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Survey Methods

Objectives

The Clerkship Directors Survey had the following objective: to assess the current state of Neurology Clerkships in all medical schools in the United States and to update information gathered in the last clerkship survey of 1996.

Sample

The Clerkship Directors Survey was sent to clerkship directors of all clerkships that were in active status with the AAN as of June 30, 2005. International programs were excluded from participation. The final list of programs that were eligible to receive the survey included 109 Clerkships. Several survey potential participants informed us they were no longer clerkship directors or indicated to AAN that they were listed for two programs, but only have one clerkship.

Instrument

The current survey instrument was a revision of a previous survey on Clerkship Directors issues that was conducted by AAN in 1996. Members of the Undergraduate Education Subcommittee, Member Demographics Subcommittee and AAN staff revised the questionnaire during 2004 and 2005.

Data Collection

The Clerkship Directors Survey was sent by mail to the complete survey population (n = 109) on July 5, 2005. All Clerkship Directors with valid U.S. Postal mail address received the survey. Enclosed with each survey was a letter from the Chair of the Undergraduate Education Subcommittee explaining the reason for the survey and encouraging participation in the AAN sponsored survey. For any clerkship director who was listed for two separate programs, a memo was also enclosed regarding their listing.

A second mailing of the survey was sent to non-respondents on July 28, 2005, three weeks after the initial mailing. AAN staff called non-respondents asking that they complete the survey, and/or clarify their status through the second half of August 2005. The third round of distribution via mail took place on September 19, 2005. Prior to the second and third rounds of distribution, clerkship directors were sent pre-notification e-mails encouraging them to complete the survey. The Undergraduate Education Subcommittee followed up with calls to the remaining non-respondents to the survey in October 2005. Data collection stopped on November 14, 2005.

Response rate

A response rate of 75% (82/109) was achieved for the 2005 Clerkship Directors survey. It should be noted that approximately 10% of Clerkship directors were either not listed correctly in our database, or may have returned one survey when we had them listed for two separate clerkships.
Part I: Structure of the Neurology Clerkship

1. Is the neurology clerkship a required clerkship at your institution? N = 82
   92.7% Yes    7.3% No

2. If the neurology clerkship is not required, what percentage of students elect to take it? N = 6
   (Utilizing data only from the six who responded "No" to question number 1)
   16.7% 0-20%
   0.0% 21-40%
   16.7% 41-60%
   33.3% 61-80%
   33.3% 81-100%

3. What is the length of the neurology clerkship? N = 82
   0.0% 1 week
   4.9% 2 weeks
   7.3% 3 weeks
   85.4% 4 weeks
   2.4% 5 or more weeks

4. When is the neurology clerkship taken? N = 80
   0.0% 2nd year
   45.0% 3rd year
   22.5% 4th year
   31.3% Either 3rd or 4th year
   1.3% Other (please specify) See page 14 for list of comments

5. Is the neurology clerkship part of a combined clerkship block such as Neurology/Psychiatry? N = 82
   25.6% Yes    74.4% No

5 a. If Yes, please make a few comments about the structure of that combined clerkship:
See page 14 for list of comments

5 b. Other than neurology, what disciplines are covered in the combined clerkship block? N = 33
   42.4% Psychiatry
   42.4% Neurosurgery
   15.2% Physical Medicine
   45.5% Pediatric Neurology
   39.4% Other (please specify) See page 15 for list of comments

*Due to some respondents choosing more than one response, the percentages may add up to more than 100 percent.
5 c. Are the disciplines separated (such as a month on neurology and a month on psychiatry) or is the clinical experience somehow integrated? N = 82  
80% Separated  
20% Integrated

5 d. Please briefly describe your combined clerkship: 
See page 15 for list of comments

6. How many times per year is the neurology clerkship offered? N = 78

<table>
<thead>
<tr>
<th>Mean</th>
<th>Median</th>
<th>Mode</th>
<th>Standard Deviation</th>
<th>Minimum</th>
<th>Maximum</th>
</tr>
</thead>
<tbody>
<tr>
<td>10.8</td>
<td>12</td>
<td>12</td>
<td>2.6</td>
<td>1</td>
<td>16</td>
</tr>
</tbody>
</table>

7. Approximately how many students are rotating through the neurology clerkship at any given time? N = 78

- 13.4% 0-5
- 29.3% 6-10
- 34.1% 11-15
- 15.9% 16-20
- 7.3% >20

8. Students rotating on the neurology clerkship are assigned to which of the following sites? (check all that apply) N = 82

- 98.8% Inpatient neurology ward
- 79.3% Inpatient neurology consultation service
- 82.9% Outpatient neurology clinic
- 35.4% Private office of a community neurologist
- 23.2% Other (please specify) See page 15 for list of comments

*Due to some respondents choosing more than one response, the percentages may add up to more than 100 percent.

9. Students rotating on an inpatient neurology ward are assigned to which of the following sites? (mark all that apply) N = 82

- 96.3% University teaching hospital
- 37.8% Community hospital affiliated with a medical school
- 9.8% Community hospital not affiliated with a medical school
- 52.4% VA hospital
- 31.7% Pediatric Neurology ward
- 7.3% Other (please specify) See page 16 for list of comments

*Due to some respondents choosing more than one response, the percentages may add up to more than 100 percent.

10. On average, how many new inpatients per week are worked-up in detail by each medical student rotating on the neurology clerkship? N = 81

- 3.7% 1
- 29.6% 2
- 23.5% 3
- 28.4% 4
- 14.8% 5 or more
11. On average, how many new outpatients per week are worked-up in detail by each medical student rotating on the neurology clerkship? N = 70

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>11.4%</td>
<td>1</td>
</tr>
<tr>
<td>27.1%</td>
<td>2</td>
</tr>
<tr>
<td>17.1%</td>
<td>3</td>
</tr>
<tr>
<td>14.3%</td>
<td>4</td>
</tr>
<tr>
<td>30.0%</td>
<td>5 or more</td>
</tr>
</tbody>
</table>

12. Please estimate, on the average, how many LPs your students perform while on their clerkship. N = 79

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>43.0%</td>
<td>0</td>
</tr>
<tr>
<td>46.8%</td>
<td>1</td>
</tr>
<tr>
<td>8.9%</td>
<td>2</td>
</tr>
<tr>
<td>1.3%</td>
<td>3 or more</td>
</tr>
</tbody>
</table>

13. Which of the following rotations can be taken in place of the neurology clerkship? (check all that apply) N = 80

<table>
<thead>
<tr>
<th>Rotation</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neurosurgery</td>
<td>16.3%</td>
</tr>
<tr>
<td>Pediatric neurology</td>
<td>16.3%</td>
</tr>
<tr>
<td>Behavioral neurology or Psychiatry</td>
<td>1.3%</td>
</tr>
<tr>
<td>Physical medicine and Rehabilitation</td>
<td>5.0%</td>
</tr>
<tr>
<td>Other, (please specify): See page 16 for list of comments</td>
<td>8.8%</td>
</tr>
<tr>
<td>No substitutions are allowed</td>
<td>80.0%</td>
</tr>
</tbody>
</table>

*Due to some respondents choosing more than one response, the percentages may add up to more than 100 percent.

14. Is a neurology clerkship syllabus provided for your students? N = 80

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>85%</td>
<td>Yes</td>
</tr>
<tr>
<td>15%</td>
<td>No</td>
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</table>

14a Do you recommend a particular text for use during the neurology clerkship? N = 74

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>56.8%</td>
<td>Yes</td>
</tr>
<tr>
<td>43.2%</td>
<td>No</td>
</tr>
</tbody>
</table>

If yes, what is it? See page 17 for list of comments

15. How many of your medical students per year, on average, enter a neurology residency? N = 79

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>64.6%</td>
<td>0-3</td>
</tr>
<tr>
<td>25.3%</td>
<td>4-6</td>
</tr>
<tr>
<td>8.9%</td>
<td>7-9</td>
</tr>
<tr>
<td>1.3%</td>
<td>10-12</td>
</tr>
<tr>
<td>0.0%</td>
<td>&gt;12</td>
</tr>
</tbody>
</table>

16. Do your students keep a case log? N = 81

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>67.9%</td>
<td>Yes</td>
</tr>
<tr>
<td>19.8%</td>
<td>No</td>
</tr>
<tr>
<td>12.3%</td>
<td>Optional</td>
</tr>
</tbody>
</table>


16a If yes, how is this log kept? N = 61

54.1% Paper
27.9% PDA
6.6% Computer-based
23.0% Web-based
1.6% Other (Please specify) See page 18 for list of comments

17. The LCME has asked that CDs start to assure that students have exposures to certain key types of patients. Have you planned what strategies you will use to meet this educational directive? Will you have each student (Mark all that apply): N = 69

73.9% Make an attempt to see a mandated number of patients from certain broad categories or diagnostic clusters
20.3% Have students see simulated patients for certain diagnoses
34.8% Have students view videotapes of patients with certain disorders
26.1% Other: (please elaborate so that we can learn from each other)

*Due to some respondents choosing more than one response, the percentages may add up to more than 100 percent.

Part II: Neurology electives (other than the neurology clerkship)

18. Which of the following neurology electives, other than the neurology clerkship, are offered at your medical school? (check all that apply) N = 78

73.1% Neurology externship (sub-internship)
61.5% Neurology subspecialty rotation(s) (please specify) See page 19 for list of comments
43.6% Ambulatory neurology elective
23.1% Experience in a community neurologist's office
64.1% Neurology Research
28.2% Neuro Intensive Care
20.5% Other(s) (please specify) See page 20 for list of comments

*Due to some respondents choosing more than one response, the percentages may add up to more than 100 percent.

19. Is the neurology clerkship a pre-requisite for these electives? N = 79

81.0% Yes
19.0% No

20. How many students per year, on average, take a neurology elective?

53.2% 0-5
34.2% 6-10
6.3% 11-15
5.1% 16-20
1.3% >20
Part III: Faculty teaching the neurology clerkship

21. Students rotating on the neurology clerkship are taught by which of the following individuals? (mark all that apply) N = 81
   98.8% Full-time university faculty
   46.9% Part-time university faculty with private office practices
   42.0% Private practitioners
   84.0% House officers
   3.7% Other (please specify) See page 20 for list of comments
   *Due to some respondents choosing more than one response, the percentages may add up to more than 100 percent.

22. The majority of medical student teaching in the neurology clerkship is done by N = 81
   79.0% Full-time university faculty
   3.7% Part-time university faculty with private office practices
   0.0% Private practitioners
   14.8% House officers
   2.5% Other (please specify) See page 21 for list of comments

23. How many private practitioners take students into their offices as part of the neurology clerkship experience? N = 79
   79.7% 0-3
   16.5% 4-6
   1.3% 7-9
   1.3% 10-12
   1.3% >12

24. Do faculty who teach medical students in the neurology clerkship receive any remuneration for their teaching efforts (salary support or supplemental honorarium)? N = 81
   22.2% Yes
   77.8% No

25. How important a component are faculty teaching efforts in the promotions process at your medical school? N = 78
   12.8% Not at all important
   71.8% Somewhat important
   15.4% Very important
   0.0% The most important component

26. What percentage of the full-time clinical faculty in the department of neurology serve as student preceptors or ward attendings who supervise medical students rotating on the neurology clerkship? N = 81
   1.2% 0-20% 11.1% 21-40% 12.3% 41-60% 11.1% 61-80%
   64.2% 81-100%
27. What percentage of the full-time clinical faculty in the department of neurology have no direct teaching responsibilities for medical students rotating on the neurology clerkship? N = 81

- 80.2% 0-20%
- 9.9% 21-40%
- 9.9% 41-60%
- 0.0% 61-80%
- 0.0% 81-99%

28. What types of faculty development activities are available to the clinical faculty in your department of neurology? (check all that apply) N = 80

- 25.0% Individual faculty mentoring by "master teachers" (senior faculty who are excellent teachers)
- 55.0% Faculty development workshops held locally
- 7.5% Faculty development workshops held nationally
- 31.3% Financial support for clerkship director to attend AAN annual meeting
- 26.3% No formal faculty development activities exist
- 5.0% Other, (please specify) See page 21 for list of comments

*Due to some respondents choosing more than one response, the percentages may add up to more than 100 percent.

Part IV: Evaluation methods for the neurology clerkship

29. Which of the following evaluation methods do you employ in assigning a final grade to students rotating on the neurology clerkship? (check all that apply) N = 81

- 97.5% Direct observation of the student by faculty and house officers
- 33.3% Structured oral examination (observing an H&P, or discussing vignettes)
- 12.3% OSCE (objective structured clinical examination)
- 17.3% Written essay examination
- 39.5% MCQ (multiple choice question) examination
- 50.6% NBME Shelf Neurology Examination
- 29.6% Other (please specify)_____________________

*Due to some respondents choosing more than one response, the percentages may add up to more than 100 percent.

30. Please state what percentage of the final grade is derived from each of the following evaluation method (total should equal 100%). N = 78

- 57.2% Direct observation of the student by faculty and house officers
- 4.9% Structured oral examination (observing an H&P, or discussing vignettes)
- 1.7% OSCE (objective structured clinical examination)
- 2.7% Written essay examination
- 18.6% MCQ (multiple choice question) examination
- 13.9% Other (please specify) See page 22 for list of comments

31. The National Board of Medical Examiners has developed a subject examination in Clinical Neurology that would be suitable for use as a final examination for the neurology clerkship. If you do not use the NBME Shelf Exam in Neurology, are you planning to in the future? N = 75

- 10.7% Yes, in the future
- 45.3% Yes, we already use this examination
- 44.0% No
If no, why not?  N = 32

46.9%  Too expensive
6.3%  Inconvenient to use
6.3%  Student Feedback does not come back soon enough
53.1%  Prefer institution-specific (“home-grown”) written examination
6.3%  Prefer use of OSCE or simulated patient assessments
12.5%  Prefer clinical assessment by observers
15.6%  Other, (please specify) See page 23 for list of comments

*Due to some respondents choosing more than one response, the percentages may add up to more than 100 percent.

32.  What type of grading scale is used to assign a final grade for students in the neurology clerkship?  

N = 80

6.3%  Numerical percentages
0.0%  5 (or more) point scale
11.3%  A, B, C, D, F scale
16.3%  Honors - pass – fail
56.3%  Honors – high - pass – pass – fail
5.0%  Pass - fail
5.0%  Other (please specify) See page 23 for list of comments

33.  Which of the following methods do you use to obtain feedback about the neurology clerkship from students? (mark all that apply)  

N = 81

43.2%  Individual Interviews with students
23.5%  Group interviews with students
43.2%  Written subjective evaluation
35.8%  Written objective evaluation form
56.8%  On-line Evaluation
1.2%  Other (please specify) See page 23 for list of comments
0.0%  No feedback is obtained from students

*Due to some respondents choosing more than one response, the percentages may add up to more than 100 percent.

34.  Which of the following methods do you use to obtain feedback about the neurology clerkship from faculty and house officers? (check all that apply)  

N = 78

19.2%  Individual Interviews with faculty and house officers
5.1%  Group interviews with faculty and house officers
14.1%  Written subjective evaluation
16.7%  Written objective (numerical) evaluation form
11.5%  On-line Evaluation
41.0%  Other (please specify) See page 23 for list of comments
21.8%  No feedback is obtained from faculty and house officers

*Due to some respondents choosing more than one response, the percentages may add up to more than 100 percent.
Part V: Departmental and institutional support for the neurology clerkship

35. How large is your departmental or institutional budget for the direct costs of the neurology clerkship (such as syllabus, administrative time, standardized patients, student resources)?

N = 76

- 15.8% 0
- 3.9% $1-500
- 0.0% $501-1000
- 3.9% $1001-2000
- 2.6% $2001-3000
- 1.3% $3001-5000
- 9.2% $5001-10,000
- 14.5% > $10,000
- 48.7% I don’t know

36. For institutions with a neurology clerkship, how much secretarial support do you receive for the neurology clerkship? N = 77

- 51.9% 0 – 0.25 FTE
- 36.4% 0.26– 0.50 FTE
- 3.9% 0.51 – 0.75 FTE
- 7.9% 0.76 – 1.0 FTE
- 0.0% Greater than 1.0 FTE

37. How much support in % of protected time do you presently receive for your efforts as neurology clerkship director? N = 77

- 37.7% 0-5%
- 13.0% 6-10%
- 11.7% 11-15%
- 29.9% 16-25%
- 6.5% 26-50%
- 1.3% 51-75%
- 0.0% 76-85%
- 0.0% 86-100%

38. How much salary support do you feel you should receive for your efforts as neurology clerkship director, based upon the amount of time spent? N = 80

- 2.5% 0-5%
- 12.5% 6-10%
- 13.8% 11-15%
- 41.3% 16-25%
- 27.5% 26-50%
- 2.5% 51-75%
- 0.0% 76-85%
- 0.0% 86-100%
Part VI: Clerkship director profile

39. What is your faculty status? N = 82

96.3% Full-time academic faculty
2.4% Part-time academic faculty
1.2% Private practitioner with a courtesy clinical faculty appointment
0.0% Other (please specify) See page 23 for list of comments

40. What is your faculty rank? N = 81

2.5% Instructor
32.1% Assistant professor
39.5% Associate professor
24.7% Full professor
1.2% Other (please specify) See page 24 for list of comments

41. Are you presently tenured or on a tenure track? N = 81

34.6% Yes  65.4% No

42. For how many years have you been director of the neurology clerkship? N = 82

41.5% 0-3
25.6% 4-6
15.9% 7-9
8.5% 10-12
8.5% >12

42a For how many years did your immediate predecessor serve as neurology clerkship director? N = 81

30.9% 0-3
21.0% 4-6
9.9% 7-9
4.9% 10-12
17.3% >12
16.0% Don’t know

43. Which of the following pre-clinical neural science courses at your medical school are jointly directed by a member of the neurology department, if any? (mark all that apply) N = 71

56.3% 1st year neural science course, or equivalent
49.3% 2nd year neuropathology course, or equivalent
25.4% Other (please specify) See page 24 for list of comments

*Due to some respondents choosing more than one response, the percentages may add up to more than 100 percent
44. Which of the following administrative positions do you currently hold, if any? (mark all that apply) N = 73

- 39.7% None
- 4.1% Neurology department chairman
- 17.8% Neurology residency program director
- 1.4% Education dean at your medical school
- 13.7% Course director for a preclinical neural science course
- 37.0% Other (please specify) See page 25 for list of comments

*Due to some respondents choosing more than one response, the percentages may add up to more than 100 percent.

45. Which of the following medical school committees do you sit on, if any? (mark all that apply) N = 78

- 21.8% None
- 59.0% Clinical instruction committee (or equivalent)
- 24.4% Medical student promotions committee
- 9.0% Faculty promotions committee
- 5.1% Medical school executive committee
- 0.0% Other (please specify) See page 25 for list of comments

*Due to some respondents choosing more than one response, the percentages may add up to more than 100 percent.

46. Are you presently a member of the Consortium of Clerkship Directors in Neurology? N = 78

- 66.7% Yes
- 33.3% No

47. If not, would you be interested in becoming a member? N = 24

- 75.0% Yes
- 25.0% No (please explain why) See page 25 for list of comments

48. Does your school have a third or fourth year interdisciplinary OSCE examination to assess student clinical skills? N = 77

- 88.3% Yes
- 11.7% No

49. Does the Neurology clerkship staff participate in this OSCE? N = 75

- 32.0% Yes
- 68.0% No

50. Has the neurology clerkship been asked to help students to prepare for the new NBME Step 2S exam? N = 78

- 15.4% Yes
- 84.6% No

51. Does your medical school have a clinical skills laboratory? N = 78

- 75.6% Yes
- 24.4% No
52. How would you use a clinical skills laboratory in the neurology clerkship? (Check all that apply)  
   N = 72
   68.1%  Teach neurologic examination
   70.8%  Assess students taking neurologic history and examination
   68.1%  Teach lumbar puncture techniques
   33.3%  Teach assessment of stupor and coma
   41.7%  Simulate treatment of neurologic emergencies such as status epilepticus
   6.9%   Other, please specify See page 25 for list of comments

53. Have you read the CNCD Neurology Clerkship Core Curriculum? N = 79


   73.4% Yes    26.6% No

Please share any comments you have on this curriculum:
   See page 26 for list of comments

54. Have you read the following article? N = 78


   28.2% Yes    71.8% No

Please share any comments you have on this article:
   See page 26 for list of comments
Appendix A: Comments

4. When is neurology clerkship taken?

Other (please specify)

- Some take it at end 2nd year (April or beyond)
- Up to 10 can take it between 2nd and 3rd yr
- Mostly 4th year – as of 2006-7 moving to 3rd year with full grading

5a. If yes, please make a few comments about the structure of that combined clerkship.

- We are moving towards 4 weeks as of 1/06. Combined block with psychiatry, orthopedics and ophthalmology.
- Starting in 2005-2006 academic year, students at 2 of our sites (university inpatient and university consults) are spending one (1) week of the clerkship on the neurosurgery service.
- 4 weeks neuro/4weeks psych, 2 weeks basic service block.
- Neurology and psychiatry are paired as part of an 8 wk block. There are shared lectures (some) but each discipline functions as a “separate” 4 wk experience.
- Combined with neurosurgery and ped. Neurology
- 8 week combined rotation in a combined department of psych and neurology
- Neurology/Psychiatry block (one of 6 blocks in 3rd year) is 8 weeks with 4 weeks to each discipline; they are, however, completely independent.
- 2 weeks neurology inpatient, one week neurology outpatient, and 1 week of ophthalmology
- 8 week rotation with 2 weeks neurology, 6 weeks psychiatry lecture series spread out over the 8 weeks
- Neurology Clerkship is assigned to ½ of the medical students in the 3rd year. The other ½ are assigned to internal medicine ambulatory care. While on neurology they must do 3 (½ days) clinics – outpt all are neuro. Elective in 4th year.
- 4 weeks of neuroscience (with principle clinical assignment on neurology, neurosurgery, or pediatric neurology) and 4 weeks in psychiatry with shared didactic session spanning the 8 week rotation.
- Some students rotate through Neurosurgery, or Pediatric Neurology or Ped Neurosurgery. We hold common directives.
- 4 weeks psychiatry and 4 weeks neurology – no overlaps.
- Currently neurology required portion is 2 weeks and psychiatry is 6 weeks. 2 week neuron elective is available, but only a few students take this (well publicized by psychiatry who is the clerkship director).
- ½ students on 4, ½ on Neuro, then switch, 4 weeks each, no significant interaction across disciplines; 1 week ophtha at start of 9 week block.
- 4 + 4 weeks with 8 week long [???] psychiatry clinic, [???] orientation, web site, neuropsych interactive, [???] and [???] based conference
5b. Other than Neurology, what disciplines are covered in the combined clerkship block?

Other (please specify)

- Ophthalmology (2)
- Ophthalmology (1 week)
- Geriatric neurology
- See 5a
- Neuroradiology
- Only neurology
- Longitudinal clinic across third year
- Ambulatory care
- NDD, Pediatrics

5d. Please briefly describe your combined clerkship:

- Neurosurgery and pedi-neuro are offered for two blocks (as part of the 4 week rotation.)
- 4 weeks neuro, 4 weeks psych, 2 weeks basic science block integrated conference weekly.
- See 5a
- In addition to pairing with psychiatry….Neurology is part of a larger 16wk (“Block-II”) rotation that includes OB/GYN and Peds. Each of the 4 disciplines has a separate experience, with 16 week program of “longitudinal” seminars.
- Integrated lecture series.
- Don’t have details on new combo yet.
- 4 weeks on neuro-then 4 weeks on psych lectures and conferences in both disciplines.
- We have had a very successful combined block with some integration as described.
- 2 weeks neurology inpatient, one week neurology outpatient, and 1 week of ophthalmology.
- 8 week rotation with 2 weeks neurology, 6 weeks psychiatry lecture series spread out over the 8 weeks.
- Neurology Clerkship is assigned to ½ of the medical students in the 3rd year. The other ½ are assigned to internal medicine ambulatory care. While on neurology they must do 3 (½ days) clinics – outpt all are neuro. Elective in 4th year.
- 4 weeks of neuroscience (with principle clinical assignment on neurology, neurosurgery, or pediatric neurology) and 4 weeks in psychiatry with shared didactic session spanning the 8 week rotation.
- 4 weeks on Adult or Ped Neuro or N/S; often a combination thereof.
- 3 weeks neurology, 3 weeks neurosurgery, joint conferences to lectures, ½ day week ophthalmology.

8. Students rotating on the neurology clerkship are assigned to which of the following sites?

Other (please specify)
NEUROLOGY CLERKSHIP DIRECTORS SURVEY
Final results 3/13/2006
Response rate: 75% (82/109)

- Pediatric neurology consult service
- Pediatric neurology (in-pt & opd), VA neurology (in-pt & opd)
- All students have some inpt, some outpt but not all have each type of in/outpt
- Neuroradiology, PM & R.
- Navy hospital
- Child neurologist
- Cerebrovascular (inpatient)
- Other affiliated hospitals
- Neuro-ICU, Peds Neurology
- EMG lab, MDA Clinic
- Pediatric neurology, outpatient and inpatient unit, neurology intensive care
- Inpatient neurorehab ward
- Stroke/ICU service, veterans affairs medical center, pediatric neurology inpt service
- Neurosurgery, pediatric neurology
- Pediatric neurology
- Neuro ICU, Peds Clinic
- Neuro/CU
- Inpatient NDD ward
- Stroke service

9. Students rotating on an inpatient neurology ward are assigned to which of the following sites? (mark all that apply)

Other (please specify)

- County hospital (2)
- 1 week peds or outpatient specialty clinic
- County hospital affiliated with the medical school
- We us all types in order to accommodate all students.
- Navy hospital
- Military hospital affiliated with medical school (WHMC)

13. Which of the following rotations can be taken in place of the neurology clerkship? (mark all that apply)

Other (please specify)

- Neuroradiology
- General pediatrics or other peds subspecialty selectives
- Family medicine
- ½ medical students assigned to neuro, ½ medical students assigned to IM ambulatory care
14. Is a neurology clerkship syllabus provided for your students?

14b. If yes, what is it?

- Clinical neurology
- None is required but we recommend
- Simon et al
- Blumenfeld, H.: Neuroanatomy Through Clinical Cases 2002
- Gelb (Introduction to Clinical Neurology)
- Gelb
- Greenberg/Aminoff-Clinical Neurology  Harrison’s Internal Medicine
- Blueprints in Neurology
- Introduction to Clinical Neurology, 3rd edition, Doug Gelb
- Clinical Neurology and Blueprints in Neurology
- Require: Blueprints in Neurology as a review, board prep. Recommend: Goetz or Victor/Adams for looking up info.
- Neurology in Primary Care
- Clinical Neurology; Aminoff, Simon
- Essentials of Clinical Neurology by Wesberg. Went through 3rd edition. I got release from Mosby and put in on our open website available to anyone and I update it every 6 months.
- Gerald Ferichel’s Ped Neuro A Signs and Symptoms Approach.
- Clinical Neurology Ed. Simon
- Biller “Practical Neurology DVD Review”
- Greenberg, Aminoff, Simon, Clinical Neurology
- Refer to Brain, Mind and Behavior first year syllabus
- Principles of Neurology (Adams & Victor); Neurology for the Non-Neurologist (Weiner & Goetz); Neurology for the House Officer (Weiner & Levi II)
- Clinical Neurology (Lange)
- Simon/Aminoff/Greenberg
- Greenberg and Blueprints
- Several texts listed
- Blueprints
- Merritt’s Text of Neurology
- Lange Clinical Neurology
- Principles of Neurology
- Harrison’s Med. Text
- In the middle of textbooks
- Marcus & Jacobson, Jozefowicz & Holloway, Simon/Aminoff/Greenberg
- Neurology for the Non-Neurologist
- Clinical Neurology, Aminoff
16. Do your students keep a case log?

16a. If yes, how is this log kept?

Other (please specify)

- e-value
- PDA downloaded to web site
- Just starting
- Will be on-line soon

17. The LCME has asked that Clerkship Directors start to assure that students have exposure to certain key types of patients. Have you planned strategies you will use to meet this educational directive? Will you have each student: (mark all that apply)

Other (Please elaborate so that we can learn from each other)

- Case-based teaching sessions
- Case discussions/didactics. Keep log throughout medical school of cell patients
- Vignette based learning
- Discuss teaching cases, e.g. epilepsy during sessions, once weekly with epileptologist
- PBL’s/Multiple sites pt contact/etc
- We have small group sessions weekly, which cover all of the important diseases in neurology that they should have exposure to
- Case discussions
- Case-based small group discussions
- Have not solved this problem. Need ideas.
- None
- Use combination of live patients, video, paper cases
- Vignettes
- Case discussions
• Combination of live contacts and case discussions
• More concerned with process approach and clinical problems
• We use combined directives so all students get common material in teaching. I do not have a mechanism to guarantee exposure to certain key types of patients.
• Web-based patient presentations
• Case based problem sets

18. Which of the following neurology electives, other than the neurology clerkship, are offered at your medical school? (mark all that apply)

Neurology Subspecialty rotation(s) (please specify)

• Pediatric Neurology (2)
• Stroke, neurorehab
• Epilepsy, stroke
• MS, Epilepsy
• NICU, Neuromuscular
• Clinical Neurophysiology
• Neurosurgery, Neuro-ophthalmology
• At students’ request, the ambulatory elective can be arranged to focus on a specific subspecialty
• Ped Neuro; CNS immunology…Neurogenetics. Each faculty member is interest, etc.
• Neuromuscular, epilepsy, general
• Child Neurology
• Stroke, ER
• Students have taken a memory disorders rotation, but they could arrange any of the subspecialties.
• Neuromuscular, Neuro-oncology, Neuro-ophthalmology
• Cerebrovascular disease
• MrT disorders, neuromuscular, stroke, epilepsy groups all willing to take a student if requested.
• MS, headache, dementia, seizures, neuromuscular movement d/o.
• Stroke, neuropathology, pain
• Epilepsy, Movement disorder, stroke
• Pain, headache
• Neuro ICU; Neuro Consult
• Peds Neuro
• Stroke, Neuroptamology, Neurotology
• Consult service
• Stroke
• Clinical Neurophysiology
• Pediatric neurology, neurology consult service
• Neuropathology, movement disorders, EMG/EEG
• Students interested in neurology are encouraged to attend outpatient neurology or subspecialty rotation of their choice
• Neuromuscular disease
• Pediatric neurology, neuropsychiatry
• Stroke/Memory Dr/Movement Dr/Neuromuscular Dr.
• Neurology consult service
• Epilepsy
• Neurodevelopment
• Pediatrics
• Neuromuscular, general, neuron-ophtho
• MS, Headache, Dementia, Seizures, Neuromuscular, movement d/o (disorders)
• Behavioral neurology, epilepsy, movement disorders, etc.
• Movement Disorders, Neuromuscular, neurorehabilitation
• Neurorhabilitation, movement disorders
• Stroke, child neurology, epilepsy
• Neuron ophthalmology, epilepsy, neuro-cognitive, neurooncology

Other(s) (Please specify)

• Am rounds on wards, PM private clinics with attendings
• Whatever the student is interested in doing!!
• Neurology research
• Neurology consult month
• International elective in Krakow, Poland
• Neuro consult service, Neurorehab.
• Sleep medicine, epilepsy
• Sleep
• Neurology consultation service
• EMG
• Consultation service
• Pediatric neuro
• Pediatric neurology

21. Students rotating on the neurology clerkship are taught by which of the following individuals? (mark all that apply)

Other (please specify):

• OT, PT, faculty
• Neurovascular fellows, pediatric neurology fellows

22. The majority of medical student teaching in the neurology clerkship is done by: (please
check only one)

Other (please specify)

- Probably 50:50 Faculty: House staff
- Neurohospitalists
- Conference and interactive CD-ROM
- [???] split residents and attendings

28. What types of faculty development activities are available to teach clinical faculty in your department of neurology (mark all that apply)

Other (please specify)

- Sessions on how to evaluate
- Peer observation program
- Education lecture series, teaching campaign
- Med school has workshops

29. Which of the following evaluation methods do you employ in assigning a final grade to students on the neurology clerkship? (mark all that apply)

Other (please specify)

- Pt portfolio, oral and written presentations, oral and written case summaries
- This is how we anticipate grading students
- Patient write up with discussion of topic
- Weekly quizzes
- One tutorial session spent on lecture/discuss on CSF/LP followed by use of LP simulates giving each student time to practice in LP. Tutorial format with case presentation and discussion. One student assigned to each of 6 topics: Back pain, movement disorders, spells, weakness, effects of alcohol or the nervous system, floppy baby.
- Month long project
- Videotaped patient exam
- Case conference sessions
- Short-answer questions
- Topic presentation
- Portfolio project/essay
- Skills evaluation
- Team Board Learning Curriculum
- Problem solving in class participation
- Oral presentations with required handouts
- Write-ups with emphasis on EBM
• Observed neurological exam
• Students hand in written “passport” recording their patient logs, procedures, etc. These have to be handed in.
• Presentation of topic; writing
• Review of H&P and progress report
• Written analysis of case based problem sets
• Patient write-up; didactic sessions with vignettes

30. Please state what percentage of the final grade is derived from each of the following evaluation method (total should equal 100%)

Other (please specify)

• computerized care exam
• NBME (5)
• SHELF (2)
• Oral and written case presentations, oral and written case summaries, patient portfolio
• Staff Physician evaluation
• NBME SHELF Exam (2)
• NBME Clinical Neuro Shelf Exam
• NBME Shelf (2)
• We will add a computer skills exam 1st, 3rd week not sure yet how I’ll grade it.
• Weekly quizzes
• Patient write up 5-Passport turned in.
• Topics in Neurology (see above; tutorial case presentations)
• NBME shelf examination
• Month long project
• Required lecture series-all or none credits
• Videotaped patient exam
• SHELF exam
• Ophtho week
• short answer
• test and topic
• portfolio project/essay
• skills evaluation
• problem solving in class participation
• oral presentations
• NBME examination, Review of H&P progress notes, etc.
• cost write-ups
• visual [??]

31. The National Board of Medical Examiners has developed a subject examination in Clinical
Neurology that would be suitable for use as a final examination for the neurology clerkship. If you do not use the NBME Shelf Exam in Neurology, are you planning to in the future?

31a. If no, why not?

Other (please specify)

- The assessment tools dictate what’s in the curriculum. I feel it is wrong to use
- Shelf for a graded final exam
- I have not had an opportunity to review the exam
- As a selective, this is not the focus of the month
- Student will focus on studying for exam which will detract from a clerkship
- Written exams are not a standard part of 3rd year at [???] at this time

32. What type of grading scale is used to assign a final grade for students in the neurology clerkship?

Other (please specify)

- GPA (4.0=A, B=3.0, etc.)
- Honors – Excellent – Good – Marginal – Unsatisfactory
- High – pass = Letter of Commendation
- Outstanding (.3.5), Good (.2.7), Satisfactory (>1.8), Marginal (>1), Unsatisfactory
- Superior, High Satisfactory, Satisfactory, Low Satisfactory, Fail
- High Hon/Hon/Satisfactory

33. Which of the following methods do you use to obtain feedback about the neurology clerkship from students? (mark all that apply)

Other (please specify):
- End of year OSCE production

34. Which of the following methods do you use to obtain feedback about the neurology clerkship from faculty and house officers?

Other (please specify)

- Department meetings (2)
- Informal
- Personal interviews
- Whole faculty and neuro education meetings (group 5-10)
- Informal discussion with house staff/faculty
- Faculty meetings/Resident conferences
Occasional department meetings
Informal discussion with faculty, residents
Discussed monthly at faculty meetings
They are encouraged to give feedback but few do it.
Meetings with faculty
Interviews with faculty and house officers
Group discussion
Faculty meeting forum
Faculty conferences
Discussions with faculty and housestaff at meetings
Informal via e-mails, faculty meetings or conversations
Individuals give feedback anytime
Individual conversations
Informal only
Casual meetings
Casual one-on-one meetings
Educational retreat
Fqt. Faculty meetings
Interviews with residents
Interaction with [??]

40. What is your faculty rank?

Other (please specify):

• Associate

43. Which of the following pre-clinical neural science courses at your medical school are jointly directed by a member of the neurology department, if any? (mark all that apply)

Other (please specify)

• None (3)
• Neurology clerkship director
• Neurologic exam
• Introduction to Clinical Medicine, 2nd year
• 2nd year course-Biology of Disease
• One faculty member is assigned to/involved in neurology teaching in preclinical years.
• 2nd year Neural science course
• 2nd year neuroscience
• 2nd year neuroscience 2 theme
• I participant on a curriculum committee for the 1st and 2nd year students
• 2nd year clinical neurology [??]
First year [???] physiology, etc. with neuro and psych

44. Which of the following administrative positions do you currently hold, if any? (mark all that apply)

Other (please specify)

- Vice-chair
- Assistant Director Center for Research in Medical Evaluation
- Director, Undergrad Med. Student Ed.
- Fellowship Director for the Sleep Medicine Program
- Vice-Chairman
- Director, Epilepsy Clinic
- Neurology, 3rd year director
- 4th year Clerkship Director, Inpt Clinical Services Director
- Stroke Center Director, Neurosonology Lab Director
- Ped. Neurol Residency Program Director-currently being set up
- Division director
- Chairman Clinical Innovations Committee
- Director, epilepsy clinic
- Lab director
- Medical Director, APDA, I&R Center
- Medical Education Committee
- Director Stroke and Neurosciences Stepdown Unit
- Chief Neurology at UA
- Chair, student review subcommittee med 1-2
- Clin Neurophys Fellowship Director
- Fellowship Director
- Medical Education Committee Member for UTSW
- Co-director EMG Lab
- Medical director outpatient clinic
- Chair, Curricular Committee [????]

47. If not, would you be interested in becoming a member?

No (please explain why)

- Money at AAN meeting
- Time!
- Unsure if this is appropriate (peds neuro)
- Not enough time
- Lack of time, don’t want to travel
- More time
52. How would you use a clinical skills laboratory in the neurology clerkship? (mark all that apply)

Other (please specify)

- Observe students’ interpersonal skills/professionalism e.g., in setting of breaking bad news
- Presently we do not utilize it
- Neuroradiology basics
- We will begin in 2006
- OSCE, i.e. end of clerkship exam
- Neuroradiology basics

53. Have you read the CNCD Neurology Clerkship Core Curriculum?

Gelb, DJ, Gunderson CH, Henry KA, Kirshner HS, Jozefowicz RF. The neurology clerkship core curriculum. Neurology, Mar 2002; 58: 849-852. Please share any thoughts you have on this curriculum:

- Our entire curriculum was based on this document.
- Helpful, but more than is practical to include.
- Outstanding overview and specific content (on website) re: objectives/specific knowledge. I would like to see CNCD level up content (case vignettes, library of videotaped patients, examination questions) that we share.
- Excellent guideline and resource.
- Outstanding!
- Will read and email thoughts.
- Excellent guide
- Hard to get it all done for each student.
- Good enough
- Adequate
- Way more than students can learn in 4 weeks
- I like it
- I need the 1998 document extensively when developing the required clerkship 4 years ago
- We enforce it
- Excellent guidelines. I adapted my syllabus to it.
- It is great to have a standard recommend core curriculum!
- Excellent
- Put parts in my student syllabus
- We teach localization in Neuroscience course first 2 years – reintroduce it 3rd year. In a 2-4 week course, there is insufficient time to teach skills ……..
- As we make changes much of contents applicable…and we are in the midst of major changes (neurology – neuroscneince – MSII curriculum in neuro; “selectives” MSII neuro, etc. etc.)
54. Have you read the following article?
Pangaro L, Fincher RM, Bachicha J, Gelb D, Brodkey A, Morgenstern B, Chumley-Jones H, Sacdeva AK. Expectations of and for Clerkship Directors: A Collaborative Statement from the Alliance for Clinical Education. *Teaching and Learning in Medicine*, 2003; 15: 217-222. Please share any thoughts you have on this article:

- Not so helpful to me on a personal level, but perhaps would be for others.
- Insightful
- Thought provoking.
- As above
- Hard to get the job done so well with current support situation, not enough time.
- Good. Tried to get my chairman to read it.
- I appreciate the support it says is needed for clerkship from departments
- I need it somewhat
- Very helpful in dealing with share, defining clerkship director job and needs!
- There is insufficient finding nationally to support these ideals – especially as government continues to redirect funding [???] physician/institution attempting to educate a provider parting ways

**Additional Comments:**

Comment at the top of page 2

- The answers below are based on my involvement in the Pediatric Neurology clerkship, an elective which students may choose via the Dept. of Pediatrics
- Part III: Faculty teaching the neurology clerkship: crossed our clerkship and wrote in elective

1. Is the neurology clerkship a required clerkship at your institution?

- [after marking yes] starting in 2006
- [after marking no] not currently – we are in the process of mandating it
- [after marking no] for only ½ of the students, the other ½ take ambulatory care

3. What is the length of the neurology clerkship?

- [after marking 4 weeks] prev., fighting for 4 weeks – school wants to make it 2)
- [after marking 4 weeks] Soon (2006) will be 5 ½ weeks
- [after marking 4 weeks] in 2006 it will be 5 ½ weeks long

4. When is neurology clerkship taken?

- [after not marking an answer] was in the 2nd year – now moving it to the 4th year
5. Is the neurology clerkship part of a combined clerkship block such as Neurology/Psychiatry?

- [after marking no] But a combo is planned with more time for neuro
- [after marking no] N/A
- [after marking yes] 4/4 = 8 weeks

5b. Other than Neurology, what disciplines are covered in the combined clerkship block?

- [after marking Pediatric Neurology] only for a few students each month if there are too many students to accommodate in Adult Neurology; for one week at a time.
- [after marking Neurosurgery] we are just starting this, we’ll have 2 talks and a chance to go to the OR) (Not a combined block but neurosurgery offered to help)
- [after not marking an answer] N/A
- [after marking Neurosurgery] Adult and Pediatric
- [after marking Psychiatry] but no overlap – students do 4 weeks of either one without mixing lectures or clinical work

5c. Are the disciplines separated (such as a month on neurology and a month on psychiatry) or is the clinical experience somehow integrated?

- [after not marking an answer] N/A

5d. Please briefly describe your combined clerkship:

- N/A

6. How many times per year is the neurology clerkship offered?

- [after not marking an answer] all year round

7. Approximately how many students are rotating through the neurology clerkship at any given time?

- [after marking 6-10] 6 mostly
- [after marking >20] due to 3rd year expansion to 16 months
- [after marking 6-10] up to 12
- [after marking 6-10] but on some occasions as many as 12

8. Students rotating on the neurology clerkship are assigned to which of the following sites?

- [after marking outpatient neurology clinic] just during 2 week selective
9. Students rotating on an inpatient neurology ward are assigned to which of the following sites? (mark all that apply)

- [after marking VA hospital] clinic and consult service only

10. On average, how many new inpatients per week are worked-up in detail by each medical student rotating on the neurology clerkship?

- [after marking 5 or more] Quite variable depending on site
- [after not marking an answer] 2 over the 4 weeks (required writeups) and do more presentations

11. On average, how many new inpatients per week are worked-up in detail by each medical student rotating on the neurology clerkship?

- [after not marking an answer] usually more observation.
- [after marking 2] at one site
- [after marking 1] may be closer to zero in detail; but many observed.
- [after not marking an answer] they observe 5-7 pt encounters per week
- [after not marking an answer] N/A
- [after marking 4] Quite variable depending on site
- [after not marking an answer] Zero
- [after not marking an answer] None
- [after not marking an answer] 2 over the 4 weeks (required writeups) and do more presentations
- [after not marking an answer] only 20% of students receive a 2 week block in clinic. They “see” but don’t work up 8-10 patients per day + 4 days

12. Please estimate, on average, how many LPs your students perform while on their clerkship.

- [after not marking an answer] dependent upon patient population 1 to 3.
- [after not marking an answer] 0-1
- [after not marking an answer] not every student does one – probably 0.7

13. Which of the following rotations can be taken in place of the neurology clerkship? (mark all that apply)

- [after marking Physical medicine and Rehabilitation] only one day
- [after marking Pediatric Neurology] part of Neuro!!
- [after marking No substitutions are allowed] can do neurology at another institution
14. Is a neurology clerkship syllabus provided for your students?

- [after marking no] Although certain chapters are given to them and computerized, study guides are available to them.
- [after marking yes] website
- [after marking no] but we are working on it. They have access to the slides of the conferences online.
- [after not marking an answer] given the AAN core curriculum/guidelines, no extensive syllabus

15. How many of your medical students per year, on average, enter a neurology residency?

- DK (don’t know)

16a. Do your students keep a case log?

- [after not marking an answer] Paper web-based later this month

17. The LCME has asked that Clerkship Directors start to assure that students have exposure to certain key types of patients. Have you planned strategies you will use to meet this educational directive? Will you have each student: (mark all that apply)

- [after Make an attempt to see a mandated number if patients from certain broad categories or diagnostic clusters] rotation too short
- [after Have students see simulated patients for certain diagnoses] too expensive
- [after Have students view videotapes of patients with certain diagnoses] not before leaving

18. Which of the following neurology electives, other than the neurology clerkship, are offered at your medical school? (mark all that apply)

- [after marking Neuro Intensive Care] if asked-one last year
- [after marking Ambulatory neurology elective] pediatric

19. Is the neurology clerkship a prerequisite for these electives?

- [after marking no] not for peds neuro

20. How many students per year, on average, take a neurology elective?

- [after marking 11-15] one year data

21. Students rotating on the neurology clerkship are taught by which of the following individuals?

- [after marking Private practitioners] few as attending.
23. How many private practitioners take students into their offices as part of the neurology clerkship experience?

- [after not marking anything] None
- [after marking 0-3] None
- [after marking 0-3] Not available at this time

24. Do faculty who teach medical students in the neurology clerkship receive any remuneration for their teaching efforts (salary support or supplemental honorarium)?

- [after marking yes] only for actual lecture hours not for clinical experience

25. How important a component are faculty teaching efforts in the promotions process at your medical school?

- [after not marking an answer] promotion for faculty or students?
- [after marking somewhat important and very important] depends
- [after marking financial support for Clerkship Director to attend AAN Annual Meeting Clerkship/Program Director’s course] for next year
- [after marking financial support for Clerkship Director to attend AAN Annual Meeting Clerkship/Program Director’s course] and [No formal faculty development activities exists] don’t consider AAN meeting reimbursement a faculty development activity

29. Which of the following evaluation methods do you employ in assigning a final grade to students on the neurology clerkship? (mark all that apply)

- [after marking written essay examination] formally written H & P with discussion
- [after marking written essay examination] soon to start
- [after marking written essay examination] optional

30. Please state what percentage of the final grade is derived from each of the following evaluation methods. (total should equal 100%)

- [after marking 25% for Direct observation of the student by faculty and house officers] Ward
- [after marking 25% and crossing out OSCE (objective structured clinical examination)] Shelf Board
- [after marking 25% and crossing out written essay questions] clinic
- [after not marking written essay questions] used to determine “honors”
- [after marking 40% for MCQ (multiple choice questions) examination] NBME SHELF
- [after not marking Other] Presently, faculty awards honors, pass fail. Depending on score on internal MCQ we upgrade to honors or downgrade to pass. As of 2006-7 we are contemplating using SHELF.
31. The National Board of Medical Examiners has developed a subject examination in Clinical Neurology that would be suitable for use as a final examination for the neurology clerkship. If you do not use the NBME Shelf Exam in Neurology, are you planning to in the future?

- [after marking yes, we already use this examination] for practice, not a grade.

31a. If no, why not?

- [after marking Yes, in the future] N/A

32. What type of grading scale is used to assign a final grade for students in the neurology clerkship?

- [after marking Numerical percentages and Pass-Fail] both
- [after marking A, B, C, D, F scale] but it’s really A, A-, B+, F
- [after marking pass-fail] The standard way

33. Which of the following methods do you use to obtain feedback about the neurology clerkship from students? (mark all that apply)

- [after marking written subjective evaluation and written objective evaluation] they fill out a form.
- [after marking on-line evaluation] will be shifting to this

34. Which of the following methods do you use to obtain feedback about the neurology clerkship from faculty and house officers? (mark all that apply)

- [after marking on-line evaluation] in the works
- [after marking Individual interviews with students], crossed out students and wrote faculty/residents
- [after marking Individual interviews with students] crossed out students and wrote faculty and HO

35. How large is your departmental or institutional budget for the direct costs of the neurology clerkship (such as syllabus, administrative time, standardized patients, student resources)?

- [after marking > $10,000] if my salary supports ½ FTE staff is included
- [after marking > $10,000] for director other costs I don’t know
- [after marking I don’t know] but likely >$10,000

36. For institutions with a neurology clerkship, how much secretarial support do you receive for
the neurology clerkship?
- [after not marking an answer] None
- [after marking 0.26-0.50 FTE] 0.26-.40 FTE

37. How much support in % of protected time do you presently receive for your efforts as neurology clerkship director?
- [after marking 6-10%] I spend my own time on weekends, etc. as well
- [after not marking an answer] Unclear
- [after not marking an answer] None
- [after not marking an answer] This will be answered by the new curriculum director

38. How much salary support do you feel you should receive for your efforts as neurology clerkship director, based upon the amount of time spent?
- [After marking 25-50%] could spend more. 50% would be nice.
- [after marking 11-15%] in addition to involvement with residents

40. What is your faculty rank?
- [after marking full professor] A new director will take over in Sept; assistant professor

41. Are you presently tenured or on a tenure track?
- [after not marking an answer] N/A
- [after marking yes] No

42. For how many years have you been a director of the neurology clerkship?
- [after marking >12] crossed out neurology clerkship and wrote in NDD training program

43. Which of the following pre-clinical neural science courses at your medical school are jointly directed by a member of the neurology department, if any? (mark all that apply)
- [after underlining 2nd year neuropathology course or equivalent] (+) 2005-2006 will be the first time!
- [after not marking an answer] None
- [after marking 2nd year neuropathology course or equivalent] neuroscience systems
- [after marking 1st year neural science course, or equivalent] included in pathology

45. Which of the following medical school committees do you sit on, if any? (mark all that apply)
- [after not marking an answer] Educational Program Management Committee, Core Curriculum Working Group
- [after marking Clinical instruction committee (or equivalent)] Member for UTSW
46. Are you presently a member of the Consortium of Clerkship Directors in Neurology?

- [after marking yes] I think so!
- Unsure

47. If not, would you be interested in becoming a member?

- [after not marking an answer] [???] will be joining to take my place

48. Does your school have a third or fourth year interdisciplinary OSCE examination to assess student clinical skills?

- [after marking yes] but (pointing towards question 49)

50. Has the neurology clerkship been asked to help students to prepare for the NBME step 2S exam?

- [after marking no] not formally
- [after marking no] we don’t teach toward exam

51. Does your medical school have a clinical skills laboratory?

- [after not marking an answer] not sure what it is!
- [after marking yes] for surgery
- [after marking no] under development
- [after not marking an answer] not sure what it is!
- {after marking no] but one is being put together – Director already hired
- [after marking yes] in development
- [after marking yes] Course

52. How would you use a clinical skills laboratory in the neurology clerkship? (mark all that apply)

- [after marking Teach lumbar puncture techniques] Maybe?

53. Have you read the CNCD Neurology Clerkship Core Curriculum? Gelb, DJ, Gunderson CH, Henry KA, Kirshner HS, Jozefowicz RF. The neurology clerkship core curriculum. Neurology, Mar 2002; 58: 849-852. • [after marking no] I will look them up


- [after marking no] I will look them up