



**Undergraduate Medical Education
Cumming School of Medicine
University of Calgary**

Curriculum Review

Public Report

July 2016

Program Background

The Faculty of Medicine of the University of Calgary was founded in 1967, with the first class of 32 undergraduate medical education students beginning in 1970 in a unique three year curriculum. The current enrolment of new students is 155 which has decreased from peak enrollment of 180 for the class of 2012 due to a reduction in government funding. In 2014, the Faculty was renamed the Cumming School of Medicine (CSM) in recognition of a \$100m donation by Geoffrey Cumming, which was matched by the Province of Alberta.

The three year program is comprised of pre-clerkship courses (Years 1 & 2) and clerkship clinical experiences (Year 3). Required courses dominate Years 1 and 2 of the program, with 4 weeks of course electives occurring at the end of Year 2. The instructional formats for Year 1 and 2 courses include lectures, labs and small group work. In Year 3, students rotate through 8 required discipline-specific clinical learning experiences at various clinical instruction sites (eg. hospitals, clinics, etc), -with 12 weeks dedicated to clerkship electives. Students in Year 3 are also required to complete Course 8 – Comprehensive Clinical Skills Curriculum for Clerkship. There is also the option of participating in the University of Calgary Longitudinal Integrated Clerkship (UCLIC) which allows students to experience 9 months of their clerkship at one rural site, with the remaining 3 months completed in the traditional stream. The learning objectives and evaluations are the same for UCLIC and the traditional program.

The school's original undergraduate curriculum used a 'Systems-Based' curricular model which encouraged interdisciplinary teaching with equal time allocated to didactic sessions, small group case-based learning and independent study time. Building on the strengths of this curricular model, the medical school modified its curriculum to a 'Clinical Presentation' curriculum in the mid-1990s. This innovative model, which has now been adopted by over 15 other medical schools worldwide, structures teaching around the 120+/- 5 ways a patient can present to a physician.

Faculty and students recommended changes beginning in August 2006 that further strengthened the curriculum. Courses were linked to graduation objectives (see <http://www.ucalgary.ca/mdprogram/about-us/big-10-graduation-educational-objectives>) and UME program philosophy of teaching, learning and evaluation. Linkage of courses better integrated Clinical Presentations across systems (horizontal integration), emphasized schemes as a powerful knowledge organization teaching tool, and reduced redundancies. Significant changes occurred to the evaluation process, with reduced frequency of summative examinations in the pre-clerkship, increased frequency of formative examinations, and specific time allotted for faculty assisted review or independent study prior to each certifying exam for most pre-clerkship courses. Improvements to the curriculum continue to be made on a regular basis based on course evaluations, instructor feedback, and external accreditation requirements.

