

The Three Rivers Curriculum emphasizes connections among different courses, reflecting how systems in the human body interact. Students will also make use of hands-on technology in Alan Magee Scaife Hall's new West Wing.



AIMÉE OBOZINSKI/UNIVERSITY OF PITTSBURGH

An open conversation

A NEW MED SCHOOL CURRICULUM BUILT ON DIALOGUE

Lisa Borghesi knows a missed opportunity when she sees one. She recalls presenting a topic in her class, only to find out from her course evaluations that another faculty member had covered it a few weeks before.

"I realized that, despite the fact that the faculty are my friends, and we talk about the courses, I couldn't say I ever sat down with the syllabuses of the pre-clerkship curriculum and informed myself about what every course is doing," says Borghesi, a PhD professor of immunology and the assistant dean for foundations in the University of Pittsburgh Office of Medical Education.

Soon, she and her colleagues won't be left to work out such challenges on their own. The Three Rivers Curriculum, launching this fall for the incoming Pitt Med class, reshapes medical education into an ongoing conversation—among instructors of different courses, among educators and students, among trainees from multiple health care professions, and among the medical school and its community.

In the human body, systems interact, overlap and influence each other. How a medical school imparts knowledge, the new curriculum suggests, should reflect that reality not only in content but in method.

The new model moves away from lectures, which often see paltry attendance. (Students tend to tune in to faculty lecture podcasts instead.) The one-way street can also leave students without a confident grasp of the material. Now, more small-group discussions, facilitated by longitudinal

educators who work with students for an entire semester, will engage students as active participants in their education. Classes in the new West Wing of Alan Magee Scaife Hall won't be held in large lecture rooms—see "Best of the West," page 12, for more.

The curriculum's case-based approach encourages critical thinking and emphasizes underlying mechanisms in medicine. And the longitudinal educators will guide future doctors throughout the stages of their preclinical education, linking concepts and serving as mentors.

Pitt Med is already ranked among the top schools in the country (11th for primary care and 13th for research, according to the 2023 U.S. News & World Report rankings). Yet a more integrated understanding of health will more fully prepare students as they step into the clinic for the first time, says Nathalie Chen, an MD, PhD student who served on the curriculum reform task force.

"When you hit clerkships, a person may come in who's tired, and they have a rash and all these other symptoms," says Chen. If you don't understand the connections across the material you've learned, "you're like, 'Well, I don't know what class we're in right now.'"

John Maier, a PhD, MD assistant professor of family medicine who served on the curriculum reform task force, believes more small-group discussion will not only deepen students' knowledge but will also help them become better at relating to others—a great benefit to their future patients.

The curriculum's very development took the value of dialogue into account. "Students were equal partners in the creation of this," says Jason Rosenstock, associate dean for medical education and an MD professor of psychiatry. Their feedback influenced a stronger focus on social medicine and leadership. And taking student well-being into consideration, new "flex weeks" allow more time for independent learning, shadowing, research and personal activities.

Just as important was participation from staff who help make learning possible. “If you come up with a brilliant idea, will it work? Do we have the technology to do it? Do we have the resources? Only the staff who do that work every day can answer that,” says Katie Maietta, an MPPM and executive director of the Office of Medical Education. “They want to be heard. And they want to also make [medical education at Pitt] better.”

Other essential voices came from beyond the walls of the medical school. The curriculum reform task force included community members to help represent patients—of vastly different backgrounds—that today’s med students will eventually serve.

“The health care system has the power, and the community members oftentimes felt powerless in this arrangement,” says Felicia Savage Friedman, a task force member who runs a yoga studio, studied education and previously worked as a UPMC community health worker.

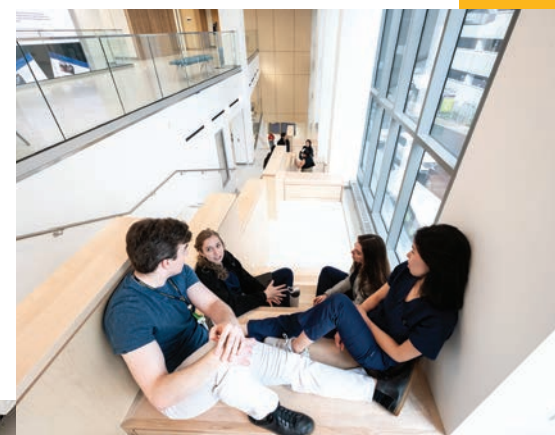
The task force sought to break down hierarchies by having everyone address each other by first name—no titles or honorifics. “Just seeing me on a regular basis in this kind of space as a peer is going to help to shift folks into a space where they’re more introspective and more thoughtful,” says Friedman.

She sees it as just one step toward a more inclusive, patient-centered approach to medicine.

Since the reform process launched in 2019, Rosenstock says, its three phases have brought approximately 400 people to the discussion table, spread among task forces, committees and subcommittees. Even after all the planning, those involved know that implementing the curriculum in the fall will bring new challenges to work through.

“Our students will have a huge role in leading the discussion of the new curriculum,” says Borghesi, who also served on the task force. “There will be first-year hiccups, and they’ll be our partners in coming up with solutions.”

The conversation continues.
—Andrew Doerfler



The new curriculum encourages conversation and team-building among students by moving away from large lectures. In the new West Wing, students meet in intimate, flexible classrooms for more active learning. And new spaces to study and gather keep the dialogue going beyond the classroom.



The seven-story expansion of Alan Magee Scaife Hall opened its doors for the first time in April.

Boston architecture firm Payette handled design planning for the building, and PJ Dick led construction management.



Best of the West

With the launch of a new curriculum at the School of Medicine comes a long-awaited facility to match.

The new West Wing of Alan Magee Scaife Hall opened its doors in April, with a grand opening planned for later in 2023. The airy, light-filled expansion, built on the existing foundation at Terrace and Lothrop streets, offers seven stories where health sciences students will learn, study, gather and—if you can believe it—even relax.

Katie Maietta, executive director of the Office of Medical Education, compared stepping from the old building into the “bright and beautiful” West Wing to Dorothy’s introduction into the technicolor world of Oz. Among its highlights is the seventh-story anatomy lab. There—past hallway displays featuring cross sections of brains, bodies and other specimens—students dissect cadavers both real and, using virtual reality systems, digital. Nearby, a wet lab spans the width of the building.

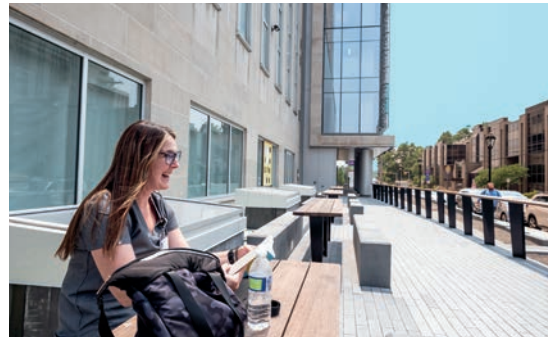
Gone are the large, rigid lecture rooms of old. Instead, the West Wing features smaller-scale, flexible learning spaces with partitions and seating that can be adjusted as needed. The rooms square with the new curriculum’s emphasis on more group discussion and active learning.

There is one space equipped to hold a large crowd: A 600-seat auditorium. Fittingly, among its very first uses was hosting the Class of ‘23’s Scope and Scalpel performance, “West Wing Story.”

Access to the sixth floor is limited to med students only. There, aspiring doctors can take advantage of group study rooms and a lounge with Ping-Pong and pool tables, a Wii, a lava lamp and a life-size cut-out of Nicolas Cage (reportedly, a specific request from students). Students can snatch a snooze in the sixth-floor quiet room. “Every day I get my half-hour nap in,” says Stephen Frederico, a third-year medical student. Plenty are also making use of the Panera Bread two floors down, as well as the study areas in the Falk Library of the Health Sciences.

Maietta hopes that cross-disciplinary symposia in the building and features like the open, lobby-style seating across multiple floors will encourage more intermingling.

“We’ve really been moving toward more interprofessional education in our curriculum,” she says. “I feel like [the wing] is going to turn into a hub for the health sciences students.” —AD



The new wing includes bright and airy spaces with lobby-style seating (above) designed to encourage more intermingling among students across the health sciences.

The seventh-floor anatomy lab (middle left) has 27 exam tables; an adjacent room makes use of virtual reality technology for complementary anatomy instruction.

The West Wing's design took student well-being into consideration. Outdoor spaces (middle right) and a fourth-floor Panera Bread provide a chance to refresh amid a heavy course load.

Only medical students can access the building's sixth floor, where they'll find a break room, study rooms and a quiet room for resting. The sixth-floor lounge (bottom right) features billiards, Ping-Pong and other games.

