



**2021 STFM CONFERENCE ON
MEDICAL STUDENT EDUCATION  VIRTUAL**

FINAL PROGRAM

February 1–3, 2021

TABLE OF CONTENTS

Session Formats

- Education Session Formats3
- Session Highlight Tracks3
- Evaluations.....3
- Faculty Disclosures3

Schedule at a Glance4-7

General Sessions8-10

Live Sessions 11

On-Demand Lectures 12-14

Scholarly and Research Posters 15

Student Scholar Posters 16

General Conference Information

- Continuing Medical Education 17
- Refund Statement..... 17
- Acknowledgments 17



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SESSION FORMATS

Education Session Formats

The STFM Conference on Medical Student Education offers attendees a variety of session formats, including:

- **Live Sessions:** 60-minute didactic presentations with question-and-answer segments
- **On-Demand Sessions:** 30-minute didactic presentations; attendees are encouraged to leave comments, thoughts, or questions for the speaker and other attendees. Speakers look forward to attendee feedback and will be checking the comment sections to respond.
- **Hot Topic Discussions (Zoom Room):** 60-minute informal discussions on specific topics to facilitate the sharing of experiences, ideas, problems, and solutions
- **Poster Hall:** Visual presentations highlighting key areas of research and educational projects: Enjoy video presentations with select posters, highlighting key areas of the research. Attendees are encouraged to leave comments, thoughts, or questions for the presenters.
- **Scholarly Topic Presentations With Discussion (Zoom Room):** 60-minute, informal presentations to share experiences, ideas, problems, or solutions; leaders briefly present material and facilitate discussion.
- **STFM Collaborative Meetings (Zoom Room):** 60-minute, informal discussions by STFM Collaboratives to share experiences and ideas about common topics in family medicine education

For complete session schedules and abstracts, go to <https://stfm.org/conferences/generalinformation/msearchives/>

Session Highlight Tracks

This year's conference incorporates educational tracks for health care professionals. These tracks are identified by a code at the end of the presentation title. Use the code to search for presentations and build a personal conference schedule.

Coordinators: **[COOR]**

Medical Students: **[STU]**

Evaluations

Be sure to complete a session evaluation for each presentation; there is an evaluation link included with each session's abstract.

Faculty Disclosures

STFM is required by continuing medical education guidelines to disclose conflicts of interest in the conference's final program. Presenters are required to disclose any potential conflict of interest at the beginning of their educational session at the conference, on handout materials, and/or PowerPoint slide presentations.

The following conference presenters have noted that they and/or a family member may have a conflict of interest pertaining to:

1. Disclosure of Financial Relationships, or
2. Disclosure of Unlabeled/Investigational Uses, Sales, or Promotions of Products or Services

Alyssa Bruehlman
Amanda Cud, MD, FFAFP, MPH
Anna Dodson, BSPH

Matthew Mesias, MD
Conny Morrison, MD
Saji Pillai, MD

Aaron Thomas, MS
Alexander Towbin, MD

2021 STFM CONFERENCE ON MEDICAL STUDENT EDUCATION VIRTUAL

Access to all on-demand presentations is available at mse.stfm.org, and all live presentations, **excluding Zoom meetings**, are included in the on-demand content.

SCHEDULE at a GLANCE

MONDAY AT A GLANCE, FEBRUARY 1 - all times listed are Central Standard Time (CST)

- 9 am–5 pm** **Networking Lounge** *Stop by the networking lounge any time during the conference. Meet with new and old friends and say hello.*
- 9–10 am** **Collaborative Business Meetings** *open to all attendees*
- STFM Medical Student Education Collaborative
 - STFM Medical Student Education Academic Coordinators and Administrators
- 9–10 am** **Hot Topic Zoom Room Discussions** *open to all attendees*
- Telemedicine: Implications for Education
 - COVID Support Room (students): Share How Your Educational Experience Has Been Affected by COVID
 - Diversifying Family Medicine: Creating Initiatives to Increase Diversity in Residents and Faculty
 - Creating Positive Environments That Make Family Medicine and Family Medicine Academics Appealing
 - Career Life Cycle
- 10:10 am** **Conference Welcome and Orientation**
Ann Rutter, MD, Chair, STFM Medical Student Education Committee
- 10:15–11:15 am** **L01:** Transmitting Antiracism and Healing COVID-19 Scars: How to Grow Tolerance From Trainees to Teachers V.99
or view one of our on-demand educational sessions!
- 11:45 am–12:45 pm** **L02:** Do I Have to Be the One to Tell Them? Using the ARCH-SPIKES Model to Give Difficult Feedback
or view one of our on-demand educational sessions!
- 1:15–2:30 pm** **Opening General Session**
Tricia Elliott, MD, STFM President
Kristen Hood-Watson, MD, 2021 Conference Chair



The Scott Fields Lecture: The Intersection of Racism and Race-Based Medical Decision Making in Medical Education
Bonzo Reddick, MD, MPH
Mercer University School of Medicine, Savannah

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MONDAY AT A GLANCE, FEBRUARY 1 - all times listed are Central Standard Time (CST)

- 2:30–3:30 pm** **Virtual Poster Hall**
- 2:30–3:30 pm** **Partner Meet and Greet**
- 2:45–3:15 pm** **Wellness Activity (Yoga)**
- 3:30–4:30 pm** **L03:** Family Medicine National Sub-Internship Curriculum: Updates and Final Input
or view one of our on-demand educational sessions!
- 5–6 pm** **L04:** Implementation of a Health Equity Curriculum in to Undergraduate and Graduate Medical Education—
Follow-up to Dr. Reddick's General Session *or view one of our on-demand educational sessions!*
- 6:10–7:15 pm** **Welcome Reception (Join Zoom Room)—PDF for Use During the Event**
- 6:10–6:20: **Welcome From the STFM President**, Trish Elliott, MD, PRE-RECORDED
- 6:20–6:32: **Student Scholar Recognition**, Aaron Michelfelder, MD, PRE-RECORDED
- 6:32–6:35: **Breakout Room Instruction**, Kristen Hood-Watson MSE Chair, LIVE



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TUESDAY AT A GLANCE, FEBRUARY 2 - all times listed are Central Standard Time (CST)

9 am–5 pm

Networking Lounge *Stop by the networking lounge any time during the conference. Meet with new and old friends and say hello.*

9–10 am

Scholarly Topic Presentations With Discussion *open to all attendees*

D01: How to Teach Hospice and Palliative Medicine to Medical Students in a Virtual Elective

D02: Medical Education and Interprofessional Service Learning

D03: Newborn Nursery Clinical Experience in Medical Education: An Early Clinical Exposure for Residency Programs

D04: Offer FM Clerkships: How to Develop a Didactic Curriculum Dedicated for Medical Students Only

D05: Are the Strengths and Scope of Family Medicine Reflected in UME Curricular Materials?

D06: Students in Telehealth: A Discussion of Scenarios to Incorporate Students in Virtual Visits

D07: Overcoming Challenges in Webisode Teaching: A Symposium on Lessons Learned in Medical Student Telehealth Education

D08: A Teaching CIN: A Platform for Learner Engaged Health Equity, Interprofessional, Population Health Education and Scholarship

D09: Using Instagram Stories to Engage Medical and Pharmacy Students in Developing Videos About Motivational Interviewing

10:15–11:15 am

L05: Creative, Organized, Proactive and Adaptive: Key Characteristics and Best Practices of a Successful Coordinator *or view one of our on-demand educational sessions!*

11:45 am–12:45 pm

L06: Work Rhythms: Intentional Strategies for Your Life in Family Medicine *or view one of our on-demand educational sessions!*



1:15–2:15 pm

General Session: *From Code to Bedside: Why and How Family Medicine Should Lead the Healthcare AI Revolution*

Steven Lin, MD

Stanford University School of Medicine, Division of Primary Care and Population Health

2:30–3:30 pm

Virtual Poster Hall

2:30–3:30 pm

Partner Meet and Greet

2:45–3:15 pm

Wellness Activity (Strength Training)

3:45–4:45 pm

L07: Assessing Students in a Virtual Environment: Translating What We Know to Telehealth *or view one of our on-demand educational sessions!*

5:15–6:15 pm

L08: Becoming: A Panel of URM Chief Residents and Their Academic Medicine Journey to Resident Leader *or view one of our on-demand educational sessions!*

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WEDNESDAY AT A GLANCE, FEBRUARY 3 - all times listed are Central Standard Time (CST)

9:00–10 am

Hot Topic Zoom Room Discussions

- COVID Support Room (Faculty): Share How Your Work Life Has Been Affected by COVID
- Holistic Admissions: How to Review Student Applications When Step 1 Is Pass/Fail
- Negotiation Skills: Negotiations and Crucial Conversation Training
- Progressive Pipeline: Family Medicine Needs to Own Pipeline-Increase in Diversity (QI Projects for Students)
- Race and Diversity—Uncomfortable and Difficult Conversations: What Is Needed for Socially Accountable Academic Health Centers and Value-Added Education

10:15–11:15 am

L09: Changing the World One Step at a Time; Advocacy for What You Believe in *panel discussion* or view one of our on-demand educational sessions!

11:45 am–12:45 pm

L10: Taking Bold Action, Leading by Example: Recognizing, Improving, and Resolving the Unique Challenges Faced by URM Students or view one of our on-demand educational sessions!

1:15–2:15 pm



General Session: *Climate Change, Health and Poverty*

Cheryl Holder, MD

Florida International University, Herbert Wertheim College of Medicine—Diversity, Equity, Inclusivity and Community Initiatives

2:15 pm

Conference Adjourns

GENERAL SESSION *all times listed are Central Standard Time (CST)*

MONDAY, FEBRUARY 1

1:15–2:30 pm



The Scott Fields Lecture: The Intersection of Racism and Race-Based Medical Decision Making in Medical Education

Bonzo Reddick, MD, MPH, Mercer University

An expert panel from the Association of American Medical Colleges (AAMC) encouraged schools to improve the teaching and learning of behavioral and social sciences in undergraduate medical education. Most medical schools and residency programs educate their learners about the social determinants of health, but there is little guidance about the ideal quantity or format for education on social contributors to health outcomes. One particular social determinant of health—a patient’s race or ethnicity—is mentioned frequently in medical education, but with a heavy emphasis on supposed biological or genetic differences between different races and cultural groups. For example, our learners are taught that Asian patients have higher rates of gastric cancer or that Black patients are at higher risk for cardiovascular disease, but we rarely discuss that these differences are likely caused by social and environmental factors. Moreover, when we discuss racial and ethnic differences, we group patients into large clusters based on phenotypes which do not have a biological or genetic basis and have little to no scientific evidence to support them. Dr Reddick will present a new paradigm for medical education that asserts that race-based medicine and a social determinants of health approach to healthcare are diametrically opposed. Additionally, this paradigm integrates social determinants of health into the entirety of medical education, as we can paradoxically use the traditional biological focus of medical schools to teach about the social factors that impact patients’ health.

Learning Objectives:

On completion of this session, the participants should be able to:

- Discuss current trends in teaching race-based medicine in medical schools and residency programs.
- Identify the evidence for/against teaching race-based medical decision making using 1 of 4 clinical examples.
- Describe how a genetic/biological view of racial and ethnic classifications contributes to systemic racism.
- Describe a new educational paradigm in which the impact of social determinants on a patient’s health supersedes biological determinants, and we paradoxically use biological determinants to promote a social determinants of health approach to medical education and health care.

Dr Reddick is the associate dean of Diversity, Equity and Inclusion, the chair of the Department of Community Medicine, and a professor in the Community Medicine and Family Medicine departments at Mercer University School of Medicine in Savannah, GA—the city where he was also born and raised. After receiving his BS degree (Biology) from Morehouse College and MD degree from Morehouse School of Medicine in Atlanta, GA, Bonzo moved to NC to attend the University of North Carolina at Chapel Hill, where he completed a family medicine residency, two faculty development fellowships, and an MPH degree with an added Interdisciplinary Certificate in Health Disparities. He practices at the JC Lewis Primary Health Care Center, a federally qualified health center (FQHC) and designated health care for the homeless (HCH) site.

Dr Reddick is well known for his unique, innovative teaching methods, and he has been recognized with 14 teaching awards in his career. He is on the board of trustees for the Society of Teachers of Family Medicine (STFM) Foundation, and he writes questions for the American Board of Family Medicine board exams and in-training exams. His other professional interests include: prevention, early diagnosis, and management of HIV and Hepatitis C in primary care and emergency care settings, application and teaching of social determinants of health and health equity, and use of test-enhanced learning to improve academic performance and medical knowledge.

GENERAL SESSION *all times listed are Central Standard Time (CST)*

TUESDAY, FEBRUARY 2

1:15–2:15 pm



From Code to Bedside: Why and How Family Medicine Should Lead the Healthcare AI Revolution

Steven Lin, MD, Stanford University, Division of Primary Care and Population Health

Artificial intelligence (AI) is poised as a transformational force in health care. In this session, participants will explore the top ten ways AI will impact patients, providers, health systems, and the Quadruple Aim. We will examine both the tremendous promise and the key limitations of AI, including its ethical pitfalls and health equity implications. Primary care is where the power, opportunity, and future of AI are most likely to be realized in the broadest and most ambitious scale. Family medicine—as the dominant force at the base of the healthcare pyramid, with its unrivaled interconnectedness to every part of the health system and its deep relationships with patients and communities—is the most uniquely suited specialty to lead the health care AI revolution. Participants will learn how family physicians can lead the future by adapting quality improvement methods to AI implementations, partnering with technologists to ensure that use cases are relevant and always human-centered, and advocating for inclusive and ethical AI that combats (rather than worsens) health inequities.

Learning Objectives:

On completion of this session, participants should be able to:

- Define artificial intelligence, machine learning, and deep learning.
- Describe ten ways artificial intelligence is transforming health care, as well as the key limitations and ethical pitfalls of artificial intelligence.
- Explain three reasons why and three reasons how family medicine should lead the health care AI revolution.

Dr Lin is a family physician, educator, researcher, and administrator. He received his MD from Stanford University and completed his training at Stanford's family medicine residency program at O'Connor Hospital. He is clinical associate professor and vice chief for technology innovation in the Division of Primary Care and Population Health at Stanford. He is the founder of three nationally recognized programs: the O'Connor-Stanford Leaders in Education Residency Program (OSLER), the Stanford Medical Scribe Fellowship (COMET), and the Stanford Healthcare AI Applied Research Team (HEA3RT). Dr Lin is the author of more than 200 scholarly works and conference presentations. His research covers a broad range of primary care topics with a current focus on artificial intelligence in health care.

GENERAL SESSION *all times listed are Central Standard Time (CST)*

WEDNESDAY, FEBRUARY 3

1:15–2:15 pm



Climate Change, Health, and Poverty

Cheryl Holder, MD, Florida International University—Diversity, Equity, Inclusivity and Community Initiatives

Climate change impacts all of us, but low wealth communities are especially vulnerable. Through the stories told by South Florida's patients, Dr. Holder will review the four major ways climate impacts health, eight major illnesses, and a strong and equitable clinician response, incorporating economic and social justice.

Learning Objectives:

On completion of this session, participants should be able to:

- Identify at least two populations which are more vulnerable to the impact of climate change.
- Describe three ways climate change impacts health.
- Identify three ways clinicians can act for climate change solutions.

After her undergraduate education at Princeton University, Dr Holder completed The George Washington University School of Medicine and Internal Medicine training at Harlem Hospital. In 1987, she moved to Miami-Dade County as a National Health Service Corp Scholar to work with underserved communities and served as medical director of Jackson Health System's North Dade Health Center from 1990 to 2009. As medical director, she developed an HIV care and treatment program with funding through the Ryan White Care Act and participated in Centers for Disease Control and Prevention and National Institute of Health advisory and programmatic review panels for HIV treatment and vaccine research and for community based participatory research. In September 2009, she joined Florida International University Herbert Wertheim College of Medicine as faculty where she focuses on teaching the impact of social determinants of health-on-health outcomes, addressing diversity in health professions through pipeline programs, HIV prevention, and health impact of climate change. Dr Holder currently serves as the interim associate dean of diversity, equity, inclusivity, and community initiatives.



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LIVE SESSIONS: *all times listed are Central Standard Time (CST)*

MONDAY, FEBRUARY 1

LIVE LECTURES *with Q&A*

- 10:15–11:15 am** **L01:** Transmitting Antiracism and Healing COVID-19 Scars: How to Grow Tolerance From Trainees to Teachers V.99
- 11:45 am–12:45 pm** **L02:** Do I Have To Be The One To Tell Them? Using the ARCH-SPIKES Model to Give Difficult Feedback
- 3:30–4:30 pm** **L03:** Family Medicine National Sub-Internship Curriculum: Updates and Final Input
- 5–6 pm** **L04:** Implementation of a Health Equity Curriculum Into Undergraduate and Graduate Medical Education”
follow-up to Dr. Reddick’s General Session

TUESDAY, FEBRUARY 2

SCHOLARLY TOPIC DISCUSSIONS *open to all attendees*

- 9–10 am**
- D01:** How to Teach Hospice and Palliative Medicine to Medical Students in a Virtual Elective
- D02:** Medical Education and Interprofessional Service Learning
- D03:** Newborn Nursery Clinical Experience in Medical Education: An Early Clinical Exposure
- D04:** Residency Programs That Offer FM Clerkships: How To Develop A Didactic Curriculum Dedicated For Medical Students Only
- D05:** Are the Strengths and Scope of Family Medicine Reflected in UME Curricular Materials?
- D06:** Students in Telehealth: A Discussion of Scenarios to Incorporate Students in Virtual Visits
- D07:** Overcoming Challenges in Webside Teaching: A Symposium on Lessons Learned in Medical Student Telehealth Education
- D08:** A Teaching CIN: A Platform for Learner Engaged Health Equity, Interprofessional, Population Health Education and Scholarship
- D09:** Using Instagram Stories to Engage Medical and Pharmacy Students in Developing Videos About Motivational Interviewing

LIVE LECTURES *with Q&A*

- 10:15–11:15 am** **L05:** Creative, Organized, Proactive and Adaptive: Key Characteristics and Best Practices of a Successful Coordinator
- 11:45 am–12:45 pm** **L06:** Work Rhythms: Intentional Strategies for Your Life in Family Medicine
- 3:45–4:45 pm** **L07:** Assessing Students in a Virtual Environment: Translating What We Know to Telehealth
- 5:15–6:15 pm** **L08:** Becoming: A Panel of URM Chief Residents and Their Academic Medicine Journey to Resident Leader

WEDNESDAY, FEBRUARY 3

LIVE LECTURES *with Q&A*

- 10:15–11:15 am** **L09:** Changing the World One Step at a Time; Advocacy for What you Believe in *panel discussion*
- 11:45 am–12:45 pm** **L010:** Taking Bold Action, Leading by Example: Recognizing, Improving, and Resolving the Unique Challenges Faced by URM Students

ON-DEMAND LECTURES *We encourage you to leave comments and feedback for presenters*

- OD01:** Using a Holistic, Competency-Based Grading System to Determine Year Three LIC Grades
- OD02:** Learning Trajectory of Third-Year Medical Students' Clinical Performance in a 6-Month Primary Care Integrated Clerkship
- OD03:** Unprompted Narrative Comments After 6 Months With a M3 Student in Office: On What Competencies Do Community Preceptors Focus?
- OD04:** A Student-Generated, Peer-Led Teaching Activity for Integrative Medicine in a Family Medicine Accelerated Track
- OD05:** Comparative Effectiveness of 1:1 Teaching and Group Learning to Develop Medical Student Sexual History Gathering Competencies
- OD06:** Increasing the Number of Underrepresented Minority Residents at a Family Medicine Residency in Denver, Colorado
- OD07:** Reproductive History, Contraceptive Practices, and Future Needs Among Female Clients at a Syringe Exchange Program
- OD08:** Forming an STFM Special Projects Team on Longitudinal Early-Phase Primary Care Experiences
- OD09:** U2P: Equipping Students to Care for Urban Underserved Communities in Alabama
- OD10:** Telemedicine for Primary Care in the Era of COVID-19: A Quality Improvement Project
- OD11:** Curriculum, Electives, and Student Choice of Family Medicine: What We Know, What We Don't, and What Next
- OD12:** Assessing Health Beliefs Using the LEARN Model
- OD13:** Assessing Medical Student Skills in Conducting Difficult Conversations: How to Deal With Patient With a Stigmatized Issue
- OD14:** A Natural Cross-Over Study: How Do In-Person vs Remote Clerkship Seminars Differ in Impact to Learners and Faculty?
- OD15:** Pregnancy and Parenting in Medical School: How to Support Trainees and Families
- OD16:** Comparing Teaching Modalities of Human Trafficking Identification and Response in Medical Education
- OD17:** Partnering With Medical Students and Clinical Pharmacist for Patient Outreach During the COVID-19 Pandemic
- OD18:** Rural Outreach Programs Going Virtual in the Time of COVID: Lessons Learned From the UNC Family Medicine Summer Academy
- OD19:** Phone Calls Instead of Physical Exams: Students' and Preceptors' Perspectives on Telemedicine Clerkship Experiences
- OD20:** Voices of the Stakeholders: Reflections on a Virtual Interprofessional Education Experience From Students and Faculty
- OD21:** Rethinking Advocacy Training in Medical Education: Evaluation of a Student-Organized Learning Experience
- OD22:** Medical Students Making Patient Outreach Calls During the COVID-19 Pandemic Learn Powerful Social Advocacy Skills
- OD23:** Win-Win: Medical Students Support Patients and Learn New Skills Through Social Outreach Calls During the COVID-19 Pandemic
- OD24:** What Inspires You? A Virtual Hope Quilt Stitches Together Real Community
- OD25:** The FLAME Initiative: Using Teaching Scripts to Enhance "Resident as Teachers" Experience
- OD26:** Assessing STFM's Standardized Onboarding Resources for Students and Preceptors at Family Medicine Community Sites
- OD27:** Promoting Student Interest in Family Medicine: Teaching Community-Based Patients Exercise and Strength Training
- OD28:** Developing a New Program to Pipeline Primary Care Clinicians Into Tribal, Rural, and Underserved Communities in Oklahoma
- OD29:** Virtual View: One Program's Online Experience for Prospective Applicants
- OD30:** Association of Average Institutional Educational Debt Load and Medical Student Choice of Family Medicine
- OD31:** Understanding the Regional Impact of Medical Schools on the Family Medicine Workforce in the United States.
- OD32:** Influence of Clerkships on Primary Care Specialty Choice—a Scoping Review
- OD33:** Reducing Feelings of Isolation and Anxiety Among Community Members With Mental Illness During the COVID-19 Pandemic
- OD34:** Caring for Patients With Complex Trauma Due to Human Trafficking: Equipping Medical Students to Meet This Growing Challenge!
- OD35:** How Medical Students Can Help: Educating Medical Students and Enhancing Patient Support During the COVID-19 Crisis
- OD36:** The Impact of Family Medicine Interest Groups on Primary Care Career Choice: A Systematic Review
- OD37:** COVID-19 Testing and Research During the Pandemic: Mobilizing Medical Students Through a Mobile Clinic
- OD38:** Exercise and Physical Activity Counseling in Medical Student Education
- OD39:** Community Resources on the Family Medicine Clerkship: The Role of Experiential Learning
- OD40:** It's a Two-Way Street: Helping Faculty Seek Feedback From Learners

ON-DEMAND LECTURES *continued*

- OD41:** Zooming in on Relationships: Strengthening What Matters Most With Medical Students in Primary Care Apprenticeships
- OD42:** Rural Pipeline Programs at UNC School of Medicine and Their Role in Recruitment and Retention of the Rural Family Physician
- OD43:** What Factors Do Medical Students Prioritize in a FM Residency and How to Align With These Priorities to Improve Recruitment
- OD44:** No Outcome, No Income: Positively Educating Student Physicians About Value-Based Care
- OD45:** Observed Telemedicine Simulation in Teaching Clinical Skills in Second-Year Medical Students
- OD46:** Using a Poverty and Social Needs Simulation Game to Teach First-Year Medical Students About Social Determinants of Health
- OD47:** Utilizing the AHEC Scholars Program to Build Medical Student's Self-Efficacy for Practice Transformation
- OD48:** Cooking up a Virtual Culinary Medicine Course in the Midst of a Pandemic
- OD49:** Teaching Medical Students About the Role of Community Health Centers Through the Lens of the COVID-19 Pandemic
- OD50:** Faculty Perceptions of a Novel Virtual Family Medicine Clerkship
- OD51:** How to Help Left-Handed Learners Succeed in Medicine: Left-Handed Learner Challenges and Twelve Combating Strategies
- OD52:** Caring for the Undeserved During COVID-19 Pandemic: Medical Student Telemedicine and Behavioral Health Integration
- OD53:** Family Medicine Advising for a Virtual Match Year: Increased Collaboration, Participation, and Lessons Learned
- OD54:** Leveraging Technology to Create a Community of Engaged Longitudinal Integrated Clerkship Preceptors
- OD55:** Curriculum Response to COVID-19: Creating an Online Transition of Care Simulation Case
- OD56:** Pandemonium to Proficiency, Implementing Telehealth at a Student-Run Free Clinic in Response to COVID-19
- OD57:** Shelter in Place, Continue to Connect: New Innovations in Education Birthed From Necessities During a Pandemic
- OD58:** Innovation in Subinternship: Two Institutions' Approaches to Breathing the Spirit of Family Medicine Into Subinternships
- OD59:** A Roadmap for Strolling Through the Match
- OD60:** Supporting Family Medicine Faculty in Research Efforts Through A Model of Rolling Participation of Medical Learners
- OD61:** Silver Linings of the COVID Pandemic: Lessons Learned From the Pivot to Telemedicine
- OD62:** The Silent Health Disparity: Why We Should Teach Medical Students to Care for Patients With Disabilities
- OD63:** Aligning the National Clerkship Curriculum and Aquifer Family Medicine's Learning Objectives for Enhanced Curricular Mapping
- OD64:** Video Conferencing: A Coordinator's New Normal
- OD65:** Preparing for Chaos
- OD66:** Virtual Learning: Operating a Clerkship During a Global Pandemic
- OD67:** From 60 mph to 0 and back again: Adapting to COVID-19 in Accelerated Pathway Programs
- OD68:** Helping Students Who Struggle With Standardized Tests
- OD69:** Reflections From Medical Students About the Value of a Health Disparities Curriculum
- OD70:** Innovation in COVID Times: Development of a Patient Outreach Toolkit for a Family Medicine Clerkship
- OD71:** "Vertical" Interprofessional Education
- OD72:** Resident and Student Directed Development of "Pocket Talks" for Interns.
- OD73:** Help Students Hit the Ground Running at Their Clinical Rotations
- OD74:** Family Medicine Clerkship, COVID-Style
- OD75:** LGBTQ Plus...COVID?
- OD76:** The COVID Effect on Medical Education: Developing a Virtual Family Medicine Clerkship Curriculum
- OD77:** Strategies to Meet LCME Requirements for Directly Observing Students in Clinical Settings and Performing Formative Feedback
- OD78:** Encouraging Diverse "Young Docs": FMIG Serves as a Mentor for Underrepresented High School Students
- OD79:** Using Brain Rules to Make It Stick: Improving Education From Classroom to Clinic With Neurobiology and Educational Psychology
- OD80:** Entrustable Professional Activity Coaching Tool (EPACT): Innovative Tool for Developing Individual Learning Plans

ON-DEMAND LECTURES *continued*

- OD81:** Professional Development for Successful Clerkship Directors
- OD82:** Effective Use of High-Stakes Virtual Objective Structured Clinical Examination (Tele-OSCE)
- OD83:** Me and My (Virtual) Shadow: Applying Shadow Coaching Strategies to Enhance Medical Student Teaching
- OD84:** Telehealth in the Clinical Learning Environment: How to Teach the Art of Bedside Manners
- OD85:** Going Up: An Elevator Speech to Take Your Career to the Next Level
- OD86:** Fighting Opioid Epidemic With Education: A Guide for a Strategic Approach
- OD87:** Image Gently: Reducing Childhood Radiation Exposure Through Education
- OD88:** Developing Patient Advocates and Health Equity Champions Through the Primary Care Leadership Collaborative
- OD89:** The Skinny on Dermoscopy: Teaching Skin Cancer Detection to Medical Students Using Triage Amalgamated Dermoscopic Algorithm
- OD90:** Countdown: Empowering Medical Educators to Promote and Enact Planetary Health Principles
- OD91:** Make Your Work Count Towards Your Promotion: Here Are Best Approaches!
- OD92:** Leading Change: Building the Next Generation Medical Educator
- OD93:** Adding Spice to Your Life—Learn as You Cook Four Instant Pot Recipes to Incorporate Spices With Antidiabetic Properties
- OD94:** Coaching for the Development of Master Adaptive Learners
- OD95:** Be a Family Medicine Champion
- OD96:** Developing and Implementing a Program to Empower Medical Students to Respond to Bias and Mistreatment on the Wards



SCHOLARLY AND RESEARCH POSTERS:

Attendees are encouraged to leave comments, thoughts, or questions for the presenters.

- P02:** Association of Food Insecurity and Adherence to Diabetes Self-Care Activities in a Diverse Group of Diabetic Patients
- P03:** Building the Foundation: Blueprint for a Healthcare and Homelessness Elective in Medical School Clinical Education
- P04:** Community Outreach Involvement Effects on Medical Student Empathy, Burnout, Inclusivity and Active Citizenship
- P05:** Completion Rates of Colonoscopy Screenings From the Primary Care Setting
- P06:** Completion Rates of Neuroimaging Orders From the Primary Care Setting
- P07:** Contraceptive Jeopardy for Third-Year Medical Students on the Family Medicine Clerkship
- P08:** Cooking in Clerkships: Bridging Nutrition Gaps for Medical Students
- P09:** Creating Virtual Learning for Students During the COVID Pandemic: Feasibility and Impact of Technologies in Medical Education
- P10:** Creation of a Native Health Module for the University of Washington School of Medicine's Underserved Pathway
- P11:** Cultural Sensitivity and Learning About Healthcare Equity: Experiential Learning in a Student-Run Free Clinic
- P12:** Development of a Short Form of the Family Medicine Attitudes Questionnaire
- P13:** Establishing a Medical Student Pipeline to Recruit for a New FM Residency Program: A Five-Pronged Approach
- P14:** Exploring Approaches and Resources Utilized for USMLE Step 2 Exams to Inform Best Practices
- P15:** Exploring Unintended Pregnancy Among Women With Opiate Dependence
- P16:** Faculty Experience With Using Student Outpatient Documentation as the Billable Note
- P17:** From Clinicians to Culinary Artists: The Effect of Interactive Culinary Nutrition Didactics on Preclinical Curricula
- P18:** Health Equity in Student-Run Clinics: A Theoretical Model for Change
- P19:** How Race Is Taught in the First-Year Medical School Class Setting: A Retrospective, Longitudinal Curriculum Analysis
- P20:** Implementation of Remote Learning Electives for Medical Students Within a University Based Family Medicine Department.
- P21:** Improving Resident Comfort and Skill With Medical Student Teaching
- P22:** Improving Student Confidence Through Electronic Health Record Order Entry
- P23:** Inspiring Future Clinicians Through Value Added Medical Education: Student Synthesis of Emerging COVID-19 Literature
- P24:** Interprofessional Collaboration in Chronic Care: Course for Second-Year Medical Students
- P25:** Mammogram Order Completion in the Outpatient Setting
- P26:** Mid Central AHEC Flexes Its Community and Economic Development Expertise to Support Medical Students in Clinical Rotations
- P27:** Naloxone Training to Medical Students
- P28:** Pilot Study to Evaluate the Effect of an SOP for PrEP on Provider Comfort, Knowledge and Experience in a Georgia Residency
- P29:** Preliminary Results of a Mixed-Methods Program Evaluation of a Longitudinal Family Medicine Leadership Program
- P30:** Quiz Score as a Predictor of End of Clerkship Grade During the Family Medicine Clerkship
- P31:** Service on Student-Run Free Clinic Executive Board Improves Leadership Skills of Medical Students
- P32:** Social Determinants of Health OSCE Case: Assessing Students' Patient-Centered Communication and Attention to Patient Context
- P33:** The Effect of COVID-19 Stay-at-Home Orders on Medical Student Stress, Sleep, and Satisfaction With the Learning Environment
- P34:** The Importance of Correctional Health Care Curriculum in Medical Education
- P35:** The STORIES Project: Stroke Technology Overviews of Rehabilitation, Insights, and Experiences of Survivors and Carers
- P36:** Using Photovoice to Build Resilience in Your Program

STUDENT SCHOLAR POSTERS:

Attendees are encouraged to leave comments, thoughts, or questions for the presenters.

- SP01:** Correlation Between Vitamin and Supplement Use and SARS CoV-2 Infection
- SP02:** Adoption of Telemedicine in Outpatient Practices at Emory Healthcare: Provider Perspective
- SP03:** Advocacy and Assessment of Climate Change Integration Into Preclinical Curriculum
- SP04:** Community Health Clubs in US-Mexican Border Communities: Implications for Family Practitioners
- SP05:** Contraceptive Practices, Intimate Partner Violence, and Reproductive Coercion Among Women at a Syringe Exchange Program
- SP06:** Creating a Safe Environment for the Acquisition of Professional Competencies: Anatomy at Harvard Medical School
- SP07:** Culturally Reflective Medicine: A Novel Identity-Based Framework for Understanding Minority Patients Through Self-Reflection
- SP08:** Developing a Wellness Curriculum at a New Regional Campus: A Pilot Study
- SP09:** Disability Health: Development, Implementation, and Evaluation of a Novel Curriculum at Stanford School of Medicine
- SP10:** Evaluation of Medical University of South Carolina Pipeline Programs in Increasing Health Care Access and Workforce Diversity
- SP11:** Evaluation of the Likelihood of Specific Press Ganey® Questions to Receive a Perfect Score in Family Medicine
- SP12:** Evidenced-Based Red Flags for Falls Associated With Low Back Pain: A Teachable Moment for Medical Students
- SP13:** Helping Out Public Education (HOPE): Tutoring Services for Miami Dade County Public Schools During the COVID-19 Pandemic
- SP14:** Identifying Barriers to a Diverse, Inclusive, and Equitable Medical Education
- SP15:** Impact of a Care Transition to Telehealth Services for Patients With Intellectual and Developmental Disabilities
- SP16:** Improving Pre-Clerkship Education and Patient Care in the Era of Telemedicine
- SP17:** Innovative Approaches to Nutrition Education in Medical Education
- SP18:** Medical Students Perceived Impact of the COVID-19 Pandemic on Mental Health and Academic Performance
- SP19:** Patients' Perception of Healthcare Provider Communication Quality and Colorectal Cancer Screening in US Adults
- SP20:** Patients' Perspective of Their Post-Acute Care Transition at a Skilled Nursing Facility
- SP21:** Practicing the Art of Delivering Bad News: A Telehealth Simulation Pilot Program
- SP22:** Resident and Student Directed Development of "Pocket Talks" for Interns
- SP23:** Restrictions on Reproductive Training: A Study on Family Medicine Residency Programs in the U.S.
- SP24:** Risk Factors and Life Experiences for Initiation and Progression of Substance Use in Adolescents
- SP25:** Student-Developed Curriculum for Cultural Change in Medicine: Opening the Conversation in a Peer-Led Environment
- SP26:** Supporting Breastfeeding in Late Preterm Infants: Null Results and Next Steps of a Hospital-Based Intervention
- SP27:** The Effect of Being a Mentor on Medical Student Attitudes About Family Medicine
- SP28:** The Value of Medicare Annual Wellness Visits for Patients, Physicians and Medical Students
- SP29:** Translating Written Assignments Into a Virtual, Summative OSCE
- SP30:** Use of Metamemory Techniques in Teaching Dermatology to Medical Students
- SP31:** Washington State University Native American Health Curriculum Project
- SP32:** Will a Comprehensive Review for the Family Medicine Shelf Make a Significant Difference in Grades?

2021 STFM CONFERENCE ON MEDICAL STUDENT EDUCATION VIRTUAL

Access to all on-demand presentations is available at mse.stfm.org, and all live presentations, **excluding Zoom meetings**, are included in the on-demand content.

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Continuing Medical Education

This Enduring Material activity, Virtual Conference on Medical Student Education On-Demand Sessions, has been reviewed and is acceptable for credit by the American Academy of Family Physicians. Term of approval begins 02/1/2021. Term of approval is for one year from this date. Physicians should claim only the credit commensurate with the extent of their participation in the activity. Approved for 12 AAFP Prescribed credits. The AAFP has reviewed Virtual STFM MSE Live Activity and deemed it acceptable for up to 7.00 Online Only, Live AAFP Prescribed credit. Term of Approval is from 02/01/2021 to 02/04/2021. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

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Refund Statement

Because the virtual 2021 STFM Conference on Medical Student Education will be available on-demand for 90 days, STFM will not issue registration refunds. Once registered, attendees will have 3 months to participate and/or view on-demand presentations.

Acknowledgments

STFM recognizes and thanks the Conference Steering Committee and Medical Student Education Committee for their time and leadership in developing this year's conference.

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