

5:00 PM - 6:30 PM 9/09/2024

CHAIR:

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

VOTING MEMBERS:

Dale Quest, PhD; Biff Palmer, MD; Fatima Gutierrez, MD; Patricia Ortiz, MD; Jessica Chacon, PhD; Khanjani Narges, MD, PhD; Munmun Chattopadhyay, PhD; Marwaha Komal, MD, PhD; Natalia Sidhu, MD

EX-OFFICIO:

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

STUDENT REPRESENATIVES:

MS1 (Voting-Pending); MS1 (Ex Officio-Pending); Kristina Ingles MS2 (Voting); Samuel Aldous MS2 (Ex Officio); Katherine Asmis MS3 (Voting); Joshua Salisbury MS3 (Ex Officio); Rowan Sankar MS4 (Voting); Nikolas Malize MS4 (Ex Officio)

INVITED/GUESTS:

Thwe Htay, MD, Priya Harindranathan, PhD

REVIEW AND APPROVAL OF MINUTES

Minutes Attached

ANNOUNCEMENTS

Presenter(s): Dr. Francis

- New CEPC members
- Update on LCME accreditation/site visit
- CEPC plan for the upcoming year

ITEMS FROM STUDENT REPRESENTATIVES

Presenter(s): Students

ITEM I LCME Element 1.1 Table

Presenter(s): Dr. Francis

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ITEM II General Discussion

Presenter(s): Dr. Francis

- Student Voice
- o Returning after LOA
- Wellness Activities
- Event Cards
- o Internal Communication

ITEM III Policy Updates

Presenter(s): Dr. Francis

o Educational Program Participation by Non-Faculty

ITEM IV Clerkship Directors Update

Presenter(s): Dr. Francis

ADJOURN



CEPC Monthly Meeting Minutes 5:00 PM - 6:30 PM 09/09/2024

MEMBERS IN ATTENDANCE:

Charmaine Martin; Colby Genrich; Dale Quest; Fatima Gutierrez; Jessica Chacon; Jose Lopez; Joshua Salisbury, Komal Marwaha; Samuel Aldous; Katherine Asmis; Lisa Beinhoff; Maureen Francis; Munmun Chattopadhyay; Narges Khanjani; Neha Sehgal; Patricia Ortiz; Tanis Hogg

MEMBERS NOT IN ATTENDANCE:

Nikolas Malize; Rowan Sankar

PRESENTERS/GUESTS IN ATTENDANCE:

Thwe Htay; Priya Harindranathan

INVITED/GUESTS NOT IN ATTENDANCE:

REVIEW AND APPROVAL OF MINUTES

Dr. Francis

Having met quorum, the meeting minutes from the August 12, 2024 meeting were voted on and approved as presented.

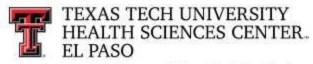
Dr. Quest moves the motion for approval.

Dr. Chacon seconds the motion.

No objections: Motion was approved.

Dr. Francis introduced the new committee members; Dr. Biff Palmer and Natalia Sidhu.

*Please see attached CVs.



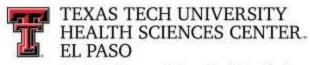
Dr. Francis provided an update on the upcoming LCME Site Visit Preparation Milestones. She noted that the data compilation (DCI) is currently in progress, and self-study committees have been formed to review the data and supporting documents, and to identify the school's program strengths and weaknesses. She also mentioned that students are simultaneously preparing the ISA report. Additionally, she emphasized the importance of continuous quality improvement of the DCI, as it will need to be updated toward the end of the year with new data from AY24-25. Dr. Francis clarified that all documents must be submitted by June 2, 2025.

She also presented the plan for the CEPC's upcoming meetings, noting that annual reports and subcommittee reports will be prepared and presented in the fall. Prior phase reviews will be revisited to support ongoing quality improvement efforts, and student satisfaction surveys and outcome data will be analyzed in preparation for the pre-clerkship phase review.

ITEMS FROM STUDENT REPRESENTATIVES MS1/MS2/MS3/MS4

Dr. Francis invited students to share their thoughts or concerns. Kristina Ingles (MS2) asked if faculty could provide a clear outline of the upcoming changes to the SPM summative exams. She explained that having more focused objectives would help students prepare better. Kristina suggested that faculty offer specific, high-priority objectives, so students could focus on key areas without needing to review entire units while learning new material. She addressed her class's concern about the overwhelming number of objectives. Dr. Marwaha proposed compiling the objectives linked to the flashback formatives into a single document. She explained that this would narrow the focus and make the review process more manageable by concentrating on relevant flashback-related objectives instead of overwhelming students with hundreds of objectives

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from each session. The student representative agreed that this would be incredibly helpful.

The MS3 representative, Katherine Asmis, shared that student had met with Dr. Sehgal, and all their concerns were successfully addressed. She expressed the students' gratitude for Dr. Sehgal's outstanding support.

The MS4 representatives were not present.

ITEM I: ITEM I LCME Element 1.1 – Table Updates

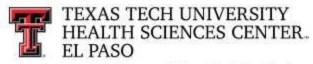
Presenter(s): Dr. Francis

LCME Element 1.1 – Table Update

*Please see attached report

Dr. Francis stated that Table 1.1, introduced during the previous meeting as part of the DCI, which tracks outstanding elements and responsibilities, has been completed and cleaned up. She emphasized that the CEPC will focus on monitoring specific elements related to the curriculum and faculty (slides 5 to 8). Dr. Francis highlighted key areas that the CEPC will prioritize. Specifically, standards 6 and 7 focus on the curriculum content and the instructional methods used for its delivery, while standards 8 and 9 address program assessment and the evaluation of teaching. The CEPC will concentrate on elements related to the curriculum and faculty teaching roles, while other elements will be handled by separate committees.

Furthermore, Dr. Francis explained that many of the elements the CEPC monitors are already integrated into the existing tracking system. For example, she stated that fair and timely grading is constantly checked for compliance, with no room for flexibility. She emphasized that most elements within Standards 6, 7, 8, and 9 are manageable since they align with current practices. However, she suggested adding few new items to



the CEPC's oversight. Specifically, she highlighted pre-medical education requirements. Although regular updates on these requirements are not typically provided, she proposed inviting Dr. Perry every three years to review any changes and outline the current pre-medical requirements, given that while the admissions committee handles most related matters, they cannot alter these requirements without CEPC approval. However, Dr. Perry looked into this matter after the CEPC meeting, and confirmed that the Admissions Committee approves prerequisites with input from the Year 1-2 Committee, but it does not require CEPC approval.

Dr. Francis also noted that technical standards and other policies have been recently reviewed, with nearly all policies updated over the past year. She explained that the LCME Leadership Advisory Committee handles institutional and school-wide matters beyond the curriculum. These matters will be reviewed by this committee and with the strategic planning team. With this framework, Dr. Francis concluded that the current proposal provides sufficient oversight without overwhelming the CEPC.

Dr. Ortiz moves the motion for approval.

Dr. Komal seconds the motion.

No objections: Motion was approved.

ITEM II: General Discussion



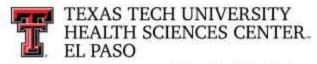
Presenter(s):

Dr. Francis opened the general discussion with the topic of student voice. The focus was on concerns raised by some students regarding inadequate representation on committees. Kristina Ingles noted that students should be involved in both formal and informal discussions about curriculum changes, as decisions often reach the CEPC too late for meaningful input. She proposed having a student present during faculty discussions on curriculum changes to ensure their perspectives are considered.

Dr. Ortiz stated that students had been involved in the process, and Dr. Marwaha noted that initial changes were discussed during monthly meetings with class representatives. She explained that many adjustments were based on course evaluations and feedback from these representatives. Dr. Hogg added that changes are often driven by multiple factors, including accreditation requirements. However, he suggested that communicating the rationale for changes through social media could improve feedback.

Dr. Sehgal confirmed that students are engaged through both formal and informal channels. She also noted that sharing timelines for planned changes would improve visibility, allowing students to see how their input influences both short-term and long-term decisions.

Dr. Francis stressed that there is always room for further consideration and mentioned that some decisions are postponed to future meetings to allow time for additional information or review. She explained that while certain decisions are based on learning theory and prior experience to promote student success, most are informed by student feedback and outcome reviews.



Dr. Francis added that she and Dr. Martin are currently discussing ideas for creating a group to support students returning from a leave of absence. She asked members to let her know if they were interested in joining this effort. She also mentioned that wellness activities will be reinforced. Samuel Aldous supported the idea, saying that social interactions between students and faculty could help students with their residency applications.

Dr. Francis acknowledged students' concerns about the event cards, explaining that students see the system as punitive. She highlighted that the system needs to be revised and stated that event cards are used during the pre-clerkship phase. Dr. Hogg supported the idea of creating a task force to review the system, and students agreed that the focus should shift toward promoting professionalism instead of punishing unavoidable life events. He also mentioned that some schools allow discretionary absences. Dr. Chacon and Dr. Marwaha volunteered to colead the task force, joined by students Kristina Ingles and Salisbury Joshua. The group will report their progress during the pre-clerkship phase review.

Dr. Francis further suggested ways to improve internal communication. She and Dr. Martin discussed holding joint town halls, where students could participate voluntarily and ask questions. Responding to student feedback, Dr. Francis noted that she and Dr. Martin had also introduced out-of-office hours to provide informal opportunities for students to engage with faculty.

Finally, it was announced that Dr. Tyler would be replacing Dr. Ward as the director of the orthopedic surgery sub-internship.

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Dr. Quest moves the motion for approval.

Dr. Chattopadhyay seconds the motion.

No objections: Motion was approved.

ITEM III: I	Policy	Updates
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Presenter(s): Dr. Francis

Educational Program Participation by Non-Faculty

*Please see attached report

Dr. Francis explained that the purpose of this policy is to guide, inform, and regulate the involvement of non-faculty members in medical student instruction. It ensures that professionals such as nurses, librarians, Spanish instructors, midwives, and other healthcare providers can supervise students in their areas of expertise, as long as they are familiar with the learning objectives of the course or clerkship. These non-faculty members must also be prepared for their role and work under the supervision of a faculty member or the course/clerkship director.

Members agreed to vote on the policy electronically and asynchronously.

ADJOURN

Meeting adjourned at 6:30 PM

CEPC Meeting

9/9/2-24

Welcome!

- New faculty members
- New student members

LCME Site Visit Preparation Milestones



CEPC Plan for Upcoming Year

- September to December
 - Annual reports
 - Pre-clerkship
 - Clerkship
 - Sub-committee reports
 - Pre-clerkship
 - Clerkship
 - Evaluation Committee
 - Review recommendations from last pre-clerkship phase review and CQI efforts
- January to June
 - Pre-clerkship phase review of last completed year AY 2023-2024

LCME EI	ement	Review Cycle	
1.3	Mechanisms for faculty participation	3 year cycle	
1.4	Affiliation Agreements	Annual report	
1.6	Eligibility Requirements	3 year cycle – Curriculum as a Whole Review	
3.1	Resident Participation in Medical Student Education	3 year cycle – Clerkship phase review	
3.5	Learning Environment/ Professionalism	Annual report	
3.6	Student Mistreatment	Annual report	
5.5	Resources For Clinical Instruction	3 Year Cycle - Clerkship phase review	
5.6	Clinical Instructional Facilities/Information Resources	Annual CEPC Sub-committee Reports	
5.10	Resources Used By Transfer/Visiting Students	3 year cycle – review included in Annual Report	
6.1	Program and Learning Objectives	3 year cycle with Curriculum as a Whole review	
6.2	Required Clinical Experiences	Annually with syllabus review	
6.3	Self-Directed and Life-Long Learning	3 year cycle with phase reviews	
6.4	Inpatient / Outpatient Experiences	3 year cycle with clerkship phase review	
6.5	Elective opportunities	Annual presentation of new electives/ 3 year cycle for overall review	
6.8	Educational program duration	3 year cycle	

Cultural Competence and Health Care Disparities

Use of Medical Educational Program Objectives

Evaluation of Educational Program Outcomes

Curricular Design, Review, Revision/Content Monitoring

LCME Element

7.0

7.6

7.7

7.8

7.9

8.1

8.2

8.3

8.4

Curricular Content

Medical Ethics

Communication Skills

Curricular Management

Interprofessional Collaborative Skills

7.0	Carricular Content	Annually with Synabas reviews & annual reports	
7.1	Biomedical, Behavioral, Social Sciences	3 year cycle with pre-clerkship phase review	
7.2	Organ Systems/Life Cycle/Prevention/ Symptoms/ Signs/Differential Diagnosis/ Treatment Planning	3 year cycle with Curriculum as a Whole Review/ also reviewed with syllabus updates annually	
7.3	Scientific Method/Clinical/ Translational Research	3 Year Cycle – pre-clerkship phase review	
7.4	Critical Judgment/Problem- Solving Skills	3 year cycle with Curriculum as a Whole Review	
7.5	Societal Problems	3 year cycle with phase reviews/ also reviewed with syllabus updates annually	

Review Cycle

Annually with syllabus reviews & annual reports

3 year cycle with Curriculum as a Whole Review

3 year cycle with Curriculum as a Whole Review

3 year cycle with Curriculum as a Whole Review

3 year cycle with Curriculum as a Whole Review

Annually - all phase reviews & syllabus revisions

Annual reports and annual sub-committee reports

3 year cycle for policy reviews

All phase reviews

LCME	Element	Review Cycle	
8.5	Medical Student Feedback	Annual reports and Subcommittee reports	
8.6	Monitoring of Completion of Required Clinical Experiences	Comparability report and Clerkship Annual report	
8.7	Comparability of Education/ Assessment	Comparability report and Clerkship Annual report	
8.8	Monitoring Student Time	Annual reports	
9.1	Preparation of Resident and Non- Faculty Instructors	Annual clerkship phase sub-committee report	
9.3	Clinical Supervision of Medical Students	3 Year Cycle	
9.4	Assessment System	Annual reports and Subcommittee reports	
9.5	Narrative Assessment	Pre-clerkship and Clerkship Phase Reviews	
9.6	Setting Standards of Achievement	Pre-clerkship and Clerkship Phase Reviews and annual syllabus reviews	
9.7	Formative Assessment and Feedback	Annual reports	
9.8	Fair and Timely Summative Assessment	Annual reports	
9.9	Student Advancement and Appeal Process	3 year cycle with policy reviews	
10.1	Premedical Education/Required Coursework	Annual by Admissions Committee/ Presentation to CEPC on a 3 year cycle	

LCME	Element	Review cycle	
10.3	Policies Regarding Student Selection/Progress and their Dissemination	Admission Committee review annually; GPAS policy reviewed every 3 years	
10.5	Technical Standards	Technical Standards policy reviewed every 3 years	
10.9	Student Assignments	3 year cycle - Clerkship phase subcommittee report	
11.2	Academic Advising	Annual reports	
11.3	Oversight of Extramural Electives	3 year cycle with policy review	

^{***}Compliance with all other standards will be reviewed and discussed at LCME Leadership Advisory Group meetings and referred back to assigned individual/groups for action and follow-up.

General Discussion

- Student Voice
 - Student representation in committees
 - Closing the loop and reporting actions taken based on feedback
- Returning after LOA
 - Possible ad hoc group with CEPC and Student Affairs Committee members to brainstorm ideas for support for returning students after gap
- Wellness Activities
- Event Cards
 - Taskforce to review policy
- Internal Communication
 - Town halls/open forums
 - Newsletter
 - Social media communication
 - Out of Office Hours

CURRICULUM VITAE

Date: May 31st, 2023

Andrew Farley Tyler, MD, PhD

Email: aftyler@gmail.com Phone: (214) 868-8765

Home Address: 2319 Rymers Switch Cir

Friendswood, TX 77546

Office Address: Orthopedics Specialists of Texas

450 Medical Center Blvd, Ste 600B

Webster, TX 77598

NPI #: 1124413646

<u>USMLE #:</u> 52343068

Medical License: T0652 Texas Active (expiration date 5/31/2024)

60909 Tennessee Retired MD464601 Pennsylvania Expired

MT209568 Pennsylvania Expired (training license) C7-0007298 Delaware Expired (training license)

Other Certifications: ATLS Expiration date 11/19/2024

ACLS Expiration date 04/12/2024 BLS Expiration date 05/06/2025

Postgraduate Training and Fellowship Appointments:

8/2020-7/2021 Fellow in Orthopaedic Trauma Surgery

Vanderbilt University Medical Center

7/2016-6/2020 Resident in Orthopaedic Surgery

Hospital of the University of Pennsylvania

6/2015-6/2016 Intern in Orthopaedic Surgery

Hospital of the University of Pennsylvania

Education:

6/2007-5/2015	MD	University of Texas Southwestern Medical Center	Dallas, TX
5/2007-5/2015	PhD	University of Texas Southwestern Medical Center	Dallas, TX

Immunology

9/2005-6/2006 MA Harvard University Cambridge, MA

Chemistry & Chemical Biology

9/2002-6/2006 BA Harvard University Cambridge, MA

Chemistry & Chemical Biology

Employment:

9/2021-present	Partner	Orthopedic Specialists of Texas	Webster, IX

Awards, Honors, and Memberships in Honorary Societies:

2022	Physician of the Quarter
	HCA Houston Healthcare Clear Lake
2020	Emerging Leaders Program
	American Orthopaedic Association
2020	R. Bruce Heppenstall "Know-It-All" Award
	Department of Orthopaedic Surgery, University of Pennsylvania
2014	Senior medical student inductee
	Alpha Omega Alpha honors society

Professional and Scientific Society Memberships:

AOTrauma
Orthopaedic Trauma Association
American Orthopaedic Association
American Academy of Orthopaedic Surgery
Orthopaedic Research Society
American Medical Association
American Physician Scientists Association

Committee positions:

Orthopedic Surgery representative, Trauma Committee, HCA Houston Healthcare Clear Lake, 2021-present

Leadership positions:

Section editor, Spine, University of Pennsylvania Orthopaedic Journal, 2018-2019
 Section editor, Orthopaedic Oncology, University of Pennsylvania Orthopaedic Journal, 2016-2017
 Community Outreach manager, The Monday Clinic (a medical student-run free clinic for the local indigent population of Dallas, TX), UT Southwestern Medical Center, 2009-2010
 President, Harvard University Boxing Club, 2005-2006

Grants:

- **Co-PI** (with Derek Donegan, MD), Foundation of Orthopaedic Trauma (FOT) Grant #6017-11: "Effect of Local Anesthetic on Fracture Healing in an Animal Model"; \$18,490
- **PI**, NINDS F31 Predoctoral Fellowship #5F31NS076081: "Immunotherapy Induced Regulation of Demyelinating Disease"; \$58,564
- **Recipient fellow**, T32 Institutional Training Grant #5T32Al005284: "Integrative Immunology Training Grant"
- **Recipient fellow**, T32 Institutional Training Grant #5T32GM008014: "Medical Scientist Training Program"

Courses:

2023	Intro to Direct Anterior Course	Stryker	Las Vegas, NV
2022	Soft Tissue & Flaps Course	OTA	Tampa, FL
2021	OTA Fellow's Course	OTA	Virtual
2020	Advanced Case Controversies for Residents	OTA	Virtual
2020	SPDI Preparing for Practice	SPDI	Weehawken, NJ
2019	Trauma Advanced Principles	AONA	Glendale, AZ
2019	Trauma Resident Education Course	Stryker	Mahwah, NJ
2018	Surgical Approaches for Internal Fixation	Smith & Nephew	Memphis, TN
2017	Principles of Fracture Management	AONA	Chicago, IL
2017	Residents' Knee & Hip BioSkills Event	Zimmer Biomet	Philadelphia, PA
2015-19	Surgical Approaches Workshop	Johnson & Johnson	West Chester, PA

Meetings:

2022	Orthopaedic Trauma Association Annual Meeting	Tampa, FL
2020	Orthopaedic Trauma Association Annual Meeting	Virtual
2020	Foundation for Orthopaedic Trauma Annual Meeting	Las Vegas, NV
2018	Eastern Orthopaedic Association Annual Meeting	Amelia Island, FL
2018	Orthopaedic Trauma Association Annual Meeting	Orlando, FL
2011	American Association of Immunologists Annual Meeting	San Francisco, CA
2010	Rare Neuroimmunologic Disorders Symposium	Dallas, TX
2009-2013	UTSW Department of Pathology Annual Retreat	Dallas, TX
2009-2013	UTSW Immunology Graduate Program Annual Retreat	Dallas, TX
2007-2015	UTSW Medical Scientist Training Program Annual Retreat	Dallas, TX

Bibliography:

Peer-reviewed publications:

- **Tyler AF**, Vincent C, Steven NM, Payton H, Boyce RH, Collinge CA, Mitchell PM. "Hands-free femoral traction using the Bookwalter retractor system during anterior approaches to the acetabulum." *J Orthop Trauma* Mar 2023; 37(3): e135-8.
- Steven NM, **Tyler AF**, Mitchell PM, Stinner DJ. "Preoperative and intraoperative considerations using intramedullary nails for the treatment of tibial shaft fractures below total knee arthroplasty." *J Orthop Trauma* Nov 2022; 36(11): e437-41.
- Steven NM, **Tyler AF**, Boyce RH, Mitchell PM. "Extra-articular unstable iliac fractures: Associated injuries, fixation strategies, and outcomes." *J Orthop Trauma* Jul 2022; 36(7): 339-42.
- **Tyler AF**, Ahn J, Donegan DJ. "Local infiltrative analgesia of murine femur fractures in vivo does not inhibit fracture healing." *Cureus* 14(3): e23569.
- **Tyler AF**, Rose T, Day S, Kenia J, Horan AD, Mehta S, Donegan DJ. "Comparison of spatiotemporal gait parameters in patients following operative treatment of trimalleolar ankle fractures at six months versus healthy controls." *Foot & Ankle Orthopaedics* 30 Jun 2020; 5(3): 1-7.
- **Tyler AF**, Mendoza JP, Firan M, Karandikar NJ. "CD8⁺ T cells are required for glatiramer acetate therapy in autoimmune demyelinating disease." *PLoS One* 21 Jun 2013; 8(6): e66772.
- Ortega SB, Kashi VP, **Tyler AF**, Cunnusamy K, Mendoza JP, Karandikar NJ. "The disease-ameliorating function of autoregulatory CD8⁺ T cells is mediated by the targeting of encephalitogenic CD4⁺ T cells in experimental autoimmune encephalomyelitis." *J Immunol* 1 Jul 2013; 191(1): 117-26.

- York NR, Mendoza JP, Ortega SB, Benagh A, **Tyler AF**, Firan M, Karandikar NJ. "Immune regulatory CNS-reactive CD8⁺ T cells in experimental autoimmune encephalomyelitis." *J Autoimmun* Aug 2010; 35(1): 33-44.
- Fleisig HB, Orazio NI, Liang H, **Tyler AF**, Adams HP, Weitzman MD, Nagarajan L. "Adenoviral E1B55K oncoprotein sequesters candidate leukemia suppressor sequence-specific single-stranded DNA-binding protein 2 into aggresomes." *Oncogene* 19 Jul 2007; 26(33): 4797-805.
- Bernal F, **Tyler AF**, Korsmeyer SJ, Walensky LD, Verdine GL. "Reactivation of the p53 tumor suppressor pathway by a stapled p53 peptide." *J Am Chem Soc* 7 Mar 2007; 129(9): 2456-7.

Non-peer-reviewed publications:

- Tyler A, Lopas L, Ahn J. "Bone, Cartilage, and Tendon Healing." Rockwood & Green On-Call 2020.
- **Tyler A**, Arlet V. "Tips & Tricks: Increasing Sacropelvic Fixation with the "Four Rods" Technique in Parkinson's-Related Camptocormia." *UPOJ* June 2019; Vol 29: 89-91.
- **Tyler A**, Weber K. "Tips & Tricks: Prophylactic Femoral Nailing for Metastatic Carcinoma." *UPOJ* June 2017; Vol 27: 113-4.

Review articles:

Mehta S, **Tyler A**, Hast M. "Understanding the Basics of Computational Models in Orthopaedics: A Nonnumeric Review for Surgeons." *JAAOS* Oct 2017; 25(10): 684-92.

Book chapters:

- **Tyler A**, Kelly AM, Ott N, Kelly MP, Miller L, Kelly JD. "Arthroscopic Cuff Repair Set Up and Fundamentals". *Premier Approaches to Arthroscopic Rotator Cuff Repair*. 2020, SLACK Incorporated.
- Lopas L, **Tyler A**, Mehta S. "Extracapsular Hip Fractures". *Evidence Based Orthopaedics*, 2nd edition. 2021, Wiley-Blackwell.
- Tsai C, **Tyler A**, Baldwin K. "Orthopedic Devices". *Emergency Management of the High-Tech Patient in Acute and Critical Care*. 1st edition. 2021, Wiley-Blackwell.

Abstracts:

- **Tyler A**, Ahn J, Donegan D. "Local infiltrative analgesia of murine femur fractures in vivo does not inhibit fracture healing." *Orthopaedic Trauma Association Annual Meeting* Oct 2020.
- **Tyler A**, Sloan M, Sheth N, Donegan D. "General anesthesia increases complications following hip fracture surgery." *Eastern Orthopaedic Association Annual Meeting* Oct 2018. https://datatrace.gatherdigital.com/apps/1402/gatherings/4389/events/922014?breakout=921911
- Kashi V, Ortega S, **Tyler A**, Karandikar N. "Modulation of dendritic cell function by neuroantigen-specific CD8⁺ T cells." *J Immunol* May 2013; 190: 127.4.
- Ortega S, Kashi V, **Tyler A**, Mendoza J, Cunnusamy K, Karandikar N. "Autoregulatory CD8⁺ T cells modulate CNS autoimmunity by targeting encephalitogenic CD4 T cells." *J Immunol* May 2013; 190: 191.11.
- Ortega S, **Tyler A**, Kashi V, Mendoza J, Benagh A, Karandikar, N. "Treatment of autoimmune demyelination by autoregulatory CD8⁺ T-cells." *J Immunol* Apr 2011; 186: 115.24.
- **Tyler A**, Mendoza J, Ortega S, Firan M, Karandikar N. "CD8⁺ T-cells are required for the action of glatiramer acetate therapy for autoimmune demyelinating disease." *J Immunol* Apr 2011; 186: 164.19.

Bernal F, Walensky LD, **Tyler AF**, Korsmeyer SJ, Verdine GL. "Selective targeting of the p53-hDM2 interaction using hydrocarbon-stapled p53 peptides." Blood Nov 2006; 108(11); 159A-159A.

Other publications:

Tyler A. CD8⁺ T Cells Are Required for the Therapeutic Action of Glatiramer Acetate in Autoimmune Demyelinating Disease. *Doctoral Thesis*, UT Southwestern Electronic Theses and Dissertations, March 2013.

Presentations/lectures:

Research presentations:

- **Tyler A**, Ahn J, Donegan D. (2020). "Local infiltrative analgesia of murine femur fractures in vivo does not inhibit fracture healing." *Presented at*: Orthopaedic Trauma Association Annual Meeting, Virtual.
- **Tyler A**, Ahn J, Donegan D. (2020). "The effect of local anesthetic on fracture healing in an animal model." *Presented at*: Foundation for Orthopaedic Trauma Annual Meeting, Las Vegas, NV.
- **Tyler A**, Ahn J, Donegan D. (2019). "The effect of local anesthetic on fracture healing in an animal model." *Presented at*: Research Day, University of Pennsylvania, Philadelphia, PA.
- **Tyler A**, Sloan M, Sheth N, Donegan D. (2018). "General anesthesia increases complications following hip fracture surgery." *Presented at*: Rapid Fire Session 4E Hip Arthroscopy/Hip Fractures, Eastern Orthopaedic Assocation Annual Meeting, Amelia Island, FL.
- **Tyler A.** (2013). "CD8⁺ T Cells Are Required for the Therapeutic Action of Glatiramer Acetate in Autoimmune Demyelinating Disease." *Thesis Defense presented at*: University of Texas Southwestern Medical Center, Dallas, TX.
- **Tyler A**, Mendoza J, Ortega S, Firan M, Karandikar N. (2011). "CD8⁺ T-cells are required for the action of glatiramer acetate therapy for autoimmune demyelinating disease." *Presented at*: American Association for Immunologists Annual Meeting; San Francisco, CA.
- **Tyler A**, Mendoza J, Ortega S, Firan M, Karandikar N. (2011). "CD8⁺ T-cells are required for the action of glatiramer acetate therapy for autoimmune demyelinating disease." *Presented at*: UT Southwestern Medical Center Department of Immunology Annual Retreat; Dallas, TX.

Poster presentations:

- Moreno AF, Obudzinski S, Taylor PR, **Tyler AF**, Chen A, Obremskey WT, Southeastern Fracture Consortium. (2022). "Management of femur and tibia shaft fractures in chronic spinal cord injury patients." *Presented at*: Orthopaedic Trauma Association Annual Meeting; Tampa, FL.
- **Tyler A**, Ahn J, Donegan D. (2020). "Direct infiltration of femur fractures with local anesthetic does not reduce callus formation in an animal model." *ePoster presented at*: American Academy of Orthopaedic Surgeons Annual Meeting.
- Kashi V, Ortega, S, **Tyler A**, Karandikar N. (2013). "Modulation of dendritic cell function by neuroantigen-specific CD8⁺T cells." *Presented at*: American Association for Immunologists Annual Meeting; Honolulu, HI.
- Ortega S, Kashi V, **Tyler A**, Mendoza J, Cunnusamy K, Karandikar N. (2013). "Autoregulatory CD8⁺ T cells modulate CNS autoimmunity by targeting encephalitogenic CD4⁺ T cells." *Presented at*: American Association for Immunologists Annual Meeting; Honolulu, HI.

- Ortega S, **Tyler A**, Kashi V, Mendoza J, Benagh A, Karandikar N. (2011). "Treatment of autoimmune demyelination by autoregulatory CD8⁺ T-cells." *Presented at*: American Association for Immunologists Annual Meeting; San Francisco, CA.
- **Tyler A**, Mendoza J, Ortega S, Firan M, Karandikar N. (2011). "CD8⁺ T-cells are required for the action of glatiramer acetate therapy for autoimmune demyelinating disease." *Presented at*: UT Southwestern Medical Center Department of Immunology Annual Retreat; Dallas, TX.
- **Tyler A**, Mendoza J, Ortega S, Firan M, Karandikar N. (2011). "CD8⁺ T-cells are required for the action of glatiramer acetate therapy for autoimmune demyelinating disease." *Presented at*: American Association for Immunologists Annual Meeting; San Francisco, CA.

Lectures:

- **Tyler A**. (2021). "Acetabular fractures." *Presented at*: Orthopaedic Surgery Resident Conference, Vanderbilt University, Nashville, PA.
- **Tyler A**. (2020). "Ballistic trauma for the orthopaedic surgeon." *Presented at*: Orthopaedic Surgery Resident Conference, University of Pennsylvania, Philadelphia, PA.
- **Tyler A**. (2019). "Geriatric Fragility Fractures." *Presented at*: Orthopaedic Surgery Grand Rounds, University of Pennsylvania, Philadelphia, PA.
- **Tyler A**. (2018). "The SPRINT Trial." *Presented at*: Orthopaedic Surgery Grand Rounds, University of Pennsylvania, Philadelphia, PA.
- **Tyler A**. (2017). "Delayed Union, Malunion, and Nonunion." *Presented at*: Orthopaedic Surgery Grand Rounds, University of Pennsylvania, Philadelphia, PA.
- **Tyler A**. (2016). "Supracondylar Humerus Fractures: Past and Present." *Presented at*: Orthopaedic Surgery Grand Rounds, University of Pennsylvania, Philadelphia, PA.



Medical Education Program Policy

Policy Name:	Educational Program Participation by Non-Faculty					
Policy Domain:	Instructional Methods and Resources LCME Elements: 9.1					
Approval Authority:	Curriculum and Educational Policy Committee	Date First Adopted:	9/19/2016	Date Last Reviewed:	3/6/2017	
Responsible Executive:	Assoc. Dean for Med Ed	Date Last Revised:	3/6/2017			
Responsible Office:	Office of Med Ed	Contact:	Mirjana Babic M.	.P.A. mbabic	@ttuhsc.edu	

- Policy Statement: Involvement by non-faculty in medical student instruction is to be strictly limited and centrally monitored. <u>See also the related educational program</u> policy entitled: "Clinical Supervision of Medical Students".
- 2. **Reason for Policy**: This policy is intended to guide, inform, and regulate the involvement of non-faculty in medical student instruction.
- 3. Who Should Read this Policy: This policy should be read by all Course/Clerkship
 Directors, Faculty, and Course/Clerkship Coordinators involved in curricular elements
 that may include participation in instruction by non-faculty
- 4. Resources: None
- 5. **Definitions**:
 - a. "Non-faculty": For the purposes of this policy, "non-faculty" refers to physicians, therapists, nurses, other health care providers, scientists, technicians, and other individuals with special skills and/or expertise that are relevant to a well-rounded medical education, who are not appointed to the faculty of the Paul L. Foster School of Medicine and who are not post-graduate trainees affiliated with the Paul L. Foster School of Medicine or any academic component of the Texas Tech University Health Sciences Center El Paso.
 - This term does not apply to teaching staff or librarians working in their area of expertise who are employed by the medical school dean to enhance the medical education program. For example, senior teachers who lead the Spanish language courses designed to improve the communication skills of the medical students in our border region and librarians who teach medical students in their area of expertise on topics including medical literature searches and analysis of the literature.
 - Please note that non-physician providers, such as nurses, nurse practitioners, physician assistants, midwives and other health professionals may supervise medical students in their area of expertise



Paul L. Foster School of Medicine provided they are familiar with the learning objectives of the course or clerkship and are prepared for their role in teaching and assessment and perform these duties under the supervision of a faculty member and/or the course or clerkship director.

6. The Policy:

General principles related to non-faculty participation in the educational program:

Almost all instruction and facilitation in the required curricular components of the Paul L.

Foster School of Medicine <u>pre-clerkship phase are educational program is to be provided by appropriately designated members of the faculty or teaching staff-its faculty.</u>

All <u>clinical experiences in the required clerkships</u> required curricular components (courses, clerkships, other graduation requirements) and their associated instructional sessions and educational experiences must be <u>are</u> supervised by the appropriately designated members of the faculty.

At the session level, and within the centrally-determined curriculum plan and operational management, learning objectives, instructional methods, and student assessment are to be determined by the appropriately designated members of the faculty and teaching staff.

Participation in student assessment:

- Only faculty or teaching staff under the direction of faculty may make final summative assessments of medical student core/required clinical skills.
- Only faculty and teaching staff (regarding Spanish instruction) may determine final course grades in the pre-clerkship phase.
- Librarians may make final summative assessments of medical students in the electives that they teach in their area of expertise.
- Only faculty may determine clerkship grades, fulfillment of graduation requirements, and determinations of competency in core domains (see also the section below entitled: "Limits on assessment of student performance/feedback").

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CEPC Approved March 6, 2017

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At the session level, and within the centrally-determined curriculum plan and operational management, learning objectives, instructional methods, and student assessment are to be determined by the appropriately designated members of the faculty.

Prohibitions related to non-faculty participation in the educational program:

<u>Design of curriculum management</u>, instruction, and assessment: Although faculty may consult with non-faculty in preliminary discussions, non-faculty shall not participate in the final determination of curriculum plans, course/curricular component management, learning objectives, instructional methods, or student assessment. More specifically:

- <u>Development of learning objectives</u>: Although faculty members may consult withnon-faculty in the development of formal learning objectives related to their area(s) of experience and expertise, non-faculty may not develop or propose formal learning objectives.
- Development of student assessments: Although faculty members may consult with non-faculty in the development of medical student assessments, non-faculty may not develop or propose medical student assessments, and non-faculty may notparticipate in the summative assessment of medical students.
- <u>Participation in student assessment</u>: Non-faculty may not make final summative assessments of medical student core/required clinical skills. Conversely, only faculty may determine course/clerkship grades, fulfillment of graduation requirements, and determinations of competency in core clinical skills (see also the section below entitled: "Limits on assessment of student performance/feedback").

Terms for and limits on participation:

Participation in formal components of the medical education program by non-faculty (as defined above) may be approved by a course/clerkship director under the following conditions:

- Relevant skills and experience: The non-faculty individual(s) possess verified skills
 and/or expertise that are directly relevant to their proposed participation. For health
 care professionals, this refers to relevant proof of licensure (required for any
 experiences occurring in an actual clinical environment) and/or state or national
 certification in their relevant area of expertise.
- <u>Preparation and supervision of non-faculty participants</u>: Preparation and supervision
 of non-faculty participants in medical student education is the responsibility of the



Paul L. Foster School of Medicine relevant Course/Clerkship Director(s). All non-faculty participants are to be provided with an explanation of the sessions and/or experiences in which they are participating as well as a copy of the associated learning objectives. Non-faculty participants are also to be provided an explanation of any feedback and/or information regarding student participation they are expected to provide. In addition, the Course/Clerkship Director is expected to inform the non-faculty participants of the basic expectations regarding the enhancement and preservation of a positive, growth-oriented learning environment and the strict avoidance of student mistreatment/abuse. Student evaluations of their experiences with non-faculty participants are to be reviewed by the Course Director(s). Potential non-faculty participants who do not acknowledge and accept the above described above-described preparation and supervision are to be excluded from participation in the medical education program.

- <u>Limits on assessment of student performance/feedback</u>: Student assessment by non-faculty participants in medical student instruction and/or facilitation shall be formative, or limited to confirmation of, and/or comment upon, the student's attendance and active engagement in the educational experience. Additionally, non-faculty participants may be asked to confirm or comment upon the basic appropriateness of the student's professional behavior and communication skills.
 - Note: The faculty member(s) responsible for an educational experience involving participation by non-faculty are responsible for assessment of the student's achievement of the associated learning objectives and the completion of any required experiences.
- Discretion of the Course/Clerkship Director and limits on the duration of non-faculty participation for non-faculty physicians: For physicians, participation by any individual non-faculty must be directly related to their areas of professional expertise and experience. In addition, and within the constraints as otherwise outlined in this policy, participation is at the discretion of the course or clerkship director in an educational setting. Non-faculty physicians may not serve as community-based preceptors in a clinical setting for required experiences in the preclerkship phase or required clerkships. Also, participation by any individual non-faculty physician as a community-based preceptor is limited to no more than 20-hours with any individual student per academic year, and less than 60-hours in total per academic year.
 - For example, the Medical Director of the Public Health Department who does not have a faculty appointment would be permitted to participate as a guest in a panel related to environmental health hazards.

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- <u>Discretion of the Course/Clerkship Director and limits on the duration of non-faculty participation non-faculty who are not physicians</u>: For non-physicians, participation must be directly related to the non-faculty individual's special and desired expertise and/or experience, and participation is at the discretion of the course or clerkship director (within the constraints as otherwise outlined in this policy).
- Requirement of faculty appointment prior to exceeding the duration of non faculty participation limits: All physician non-faculty who agree to participate, and whointend to provide more than the limited number of hours listed above, must obtain a



Paul L. Foster School of Medicine PLFSOM faculty appointment prior to exceeding the non-faculty contact hour limits.

- Encouragement of all non-faculty to apply for appointment: All non-faculty who
 agree to participate in medical student instruction and/or facilitation on a recurring
 annual basis, regardless of the number of hours per year, are to be encouraged, if
 eligible, to apply for a non-salaried/volunteer PLFSOM faculty_appointment.
- Termination of participation by educational program administration: The participation by any non-faculty shall be terminated by the Course/Clerkship Director or, if appropriate or necessary, the Associate Dean for Medical Education or their designee, if the non-faculty participant does not function in accordance with the intent of the educational experience in which they are invited to participate, or if their behavior is disruptive or inconsistent with the school's intent to provide a professional and supportive learning environment.
- <u>Central monitoring</u>: Participation by non-faculty shall be centrally monitored at least annually by the Office of Medical Education (including their qualifying credentials, the hours of instruction and/or facilitation provided, and student evaluations regarding the instruction and/or facilitation provided).

Examples/explanations of some intended applications of this policy:

Early/pre-clerkship phase clinical experiences: Early clinical experiences are a required component of the PLFSOM pre-clerkship curriculum. These experiences are designed, managed, and assessed by members of the faculty of the PLFSOM Department of Medical Education. It is the intention of this CEPC that all or most of these experiences occur in community-based settings, away from the school's primary academic medical campus. In addition, the CEPC expects that all or most of these experiences shall be facilitated by non-salaried/volunteer members of the PLFSOM faculty. However, some of these experiences involve health professionals who either do not qualify for appointment to the PLFSOM faculty, are in the process of applying, or who contribute such limited and infrequent time and effort that the time and effort required to obtain and maintain a faculty appointment may be reasonably considered onerous.

<u>Clerkship phase</u>: In the clerkship phase of the curriculum there are structured experiences that may be facilitated by non-faculty health professionals functioning within the instructional design of appropriately designated PLFSOM faculty (e.g. clerkship director or assistant director). These experiences occur within the oversight, supervision and assessment of student performance/completion by PLFSOM faculty. These include selective experiences that occur within the context of the clinical settings of the clerkships.