

**[S20.004] First-Year Outcomes for the Parnassus Integrated Student Clinical Experiences (PISCES): A Multidisciplinary Longitudinal Patient Centered Model for Third Year Medical Education at the University of California, San Francisco**

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**OBJECTIVE:** To describe and report the first-year results from a novel integrated patient-centered third year curriculum at an academic medical center. **BACKGROUND:** Changes in healthcare delivery make third-year clerkship goals harder to achieve. Students have less ownership of patients and exposure to undiagnosed patients, and are more rarely observed by faculty. Longitudinal clerkship models aim to address these challenges; in PISCES, students follow a panel of patients into different in- and outpatient health care settings. As part of this, they join a subspecialty neurology preceptor in clinic, following patients with a variety of neurological conditions; they also take call with the inpatient neurology team. Preceptors assess clinical skills and professional development through structured observed clinical exams. Interdisciplinary weekly didactic sessions include student-led case presentations, neurology vignettes and neurology/psychiatry sessions. **DESIGN/METHODS:** The first year of PISCES ran from 4/2007-4/2008 with 8 students. Data were gathered at midyear and end-of-year. Outcome measures for neurology include students' evaluations of program and preceptors, performance on end of year clinical performance examination (CPX) and performance on medicine sub-internship. **RESULTS:** 7/8 of PISCES students evaluated the program. Mean faculty teaching quality, formal teaching quality, clinical skills instruction, and adequacy of feedback were all highly rated; mean overall effectiveness was higher than for the traditional neurology clerkship ( $p = 0.05$ ). Students performed equivalently to non-PISCES peers on the CPX and those who have done their medicine sub-internships to date did well. Although the cohort is small, PISCES students chose to pursue research experiences and also chose to enter a variety of subspecialties similar to that chosen by our larger student population. **CONCLUSIONS/RELEVANCE:** PISCES appears to be effective in terms of student satisfaction and senior clinical performance. Further research will establish how PISCES students perform with respect to their peers in the areas of board scores, residency match results, and specialty choice.