Doctor of Medicine

Curriculum

By conferring the MD degree, the university certifies that the student is competent to undertake a career as a doctor of medicine. It certifies further that, in addition to medical knowledge and skills, the graduate possesses qualities of personality — compassion, emotional stability and a responsible attitude — essential to an effective professional life.

Accreditation

The Washington University School of Medicine's MD program is nationally accredited by the Liaison Committee on Medical Education (LCME (https://www.aamc.org/services/first-for-financial-aid-officers/lcme-accreditation/)). The LCME is recognized by the U.S. Department of Education as an accrediting agency for medical education programs leading to the MD degree.

Most state boards of licensure require that applicants graduate from a U.S. medical school accredited by the LCME as a condition for licensure. In addition, most state boards of licensure require that U.S. applicants take and pass the United States Medical Licensing Examination (USMLE (https://www.usmle.org/)). For U.S. medical students to be eligible to sit for the USMLE, their school must be accredited by the LCME. Graduates of LCME-accredited schools are also eligible for residency programs accredited by the Accreditation Council for Graduate Medical Education (ACGME (https://www.acgme.org/)).

The School of Medicine has determined that, as a result of its LCME accreditation, its MD program curriculum meets the educational requirements to sit for the USMLE and to pursue licensure and certification in all states and territories of the United States and Washington, DC.

For Students Entering the MD Program in July 2020 or After:

The Gateway Curriculum ensures that students are not only exceptional physicians but that they are also prepared to lead the transformational changes needed to improve the future of health care delivery and the understanding of health and social determinants of health. The curriculum will include three phases.

Phase 1

Phase 1 will consist of 62 total weeks of curricular time: 1 week of orientation, 46 weeks of Integrated Science Foundational Modules, 9 weeks of Clinical Immersions, 4 weeks of the EXPLORE Immersion, and 2 weeks of Phase 1 Capstone.

The Integrated Foundational Science Modules will present core science content in fundamental areas (basic, clinical, social, behavioral, and health system sciences). The Clinical Immersions consist of clinical experiences that are authentic, varied in content, and appropriate for the student's level of ability. Every student will have an immersion in each of the following areas: inpatient, ambulatory, and procedural. There will be substantial emphasis on professional identity formation and the social, behavioral, and health systems sciences. The EXPLORE Immersion element of the curriculum will focus on four key areas: research, education, advocacy/global health, and innovation.

Phase 2

Phase 2 will include 12 months (48 weeks) of clinical clerkship experiences in the content areas of Internal Medicine, Neurology, Obstetrics & Gynecology, Pediatrics, Psychiatry, and Surgery. Each clerkship will begin with one week of specialty-specific foundational science that consists of the purposeful reiteration and expansion of prior material and new material. This material will be taught in a “signs and symptoms” framework in order to facilitate core knowledge transfer to clinical reasoning. Each clerkship will end with one week dedicated to assessment, reflection, coaching, and communities (ARCC).

Phase 3

Phase 3 will consist of 64 weeks total. Students will engage in 32 weeks of required elements that will include a 4-week Internal Medicine Subinternship; three 4-week Advanced Clinical Rotations (ACRs; 12 weeks total); three 4-week Keystone Integrated Science Courses (KISCs; 12 weeks total); and 4 weeks of Capstone. In addition, students will take 28 weeks of electives (clinical, research, other non-clinical). Up to 8 of the 28 weeks of elective time may be used for USMLE study, and up to 16 weeks may be used for research. During Phase 3, there are 4 weeks of School of Medicine holiday time, and students may also opt to take up to 4 weeks of unscheduled (no credit) time.

For Students Entering the MD Program Prior to July 2020:

The curriculum includes a core experience based upon a sequence of courses that introduces students to the many domains and disciplines of medicine. The principles, methods of investigation, problems and opportunities in each of the major disciplines of medical science and medical practice are presented in such a way as to help students select the career best suited to their abilities and goals. Through all four years of the curriculum, key topics known as Threads are woven throughout the learning experience, linking clinical and course work and enhancing the learning experience.
The preclinical curriculum provides a science and investigative foundation for future clinical practice. First-year and second-year course work combines basic science taught via a variety of didactic means, including lectures, small groups, simulations and case-based learning. It also includes a Practice of Medicine course that uses regular patient interactions and integrative cases to teach students to skillfully interview and examine patients while integrating current health disparities and issues in the present global spectrum.

In addition, students have the opportunity during their first year to complete four 10-hour selective courses in the humanities, the basic sciences, and various clinical areas, which provides enrichment and in-depth focus on areas beyond the core curriculum. The preclinical curriculum is pass/fail.

The overall goal of the third year is the implementation of the fundamental interactive clinical skills necessary for the practice of medicine at the highest possible level of excellence. Students achieve this goal by participating in intensive, closely supervised training experiences in the core clinical clerkships, which involve inpatient and ambulatory settings and interactions with patients who present a spectrum of emergent, urgent, routine and chronic clinical problems. Through these experiences, students exhibit growth and maturation in their abilities to take medical histories, perform complete physical examinations, synthesize findings into a diagnosis, formulate treatment plans, and document and present information in a concise, logical and organized fashion.

During the final year of the medical school curriculum, the required elective program helps students to decide where their major interests lie. It also enables them to benefit from the wide range of specialized knowledge and skills found in the faculty, and it lays the foundation for lifelong learning and the application of principles. The elective program permits students to select, according to their desires, the areas that they wish to explore or to study in depth. The fourth year also offers students the opportunity to synthesize the learning from the third year in preparation for clinical residency. Toward this end, students are required to complete a Capstone course prior to graduation.

Washington University School of Medicine Medical Student Program Objectives

The educational program is designed to ensure that each student will demonstrate the following:

**Foundational Knowledge for Practice**

1. Demonstrate knowledge of normal human structure and function at the molecular, genetic, cellular, tissue, organ-system and whole-body level in growth, development and health maintenance.
2. Demonstrate knowledge of the epidemiology and basic mechanisms involved in the pathogenesis of common human diseases and their influence on clinical presentation and therapy.
3. Demonstrate basic knowledge of the impact of ethnicity, culture, socioeconomic status, patient and provider biases, and other social factors on health and disease.
4. Demonstrate basic knowledge of the ethical principles and professional values that underpin the medical profession.
5. Demonstrate basic knowledge of the common scientific methods used to study health and disease.
6. Demonstrate basic knowledge of the methods and principles for optimizing value, which include quality measures and cost of health care delivery for patients and populations.

**Patient Care**

1. Obtain appropriate medical histories that include psychosocial and behavioral factors that influence health.
2. Perform accurate physical examinations.
3. Participate in clinical procedures as required by the curriculum.
5. Develop individualized diagnostic and treatment plans across the broad spectrum of acute and chronic conditions.

**Interpersonal and Communication Skills**

1. Demonstrate respectful and effective verbal and nonverbal interpersonal and communication skills with patients, families, colleagues, and all members of the educational and health care teams.
2. Discuss preventive strategies and diagnostic and treatment options in a manner that will facilitate the participation of patients and their families in shared decision making.
4. Provide succinct and organized oral patient presentations.
5. Work collaboratively and effectively in teams.

**Professionalism**

1. Maintain a professionally appropriate demeanor.
2. Exhibit high standards of professional integrity.
3. Apply legal and ethical principles governing the physician–patient relationship.
4. Act in the patient's best interest, and serve as a patient advocate.
Systems-Based Practice

1. Recognize the roles of various members of the interprofessional health care team and the scope of their practice.
2. Recognize barriers to and facilitators of high-value patient care, where value equals quality over cost.
3. Demonstrate the ability to identify medical errors when they occur, and describe the individual, team, and/or system factors that may contribute to them.

Practice-Based Learning and Improvement

1. Demonstrate the skills needed for lifelong learning, including the ability to identify and address personal strengths and weaknesses, to incorporate formative feedback, and to self-assess knowledge and performance to develop a self-improvement plan.
2. Apply an evidence-based approach to selecting, appraising and utilizing evidence from scientific studies related to clinical questions and patients' health problems.

Contact Information

For additional information or specifics about the MD curriculum, please use the following contact information:

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