updates requested

- **Syllabus:** See below
- Didactic objectives & topics – Appendix A: No change
- Quick guide – Appendix B: No change
- OpLogs – Appendix C: No change
- Assessments – Appendix D: No change

<u>Original</u>	<u>Change made</u>	<u>Reasoning</u>
Morning report	Morning report and sign-out sessions	Due to changes in medical student schedules on L&D, not all students attending morning report; they also may be present for evening sign-out
Palliative care Thread	Added Gyn/Onc rotation to palliative care experience	Students encounter discussions regarding palliative care while on Gyn/Onc rotation
Diagnostic imaging & Clinical Pathology Thread	Added Tumor board sessions	Students are exposed to diagnostic imaging while they participate in tumor board presentations while on gyn/onc rotation

OPSEF: Pediatrics

AY24-25 Co-Clerkship Directors – Drs. H. Kato & N.Sidhu

Updates requested

- **Syllabus**: See below
- Didactic objectives & topics – Appendix A: No change
- **Quick guide** – Appendix B: See below
- **OpLogs** – Appendix C: See below
- Assessments – Appendix D: No change

<u>Original</u>	<u>Change made</u>	<u>Reasoning</u>
Transparent group OSCE (telephone medicine)	Removing Transparent group OSCE (telephone medicine)	Activity no longer offered, OSCE case revised
Adolescent medicine as possible subspecialty rotation	Removing Adolescent medicine	Specialist no longer with department
Assignment: UMC Nursery Admission H&P form with Ballard and growth chart	Continuity Patient assigned by OBGYN Coordinator - UMC Nursery Admission H&P form with Ballard and growth chart, must be sign by Pediatric resident or attending.	Change provides clarity on continuity patient
OpLOG	Removing “Colic” as requirement	Difficult diagnosis during clinic/ward encounter

OPSEF: Surgery

AY24-25 Co-Clerkship Directors – Dr. A. Tyroch

AY24-25 Clerkship Assistant Director – Dr. S. Chiba

Updates requested

- **Syllabus:** See below
- Didactic objectives & topics – Appendix A: No change
- Quick guide – Appendix B: No change
- OpLogs – Appendix C: No change
- Assessments – Appendix D: No change

<u>Original</u>	<u>Change made</u>	<u>Reasoning</u>
Faculty for Sub-specialities	Added: Dr. Wicker (Colorectal), Dr. Spurbeck (Pediatric Surgery), UMC Neurosurgery group	New departmental faculty
Didactics	Added protected didactic time (Thursdays 7am-1pm)	Allows students to participate in resident didactics

OPSEF: Emergency Medicine

AY24-25 Clerkship Director – Dr. M. Parsa

AY24-25 Clerkship Assistant Director – Dr. P. Popieluszko

Updates requested

- Syllabus: No change
- Didactic objectives & topics – Appendix A: No change
- Quick guide – Appendix B: No change
- OpLogs – Appendix C: No change
- Assessments – Appendix D: No change

OPSEF: Family Medicine Longitudinal

AY24-25 Clerkship Director – Dr. C. Genrich

AY24-25 Clerkship Assistant Director – TBA

Updates requested

- Syllabus: No change
- Didactic objectives & topics – Appendix A: No change
- Quick guide – Appendix B: No change
- OpLogs – Appendix C: No change
- Assessments – Appendix D: No change

Appendix A: Didactics & Objectives

<u>Block</u>	<u>New topics</u>	<u>Reasoning</u>
M&M	Atrial Fibrillation, Stroke, Syncope, Pulmonary Hypertension, Pleural Effusion, Pulmonary Function Test Interpretations, GI Bleed, Palliative Care, How to Critique a Journal Club, Soap Note Basics, Thrombocytopenia	Lectures were tried AY23-24 and would like to add this year. Objectives are pending.
OPSEF	Evaluation of Emergent Airway, General Pediatric Pulmonology, Neonatal Surgery, Pediatric Congenital Heart Disease, Development & Maturation of the Respiratory System, Family Center Rounds, Vital Signs, Acute Pain Management, Endocrine Disease in Surgery, Orthopedic Emergencies, Work up & Resuscitation of Pediatric Trauma & Shock, General Pediatric Nephrology, Post-op Care & Fundamentals of Surgery, Plastic Surgery	Lectures were tried AY23-24 and would like to add this year. Objectives are pending.

Appendix B: Quick Guide

<u>Block</u>	<u>New topics</u>	<u>Reasoning</u>
M&M	<p>IM: ECG #1-5 exams on Qstream and EKG Memo transitioned from assignments to interactive didactics</p> <p>Psych: Four comprehensive psychiatry evaluations & Four Progress notes</p>	Based on student feedback to increase participation
OPSEF	No Changes	N/A

Appendix C: Op Log & Procedure Log

<u>Block</u>	<u>New topics</u>	<u>Reasoning</u>
M&M	No Changes	N/A
OPSEF	Remove Colic	Not encountered frequently



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Policy Name

Policy Name:	Grade Appeal and Complaint Policy				
Policy Domain:	Curriculum Management	Refers to LCME Element(s):	11.6		
Approval Authority:	CEPC	Adopted:		Date Last Reviewed:	
Responsible Executive:	Associate Dean for Medical Education	Date Last Revised:			
Responsible Office:	Office of Medical Education	Contact:	Mirjana Babic, M.P.A. mbabic@ttuhsc.edu		

1. **Policy Statement:** This policy defines the process for medical students to file an academic appeal or complaint regarding their educational record/s, including the Medical Student Performance Evaluation, if they feel that the content is inaccurate, misleading or inappropriate.
2. **Reason for Policy:** This policy is intended to codify our established practices, consistent with LCME accreditation element 11.6 (November 2023 edition), regarding the ability of a student to appeal their educational record.
3. **Who Should Read this Policy:** All PLFSOM medical students, education program leaders including the dean, vice president for academic affairs, all academic officers of the Office of Medical Education and the Office of Student Affairs, all course and clerkship directors, and all members of the following standing committees: the Committee on Curriculum and Educational a Policy (CEPC), the Committee on Student Grading and Promotion (GPC), the Sub-Committee on Evaluation and Education Programs, and the Committee on Student Affairs.
4. **Resources:** Officers and staff of the Office of Medical Education support this policy.
5. **Definitions:** Educational records include the following: content of the Medical Student Performance Evaluation, course and clerkship data, examination performance, OSCE performance, narrative assessments, and course and clerkship grades.
6. **The Policy:**
 - a. Students are expected to thoroughly review the course or clerkship syllabus and understand the applicable grading policies and other relevant policies, including but not limited to the Common Clerkship Policies and Grading Promotion and Academic Standing Policy, before starting each course, clerkship, or rotation.
 - b. Students in the PLFSOM Doctor of Medicine (MD) program have the right to a fair and equitable appeal process. A student may discuss a concern with the relevant course/clerkship director and/or file an appeal regarding their educational record if they believe that the content is inaccurate, misleading or inappropriate.
 - c. Students should be aware that a grade/comment review may lead to a reduction in the student's course/clerkship grade components (for example, competency grades), ~~and but~~

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that such a reduction in course/clerkship components ~~could~~will not result in a reduction of the student's final course grade.

d. Testing irregularity:

- a. In the event that there is a significant irregularity in testing that impacts a student's performance, the student may be eligible for a retest. Requests for retests must be discussed with the proctor/course director or TECHS Center personnel (or designee) prior to leaving the testing room or simulation center and filed the same day of the irregularity. In the event that the appeal request is approved, the original exam will become invalidated. For clinical skills assessments and OSCEs, only the part of the exam that was impacted would become invalidated. The retest score will be used for grading.

e. Revision of clinical evaluations

- a. All questions regarding clerkship grades or narrative comments should be directed to only the clerkship director/assistant director. Students should not approach individual faculty members or residents to request a revised clinical evaluation and doing so will be considered a professionalism violation and will forfeit the student's right to an official appeal. Revisions of clinical evaluations will not be accepted.

f. Grade/comment reconsideration

- a. If a student is concerned about their final grade or component of a final grade, they must first work with the course or clerkship director. The student should not approach individual faculty, attendings, or residents who taught in the course/clerkship. A violation of this step will result in a student forfeiting their right to an official appeal as noted in section (d) above.
- b. Students may appeal to the course/clerkship director/assistant director using the following procedure:

i. Discuss the concern/complaint:

The student must meet with the course/clerkship director/assistant director within five (5) business days from the date of the student's grade, narrative, or final grade release to Elentra/ePortfolio or Banner.

ii. File an appeal in writing to the course/clerkship director/assistant director:

If the student's concern is not resolved after discussion with the course/clerkship director/assistant director and they wish to formally contest the final grade or component of the grade, then the student must submit a written request for reconsideration within 10 business days~~2 weeks~~ from the initial release of the grade, narrative or final grade including the reasons for the appeal and provide objective documentation, where appropriate, to support a change in a grade. The course/clerkship director/assistant director then makes a decision about the appeal and



notifies the student in writing (may be electronic) of the decision within 10 business days~~two weeks~~ of receipt of the student's appeal.

iii. Appeal the Decision of the Course/Clerkship Director/Assistant Director:

If a student wants to appeal the decision of the course or clerkship director/assistant director, they must detail in writing the reasons for the appeal to the Associate Dean for Medical Education within five (5) business days from receipt of the course or clerkship director/assistant director's decision. The Associate Dean for Medical Education may choose to decide the appeal independently or may delegate the appeal to the Assistant Dean for Basic Science Instruction or the Assistant Dean for Clinical Instruction. Alternatively, or the Associate Dean may appoint an advisory ad hoc committee of at least 3 faculty members. In this case, the ad hoc committee will review all documents and conduct any necessary interviews with the student and the course/clerkship director/assistant director for fact-finding and then make a written recommendation to the Associate Dean who will then decide the matter and provide notice in writing to the student within 10 business days~~2 weeks~~ of the written request for appeal at this level.

iv. Appeal the Decision of the Associate Dean for Medical Education:

If a student feels that the School of Medicine did not properly follow its established procedures, they can appeal the decision of the Associate Dean for Medical Education to the Vice President for Academic Affairs or their designee within five business days~~one week~~ of prior notice by the Associate Dean. The Vice Dean may decide the appeal independently or appoint an advisory ad hoc committee comprised of at least 3 faculty members who have not previously participated in this appeal process. The ad hoc committee makes a recommendation to the Vice Dean, who will then decide the matter. Appeals at this level are for procedural concerns only. The student will be notified of the decision within 10 business days~~2 weeks~~ of the request for appeal. This is the final level of appeal for a grade.

g. Medical Student Performance Evaluation:

The Medical Student Performance Evaluation (MSPE) can be appealed only on the grounds that it is inaccurate, misleading, or inappropriate. Each student will approve his or her MSPE before uploading it to the Electronic Residency Application System or another platform for the residency program director to review as part of his or her residency application. Corrections of typographical and grammatical errors that do not alter the content of the MSPE do not require an appeal.

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HEALTH SCIENCES CENTER
EL PASO

Paul L. Foster School of Medicine

h. Untimely Filing:

If the appeal is not filed in a timely manner at any stage outlined in the process [\(section b. i to iv\)](#) or does not meet the grounds for appeal, the student shall be notified and the student's complaint/appeal will be considered resolved.

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Kris Nicole De Guzman Mendoza, MD

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EDUCATION

2011 – 2015 Doctor of Medicine, University of Santo Tomas, Manila, Philippines
2007 – 2011 Bachelor of Science in Medical Technology, University of Santo Tomas, Manila, Philippines

POSTDOCTORAL TRAINING

2021 – 2024 Neonatal – Perinatal Medicine Fellowship, University of Rochester Medical Center (URMC), Rochester, NY
2018 – 2021 Pediatric Residency, Texas Tech University Health Sciences Center (TTUHSC), El Paso, TX

PROFESSIONAL LICENSURE & CERTIFICATIONS

2018 – present Provider, Pediatric Advanced Life Support
2018 – present Provider, Basic Life Support
2018 – present Provider, Neonatal Resuscitation Program
2021 – present Medical License, State of New York
2021 – present American Board of Pediatrics, General Pediatrics
2022 – present Instructor, Neonatal Resuscitation Program

PROFESSIONAL EMPLOYMENT HISTORY

2016 – 2018 Preceptee/Scribe, Charlie Sonido MD Incorporated, Waipahu, HI

- Achieved intense hands-on clinical experience with direct patient care that comprised of eliciting histories, conducting physical examinations, deriving assessments and plans, interpreting laboratory results, inputting information in the EPIC electronic medical record and presenting to the attending physician. I also assisted in encoding proper ICD codes and following up claims with insurance companies.

September 2017 Preceptee, Primary Care Clinic of Hawaii, Lihue, HI

- Obtained direct clinical hands-on experience through history taking, physical examinations, formulation of differential diagnosis and management plans.

March – April 2018 Preceptee/Assistant, Carolina Davide MD Incorporated, Waianae, HI

- Performed detailed history and physical examinations, formulated differential diagnoses, and developed assessments and plans that were presented to the attending physician.

HONORS AND AWARDS

2019 Resident of the Year Award PL-1, Texas Tech Health Sciences Center, El Paso, TX

- Award recognizing outstanding leadership, performance, commitment to education and service.

2020 Resident of the Year Award PL-2, Texas Tech Health Sciences Center, El Paso, TX

- Award recognizing outstanding leadership, performance, commitment to education and service.

Updated 08/31/2023

- 2021 Resident of the Year Award PL-3, Texas Tech Health Sciences Center – El Paso, TX
- Award recognizing outstanding leadership, performance, commitment to education and service.

PROFESSIONAL ORGANIZATIONS

2021 – present	Member	Trainees and Early Career Neonatologists, American Academy of Pediatrics
2021 – present	Member	Section on Neonatal-Perinatal Medicine, American Academy of Pediatrics
2018 – present	Member	American Board of Pediatrics
2018 – present	Member	Section on Pediatric Trainees, American Academy of Pediatrics
2018 – 2021	Member	Texas Pediatric Society
2018 – 2021	Member	Texas Medical Association
2015 – 2018	Member	Ohana Medical Missions Inc.

COMMITTEES

2022 – 2023	Fellow Representative, Neonatal Fellows' Conference Planning Committee, URM
2018 – 2021	Resident Representative, Pediatric Residency Program Policy Committee, TTUHSC
2018 – 2021	Resident Representative, Pediatric Residency Program Wellness Committee, TTUHSC

ADMINISTRATIVE EXPERIENCE

2022 – 2023	Fellow Scheduler, Neonatal Fellows' Annual Clinical Schedule
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RESEARCH PROJECT

2020 – ongoing	Postpartum Depression in the NICU: Screening and Interventions
	<ul style="list-style-type: none"> • Institution: Texas Tech University Health Sciences Center – El Paso • Role: Pediatric Resident Co-investigator • Mentor: Maria Theresa Villaños, MD, Department of Pediatrics, TTUHSC • Contribution: I obtained informed consents and provided PHQ9 and COPE questionnaires to parents admitted to the NICU in El Paso Children's Hospital.

QUALITY IMPROVEMENT PROJECTS

2021 – present	Improvement of family integration, family education and multidisciplinary teamwork in the care of infants born at less than 28 weeks or 1000 grams
	<ul style="list-style-type: none"> • Institution: University of Rochester • Role: Project Leader • Mentor: Colby Day, MD, Division of Neonatology, URM • Aim: To improve family involvement for infants born at less than 28 weeks or 1000 grams. Interventions include conducting family-centered care conferences and updating welcome NICU packets. The multidisciplinary conference helps the family to promote the infant's neurodevelopment with two-person care, skin-to-skin care and oral breastmilk swabs. Transitions throughout the hospital stay, family support and resources are also provided to help the family cope throughout the NICU experience.
2019 – 2021	Improved Compliance of Pediatrics High Blood Pressure Guidelines
	<ul style="list-style-type: none"> • Institution: Texas Tech University Health Sciences Center – El Paso • Role: Team member

Updated 08/31/2023

- Mentors: Ei Khin, MD and Maria Theresa Villanos, MD, Department of Pediatrics, TTUHSC
- Aim: To improve compliance with the American Academy of Pediatrics high blood pressure diagnostic guidelines to 75% over 12 months in 9-18 year well child visits. Interventions included integrating guideline steps in the electronic health record and providing education on the correct methods for obtaining blood pressure measurement.

CERTIFICATES

December 2022 Crucial Conversations, VitalSmarts

EDUCATIONAL MATERIALS

2019 Editor, Pediatric Resident Handbook Survival Guide for the Wards, 2019 Edition

ABSTRACT PRESENTATIONS

De Guzman K, Day C. Improving involvement of families of small babies family integration, family education and multidisciplinary teamwork. American Academy of Pediatrics 102nd Perinatal and Developmental Medicine Symposium, Baltimore, MD, September 2023 (Oral Presentation)

De Guzman K, Day C. Improving involvement of families of small babies through family integration, family education and multidisciplinary teamwork. 6th International Family Centered Care Conference, Toronto, Canada, September 2023 (Oral presentation)

Gopinathan S, **De Guzman K**, Arbab B, Sambalingam S. A newborn with complete renal failure for peritoneal dialysis. Texas Perinatal Association, El Paso, TX, April 2019 (Clinical Conundrum Poster Presentation)

Khin E, Arbab B, **De Guzman K**, Garcia Alvarado J, Rodriguez D, Villaños, M. Improved compliance of pediatric high blood pressure diagnostic guidelines. Pediatric Academic Societies, Denver, CO, April 2022 (Poster Presentation)

PUBLICATION

Khin E, Villanos M, Alvarado J, Rodriguez D, Arbab B, **De Guzman K**. Improved Compliance of Pediatrics High Blood Pressure Guidelines in Well-Child Clinic Visits. *Pediatr Qual Saf*. 2023;8(4):e670. Published 2023 Aug 7.
doi:10.1097/pq9.0000000000000670

EDUCATIONAL CONTRIBUTIONS

Medical Students

2022 – present Pediatric Boot Camp: Neonatal Emergencies, UPMC

- Facilitate simulations of common neonatal emergencies that can be encountered by pediatric residents (teaching; 1.5-hr session/yr)

2022 – present Foundations of Biopsychosocial Practice Pediatric Clinical Experience, UPMC

- Facilitate small group discussions regarding student experiences on the basics of pediatric clinical assessments, child preventive care and developmental stages (teaching; two 1.5-hr sessions/yr)

Residents (Pediatrics, Medicine – Pediatrics, Family Medicine)

2021 – present NICU Morning Intake Rounds, UPMC

- Teach common topics seen in the NICU, such as patent ductus arteriosus, retinopathy of prematurity, respiratory distress in the newborn, and necrotizing enterocolitis. Discuss

antenatal risk factors, clinical presentation, resuscitation and management of infants born within the last 24 hours. (50 talks/year)

- 2022 – present Pediatric Residents Skills Block, URMC
 - Facilitate simulations of commonly encountered neonatal scenarios in the delivery room, well baby nursery and in the NICU (teaching; 2-hr session/yr)
- 2022 – present Pediatric and Medicine-Pediatrics Intern Orientation: Lumbar Puncture Mastery Learning
 - Conduct simulations to support learner acquisition of standardized procedural technique (teaching, 0.5-hr session/yr)

Advance Practice Providers, Neonatology Fellows, Physician Faculty

- 2021 – present Neonatology Fellow Conferences, URMC
 - Topics covered: Safe Sleep Guidelines, Humidity and thermoregulation, Smith-Magenis syndrome, mortality and morbidity patient discussions, pathology conferences, journal club
- 2022 – present NICU Procedure Skills Day, URMC
 - Facilitate procedural simulations for maintenance of certification for NICU advanced practice providers, fellows, and faculty (2 sessions/year)
- 2022 Neonatology and Pediatric Surgery Joint Conference, URMC
 - Topic: Dexmedetomidine in Neonatal Surgical Patients
- 2023 Neonatology and Pediatric Surgery Joint Conference, URMC
 - Topic: Necrotizing Enterocolitis and H² Receptor Antagonists: Association or coincidence?
- 2023 Neonatology and Maternal Fetal Medicine Joint Conference, URMC
 - Topic: Treatments for Genetic Disorders
- 2023 NICU – PICU – Pediatric Cardiology Joint Conference, URMC
 - Topic: Neonatal Tetralogy of Fallot

Community Providers

- 2022 – present Neonatal Resuscitation Provider Course for URMC and Community Providers
 - Facilitate simulations of neonatal resuscitation for providers in the community (1 4-hr session/year)

COMMUNITY ACTIVITIES

- 2015 - 2018 Volunteer Physician, Ohana Medical Missions, Inc., Honolulu, HI
 - Volunteered in extensive medical missions, examining, managing, and allocating medications and goods to underprivileged provinces in the Philippines (2weeks/year)

LANGUAGE FLUENCY

English – native language
 Tagalog – speak fluently, read and write with high proficiency
 Kapampangan – speak fluently, read and write with basic competence

SUSAN F. McLEAN, M.D., M.P.H., FACS, FCCM
CURRICULUM VITAE

ADDRESS

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Work: Texas Tech University HSC
Department of Surgery
4800 Alberta Avenue
El Paso, Texas 79905
Phone: (915) 545-6872
Fax: (915) 545-6864

Date of Birth: June 18, 1962
Place of Birth: Hopewell, Virginia

EDUCATION:

1980-1984 Virginia Tech, B.S. with major in Biology
Honors: Elected to Phi Beta Kappa

1984-1988 Medical College of Virginia – M.D.

2017-June 2019 George Washington University, MPH

TRAINING:

Residencies and Fellowships:

1988-1989 Resident Internship, transitional (rotating)
Riverside Regional Medical Center, Virginia

1989-1994 Internship and General Surgery Residency
Brown University Integrated Surgical Residency

1994-1995 Surgical Critical Care Fellowship
University of Massachusetts Medical Center

HOSPITAL APPOINTMENTS

1995-1996	Instructor in Surgery University of Massachusetts Medical Center
1996-1998	Instructor in Surgery Mayo Medical School, Mayo Clinic and Foundation
1998-2006	Assistant Professor, Department of Surgery Texas Tech Health Sciences Center, El Paso, Texas
2006-Present	Associate Professor, Department of Surgery Texas Tech Health Sciences Center, El Paso, Texas
2011-Present	Adjunct Faculty, Baylor University Physician Assistant Program, Baylor ID 891928133
2019-Present	Professor, Department of Surgery, Texas Tech University Health Sciences Center El Paso

CERTIFICATION

1995	Board Certified in General Surgery
1996	Board Certified in Surgical Critical Care
2004	Board Re-Certified in General Surgery
2005, 2014	Board Re-Certified in General Surgery
2006, 2015	Board Re-Certified in Surgical Critical Care

SOCIETY MEMBERSHIPS

1995	Society of Critical Care Medicine
1995	American Medical Association
1998	American Trauma Society
2000	Association of Women Surgeons
2000	Fellow of The American College of Surgeons
2002	Southwestern Surgical Congress
2014	Society of Critical Care Medicine—Texas Chapter
2015	Pediatric Trauma Society
2015	Texas Society of Critical Care Medicine
2017	American Public Health Association
2017	South Texas Chapter American College of Surgeons
2017	American Surgical Congress
2019	Delta Omega Public Health Honor Society
2020	American Association of Surgery for Trauma
2023	American College of Critical Care Medicine

EXTRAMURAL RESEARCH PRESENTATIONS

October 1993	“Synchronous Colorectal Carcinoma: Is It Different?” New England Colon and Rectal Society, October 1993.
February 6-8, 1996	“Transgastric Jejunostomy: Reliable Enteral Access for Nutritional Support and Gastric Decompression in Critically Ill Patients” Lena M. Napolitano, M.D., Susan F. McLean, M.D. , Debra L. Malone, M.D., Stephen O. Heard, M.D. Poster presentation, Society of Critical Care Medicine and Scientific Symposium, New Orleans, LA February 6 to 8, 1996.
March 1, 2001	“Injury Severity after Intentional Falls from Bridges is not Affected by Intoxicant Use”, oral presentation, Southwest Texas ACS Chapter Meeting
April 2002	“Injury Severity after Intentional Falls from Bridges is not Affected by Intoxicant Use”, poster presentation, Southwest Texas ACS Chapter Meeting
October 2002	“Ventilator Variables in Trauma Patients”, Poster Presentation, UT Houston Research Day, Houston, Texas
January 2003	“Ventilator Mode Changes in Trauma Patients”, Poster Presentation, Society of Critical Care Medicine, San Antonio, Texas
April 27-30, 2003	“Epidemiology: Injury and Outcomes after All Terrain Vehicle Crashes: A Continuing Hazard for Teens: Poster Abstract, Southwestern Surgical Congress, Tucson, Arizona
April 27-30, 2003	“Cardiopulmonary Bypass and Bronchoscopy for Removal of Large Gravel in Bronchial Tree”, Case Report Abstract, Southwestern Surgical Congress
April 27-30, 2003	“Post-Operative Duodenocolic Fistula: A Rare Occurrence after Blunt Trauma”, Poster Abstract, Southwestern Surgical Congress
April 2005	“Mortality after Pancreatic Injury is Associated with Out of County Occurrence”.

McLean SF, Dougherty SH, Hashimoto LA, Tyroch AH.
Poster Abstract, Southwest Surgical Congress

April 2006

“Case Based Learning Improves Surgical Knowledge Scores” **McLean SF**, Tyroch AH, Horn K. Poster Abstract Southwest Surgical Congress

April 2006

“Tuberculosis Masquerading as Metastatic Colon Cancer” Morales, A. **McLean SF**, Tyroch AH. Case Report Oral Abstract, Southwest Surgical Congress

February 2007

“Use of High Frequency Oscillatory Ventilation for Chest Wall Trauma” **McLean SF**, Tyroch AH, Ortega B. Poster Abstract, Society of Critical Care Medicine Scientific Meeting

March 2007

“Mucocoele of Appendix Presenting as Large Bowel Obstruction”. Kromah FA, **McLean SF**, Tyroch AH. Case Report Oral Abstract, Southwest Surgical Congress

March 2007

“Traumatic Arteriovenous Facial Shunt: Management of a Rare Entity” Palladino H, **McLean SF**, Tyroch AH, Singh A. Case Report Oral Abstract, Southwest Surgical Congress

September 2007

“Thrombocytopenia and coagulopathy after craniocerebral gunshot wounds: Factors affecting survival” Tyroch AH, **McLean SF**, et al. Poster Presentation, American Association of the Surgery of Trauma

March 2008

“High Frequency Oscillatory Ventilation is Useful to Improve Oxygenation in Trauma Patients with ARDS” **McLean SF**, Tyroch AH, Montoya R. Poster Abstract, Southwest Surgical Congress

September 2008

“Adrenal Insufficiency in the ICU setting: Debunking the Classic Myth” Kromah FA, Tyroch AH, **McLean SF** et al. presented at American Association for the Surgery of Trauma. El Paso, TX

March 2009

Use of Whitman Patch for abdominal closure. Poster presentation, Eric Payne MD resident presenter, **McLean SF**, SWSC sponsor and co-author. Presented at Southwestern Surgical Congress. San Diego, CA

- June 2009** “Saving Biologic Wound Closure with Irrigating Wound Vac” **McLean SF**, Tyroch AH, Palladino H. Presented at Abdominal Wall Reconstruction Conference as poster abstract. Washington, DC
- December 2009** Research Presentation: “Operative treatment of splenic injuries is associated with a lower incidence of thromboembolic events” Garza, Randy; **McLean, Susan F**; Tyroch , Alan H. at Rio Grande Trauma conference, El Paso, TX , December 2009. Randy Garza presenter.
- December 2009** “Injuries after Falls from Bridges in El Paso County” **McLean SF**, Tyroch AH. Rio Grande Trauma Conference, El Paso oral presentation
- March 2010** Research Presentation: “Operative treatment of splenic injuries is associated with a lower incidence of thromboembolic events” Garza, Randy; **McLean, Susan F**; Tyroch , Alan H. at Annual meeting of American College of Surgeons, South Texas Chapter conference. (Note: I did the statistical analysis of this paper and assisted with abstract preparation.) Tucson, AZ
- May 2010** “The Bridges of El Paso County: Injury Frequencies and an Injury Dyad” **McLean SF** and Tyroch AH. research abstract. Research Day, TTUHSC research day. El Paso, TX
- June 2010** “Wittman Patch plus NPWT-o enhances closure after Trauma and Acute Care Surgery” **McLean SF**, Tyroch AH, Palladino P. Poster, Abdominal Wall Reconstruction Conference, Washington DC. Poster
- September 2010** “NPWT with Antibiotics for Infected Wounds with Biologic Inserts” **McLean SF**, Tyroch AH. Clinical Symposium on Advances in Skin and Wound Care, Orlando, FL poster
- December 2010** “Shorter Elapsed Time to Surgery after Pancreas Injury is Associated with Survival” Matlock, **McLean**, Tyroch Rio Grande Trauma Conference, El Paso oral presentation
- December 2010** “Wittman Patch plus Open Abdominal Wound Vac Enhances Surgical Closure after Damage Control

	Laparotomy” McLean SF , Tyroch AH, Palladino H. Rio Grande Trauma Conference, El Paso, TX oral presentation
April 2011	“Abdominal Closure using Wittman Patch plus negative pressure wound therapy after damage control” McLean SF . Southwestern Surgical Congress. Ko Olina, HI
April 2011	“Case Based Review Questions and Call Schedule type Affect Clinical Knowledge Scores in Surgery” McLean SF , Tyroch AH and Horn K. Southern Group on Educational Affairs (SGEA) Conference, Houston, TX, presented as poster
May 2011	“Case Based Surgical Learning Enhances Medical Knowledge in a Surgical Clerkship” McLean SF , Horn K, Tyroch AH, Lee H. Research Day oral presentation given by Lee.
June 2011	“Damage Control Laparotomy and Biologics” McLean SF , Tyroch AH. Abdominal Wall Reconstruction Conference. Washington DC. Poster.
December 2011	“Peripheral Blood T-Lymphocytes after Trauma”. McLean SF , Tyroch AH, Wilson H. Rio Grande Trauma Conference, El Paso, TX oral presentation
December 2011	“Damage Control Laparotomy after Trauma” McLean SF , Tyroch AH, Steele S. Rio Grande Trauma Conference, El Paso, TX oral presentation
December 2011	(1st place award) “Thromboembolic Prophylaxis and Routine Duplex Surveillance is Not Warranted in the Pediatric Trauma Population: A National Trauma Databank Analysis. Rio Grande Trauma Conference & Pediatric Trauma Update XII. El Paso, Texas.” Ahmeti M, McLean SF , Tyroch AH
February 2012	Changes in T-cell Subsets are correlated with MODS score changes and nutritional status. McLean SF , Tyroch AH. Society of Critical Care Medicine. San Juan, Puerto Rico.
March 2012	McLean SF , Tyroch AH Acute papillary muscle rupture after blunt trauma after splenectomy. (poster) Southwestern Surgical Congress. Rancho Palos Verdes, California. March, 2012

- June 2012** “Comparison of Damage Control Laparotomy Rates and Outcomes in Blunt vs. Penetrating Trauma” **McLean SF, Tyroch AH**. Abdominal Wall Reconstruction Conference, Washington DC. Poster
- October 2012** **McLean SF, Tyroch AH** Trauma laparotomy wounds: Factors associated with wound infections. (poster) The Clinical Symposium on Advances in Skin & Wound Care. Las Vegas, NV. October, 2012
- March 2013** Garza C, McLean SF, Tyroch AH. A case of pediatric pulmonary embolism after trauma associated with heterozygous mutation in MTHFR gene (poster). Southwestern Surgical Congress. Santa Barbara, California. March, 2013
- May 2013** McLean SF, Tyroch, AH. Wound infections after trauma laparotomy. (poster) 7th Annual Research Colloquium, Texas Tech University HSC-El Paso & University of Texas at El Paso. El Paso, Texas. May, 2013
- June 2013** **McLean SF, Tyroch AH** A decrease in damage control laparotomy for trauma at a Level One Trauma Center. (poster) *Abdominal Wall Reconstruction Conference*. Washington, DC. June, 2013
- May 2013** **McLean SF** Adrenal injury and adrenal insufficiency in a local and national trauma databank. *7th Annual Research Colloquium, Texas Tech University HSC-El Paso & University of Texas at El Paso*. El Paso, Texas. May, 2013
- April 2014** **McLean, SF, Tyroch AH** Bilateral adrenal injury is associated with increased risk of adrenal insufficiency compared to unilateral injury (poster). Southwestern Surgical Congress. Scottsdale, Arizona. (to be presented April, 2014.)
- April 2014** **McLean SF, Tyroch AH, Ng N**, Hepatic “BOLSA”: a Novel Method of Perihepatic packing for hemorrhage . Accepted as a poster presentation at Southwestern Surgical Congress. Phoenix, Arizona(to be presented April 2014)
- April 2015** **McLean SF, Tyroch AH, Volk A**, Trampoline Injuries in Children. Poster presentation Southwestern Surgical Congress

Nov. 2015	McLean SF , Volk A, Tyroch AH: Pediatric Trampoline Injuries.[Poster] Pediatric Trauma Society, Scottsdale, Arizona.
February 2016	Tyroch AH Smith J, Andrade A, Ramos JA, McLean SF Trauma Patients Warrant Upper and Lower Extremity Venous Duplex Ultrasound Surveillance [Poster] Academic Surgical Congress. Jacksonville, Florida. February 2016
February 2016	Tyroch AH , Smith J, Andrade A, Ramos JA, McLean SF . Trauma Patients Warrant Upper and Lower Extremity Venous Duplex Ultrasound Surveillance (Oral Presentation) Location: Society Critical Care Medicine. Orlando, Florida. February 2016
April 2016	McLean SF , Francis M, Lacy N, Horn K. Use of Clinical Evaluation Cards During Two Fourth Year Surgical Rotations. [oral presentation] Southern Group on Educational Affairs Conference. April 15, 2016.
June 2016	McLean SF , Tyroch AH. Primary Fascial Closure is Aided after Damage Control Laparotomy using Open Abdominal Wound Vac and Component Separation. Abdominal Wall Reconstruction Conference
September 2016	McLean SF , Ricci C, Tyroch AH. Case-Based Learning in Critical Care: A World-Wide Review. Presented as Poster, Society of Critical Care Medicine—Texas Chapter. Ricci, C was presenter.
September 2016	Hanif H, Milan SA, McLean SF . A case of Thyroid Storm in the ICU. Presented at Society of Critical Care Medicine—Texas Chapter meeting as Poster. Presenter Hanif, H.
February 2017	McLean SF , Ricci C. Tyroch AH. Case-Based Learning in Critical Care: An appraisal of current literature. American Surgical Congress. Presenter: McLean SF.
April 2017	McLean SF , Tyroch AH Hemostatic Massive Transfusion Protocols and Trauma Laparotomies. Southwestern Surgical Congress. Presenter: McLean SF
April 2017	McLean SF . Use of Case-Based Learning to Incorporate Entrustable Professional Activities in to a Critical Care Rotation. Southern Group on Educational Affairs Annual Meeting. Presenter: McLean SF
April 2018	McLean SF , Tyroch AH. Clear and Present Danger: Unhelmeted ATV riders. Presented at George Washington University Research Day. Washington DC. April 11, 2018
November 2018	Schrodt A, McLean SF , Tyroch AH. [poster]Pediatric Pancreatic Injuries: Operative Management. Presented at the Pediatric

Trauma Society Meeting, November 2018, Houston, Texas.
Presenter: A Schrod, A.

April 2019

McLean SF, Tyroch AH. Children have higher incidence of traumatic brain injury after ATV crash compared to adults. Presented at George Washington University Research Day, 5-1-2019.

EXTRAMURAL EDUCATIONAL PRESENTATIONS

September 1999

“Controversies Regarding Use of the SwanGanz Catheter”
Grand Rounds, William Beaumont Army Medical Center

May 5, 2001

“Blunt Injuries to the Chest and Abdomen (from sports)”
Sports Medicine Symposium 2001. Sun City Athletic Trainers Association of El Paso Texas

October 16, 2001

“Medical Aspects of Domestic Violence: Statistics and Screens” at Tenth Annual Conference on Domestic Violence. Coordinated by El Paso Center on Family Violence.

November 2001

“Emergency Surgical Procedures for the Trauma Patient”, lecture/skills lab, Second Annual Bi-National Trauma Conference, Juarez, MEXICO

February 2002

“Medical Aspects of Domestic Violence, Emergency Nurses Association of El Paso.

August 2002

“Domestic Violence: Statistics and Screens” 3rd Bi-National Trauma Conference

August 2003

“Trauma Around the World”, Oral Presentation 4th Bi-
December 2004 “Trauma, The Team Approach”
CME course, 4 lectures with ITACCS/Northwest Anesthesia Seminars

January 2005

“Fluid Resuscitation-Crystalloids” CME lecture during Trauma course at Texas Tech National Trauma Conference

May 2011	“Nutrition in trauma and critical care. El Paso Dietician Association Annual Conference, El Paso, TX.
February 2011	Presentation at TETAF in Austin “ATV crashes, a continuing hazard for teens”
May 2012	Presentation at El Paso Dietetics Association “ Nutrition in Critical Care”
August 2012	Presentation for Texas Surgical Tech Association “ Abdominal Compartment Syndrome and the Open Abdomen”
August 2016	Sepsis 3: New definitions. CME talk given at Society of Critical Care Medicine—Texas Chapter
July 2017	Nutrition and Critical Care: CME talk given at Society of Critical Care Medicine Texas Chapter meeting in El Paso
November 2017	The Open Abdomen: To Close or not to Close. Talk given at Society of Critical Care Medicine Texas Chapter Annual Symposium in Galveston, TX
September 2020	“ The Lethal Diamond: Hypocalcemia and the Lethal Triad” Presenter Dr. Susan F. McLean. Given at Society of Critical Care Medicine Texas Chapter Annual Symposium. September 26, 2020. Regional Conference
October 18 2020	Barros A, Nguyen H, Lee H, McLean S , Rivera P et al. Effect of Arterial Catheter on Vasopressor Use in Patients with Shock: A Propensity Score Matching Analysis on a Multi-Center Retrospective Cohort. Presented at Chest, a national conference. October 18-21, 2020 as poster. Main presenter: Dr. A. Barros.
December 2020	August 3, 2019 Lessons Learned From the August 3, 2019 Mass Casualty Event. Presented at Rio Grande Trauma conference. Presenters: Susan McLean, MD, and Nancy Weber, DO.
September 16-17 2021	El Paso Active Shooter Mass Casualty Event: Debrief, Lessons Learned, and Next Steps. Presentation at conference: National Center for Disaster Management and Public Health. Conference on Best Practices for Hospitals during Active Shooter Mass Casualty Events. Presenters Susan F. McLean and Nancy Weber.

INTRAMURAL PRESENTATIONS

May 17, 2001	Trauma Research: at Trauma Grand Rounds, TTUHSC
November 1, 2001	“The Multisystem Pediatric Trauma Patient with Head Injury”; Panel Presentation, Pediatric Trauma Update.
November 2, 2001	“Medical Aspects of Domestic Violence” at TTUHSC Trauma Conference
January 2003	“Near Drowning” Trauma Grand Rounds, Texas Tech University HSC-El Paso
May 2008	“Crash: Trauma Mechanism of Injury” Trauma Grand Rounds, Texas Tech University HSC-El Paso
September 2011	“ATV crashes and outcomes” Trauma Grand Rounds
August 2012	“Nutrition in Critical Care and Trauma” Trauma Grand Rounds
February 2011	Presentation at TETAF in Austin “ATV crashes, a continuing hazard for teens”
August 2012	Presentation for Texas Surgical Tech Association “Abdominal Compartment Syndrome and the Open Abdomen”
February 2015	Adrenal Injury and Adrenal Insufficiency—TECCS talk, PLFSOM
July 2015	New Oral Anticoagulants, Bleeding and Clotting---TECCS talk
October 2015	Renal Insufficiency and Failure in the ICU—A case based talk—TECCS talk
March 2016	Sepsis: New Definitions—TECCS talk
September 2016	Massive Transfusion Protocol and Trauma Laparotomies. Presented at Monthly meeting of Trauma Quality Improvement meeting, September 2016 at University Medical Center of El Paso.

October 2016

Sepsis: An introduction to the treatment bundles.
Presentation at annual CME conference: Simulation
Conference of West Texas

April 28, 2021

Moving Research Forward: Small Grants or No Grants
WIMS seminar on grants.

PUBLICATIONS

1. Kones RJ, King TC, Schechter S, McLean SF, Lodowsky C, Wanebo HJ. Synchronous colon carcinomas: molecular-genetic evidence for multicentricity. *Ann Surg Oncol* 1996 Mar;3(2):136-43
2. Heard SO, Wagle M, Vijayakumar E, McLean S, Brueggemann A, LM, Edwards LP, O'Connell FM, Pyana JC, Doern GV. Influence of triple-lumen central venous catheters coated with chlorhexidine and silver sulfadiazine on the incidence of catheter-related bacteremia. *Arch Intern Med* 1998 Jan 12;158(1):81-7
3. McGuire EL, Tyroch AH, **McLean, SF**, Dougherty SH. Bronchoscopy and SXR are not required with percutaneous dilational tracheostomy using the Ciaglia "Blue Rhino"(abstract). *Crit Care Med*, Vol. 29, No 12 (Suppl.), A185,2001
4. Rocha NA, Mata AG, Tyroch AH, **McLean SF**, Blough L. Trauma registries as a potential source for family violence and other cases of intimate partner violence for border communities: Indicator data trends from 2000 to 2002. *Journal of Border Health*, Vol. 7, No. 1, 56-72, 2002.
5. Rocha NA, Mata AG, Tyroch AH, **McLean SF**, Blough L. Trauma registries as a potential source of border epidemiology work group indicator data: Trends from 1996 to 2000. *Journal of Free Inquiry*, December 2003.
6. **McLean SF**, Tyroch AH, Rocha N, Nelson B, Montoya R, Friesen MA. Ventilator mode changes in trauma patients (abstract). *Crit Care Med*, Vol. 31, No. 2 (supplement), A67, 2003
7. Tyroch AH, McGuire EL, **McLean SF**, Kozar RA, Gates KS, Kaups KL, Cook C, Cowgill SM, Griswold J, Sue LA, Craun ML, Price J. The association of Chance fracture and intra-abdominal injuries revisited: A multi-center review. *The American Surgeon*. Vol. 71, No. 5. 434-438, 2005.

8. Freemyer R, **McLean SF**, Tyroch AH, Santoscoy R Cardiopulmonary bypass and bronchoscopy for removal of large gravel in the bronchial tree. *The Journal of Trauma: Injury, Infection and Critical Care*. 2008 Feb 12.
9. Rivera JO, González-Stuart A, **McLean SF**, Tyroch AH. Unexplained hemorrhage in a patient taking herbal products. *The American Surgeon* 2009;75(4):346-347.
10. **McLean SF**, Tyroch AH, Montoya R High frequency oscillatory ventilation improves oxygenation in ARDS. *El Paso Physician, Academic Abstracts*. 2010; 33(1): 14
11. **McLean SF**, Tyroch AH The bridges of El Paso County: Injury severity and an injury dyad. *El Paso Physician, Academic Abstracts*. 2010; 33(1): 14
12. Garza DR, Tyroch AH, **McLean SF** Operative management o splenic injury decrease the incidence of tromboembolic events in trauma patients: Analysis of the national trauma data bank. *El Paso Physician, Academic Abstracts*. 2010; 33(1): 11
13. Kromah F, Tyroch AH, **McLean SF**, Hughes HW, Flavin NE, Lee S, Relative adrenal insufficiency in the critical care setting: Debunking the classic myth. *Worth Journal of Surgery*. 2011 Aug; 35 (8):1818-23.
14. **McLean SF**. Tyroch AH. Injuries sustained after falls from bridges across the United States-Mexico border at El Paso. *Rev Panam Salud Publica* 2012;31(5):427-434 PMID: 22767044
15. **McLean SF**, Horn, K, Tyroch AH. "Case Based Review Questions and Call Schedule Type Enhance Knowledge Gains in a Surgical Clerkship" *Journal of Surgical Education*. January/February 2013 70(1).

16. **McLean SF**, Tyroch AH. Changes in T-Cell subsets are correlated with MODS score changes and nutritional status. *Critical Care Medicine* 40(12): S1, December 2012, 245. DOI: 10.1097/01.ccm.0000424463.19010.18.

17. Matlock K, Tyroch AH, Kronfol Z, **McLean SF**, Pirela-Cruz MA Blunt traumatic bladder rupture: A ten-year perspective. *Am Surg.* 2013 Jun;79(6):589-93 PMID:23711268

18. Abdelgawad AA, Maxfield D, Tran S, **McLean SM**, Kanlic EM Dirt bikes injuries in children. *Musculoskelet Surg.* 2013 Aug 6. [Epub ahead of print PMID: 23918697 [PubMed - as supplied by publisher]

19. Michetti CP, et al, Tyroch AH, **McLean SF** Ventilator-associated pneumonia rates at major trauma centers compared with a national benchmark: A multi-institutional study of the AAST. *J Trauma.* 2012; 72(5): 1165-1173 PMID: 22673241 [PubMed - indexed for MEDLINE]
20. Nathaniel Ng, **Susan F. McLean**, Melhem R. Ghaleb, Alan H. Tyroch. Hepatic “BOLSA” a novel method of perihepatic wrapping for hepatic hemorrhage DOI: <http://dx.doi.org/10.1016/j.ijscr.2015.06.007> *International Journal of Surgery Case Reports*, Vol. 13, p99–102 Published online: June 18 2015
21. Ishida Y, **McLean SF**, Tyroch AH. Cecal Bascule after spinal cord injury: A case Series report. *International Journal of Surgery Case Reports.* 22: 94-97. 2016.
22. **McLean SF**. Case-Based Learning and its Application in Medical and Health-Care Fields: A Review of Worldwide Literature. *Journal of Medical Education and Curricular Development* 2016; 3 39-49 doi: 10.4137/JMECD.S20377.
23. **McLean SF**, Lacy N, Francis M, Alvarado A. Point of Contact Assessment: Using Health Belief Model Constructs to Change Grading Behaviors. *Journal of Medical Education and Curricular Development.* 6: 1-11. (2019). DOI: 10.1177/2382120519840358.
24. Barros A, Nguyen H, Lee H, **McLean S**, Reivera P et al. Effect of Arterial Catheter on Vasopressor Use in Patients with Shock: A Propensity Score Matching Analysis on a Multi-Center Retrospective Cohort. *Chest* 158 (4): A642. 10/01/2021. DOI: <http://dx.doi.org/10.1016/j.chest.2020.08.604>
25. Obeid NI, Velmahos G, Janis JE, Kovach III SJ, McLean SF, Askari R, Sommer CA, Agarwal S, Srinivasan J, Wong AK, Pakula A, Miranda EP, Breen K, Shapiro M, Deeken

CR, Stringer RC, McGraw JR, Bascone C, Martindale RG. Prospective, multicenter study of antimicrobial-coated, nonscrosslinked, acellular porcine dermal matrix (XenMatrix™ AB Surgical Graft) for hernia repair in all centers for disease control and prevention wound classes: 24-month follow-up cohort. *Ann Med Surg (Lond)*. 2023 85 (5), 1571-1577. PMID: 37228942.

Academic Positions:

1995-1996	Instructor in Surgery University of Massachusetts Medical Center
1996-1998	Instructor in Surgery Mayo Medical School, Mayo Clinic and Foundation
1998-2006	Assistant Professor, Department of Surgery Texas Tech Health Sciences Center, El Paso, Texas
2006-2019	Associate Professor, Department of Surgery Texas Tech Health Sciences Center, El Paso, Texas
2019 –Present	Professor, Department of Surgery, Texas Tech University Health Sciences Center El Paso
2021	Program Director, Surgical Critical Care Fellowship, Texas Tech

RESEARCH GRANTS & SPONSORED PROGRAMS

“Lymphocyte Subsets after Trauma”

Primary Investigator: S.F. McLean, M.D.

Co-investigators: H. Wilson, M.D., A.H. Tyroch, M.D., E.L. McGuire, M.D.

TTUHSC Seed Grant

Amount \$20,000.00

2000-Present

A prospective, multi-center, double-blind with in-house blinding, randomized, comparative study to evaluate the efficacy, safety and tolerability of Ertapenem sodium versus piperacillin/tazobactam in the treatment of complicated intra-abdominal infections in hospitalized adults, 2001-present

Primary investigator: A.H. Tyroch, M.D.

Co-investigators: J. Rivera, M.D., E.L. McGuire, M.D., S.F. McLean, M.D., S. Dougherty, M.D., J. Rodriguez, M.D.

Sponsor: Merck & Co., Inc.

Amount: ~ \$51,000.00

Sponsored Study: Site Primary Investigator in Study: “A Post-Market, Prospective, Multicenter, Single-Arm Trial of Xenmatrix AB Surgical Graft in All CDC Wound Class Ventral or Incisional Midline Hernias”, since **February 2016**. Sponsor: Bard-Davol, Inc.

Primary Investigator: Susan F. McLean, M.D. Co-investigators: Tyroch AH, Davis Br, Olivas VO.

Amount: \$71, 218.75.

Educational Grant for SCC Fellowship: Emergency and Trauma Care Education Partnership Program—Graduate Medical Education. Award: 24,232.00 dollars per fellow per year. Grant is from grant execution to June 30, 2024. THECB Award No.: 27776.

Honors and Awards:

1. **Award for Best Faculty Clinical Research Paper for Oral presentations, Texas Tech University Health Sciences Center at El Paso, May 6, 2010.**
2. **Elected Golden Key International Honor Society, April 3, 2018 for work at GWU**
3. **Awarded Presidential Citation 2016, 2017 from the President of Society of Critical Care medicine.**
4. **Elected to Delta Omega National Public Health Honor Society, May 14, 2019. The Omega Chapter at George Washington University.**
5. **Awarded Best Chapter Member El Paso Branch of Society of Critical Care Medicine Texas Chapter 2020.**

ADMINISTRATIVE

**Texas Tech University Health Sciences Center
Department of Surgery
Surgical Critical Care Fellowship Program Director
And Surgical Critical Care Fellowship founder
2020- To present. Program ACGME approved January 2021**

**Texas Tech University Health Sciences Center
Department of Surgery
Vice Chairperson of Department of Surgery
2010 to present**

Texas Tech University Health Sciences Center
Department of Surgery
El Paso, Texas
Associate Surgical Clerkship Director
3/2012 - Present

Texas Tech University Health Sciences Center
Department of Surgery
El Paso, Texas
Surgical Clerkship Director
2001 – 3/2012

Bi-national Trauma Conference
Chairperson
2002, 2003

Texas Tech University Health Sciences Center
Department of Surgery
El Paso, Texas
Associate Medical Director, Trauma Services
1998 – Present

Local Committees:

Investigative Review Board for Human Subjects Research, 2000-present
Trauma Performance Improvement and Public Safety—1998 to present
Trauma Quality Improvement—1998-present
Critical Care Subcommittee---2000-present
Women in Medicine and Science, 2014-present, one of founding members.

National and Regional committees:

Southwestern Surgical Congress Publications committee, 2012-2018
El Paso Program Coordinator Texas Chapter Society of Critical Care medicine
Board of Directors, Society of Critical Care Medicine Texas Chapter
Member, Fundamental Critical Care Support Course, Society of Critical Care Medicine, 2007-2009
Chair, Bylaws Committee, Southwestern Surgical Congress, appointed, 2019
American Association of Surgery of Trauma Critical Care Committee, elected, 2023 to present
Texas Society of Critical Care Medicine research committee, elected, 2019 to present

Academic Public Service:

Founded Texas Tech El Paso Surgical Department Surgical Critical Care Fellowship 2021
Founded El Paso Branch of Society of Critical Care Medicine—Texas Chapter, 2015.
Served as Examiner, American Board of Surgery, 2013 and 2016.

CONTINUING EDUCATION

Completed Master of Public Health Degree, George Washington University
Milken Institute School of Public Health 2017-2019.

Statistics classes at the SPSS Training Center, Washington, DC

1. July 2000 – SPSS Basics
2. July 2000 – SPSS Intermediate topics
3. August 2000 – SPSS: Statistical Analysis
4. October 2000 – Survey Research Using SPSS
5. December 2000 – Advanced Techniques Regression Analysis
6. December 2000 – Advanced Techniques ANOVA

Other:

Course Director Fundamental Critical Care Support Course 2007 to present.

Course Director and Founder of CME series: Texas Education in Critical Care Series. A series of CME lectures started January 2015. Given Quarterly

El Paso Coordinator and Founder of El Paso Branch of Texas Society of Critical Care Medicine. Branch founded September 2015 with quarterly meetings since then.