Background:

The College of Medicine has bought a subscription for <u>ScholarRx</u> for the new first-year medical students starting in August 2024 in conjunction with the new curriculum. ScholarRx is a digital learning platform that focuses on content delivery (knowledge acquisition) and assessment. It has been developed and vetted by faculty and students.

Subscription:

Our subscription consists of "Bricks" covering multiple disciplines and a 2000+ summative question bank (Rx Brick Assessment) through ExamSoft that focuses on assessment of the Bricks. Faculty can get access to the bricks by contacting: Nicole.Dalton@scholarrx.com

Bricks:

<u>Bricks</u> are the digital learning tools developed using instructional design principles. They are parts of what most appears as a digital textbook. They consist of objectives, narrative text, digital flashcards, clinical correlations and end of Brick assessment questions. They are content at the Knowledge Acquisition level.

Bricks can be used and created in ScholarRx in the following ways:



Rx Brick Assessment:

These 2000+ summative questions are to be sequestered and administered through ExamSoft. They are aimed at assessing brick knowledge. They have clinical vignettes, but not as multiple level as USMLE step 1 preparation questions. This is similar to what we have faced in the first year where students have limited knowledge of pathology and pharmacology/treatment. We will know more about these when they are uploaded to the UCF account.

Potential uses:

- 1. Summative exams
- 2. Team-based learning sessions
- 3. Controlled formative quiz environment?

Best Practices

ScholarRx bricks are developed for Knowledge Acquisition, NOT application or synthesis.

****For application or synthesis, use synchronous face-to-face sessions in an active learning format.

2

ScholarRx bricks can be used as-is, annotated directly into, modified by "cloning", created de novo using their template.

	As-is	Annotated directly	Modified by cloning	Created de novo
Advantage(s)	 Consistent look Known reading time and audio feature/time Aligns with Brick Assessment questions 	 Consistent look Can emphasize certain areas within the text such as "IMPORTANT" Aligns with Brick Assessment questions 	 Consistent look Can duplicate "clone" a brick and add text, videos, graphs to address missing topics or under- emphasized topics, or change content order Keeps instructional design principles in use (limits objectives, etc) Can delete sections if needed 	 Consistent look using ScholarRx template based on instructional design principles
Disadvantage(s)	• Tend to be on the basic side	 Tend to be on the basic side Limited to text only 	 Need to account for time for added material Added material must be "legal". Does library have subscription to quoted book if you use? May not align with Brick assessment, particularly the add-ons Make sure you write objective for added material 	 Learning curve with development May not align with Brick Assessment
Known Intended Uses:	 Use Brick as-is and focus on using synchronous time to emphasize more complex aspects through active learning 		 Modify brick to add in better graphs/additional reading material into brick Can add practice questions/clinical correlations/images 	

Summary of Intended Uses:

Faculty within the Foundations course and IS2 are using the Bricks as the primary content delivery or knowledge acquisition. Some faculty are using them as-is and some are modifying them or supplementing them with embedded material. Overall, the consistency of look will be maintained between sessions.

3

Synchronous sessions should follow the content delivery of bricks and focus on application and synthesis of the material/content (ASK) covered by the bricks. (Examples include mini-cases, concept maps, problem sets, etc).

***see example from Foundations course below



ScholarRx bricks and in-house SLMs/readings/videos should NOT be duplicative and cover the same exact content.

Example: Do not assign a brick on glycolysis and then give a Panopto video covering the same exact material. If a Brick is lacking something, modify it if small or provide supplementary material.



Bricks can be used independently of each other in the order you would like to use them.

Example: The course may want to provide anatomy of the Cardiovascular system Bricks before the histology of the CV system.

Note to M1 Course Directors and faculty

I strongly encourage all M1 course directors and faculty to consider utilizing ScholarRx bricks, whether as-is or modified, as the primary content delivery strategy. This approach will not only streamline the educational process (increase consistency) but also ensure a high standard of learning material across all courses. Since the Rx Assessment items are tagged to the Bricks, it will also facilitate alignment of course content and MCQs. It will also allow you to focus more energy/time on the face-to-face application and synthesis sessions.

Foundations	26-Aug	27-Aug	28-Aug	29-Aug	30-Aug
8:00 9:00	CDL #1: Neoplasia	Asynch Content: DNA transcription/translation (18 mins) Epigenetics (11 mins)	CDL #1	Asynch Content : What is epidemiology (HInes) "Asynchronous Content: Inferential statistics: Sampling Populations (19 mins) Fundamentals of Statistical Analysis (16 min)"	М
10:00	Asynch Content Cell Cycle (19 min) DNA Structure (11 min) DNA replication (17 min) DNA mutation/repair (18 min)	Synchronous: Application and Synthesis of Knowledge (ASK)	Asynch Content	Synchronous: Application and Synthesis of Knowledge (ASK)	CDL 1 debrief

Example of Foundations Curriculum Schema with ScholarRx Time Built In

Content in red font are ScholarRx bricks