

	<p>email-blasts, table at the Student Activities Fair</p> <ul style="list-style-type: none"> • Webmaster – updating the [REDACTED] blog on a bi-weekly basis. [REDACTED] • Writing the results section of and creating the poster for the abstract: T [REDACTED] [REDACTED] [REDACTED] • Writing the results and discussion section of the manuscript: [REDACTED] [REDACTED] • Editing the 2012 AOA Medical Student Service Leadership Project Award Application: [REDACTED] [REDACTED] <p>2011 – Present</p>
Type of Project	Comprehensive curricular program
Number of people affected (Quantity)	<ul style="list-style-type: none"> • 50 students have participated as [REDACTED] scholars and/or peer mentors • 24 additional Icahn SOM students have participated in the [REDACTED] [REDACTED] • 8 faculty mentors • Numerous staff and clients of the six community based organizations
Goals	<p>Goals: The goal of the [REDACTED] is to train students to push the paradigms of translational research and medicine into community and global advocacy, policy and action.</p> <p>The scholars objectives:</p> <ul style="list-style-type: none"> • Gain knowledge in a human rights-based approach to health • Develop skills in advocacy, policy analysis and community based organization partnership • Conduct in-depth research related to human rights and social justice issues in health • Participate in a individualized faculty and student mentorship • Recognize how physicians develop careers dedicated to promoting social justice and health equity
Preparation	[REDACTED] program was developed based on [REDACTED] [REDACTED] discussions with peers, meetings with several

	<p>faculty members, as well as investigations of current literature (see references below). The main areas of need we established included the following:</p> <ul style="list-style-type: none">(1) Knowledge in a human rights-based approach to health(2) Skills in advocacy, policy analysis and community based organization partnership(3) Structured service experience(4) Research opportunities in human rights and social justice issues(5) Mentorship <p>References:</p> <ol style="list-style-type: none">1. Author 1, Author 2, Author 3. Med Ed Publication Title. Acad Med. 2013; XX(10):1442-1449.2. Author 1, Author 2, Author 3. Med Ed Publication Title. Acad Med. 2013; XX(10):1442-1449.3. Author 1, Author 2, Author 3. Med Ed Publication Title. Acad Med. 2013; XX(10):1442-1449.4. Author 1, Author 2, Author 3. Med Ed Publication Title. Acad Med. 2013; XX(10):1442-1449.
Methods	<p>We created a multifaceted curriculum consisting for five components in order to achieve our goals:</p> <ul style="list-style-type: none">• Coursework—Each student participates in the [REDACTED] [REDACTED] elective, an eight week case based course, which serves as the didactic underpinning for social justice and human rights theory, concepts, and case-studies.• Mentorship--Each student is paired with a faculty mentor who works with the student throughout the year to identify or create a social justice research project, and facilitate career / academic advice.

	<ul style="list-style-type: none"> • Research—Each student conducts a summer research project broadly related to a social justice issue of his/her choice. • Service and Advocacy—Each student conducts a health advocacy/policy service project with a community based organization or coalition in East Harlem. He/she gain an understanding of current community-based approaches to serving the health and social service needs of the East Harlem community and learn how to support these efforts. Each student projects directly benefits the organization with which he/she works. The community organizations include East Harlem Community Health Committee, Union Settlement, Boriken Community Health Center, SMART University, Harlem Community and Academic Partnership and the East Harlem Emergency Preparedness collaborative. • Career Series--Two career talks take place each year to expose students to physicians who have dedicated their careers to social justice.
<p>Evaluation</p>	<p>██████████ 2011-12 cohort was evaluated with multiple measures.</p> <ul style="list-style-type: none"> • Scholar reflection session – As an active leader for the 2011-12 ██████████ I organized and proctored reflections sessions. At each session scholars provided critical feedback of the program. • Pre- and Post-██████████ Surveys – The 2011-12 scholars completed a 25-question multiple-question survey at the beginning and end of the program. The survey assessed scholars’ attitudes, knowledge and skills, professional interest, service experience, research experience, and mentorship experience • ██████████ Preclinical Effectiveness Questionnaire – The graduated 2011-12 scholars in their third-year of medical school completed 16-question questionnaire. The questionnaires examined their clinical experiences, attitudes, advocacy knowledge and skills, and professional interests, and assessment of ██████████. <p>██████████ continues to be evaluated using both quantitative and qualitative data by the current active-leadership team.</p>
<p>Evidence of Quality</p>	<ul style="list-style-type: none"> • Pre- and Post-██████████ Surveys – Pre-evaluations from ██████████ participants indicated need for education, service and research opportunities, and mentorship in human rights. Qualitatively, evaluations demonstrated gains in participant

	<p>knowledge and skill. Students reported increased confidence in defining and describing important issues in human rights and in analyzing health and medical issues from a human rights perspective. In assessing attitudes towards social justice in medicine as well as professional interests, students have also reported that [REDACTED] has influenced the way they perceive their roles as physician-advocates in the healthcare system. Increases were seen in students' confidence of having the necessary skills to plan an advocacy campaign and to advocate on behalf of their future patients. (See Appendix for survey results)</p> <ul style="list-style-type: none">• [REDACTED] Preclinical Effectiveness Questionnaire – Results indicate that the program was well received by participants with the vast majority highly recommending the program to incoming medical students. On a scale of 1 to 10 (1=worst, 10=best) the mean was 7.9. Furthermore, results demonstrate that [REDACTED] has had a lasting positive impact on participants' attitude towards medicine, their self-perception as physicians, and professional interests. The program also provided them with knowledge and advocacy skills applicable to their clinical experiences in third-year. (See Appendix for survey results)
Evidence of Dissemination	<p>Icahn School of Medicine Medical Education Grand Rounds: [REDACTED] [REDACTED] [REDACTED]</p> <p>Manuscripts [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]</p>

II. TEACHING AND TUTORING

DIRECT TEACHING AND TUTORING WORKSHEET

A. Teaching Activities #1

Title of teaching activity	<p>_____</p> <p>_____) I worked as a team leader, patient coordinator and clinical educator in the E _____</p> <p>_____ My primary teaching responsibilities included a quarterly women's health pre-clinic didactic session, as well as individualized student-clinician support during clinic. During my time as _____ I developed two Women's health lesson plans on the topics of Dyspareunia and Vulvovaginitis.</p>
Your teaching role	Lecturer and one-on-one tutor
Co-teacher/ developer	Not applicable
Level of learner	Medical students (Years 1- 4)
Contact with Learners (Quantity)	<p>Total hours of direct teaching: 4; Total # of learners: 20</p> <ul style="list-style-type: none"> • Four 25-minute pre-clinic didactics. Approximately 5 different medical students (years 1-4) attended each session. • Additional informal one-on-one teaching took place during clinic based on students needs.
# Years Teaching	1 year (2013-14)
Goals	<p>My educational goals as _____ were to provide student-clinicians with the knowledge and skills to practice thoughtful, cost-conscious, patient-centered care with an emphasis on women's health.</p> <p>The goals of my Pre-Clinical lesson plans:</p> <ul style="list-style-type: none"> • <u>Dsypareunia</u>: To educate students on the impact, causes and treatments of dyspareunia, as well as minimize their discomfort discussing the topic with patients. • <u>Vulvovaginitis</u>: To educate students on the different causes, signs, symptoms and treatments of vulvovaginitis.
Methods	<p>Pre-Clinic didactics:</p> <ul style="list-style-type: none"> • I used a combination of direct lecture, and case-based discussions to teach my lesson to a small group of students.

I included visual aids, such as slides, posters and worksheets to engage learners, and assessed their knowledge at the end of each session with quiz.

- I participated in [REDACTED] 3-day workshop on how to effectively teach adult learners, and modified my lessons accordingly.

In-Clinic teaching:

- I provided one-on-one teaching based on the clinicians individual needs, topics include the breast and pelvic exam, screening guidelines, the referrals process and cost-conscious medicine.
- In addition, while in clinic I strived to be a role-model clinician and patient advocate to teach by example.

Evidence of Quality

Qualitative data:
As a result of the positive feedback I received from student clinicians at EHHOP WHC I was offered the following teaching and leadership opportunities.

[REDACTED]

Letter(s) of support:

[REDACTED]

[Redacted text block containing multiple lines of blacked-out text]

MS4 (Senior clinician)

MS3 (Junior clinician)

Evidence of Dissemination

The Dyspareunia and Vulvovaginitis lesson plans and materials I created will be available through the [Redacted]
[Redacted]
(See Appendix for lessons)

	<p>The "How to Read a Food Label", and "Diabetes" lesson plans and materials I creates for continue to be used by the current leaders of HEI. (See Appendix for lessons)</p>
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A. Teaching Activities #3

Title of teaching activity	██████████ Teaching Assistant As a TA I developed and taught several review sessions for the first-year ██████████ course. These class presentations were added to MedEd Portal for students review. I also provided small group and one-on-one tutoring during students' Histology labs.
Your Teaching role	Lecturer, small group and individual tutor
Co-teacher/ developer	██████████
Level of learner	First-year medical students
Contact with Learners (Quantity)	Total hours of direct teaching: 9; Total # of learners: 80 <ul style="list-style-type: none"> • Three 1-hour review sessions taught to approximately 40 students. • Three 2-hour in lab tutoring sessions. I taught approximately 10 different students during each lab session.
# Years Teaching	1 year (2011-2012)
Goals	My goal was to reinforce the concepts and skills taught during students faculty taught ██████████ lectures. The objective of my review and tutoring sessions was for students to identify and understand the function of the various tissues and cells that comprise the organ systems of the human body.
Methods	Review sessions: <ul style="list-style-type: none"> • Lecture with PowerPoint presentation and handouts as aids Lab tutoring sessions: <ul style="list-style-type: none"> • A combination of direct didactic, Q&A and case-based learning
Evidence of Quality	Medical Student Excellence in Teaching Award from the Institute for Medical, May 2012 <ul style="list-style-type: none"> • The award was granted to myself and fellow ██████████ <u>Letter(s) of support:</u> ██████████

	<p>[REDACTED]</p> <p>[REDACTED] MS4</p>
Evidence of Dissemination	<p>Three review session PowerPoint presentations (Microscope & Stains, Epithelia, and Connective Tissue) were added to MedEdPORTAL. (See Appendix for lessons)</p>

B. Quantifiable Teaching Data

Year	Direct Teaching Experience
Year 1 (2010-11)	<ul style="list-style-type: none">• [REDACTED]• [REDACTED]• [REDACTED]
Year 2 (2011-12)	<ul style="list-style-type: none">• [REDACTED][REDACTED][REDACTED][REDACTED][REDACTED]
Year 3 (2012-13)	<ul style="list-style-type: none">• [REDACTED]
Year 4 (2013-14)	<ul style="list-style-type: none">• [REDACTED]• [REDACTED]• [REDACTED]

C. Overall Evidence of Teaching Quality

Awards: Medical Student Excellence in Teaching Award from the Institute for Medical, [REDACTED]

Additional Quantitative:

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Additional Qualitative Data:

In addition to the letters of support described above I have received positive verbal feedback from students in various settings, peers, administrators from outside institutions, and Icahn faculty. As a result, I have been asked to co-facilitate ASM I and II sessions. Thus, far I have facilitated 3 ASM sessions, which have been well received according to my co-facilitators and students.

III. INNOVATIVE CURRICULUM DESIGN AND/OR ASSESSMENT

INNOVATIVE CURRICULUM DESIGN AND/OR ASSESSMENT WORKSHEET

Brief description of curriculum or assessment product	<p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED] developed an orientation curriculum and peer-mentorship program to provide incoming [REDACTED] students with the knowledge and skills needed to be confident and effective at the start of the clerkship. During the two-day orientation, we trained students to understand the expectations of each clinic, where to access pertinent information and how to maximize utility of the electronic medical record. We provided students with discipline-specific content, high yield resources and patient note templates. For the peer mentorship program, fourth year [REDACTED] graduates were paired with incoming third year students. Mentors met with mentees six times throughout the clerkship for one hour to improve specific skills such as note writing and constructing a relevant differential diagnosis. We conducted online surveys to assess effectiveness of the curriculum and to evaluate the third year [REDACTED] students' perception of the orientation.</p>
Your role in development	<p>The [REDACTED] was created through the shared efforts of the [REDACTED]</p> <p>My shared responsibilities:</p> <ul style="list-style-type: none">• Brainstorming the components, timeline and implementation of the curriculum and peer-mentorship program• Editing the Pediatric and Surgery workshops• Editing the Abstract: [REDACTED] <p>[REDACTED]</p> <p>My individual responsibilities:</p> <ul style="list-style-type: none">• Developing the Psychiatry workshop lesson plan and resources materials• Teaching the Psychiatry workshop at orientation and

	<p>adding the resources to MedEd Portal</p> <ul style="list-style-type: none"> • Mentoring [REDACTED]
Co-teacher/ developer	[REDACTED]
Intended Audience	Third year medical students participating in [REDACTED]
Number of Learners Taught or Assessed (Quantity)	<p>Total hours: 20; Total students: 12</p> <ul style="list-style-type: none"> • The [REDACTED] orientation is 2-days, approximately 10 hours and takes place twice a year. • Six different students were present at each of the two orientations.
# Years this has been used	1 year [REDACTED]
Goals and Objectives	<p>Orientation: The goals of orientation were to provide incoming third-year students with essential discipline-specific knowledge, skills and resources prior to clinic sites to maximize student learning early on and minimize student anxiety.</p> <p>Peer-mentorship: The goals of the peer-mentors were to support third-year students throughout [REDACTED] develop an inter-generational [REDACTED] community, and develop fourth-year students teaching skills.</p>
Preparation	<p>As a graduate of [REDACTED] I participated in a focus group with my [REDACTED] cohort on how to improve the clerkship. The group concluded that the start of the [REDACTED] was overwhelming due to the multitude of specialties' we encountered. In order to better prepare incoming [REDACTED] students we identified a set of requisite knowledge and skills for each [REDACTED] clinic site. Afterwards, we reviewed the literature on other Longitudinal integrated clerkships (LICs) to inform our curricular design.(1,2)</p> <p>[1] Levitt DS and Cooke M, "Tips for teaching in longitudinal clerkships" Clin Teach, 2011</p>

Design	<p>Orientation: The orientation consisted of five small-group didactic sessions: [REDACTED]. The sessions used a combination of lecture, group discussion and hands-on-activity.</p> <p>Peer-mentor program: Mentors and mentees completed a minimum of six 1-hour one-on-one sessions. The structure of these sessions was variable and dependent on the mentees needs.</p>
Evaluation	<p>Orientation: Students completed an anonymous online survey to assess effectiveness of the curriculum and to evaluate their perception of the orientation.</p> <p>Peer-mentor program: At the end of the clerkship students complete a to survey to assess the peer-mentorship program. Informal interviews were conducted to assess overall impression of the program thus far.</p>
Evidence of Quality	<p>Orientation: Results of survey indicate that the orientation was well received. The students overall impression of the psychiatry, surgery, and pediatrics workshops were 4.6, 4.3, and 4.4 out of 5, respectively. Most students remarked that the orientation reduced their anxieties about the clerkship making their transition to specific clinics easier and equipping them to take a detailed and relevant history in each discipline earlier in the year.</p> <p>Peer-mentor program: Students have noted that peer mentors have been valuable resources for support with time-management,</p>

	developing differential diagnosis and note-writing. Formal evaluations are pending.
Evidence of Dissemination	All orientation materials are available on MedEdPORTAL Abstracts and Poster Presentations [Redacted text]

	<p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED] MS3 (mentee)</p> <p><u>Mentee(s) contact information:</u></p> <p>[REDACTED]</p>
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<p>Evidence of Dissemination</p>	<p>I participated in several professional development activities to enhance mentoring/advising skills.</p> <ul style="list-style-type: none">• [REDACTED] teaching and mentoring seminars• [REDACTED] 3-day seminars Adult Learners <p>Abstracts and Poster Presentations</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p>
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<p>Your advising/mentoring role</p>	<p>[REDACTED]</p> <p>I mentored under-classmen at the Icahn School of Medicine starting in my second-year. I provided advice and support with study materials, pre-clinical coursework, USMLE exam preparation, third-year clerkships, scholarly projects, work-life balance and living in NYC. I checked-in with my individual mentees regularly, and was always available for additional support if necessary.</p>
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Level of learner	Medical students
Contact with Learners (Quantity)	I mentored three students. I spent approximately 4-6 hours/year with each student. My time was divided between in person meetings, phone and email.
# Years Teaching	[REDACTED]
Goals	My goals were to support my mentees academic and professional success, and to alleviate their anxiety surrounding medical school.
Evidence of Quality	<p>My three [REDACTED] mentees, [REDACTED] [REDACTED] have done well academically and have been involved with several service and/or scholarly projects at Icahn.</p> <p><u>Letter(s) of support:</u> [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] MS3</p> <p><u>Mentee(s) contact information:</u> [REDACTED] [REDACTED] [REDACTED]</p>

ADVISING/MENTORING TABLE OF MENTEES

Name of Mentee (Contact Info)	Focus of Your Mentoring	Years Mentored	Mentee Level of Training at start and currently	Impact/ Outcomes
[REDACTED]	See above (InterACT)	3 ([REDACTED])	1 st year medical student	See above (InterACT)
[REDACTED]	See above (SFS)	3 ([REDACTED])	1 st year medical student	See above (SFS)
[REDACTED]	See above (SFS)	1 ([REDACTED])	1 st year medical student	See above (SFS)
[REDACTED]	See above (SFS)	1 ([REDACTED])	1 st year medical student	See above (SFS)
[REDACTED]	See above (First Gen)	1 ([REDACTED])	High school senior	See above (First Gen)
[REDACTED] [REDACTED]	See above (First Gen)	1 ([REDACTED])	High school senior	See above (First Gen)

V. EDUCATION ADMINISTRATION AND LEADERSHIP

EDUCATION ADMINISTRATION AND LEADERSHIP WORKSHEET

Brief description of project	<p>██</p> <p>██ is a program that provides high school students, who will be the first member of their family to attend college, one-on-one mentoring for the college process, various group events, and eligibility for a book scholarship.</p>
Co-teacher/ developer	<p>██</p> <p>██</p>
Number of people affected (Quantity)	<p>58 students:</p> <ul style="list-style-type: none"> • 29 medical student mentors • 29 high school mentees
Need/problem/opportunity	<p>The college application process is very daunting for high school students and parents. Unfortunately, due to large class sizes public school guidance counselors/college advisors do not have enough time to help every student in need. Students without the support of experienced family members are at a significant disadvantage compared to their peers in the application process.</p>
Goal	<p>The goal of the program is to provide a structured environment for high school students to receive support with their college applications, this includes help making a list of colleges, writing an admissions essay, completing college admission, financial aid and scholarship applications.</p>
Leadership role and number of years in this role	<p>My shared responsibilities with other co-directors:</p> <ul style="list-style-type: none"> • Advertising • Budget • Scheduling • Mentor recruitment • Scholarship searches <p>My individual responsibilities:</p> <ul style="list-style-type: none"> • Mentee recruitment • High school guidance counselor contact • Event planning: <ul style="list-style-type: none"> - College tour: Columbia University

	<ul style="list-style-type: none">- El Barrio Museum field trip- Graduation banquet <p>1 year ([REDACTED])</p>
Actions Taken	<p>In addition to my responsibilities listed above I started the two initiatives below to further support our students.</p> <ol style="list-style-type: none">1) <i>College tour:</i> After speaking with high school guidance counselors, mentors and mentees I realized that the majority of our mentees had never visited a college campus. In order to expose students to higher education I organized a college tour of Columbia University lead by alum for all mentees and mentors.2) <i>Financial aid speaker:</i> All of our mentees' families require financial assistance for the cost college tuition. Thus, I invited a college financial aid officer to speak at the program's graduation banquet.
Resources Utilized	<p>First generation used funds from Mount Sinai's Auxiliary board, Center for Multicultural Affairs (CMCA) and the Department of Medical Education to fund our college tour and graduation banquet. Funds were used for advertising, visit to El Barrio Museum, the college tour, the graduation banquet and book scholarship.</p> <p>The total [REDACTED] budget was \$1000.</p>
Outcomes/ Impact	<p>The majority of the 29 participants informed us that they were accepted to one of their top choice colleges. For example, [REDACTED] (MS4) mentee [REDACTED] is now in her junior year at Georgetown.</p>
Evaluation	<p>[REDACTED] completed anonymous surveys to evaluate the program. In addition, informal interviews were conducted to asses the program throughout the program.</p>
Evidence of Quality	<p>Results of the survey demonstrated that the majority of participants positively rated the mentorship program, college tour, financial aid speaker, and graduation banquet. A little less than 50% of the participants positively reviewed the field trip to El Barrio.</p> <p><u>Letter(s) of support:</u> [REDACTED]</p>

	<p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED] MSIV (co-director)</p>
Evidence of Dissemination	Both the college tour and financial aid speaker have become permanent components of the [REDACTED]