

University of Central Florida

College of Medicine

M1/M2 Minutes

Meeting Date: 7/10/2026

Start Time: 3:45 PM

Adjourn Time: 4:52 PM

Chair: Dr. Kauffman

Attendance:

Voting member attendance: Christine Kauffman, Analia Castiglioni, Robin Hines, Bernard Gros, Scott Barron, Bibi Nazeema Khan Assad

Student reps: Viviana Rivera

Discipline leads: **Vania Zayat**, Paul Sturgis, Taseen Desin

Other/online attendance: Heidi Hoopingarner, John Ryder, Phil Bellew, Patrice Frederick, Jeffrey Plochocki, Elizabeth Barbosa de Oliveira Sales | Jonathan Kibble, Marcy Verduin, Deedra Walton, Lane Coffee, Nicole Brooks, Luke Van Blaricom, Melinda Ragland, Emily Fagan, Emily Bradshaw, Manny Carrazana, Lissette Tolentino, Andrea Berry, Liz Ivey, Dale Voorhees, Lucia Schweitzer, Caitlin Garcia, Alessandra Pelligia, Nadine Dexter, Danish Bhatti, Kim Martinez, Jane Gibson,

Agenda Item	Discussion	Decisions
Approve minutes	Minutes	approved
Proposals for vote	A. Anatomy Assessment Proposal – Dr Plochocki a. Motion: approved b. Proposal outlines specific details of the anatomy assessments and the weight the assessments will have towards final grades c. Adds individual anatomy lab practical assessments to courses containing anatomy i. Number of practicals will depend on the amount of anatomy content in each course; courses covering more systems may have multiple practicals d. Exact exam logistics details have not been finalized and are not yet required for approval e. Student concerns: i. Increased stress due to additional assessment ii. Concerns addressed by explaining that the proposal task force had substantial student representation and input. The decision was also supported by evidence	A. Approved (6 in favor; 1 abstain) B. Approved (6 in favor; 1 abstain) C. Approved (7 in favor)

	iii. Student rep raised a question about anatomy questions still appearing on other exams; Anatomy concepts will continue to appear on integrated MCQ/course exams because of the integrated nature anatomy cannot be fully separated from normal function and disease processes. B. Proposal M1M2 Course Grade Assessment Weights – Dr Castiglioni a. Motion: approved b. Proposal consolidates several previously approved or planned changes to course-grade distributions, including: i. redistribution of weighting between clinical and basic sciences ii. addition of anatomy practicals iii. changing the autopsy report from a summative to a formative assessment. c. Full implementation is planned for the 2026–27 M1 class, with transitional adjustments for the current M2 class. d. The current M2 class will finish the autopsy report under the assessment structure with which they began. e. For the incoming/current M1 structure, the autopsy report will become formative across the courses, with an exception noted for IS-5. f. The autopsy report is not being eliminated. Faculty clarified that it assesses pathology, pathogenesis, differential diagnosis, and clinical reasoning rather than the same skills measured by an anatomy practical. g. Anatomy practical weighting was corrected to align with the anatomy proposal, including IS2 at 5% and IS4 at 3%. h. Concerns about differences in weighting between course exams may be revisited later if they create logistical or content-balancing issues. C. Biostatistics and Epidemiology Task Force Plan – Dr Hines a. Motion: approved b. Student members from M1, M2, and M3 classes identified the primary concerns as a lack of longitudinal integration of biostatistics and epidemiology across the curriculum and difficulty retaining the material c. Task force explored ways to integrate the material longitudinally, including coordination with HSS and discussions among relevant faculty and course leaders. d. The proposed approach is to incorporate biostatistics and epidemiology concepts into CDLs	
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	e. the plan emphasizes: i. low-stakes refreshers, ii. repeated exposure to key concepts, and iii. application of previously learned content within CDLs. f. idea raised to create an overarching document identifying the concepts students should have grasped/should be reinforced by the end of the second year i. Existing epidemiology and biostatistics learning objectives can be shared and used to support this work	
Announcements	• Welcome Dr. John Ryder – new IS 4 Psych Discipline lead • Curriculum Transformation Resources: in M1/M2_Subcommittee_GRP Microsoft Teams under • Clarification on assessment peer comparison – Dr Analia Castiglioni ○ Recommendation is to establish a consistent school-wide practice of not releasing class means/peer averages when individual assessment scores are initially released. ○ aggregate peer-comparison information would still become available through the Med Milestones dashboard. ○ Consistency across courses was emphasized; some courses currently release means while others do not. ○ questions remained about how this applies to certain other assessment types and platforms and may require further review. ○ The item was presented primarily as an announcement/recommendation. • AAMC Medical Education Program Planning Committee - call for Nominations to be on the committee ○ Faculty interested in participating encouraged to respond ○ Anyone who did not receive the original announcement can request that the information be forwarded to them. ○ Reach out to Dr Kauffman for information • Updates from Ed Tech – Mellisa Cowan ○ Audience response/mobile polling: ▪ TurningPoint/Echo360 subscription includes mobile response capabilities that could add hotspots, word clouds, and short-answer questions alongside traditional multiple-choice clickers	

	▪ Students will need the mobile app for the expanded question types, while standard clickers can still be used for traditional multiple-choice questions ▪ Faculty training and additional session setup would be required; student setup could be incorporated into orientation. ○ TLL table lights: ▪ Red, yellow, and green lights installed in TLL (com 401/401B) ▪ Currently unplugged – will need 24 hours before lights are needed to plug them in ▪ Opted to have them plugged in all the time – if they become a distraction, they can be unplugged ○ ScholarRx analytics: ▪ Faculty can access analytics for their Bricks, including views, time spent, question participation, and performance ▪ Faculty were reminded to check the selected date range before interpreting usage data. ▪ ScholarRx is developing a more faculty-facing analytics dashboard and is open to feedback about desired features. ○ Articulate RISE: ▪ Available as another content-development option, but it does not provide the same level of analytics as ScholarRx; faculty should consider whether detailed learner-performance data are needed when choosing a platform. ○ New instructional learning designer – Riley Perkins • Approved at CCom: ○ Proposed changes in Clinical Sciences weights for AY2026-27 ○ Recommendations from the Anatomy Education Taskforce ○ Clinical Sciences (CS) Feedback Taskforce Plan	
Student report	• No updates	
Course director reports	• No updates	
Standing reports	• PES progress reports ○ Next report August: IS1	