Looking Inward: Improving Our Program’s Self Assessment Process

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Rutgers, The State University of New Jersey
Physician Assistant Program
Educational Goals & Objectives

• Critically evaluate a program self assessment process

• Utilize core faculty to implement a program self assessment process through the development of an assessment committee

• Describe the opportunities and challenges associated with optimizing a program self assessment process
The Purpose of...

assessment is to **INCREASE** quality.

evaluation is to **JUDGE** quality.

Too short and not enough leaves. Ć-
Session Outline

• The Problem
  – What we were doing and why a change was necessary

• Our Solution
  – Forming the Program Assessment Committee

• Our Process
  – Our current program evaluation process

• The Future
  – Where we go from here
The Problem
The Problem

• Data collection was not the primary issue
• Systematic analysis was a concern
• Aggregate analysis needed improvement
  – Professional Evaluation Form
  – Post Rotation Exam performance
• Consider how data is used and reported
  – SCPE student evaluation of clinical site
  – Course/Instructor evaluation; Rotation/preceptor evaluation
• Relying on experience > data analysis
The Problem

- Driven by our instruments
- Responsive to changing demands for data driven analysis
  - ARC-PA
  - University/School
  - The Market
- Manpower/Workload issues
- External vs internal benchmarks
  - PANCE data
  - Deceleration
The Problem: former drivers

Program Assessment

- Experience
- Data
- Intuition
- Crisis Management
The Problem: driving in reverse?

Outcomes
Practice Specialty

Curriculum
Specialty-Specific

Mission
Specialty-Driven
The Problem: Current Process
Our Solution: Forming the Program Assessment Committee
Our Solution:

The Program Assessment Committee (PAC)

• Impetus
• Charge
• Composition
• Responsibilities
• Frequency
Our Process
Our Process

- Program Assessment
- Mission
- ARC-PA
- Health care environment
- Learning outcomes
Our Process

Revising our approach to program evaluation

Step 1: Review current process
Step 2: Categorize data
Step 3: Revise instruments
Step 4: Assign responsibilities
Step 5: Fill in the details
Our Process

**Review current process**
- Develop a comprehensive spreadsheet detailing our current data collection and analysis process
- What data do we already collect
- Who is responsible for collecting it

**Categorize data**
- Administrative
- Admissions
- Didactic
- Clinical
- Post-grad/other
<table>
<thead>
<tr>
<th>Clinical Datapoints</th>
<th>Data/Measure</th>
<th>Tool</th>
<th>Responsible for Collection</th>
<th>Responsible for Analysis</th>
<th>Clinical Datapoints</th>
<th>Data/Measure</th>
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</thead>
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<tr>
<td>Student Rotation Evaluations</td>
<td>Rotation Journals</td>
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<td>OSCE</td>
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<td>Evaluation of sites</td>
<td>Site visit form</td>
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<td>Requirements for Graduation</td>
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# Our Process

<table>
<thead>
<tr>
<th>Admission Datapoints</th>
<th>Data/Measure</th>
<th>Tool</th>
<th>Responsible for Collection</th>
<th>Responsible for Analysis</th>
<th>Time frame</th>
<th>Files</th>
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<td>Supplemental Application</td>
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<td>Written Essay</td>
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<td><strong>Applicant Stats</strong></td>
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<td>Registrar</td>
<td>Rebecca</td>
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<td>Ruth</td>
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<td><strong>Communications with Applicants</strong></td>
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<td>Decline Position Questionnaire</td>
<td>Ruth</td>
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<td>Decline Alternate Questionnaire</td>
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<td>Withdraw Application</td>
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<td>Withdraw Alternate</td>
<td>Ruth</td>
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</tbody>
</table>

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**Note:** The table above outlines the steps involved in the admission process, including the collection and analysis of various data points. Each step is assigned to a responsible individual or team, ensuring a structured and efficient workflow.
Our Process

Revise instruments

- Allow program mission, student outcomes, ARC standards and healthcare environment to drive the process
- Review each of the data collection instruments and revise as necessary.
Our Process

- Site
  - Pt exposure
    - Pt + Pt2= Pt3
  - Site neutral
  - Pt exposure to other HCPs

- Who?
  - Group (more than 1)

- Other HCPs
  - Supervision?
    - Observation?

- Teaching/Didactic
  - Group (more than 1)

- Learning/Teaching
  - Pt exposure to other HCPs

- Adequate supervision
  - Observations

- Group (more than 1)

- Pt exposure
  - Pt + Pt2= Pt3

- Site neutral

- Pt exposure to other HCPs
Our Process: Old SCPE Evaluation (Part 1)

Preceptor: [Name placeholder]
Evaluator: ANONYMOUS
Class: [0]
Academic Year: 2014-2015
Period: From: To: Rotation: [Place holder]

1. What was your typical arrival time at this rotation site?
   - Before 8 am
   - 8 am - 9 am
   - 9 am - 10 am
   - 10 am - 11 am
   - 11 am - 12 pm
   - 12 pm - 1 pm
   - 1 pm - 2 pm
   - 2 pm - 3 pm
   - 3 pm - 4 pm
   - 4 pm - 5 pm
   - 5 pm - 6 pm
   - 6 pm - 7 pm
   - 7 pm - 8 pm
   - 8 pm
   - After 8 pm

2. What was your typical departure time from this rotation site?
   - Before 5 pm
   - 5 pm - 6 pm
   - 6 pm - 7 pm
   - 7 pm - 8 pm
   - 8 pm
   - After 8 pm

3. On average, how many patients were you responsible for each day?
   - One or two
   - Three to five
   - Six or more

Response scale: 1 = Always or Almost Always, 2 = Much of the time, 3 = About half the time, 4 = Some of the time, 5 = Never or Almost Never

Criteria:

4. How often was your patient care experience limited to observing the clinician evaluate the patient?
   - 1
   - 2
   - 3
   - 4
   - 5

5. How often did your patient care experience involve evaluating the patient with the clinician present in the exam room?
   - 1
   - 2
   - 3
   - 4
   - 5

6. How often did your patient care experience involve evaluating the patient with indirect supervision only (clinician not in the exam room)?
   - 1
   - 2
   - 3
   - 4
   - 5

Response scale: 1 = Daily or almost every day, 2 = Several times a week, 3 = Weekly or almost every week, 4 = Several times a month, 5 = Monthly, 6 = One time, 7 = Never

How often were the following made available to you during your rotation?

7. Morning Reports
   - 1
   - 2
   - 3
   - 4
   - 5
   - 6
   - 7

8. Rounds with the Team
   - 1
   - 2
   - 3
   - 4
   - 5
   - 6
   - 7

9. Group Lectures, Conferences, In-services
   - 1
   - 2
   - 3
   - 4
   - 5
   - 6
   - 7

10. Oversight Call
    - 1
    - 2
    - 3
    - 4
    - 5
    - 6
    - 7

11. Short-Call
    - 1
    - 2
    - 3
    - 4
    - 5
    - 6
    - 7

12. Formal “Student Prepared” Case Presentations
    - 1
    - 2
    - 3
    - 4
    - 5
    - 6
    - 7

13. Formal “Student Prepared” Case Lectures
    Please indicate your ability to participate in the following during your rotation.
    - 1
    - 2
    - 3
    - 4
    - 5

14. Documenting Patient History and Physical Examinations
    - 1
    - 2
    - 3
    - 4
    - 5

15. Documenting Patient SOAP or Progress Notes
    - 1
    - 2
    - 3
    - 4
    - 5

Briefly list the STRENGTHS of this rotation.

[Space for response]

Briefly list the WEAKNESSES of this rotation.

[Space for response]

Additional comments

[Space for response]

Please enter your password for authentication: [Space for password]

Please review your entries before submitting.
Our Process: Old SCPE Evaluation (Part 2)

Preceptor: [name placeholder]  
Evaluator: [name placeholder]  
Class: [name placeholder]  
Academic Year: 2014-2015  
Period: 0  
From: To: [rotation placeholder]

1. During this rotation, how well do you think the program prepared you in the following areas? (Elaborate in the comment box below, if appropriate.)
   Response scale: 1 = not at all prepared; 2 = somewhat prepared; 3 = fairly well prepared; 4 = very well prepared; NA = not applicable

   - basic sciences [rating]  
   - medical knowledge [rating]  
   - pharmacology [rating]  
   - physical exam skills [rating]  
   - taking a medical history [rating]  
   - ordering labs and diagnostics [rating]  
   - developing an assessment [rating]  
   - developing a management plan [rating]  
   - documentation [rating]  
   - presentation skills [rating]  
   - patient rapport [rating]  
   - rapport with team preceptor [rating]  
   - rapport with staff [rating]

2. At the end of this rotation, how confident do you feel in the following areas? (Elaborate in the comment box below, if appropriate.)
   Response scale: 1 = not at all prepared; 2 = somewhat prepared; 3 = fairly well prepared; 4 = very well prepared; NA = not applicable

   - basic sciences [rating]  
   - medical knowledge [rating]  
   - pharmacology [rating]  
   - physical exam skills [rating]  
   - taking a medical history [rating]

Comments:

Please enter your password for authentication:

Please review your entries before submitting.
Our Process: Revised SCPE Evaluation

Supervised Clinical Practice Experience Evaluation

Specialty
Site
Preceptor

Preceptor

If you spent the majority of your time with a preceptor(s) other than the person listed above, please indicate by writing in the name(s)

The preceptor(s) provided effective feedback on my performance
SA A N D SD
Comments

Working with the preceptors improved my understanding of clinical practice (such as physical exams, medical decision making, treatment options, etc)
SA A N D SD
Comments

The preceptor provided a good mix of opportunities for observing and performing various tasks
SA A N D SD
Comments

The preceptor delegated appropriate responsibility to me
SA A N D SD
Comments

The preceptor provided adequate supervision of my activities
SA A N D SD
Comments

Site

This site provided an adequate orientation
SA A N D SD
Comments

I became more proficient in clinical decision making and patient management
SA A N D SD
Comments

I became more proficient in clinical skills
SA A N D SD
Comments

This site adequately met the learning objectives in the Student Handbook for Clinical Clerkships
SA A N D SD
Comments

This site provided opportunities to foster the concept of the team approach to the practice of medicine
SA A N D SD
Comments

This clerkship provided me with an opportunity to develop my skills in providing humanistic care
SA A N D SD
Comments

Lists the strengths of this rotation

List the weaknesses of this rotation
Our Process

Assign responsibilities

Identify the person(s) who would ideally be responsible for collecting and analyzing data

• Program Director
• Committee Chairs
• ADDE
• ADCE
# Our Process

<table>
<thead>
<tr>
<th>Data/Measure</th>
<th>Year 1 Courses Class of 2014</th>
<th>Year 2 Didactic Courses</th>
<th>Clinical Rotations</th>
<th>Post-Graduation</th>
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</thead>
<tbody>
<tr>
<td>Application</td>
<td>PD, F</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student Course Grades</td>
<td>S</td>
<td>S</td>
<td>S</td>
<td>S</td>
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<tr>
<td>Lecturer evaluations</td>
<td>PD</td>
<td>PD</td>
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<tr>
<td>Course evaluations</td>
<td>PD</td>
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<td>Overall course recommendation</td>
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<tr>
<td>Pre-Clinical Comp Exam</td>
<td>S</td>
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<td>S</td>
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### Data/Measure

<table>
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<tr>
<th>Provider of Info</th>
<th>Recipient of Info</th>
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<tbody>
<tr>
<td>Student Journals</td>
<td>A</td>
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<tr>
<td>Student Evaluation of Sites</td>
<td>A</td>
</tr>
<tr>
<td>Overall rotation evaluation</td>
<td>A</td>
</tr>
<tr>
<td>Preceptor Evaluation of Student</td>
<td>A</td>
</tr>
<tr>
<td>Site Visit include data performed</td>
<td>A</td>
</tr>
<tr>
<td>Student Self-Evaluation</td>
<td>A</td>
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<tr>
<td>Overall Self-Evaluation</td>
<td>A</td>
</tr>
<tr>
<td>Post Clinical Rotation Exams</td>
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<tr>
<td>Overall PRE score</td>
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<tr>
<td>Comp Exam</td>
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<tr>
<td>Overall Comp score</td>
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### LEGEND

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<tr>
<td>Faculty</td>
<td>F</td>
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<tr>
<td>Advisor</td>
<td>A</td>
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<tr>
<td>Preceptor</td>
<td>P</td>
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<tr>
<td>Assistant Director, Clinical Education</td>
<td>AD</td>
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<tr>
<td>Program Director</td>
<td>PD</td>
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<td>Curriculum Committee</td>
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## Table Examples

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<tr>
<th>Provider of Info</th>
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<tr>
<td>Student</td>
<td>S</td>
</tr>
<tr>
<td>Faculty</td>
<td>F</td>
</tr>
<tr>
<td>Advisor</td>
<td>A</td>
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<tr>
<td>Preceptor</td>
<td>P</td>
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<tr>
<td>Assistant Director, Clinical Education</td>
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<td>Program Director</td>
<td>PD</td>
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<tr>
<td>Curriculum Committee</td>
<td>CC</td>
</tr>
</tbody>
</table>
Our Process

Fill in the details:

• Instrument/Data Source
• Who compiles the data and how frequently
• Benchmark
• Data collected
• Where is data stored
• Who does analysis
• How are results used
• Method of data collection
Instructions: Working in groups at your table, complete this planning document by filling in the cells. Brainstorm with each other to add other assessment tools/methods that could be utilized at your program. The facilitators will announce how much time will be allotted for the exercise and debriefing. This document could be linked to program goals, feel free to add a column for goals and show how those can be evaluated. Circle the items that should be considered student outcomes assessment measures versus program evaluation.

<table>
<thead>
<tr>
<th>Evaluation Instrument/Data Source</th>
<th>Completed By &amp; Frequency</th>
<th>Benchmark</th>
<th>Data Collected</th>
<th>Where Results Are Found &amp; Disseminated</th>
<th>How Results Are Used</th>
<th>Type of Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>In this column, type the name of the instrument used as a measure for assessment of student success as defined by achievement of goals, objectives or outcomes. Many instruments are designed to measure more than one goal or objective. Examples appear below.</td>
<td></td>
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<tr>
<td>In this column, type the person(s) who will be completing the instrument and how often the assessment will be conducted. Examples are in the cells below.</td>
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<tr>
<td>Type the benchmark(s) that will be used to determine if the outcomes were achieved. Because the instruments generally will assess more than one goal/objective, summary benchmarks may be used. Examples are shown below.</td>
<td></td>
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<tr>
<td>Since the instrument listed in column one is likely to measure more than one goal/objective or the name may not be fully descriptive of the measure, summarize the data to be collected by the instrument. In other words, what does it intend to measure?</td>
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<tr>
<td>Briefly describe where the summary reports from the data analysis for this instrument are kept. Examples are shown in the cells below. Also identify how the results are disseminated to stakeholders and for development/enhancement purposes.</td>
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<td>Briefly describe how the results are used.</td>
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<tr>
<td>Identify if a direct or indirect measure. For example, student end of course evaluations may be used for self-assessment of learning, but since they are not objective measures, they would be considered indirect.</td>
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</table>

| Student Evaluation of Course and Teaching | Prior evaluations, Mean score for all items at least 3.5 (5.0 scale) | Course organization and resources, faculty teaching, etc. | Faculty development and improvement of course content. Summary forms used by Curriculum Committee for curricular modification. | Indirect |
|------------------------------------------|-------------------------------------------------------------------|------------------------------------------------------------|-------------------------------------------------------------|
| Course Examinations (written and practical) | Enrolled Students, Determined by Course Instructor | Student knowledge and skills for unit and/or course | Individual performance with faculty, course grades on transcript | |
## Our Process

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<tbody>
<tr>
<td>Journals</td>
<td>staff – annually in July</td>
<td>100% with B or better</td>
<td>student clinical competencies</td>
<td>folder on shared drive</td>
<td>Curriculum Committee in consultation with ACCE, PG – annually</td>
<td>Review curriculum and rotations</td>
<td>graded by faculty advisor</td>
</tr>
<tr>
<td>Preceptor evaluations</td>
<td>staff – annually</td>
<td>100% with 3.0 or better</td>
<td>student clinical competencies</td>
<td>Medtrix and folder on shared drive</td>
<td>Curriculum Committee in consultation with ACCE, PG – annually</td>
<td>Review curriculum and rotations</td>
<td>evaluation form completed by preceptors at the end of each rotation</td>
</tr>
<tr>
<td>PRE grades</td>
<td>staff – annually</td>
<td>&gt;70% on aggregate</td>
<td>student clinical knowledge</td>
<td>folder on shared drive</td>
<td>Curriculum Committee in consultation with ACCE, PG – annually</td>
<td>Review curriculum and rotations</td>
<td>PREs graded by faculty</td>
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<tr>
<td>Student self-evaluations and site rotation evaluations</td>
<td>ACCE, site visitors – annually</td>
<td>100% with C or better</td>
<td>effectiveness of site rotation in meeting objectives</td>
<td>Medtrix</td>
<td>Curriculum Committee in consultation with ACCE, PG – annually</td>
<td>Review curriculum and rotations</td>
<td>evaluations completed by the students at the end of each rotation</td>
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<tr>
<td>Supervised Clinical Site Visits</td>
<td>ACCE, site visitors – annually</td>
<td>100% meet expectation</td>
<td>effectiveness of site rotation in meeting objectives</td>
<td>shared drive with intent to incorporate Medtrix</td>
<td>ACCEPD in consultation with the Supervised Clinical Site Visit Group and Curriculum Committee – annually</td>
<td>Review curriculum and rotations</td>
<td>site visit encounter form completed by site visitors annually and as needed</td>
</tr>
<tr>
<td>Seminar presentations</td>
<td>Seminar director – annually</td>
<td>100% with A</td>
<td>student presentation skills and ability to perform topic/EBM review</td>
<td>shared drive</td>
<td>Seminar Director, Curriculum Committee – annually</td>
<td>Review curriculum</td>
<td>graded by faculty</td>
</tr>
<tr>
<td>Comp Exam/OSCE</td>
<td>ACCE/ACDE – annually</td>
<td>100% pass</td>
<td>student clinical knowledge and skills</td>
<td>shared drive</td>
<td>PD, Curriculum Committee – annually</td>
<td>Review curriculum</td>
<td>Comp exam and OSCEs graded by faculty</td>
</tr>
</tbody>
</table>
The Future
The Future

• Ensuring implementation of the process
• Who is responsible for ensuring it gets done?
• Continuous revision as needed

• Attend the PAEA Program Evaluation Pando Workshop!
References


Schwartz A. Assessment in Graduate Medical Education: A Primer for Pediatric Program Directors. Chapel Hill, NC: American Board of Pediatrics; 2011.
QUESTIONS?