

2012

Jefferson Medical College Annual Report, 2012

Mark L Tykocinski

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Jefferson Medical College of Thomas Jefferson University

Annual Report
2011 - 2012



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Introduction

The 2011-2012 Annual Report of the Jefferson Medical College of Thomas Jefferson University represents the general report of the College. This general report of the College's activities is distributed to the Board of Trustees and members of the faculty and student body of the Medical College. The academic departments and the institutes issue separate reports. A complete set of all annual reports can be found in the Scott Memorial Library, the President's Office, and the Dean's Office.

Compiled and Edited by

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STATE OF THE COLLEGE

Jefferson Medical College has maintained its solid upward trajectory over the past year, with accomplishments spanning its tripartite education, research and clinical service missions.

In 2012, the medical college initiated a strategic planning process that envisions a restructuring of its research enterprise and building upon various transformational steps it has already taken. The goal is to more fully leverage the exceptional scientific talent already on campus, and position the institution to optimally navigate an ever more challenging NIH funding environment. The emerging strategic plan is built upon four pillars: Diversity, Coordinate, Enable, and Invest. *Diversify* looks to create distributed faculty strengths across multiple departments, institutes and centers on campus; expand the grant portfolio to embrace more larger-scale programmatic funding; increase the scope of research on campus to more actively nurture clinical and health services research; diversify funding sources; and develop more inter-institutional partnerships, regionally and internationally. *Coordinate* looks to bridge administrative silos across campus to deal more effectively with key support areas such as grants management, research space utilization, and commercialization, as well as to allow for more top-down orchestration of research themes and programs. *Enable* looks to optimize research faculty research productivity by innovating a 'concierge, experimental pathways-based' model for shared resources; continue to build cross-cutting knowledge domains, such as computational biology, that

empower faculty research; and develop a predictable stream of pilot, bridge and proof-of-concept funding that sustains and advances faculty research agendas. *Invest* looks to optimize the institution's investment of its own discretionary dollars into its research mission.

While this JMC research strategic plan will continue to unfold in 2013, there has already been progress in giving life to some of its key elements. A series of 'programmatic research themes' have been delineated over the past few years, which are being driven forward by programmatic working groups. Examples include the 'MitoCircle', which has brought together outstanding Jefferson scientists across campus who share an interest in mitochondrial pathogenesis; the Prostate Cancer Working Group, which encompasses broad constituencies of basic and clinical scientists focused on advancing prostate cancer diagnostics and therapeutics; and the Jefferson/Wills Vision Research Center, which leverages the world-class talents within Wills Eye, the entity that doubles as Jefferson's Department of Ophthalmology, along with strong vision science in other Jefferson departments. These three programmatic working groups, along with more than 15 others, are tasked with creating research programs of distinction that position Jefferson as a locus for the most cutting-edge science in their respective areas. The dividends from these working groups began to emerge over the past year, reflected in more collaborative science and grant funding, and much more is anticipated down the road.

It is essential that the medical college demonstrate flexibility in embracing emerging fields within new departments, institutes and centers, as a means for enriching its training, investigative and clinical care environments. This year, the medical college started to develop innovative cross-disciplinary institutes that bridge the basic and clinical sciences and have direct links to patient care. The Jefferson Institute for Individualized Medicine, under the leadership of Dr. Scott Waldman, is bringing together an impressive array of talent from diverse departments to ensure that Jefferson is at the forefront of this emerging field. This frontier institute is looking to mobilize Jefferson's particular strengths in fields such as applied genomics, high-dimensional biology, and health services research to garner a unique Jefferson contribution to the personalized medicine arena. Other cross-disciplinary institutes are envisioned, touching on areas such as surgical innovation and regenerative medicine.

Jefferson's Center for Computational Medicine, launched in 2010 in conjunction with the recruitment to JMC of one of the nation's leading computational biologists, Dr. Isidore Rigoutsos, has continued to build momentum. A web of collaborative interactions, both on-campus and beyond, have already emerged, which are now enriching diverse Jefferson research programs, ranging from cancer and platelet biology to the neurosciences. Alongside the Daniel Baugh Institute for Systems Biology, this has put Jefferson on the map in emerging biomedical fields that seek to tackle biological complexity. Other newly founded academic units within JMC also continued to unfold according to plan. This included our new Department of Neuroscience, which under the leadership of its founding Chair, Dr. Irwin Levitan, has continued to build Jefferson's research base in the neurosciences. When this new department and the Farber Institute for Neurosciences are viewed alongside the dramatic expansion of Neurosurgery and the ever stronger clinical and research programs in Neurology, a picture of Jefferson as a premiere academic center for the neurosciences emerges. Continued faculty recruitment into these and various other academic units over the next few years should have a profound impact on our medical school research landscape.

At the same time, as we nurture new academic units on campus, the medical college must ensure that its existing departments remain robust. Our ongoing investment into faculty recruitment over the past year reflects this commitment to constant renewal and growth. Significant program building has continued apace in both Medical Oncology and Radiation Oncology, and along with further expansion of our surgical oncology depth and basic cancer biology research, have added substantially to the Kimmel Cancer

Center's regional and national stature. Another significant commitment is in the area of Women's Health. This is being catalyzed by the recruitment last year of Dr. William Schlaff, as new Chair of the Department of Obstetrics and Gynecology. Robust faculty recruitment to this department is already underway. While Women's Health is the newest clinical service line, the existing ones – Heart and Vascular, Oncology, Neuroscience, GI and Transplant, Musculoskeletal – continue to mature and develop. Moreover, progress extends well beyond these service lines. The surgical departments at Jefferson continue to distinguish themselves, with an ever-expanding repertoire of operations and procedures. This is serving to sustain Jefferson's historic distinction in surgical fields, whether it be in GI, ENT, orthopedic, neurologic, cardiac, transplant, ophthalmic, gynecologic or urologic surgery, among others. Medical and hospital-based specialties have also been distinguishing themselves. For example, Pulmonary has been building, and remarkably was ranked #12 in the country in the *U.S. News and World Report* hospital ranking this year. What is emerging is a wide range of 'clinical programs of distinction', where Jefferson's offerings are of the highest caliber and in some cases unique in the region. In addition to Jefferson's exceptionally strong showing in USNWR rankings across multiple clinical disciplines, it was also notable that Thomson Reuters ranked Jefferson Health System (JHS) this year as one of the nation's top five large health systems, based largely on quality and outcomes measures. Overall, strategic clinical faculty recruitment proceeded apace across Jefferson University Physicians (JUP), with clinical faculty numbers increasing by 4.3% (to 604 physicians) in FY12. Other clinical volume indicators were also positive, with total patient visits up by 4.1%, total surgical cases up by 6.8%, total surgical hours up by 6.9%, total inpatient admissions up by 7.7%, and accrued revenue for JUP up by 7.1% (now topping \$248 million), all making for a banner year.

JUP, working alongside TJUH, has also focused on growing the clinical enterprise beyond Jefferson's walls. 'Jefferson at the Navy Yard,' which was launched in October 2010 as a new outreach site for JUP's clinical practices, represents an important step forward as Jefferson rolls out its hub-and-spoke outreach model. Clinical activity there has been ramping up according to plan. Jefferson's robotic tele-presence initiative via Neurosurgery has also progressed well, as Jefferson continues to embed its impressive cadre of neurosurgeons into a growing network of regional affiliate hospitals, both virtually and physically. Furthermore, an aggressive plan for ambulatory growth has begun to unfold, spanning southeastern Pennsylvania and New Jersey.

The medical college partners with a number of regional hospitals and medical centers to train its medical students

during their clinical years. Its alliances with Christiana Care Health System and Nemours/Alfred I. Dupont Hospital for Children are especially important, given that JMC has historically served as the medical school for the state of Delaware. JMC's ties to these Delaware institutions continue to grow through a variety of joint initiatives, serving to strengthen ground-level ties among our respective faculties. Another academic alliance that was bolstered is that with the Main Line Health hospitals, which reside with TJUH under the JHS umbrella. A growing number of new joint academic and clinical initiatives are now underway, as JUP supports trauma, cardiovascular, neurosurgical, cancer and other programs across the health system. During the past two years, JMC has also worked closely with our other training partners, for example, partnering with Reading and York Hospitals to enhance student rotations and initiate new joint clinical fellowships.

Looking beyond its core curriculum, the medical college is committed to creating value-added propositions for its medical students that enrich their overall experience. The 'College-within-the-College (CwC)' program, now in its third year, offers to entering medical students the opportunity to have in depth exposure over their four medical school years to particular areas of concentration that cut across traditional specialties and disciplines. The first CwC offerings have been in Population/Global Health and Translational Research, and they have continued to attract strong interest from students, with indications that it is even factoring into decisions of applicants to matriculate at JMC. Other elements of JMC's clinical curriculum reform have also been implemented, including moving Neurology and elective time into third year.

Just as JMC has been redefining its research mission, it is also looking to continue to position itself as an innovator of medical education on the national scene. The *Flexner Report* framed medical education reform for the 20th century, by emphasizing the central importance of basic science in physician training. For the 21st century, medical education will have to continue to evolve. JMC has been using its annual fall Medical Education retreat to focus on key elements that will go into a new medical education paradigm. This year's retreat focused on critical thinking skills, within the framework of cognition and meta-cognition, while last year's retreat dealt with the 'medical knowledge cloud' and dealt with the explosive growth of medical information. Active working groups are now in place dealing with these important subjects, which will dovetail with other elements to be incorporated into a new framework for educating the physician of the future, for example, clinical simulation, telemedicine, inter-professional training, professionalism, and leadership skills. With respect to the

latter, the Dean's Student Leadership Forum was launched this past year, bringing the Dean and other administrative leaders together with student leaders in a small group format, with continuity for each class over their four medical school years.

Beyond enhanced curricular and co-curricular offerings, JMC has also sought to enrich the cultural life on campus. This has included sponsoring new kinds of events that bring our medical students into Philadelphia cultural venues, such as the Philadelphia Academy of Fine Arts and the Curtis Institute of Music, and others that bring those venues to our students, such as a noon-time Dean's Concert Series that was first launched in Fall 2010. These events are now popular and well-attended. JMC has also promoted student initiatives that are geared toward serving the underserved in our community. Indeed, at this stage it is fair to say that the outreach activities of JMC students, bringing good into our community and to our patients, is second to none in the nation. This is in terms of both the broad range of initiatives and their true substance – Refugee Health Partners, JeffHope, JeffMOMS, JeffCAT, JeffYES, Jefferson Ambassadors, Jefferson Clowns for Medicine, Jeff Cares for Kids, Give Kids Sight Day, JeffEarth, JeffHEALTH, JeffHELP, JeffSOAR, JeffSEAL JeffMentors – the list goes on and on.

There is much that happens behind the scenes to improve the operational performance of the medical college and JUP. A formal Dean's departmental review process was implemented in 2009, which calls for a more systematic approach toward the assessment of departmental performance. The departmental reviews are now on a six-year cycle, and there is much to show for this process, with clearly articulated action plans and deliverables. In a variety of additional ways, we have been building a framework behind the scenes for greater accountability and departmental entrepreneurship, which should be reflected in operational performance in the coming years. There has also been considerable attention from the Dean's office on faculty satisfaction, with JMC as a medical school participant in the AAMC Faculty Forward process, and our raising the profile of JMC awards that now recognize faculty achievement across all three missions and showcase them at a major Awards Dinner. For the second year running, we held a research symposium that featured Jefferson research award recipients, and on the education side, our newly established Jefferson Academy of Distinguished Educators moved forward with its sponsorship of special high-profile lectures dealing with medical education. In these and other ways, the ongoing physical transformation of the Jefferson campus is being accompanied by significant faculty development and enrichment of the intellectual and cultural life of the campus.

Overall, the medical college has been on strong footing this past year. Student applications continue at record highs (breaking the 10,000 applications mark this year for the first time, translating into almost one in four U.S.-trained applicants to medical school in the country applying to JMC), our fourth-year students continue to do well in the residency match, our residency programs continue to fill in strong fashion, and we continue to build a community of faculty, students and staff with exceptional talents. At Jef-

ferson, we have truly unique opportunities to advance new paradigms for inter-professional and simulation training, engender transformational interdisciplinary science, and fostering the most cutting-edge and compassionate care. There is indeed the prospect for taking our magnificent medical school to yet another level.

Mark L. Tykocinski, MD

Dean, Jefferson Medical College



ACADEMIC YEAR 2011 - 2012

Faculty Honors

The Christian R. and Mary F. Lindback Award for Distinguished Teaching.

Joseph Majdan, MD, *Assistant Professor, Department of Medicine, Director of Professional Development, University Clinical Skills and Simulation Center*

Dean's Award for Distinguished Teaching.

Joseph Majdan, MD, *Assistant Professor, Department of Medicine, Director of Professional Development, University Clinical Skills and Simulation Center*

Blockley-Osler/Dean's Teaching Award for Excellence in Teaching. To a faculty member of a Jefferson-Affiliated Hospital.

Mark Goedecker, MD, *Clinical Assistant Professor of Family and Community Medicine, Assistant Program Director, York Hospital*

The Leon A. Peris Memorial Award. To a member of the volunteer faculty for excellence in clinical teaching and superior patient care.

William Surkis, MD, *Clinical Assistant Professor, Program Director for Internal Medicine Residency Program, Lankenau Medical Center*

The Leonard Tow Humanism in Medicine Award presented by The Arnold P. Gold Foundation. To an outstanding faculty member demonstrating exemplary compassion in doctor/patient relations.

Niels Martin, MD, FACS, *Assistant Professor of Surgery, Associate Program Director, Graduate Surgical Education*

The Award for Excellence in Interprofessional Practice is given to a faculty or staff member of Thomas Jefferson University or Thomas Jefferson University Hospital. Jefferson Interprofessional Practice Award is given to a practitioner/clinician who demonstrates excellence in interprofessional practice and whose leadership efforts have promoted interprofessional practice among colleagues, staff, students and patients.

Demetrius Bagley, MD, *Nathan Lewis Hatfield Professor of Urology*

Thomas Jefferson University Inter-Professional Education Award is given to a faculty member who demonstrates excellence in inter-professional education and whose efforts have impacted collaboration among all colleges to the benefit of students.

Lauren Collins, MD, *Assistant Professor of Family and Community Medicine*

Portrait

Bruce Fenderson, PhD, *Professor of Pathology, Anatomy, and Cell Biology*, presented by the Class of 2012 and friends and colleagues, painted by Alexandra Tyng.

Medical College

The Medical College celebrated its 188th anniversary.

New Divisions/Departments/Centers

Jefferson Musculoskeletal Oncology Center

Jefferson Barrett's Esophagus Treatment Center

Jefferson Hepatitis C Center

Center to Eliminate Cancer Disparities

Jefferson Gastrointestinal Bleeding Center

Division of Geriatric Medicine changed to Division of Geriatric Medicine and Palliative Care

Division of Genomic Pathology

New Appointments

Directors/Chiefs

Mitchell Conn, MD, *Director, Jefferson Gastrointestinal Bleeding Center*

Edith Mitchell, MD, *Director, Center to Eliminate Cancer Disparities*

Brian O'Hara, MD, *Vice Chair of Pathology at Methodist Hospital Division*

Susan Parks, MD, *Director, Division of Geriatric Medicine changed to Division of Geriatric Medicine and Palliative Care*



ADMINISTRATIVE STAFF 2011 - 2012

Jefferson Medical College

Mark L. Tykocinski, MD, *The Anthony F. and Gertrude M. DePalma Dean, Senior Vice President, Thomas Jefferson University, President, Jefferson University Physicians.*

Clara A. Callahan, MD, *The Lillian H. Brent Dean of Students and Admissions*

John W. Caruso, MD, *Associate Dean, Graduate Medical Education and Affiliations*

Kristen L. DeSimone, MD, *Associate Dean, Student Affairs and Career Counseling*

Leonard Freedman, PhD, *Vice Dean for Research*

Karen M. Glaser, PhD, *Associate Dean, Academic Affairs/Undergraduate Medical Education*

Steven K. Herrine, MD, *Assistant Dean, Academic Affairs/Undergraduate Medical Education*

John C. Kairys, MD, *Associate Dean, Graduate Medical Education and Affiliations*

William M. Keane, MD, *Senior Associate Dean, Clinical Affairs*

Bernard L. Lopez, MD, *Associate Dean, Student Affairs and Career Counseling*

Phillip J. Marone, MD, *Associate Dean, Alumni Relations, Executive Director of the Alumni Association*

Karen D. Novielli, MD, *Vice Dean, Faculty Affairs and Professional Development*

John Ogunkeye, MS, *Chief Operating Officer*

Luz Ortiz, MA, *Assistant Dean, Diversity and Minority Affairs*

David L. Paskin, MD, *Vice Dean, Graduate Medical Education and Affiliations*

Richard Pestell, MD, PhD, *Associate Dean, Cancer Related Services*

Charles A. Pohl, MD, *Senior Associate Dean, Student Affairs and Career Counseling*

Susan L. Rattner, MD, MS, FACP, *Vice Dean, Academic Affairs/Undergraduate Medical Education*

Joseph L. Seltzer, MD, *Senior Associate Dean, Continuing Medical Education*

John Spandorfer, MD, *Associate Dean for Education*

Brian Squilla, MBA, *Chief of Staff*

Theodore Taraschi, PhD, *Associate Dean for Research*

Kathryn P. Traves, MD, *Assistant Dean, Student Affairs and Career Counseling*

Administrative Staff at Affiliated Institutions

Donna Robino, MD, *Medical Physician Leader, Department of Veterans Affairs*

Domenick Bucci, MD, *Chief Medical Officer, Aria Health*

James F. Burke, MD, *Director of Graduate Medical Education, Designated Institute Official, Mainline Health*
 Anthony J. DiMarino, Jr., MD, *Director of Undergraduate Medical Education, Director Medical Education, Underwood Memorial Hospital*
 Douglas McGee, DO, *Chief Academic Officer, Associate Chair, Education and Residency Program Director, Albert Einstein Medical Center*
 Christopher Formal, MD, *Medical Education, Magee Rehabilitation Hospital*
 Stephen Mills, MD, *Director, Clerkship, Family Medicine* and Carol J. Fox, MD, *Director of Undergraduate Medical Education, Excela Health Latrobe Hospital*
 David George, MD, *Director of Undergraduate Medical Education, Reading Hospital and Medical Center*
 Joseph Greco, MD, *Director, Clerkship, Family Medicine, Bryn Mawr Hospital*
 Martin E. Koutcher, MD, *Medical Education, Methodist Hospital*
 John J. Kraus, MD, MMM, *Medical Education, Bryn Mawr Rehabilitation Hospital*
 Lee Ann Riesenberg, PhD, *Interim Director Medical Education, Christiana Care*
 Steven Selbst, MD, *Director, Graduate Medical Education, Vice Chair, Pediatrics, Nemours Children's Clinic-Wilmington/A.I. duPont Hospital for Children*
 John Matsinger, DO, *Director of Undergraduate Medical Education, Virtua Health*
 Adam T. Chrusch, MD, *Director, Clerkship, Family Medicine, Abington Memorial Hospital*
 David Emrhein and Rachel Lins, *Medical Education, York Hospital*



DEPARTMENT CHAIRS

Anesthesiology
Biochemistry & Molecular Biology
Cancer Biology
Dermatology & Cutaneous Biology
Emergency Medicine
Family and Community Medicine
Medical Oncology
Medicine
Microbiology & Immunology
Molecular Physiology and Biophysics
Neurology
Neurological Surgery
Neurosciences
Obstetrics & Gynecology
Ophthalmology
Orthopaedic Surgery
Otolaryngology/Head & Neck Surgery
Pathology, Anatomy and Cell Biology
Pediatrics
Pharmacology and Experimental Therapeutics
Psychiatry & Human Behavior
Radiation Oncology
Radiology
Rehabilitation Medicine
Surgery
Urology

Institute Directors

Farber Institute for Neurosciences
Kimmel Cancer Institute

Zvi Grunwald, MD
Jeffrey Benovic, PhD
Richard G. Pestell, MD, PhD
Jouni J. Uitto, MD, PhD
Theodore A. Christopher, MD
Richard C. Wender, MD
Neal Flomenberg, MD
Gregory C. Kane, MD, Interim Chairman
Timothy Manser, PhD
Marion J. Siegman, PhD
Abdolmohamad Rostami, MD, PhD
Robert H. Rosenwasser, MD
Irwin Levitan, PhD
William Schlaff, MD
Julia A. Haller, MD
Todd Albert, MD
William M. Keane, MD
Stephen Peiper, MD
Jay Greenspan, MD
Scott Waldman, MD, PhD
Michael J. Vergare, MD
Adam Dicker, MD, PhD
Vijay M. Rao, MD
John L. Melvin, MD
Charles Yeo, MD
Leonard G. Gomella, MD

Irwin Levitan, PhD
Richard Pestell, MD, PhD

Professorial Faculty

The Advisory Committee Officers

Chairperson	Elisabeth van Bockstaele, PhD
Chairperson-Elect	Edmund Pribitkin, MD
Secretary	Karen Knudsen, PhD
Secretary-Elect	Ed Trabulsi, MD

Advisory Committee Members

2010-2012	Roger Daniels, MD
	Jack London, PhD
	Anne Rosenberg, MD
	Davide Trotti, PhD
2012-2014	Esther Chung, MD
	Constantine Daskalakis, PhD
	Craig Hooper, PhD
	Anthony Infantolino, MD
	Laurence Needleman, MD

John R. Cohn, MD, Past Chair, Advisory Committee 2012-2013

Representative to the Executive Council

Basic Science	George Brainard, PhD	2010-2012
Clinical Science	Serge Jabbour, MD	2012-2014

Representatives to the Committee on Committees

Basic Science	Diane Merry, PhD	2010-2012
Clinical Science	Matthew DeCaro, MD	2012-2014



OFFICE OF FACULTY AFFAIRS

Mission

The Office of Faculty Affairs (OFA) supports the skill development and career advancement of Jefferson faculty, promotes an academic culture where faculty collegiality, collaboration and scholarly inquiry can thrive and supports the administrative activities and programs central to faculty participation in the operations and governance of the Medical College. The Office of Faculty Affairs accomplishes its mission through its activities and programs, support of the standing committees of the Medical College and through its advisory role in the formation and revision of policies affecting the Medical College faculty.

OFA Programs/Activities

Faculty Development

Forty-five faculty development sessions, representing over 100 hours of instruction, were provided to Jefferson faculty in 2011-2012. The faculty development program was organized into three general topic areas: Curriculum for Educators, Professional and Leadership Development, and Researchers and Scholars. One hundred sixty three individuals participated in at least one session in 2011-2012 and 1597 individuals have participated in the program since its inception.

Additional Web-based, self-directed learning modules for faculty development in the program area of effective teaching were created providing a total of 14 of these models available for use by faculty. These self-directed learning

modules have allowed faculty to access faculty development programs at a time that is convenient for them. For academic year 2011-2012, 23 faculty have accessed the self-directed learning modules. To date, faculty have logged 655 faculty development credit hours through the self-directed learning modules. These modules can be found at the faculty development website, http://jeffline.jefferson.edu/Education/programs/faculty_development/sdl-modules.cfm.

The individual faculty development sessions continue to be provided through the generous commitment of time and talent of the Thomas Jefferson University faculty and Administration, and the staffs of the Scott Memorial Library, Academic Information Services and Research and the Office of Research Administration.

New Faculty Orientation

The Office of Faculty Affairs provides an orientation program for new faculty that consists of a full day orientation of the new faculty to the Jefferson community and its resources. For academic year 2011-2012, the Office of Faculty Affairs provided orientation sessions to 80 of the 95 new faculty hires.

Faculty Resignations

The Office of Faculty Affairs invites all faculty who voluntarily resign their faculty appointments for an exit interview. Aggregate data from these confidential interviews provide the administration with feedback that is used to

enhance Jefferson's ability to recruit and retain excellent faculty. Of the salaried faculty who resigned their Jefferson appointment for reasons other than retirement and who were invited for an interview, 72% were interviewed.

Faculty Awards

The Marjorie A. Bowman, MD '76, Early Career Investigator Award for Primary Care was created this year to recognize a faculty member whose research has illuminated a fundamental clinical problem or improved the organization and delivery of primary health care. This new team award was presented along with the following awards: Career Educator Award, Community Service Award, Outstanding Clinician Award, Early Career Investigator Award for Distinguished Achievement in Biomedical Research, Research Career Achievement Award, Michael and Melina Pellini Award for Innovation in the Biomedical Sciences, Dean's Award for Excellence in Education and the Dean's Award for Faculty Mentoring and Faculty Team Achievement Award.

All awards were presented at the JMC Faculty Awards Dinner at The Union League of Philadelphia on May 2, 2012. Nominations for the awards are made by department chairs. Course and clerkship coordinators, dean's staff and prior award recipients may nominate for the Excellence in Education Award.

Tenure

The Tenure Committee met to review applications for tenure. Two faculty were awarded tenure during FY12. The Committee also conducted a five-year periodic evaluation for three faculty members. These five-year periodic evaluations follow the award of tenure as outlined in the Thomas Jefferson University Post-Tenure Review Policy.

Faculty Committee Initiatives

Council on Diversity and Inclusion

The JMC Council on Diversity and Inclusion continues to meet to address issues related to diversity on campus. The council consists of JMC administration, faculty, residents, students and a TJU Board Member listed in Table 4. The

council is addressing issues relating to diversifying the faculty, resident and student population. The committee met three times during the 2011-2012 academic year. Barbara Barzansky, PhD, MHPE, Liaison Committee on Medical Education (LCME), Co-Secretary and Director, Undergraduate Medical Education, was invited to speak to the committee, course directors and chairs about The History and Application of the LCME's Diversity Standard.

Jefferson Academy of Distinguished Educators

The Jefferson Academy of Distinguished Educators (JADE) was formally created during the 2010-2011 academic year. JADE met three times during 2011-2012. The group invited Nancy Searle, EdD, Associate Professor of Pediatric, Baylor College of Medicine, to speak about teaching academies.

Standing Committee Support

The Office of Faculty Affairs provides administrative support to the following Committees and Standing Committees of the Medical College: Committee on Committees, Professorial Faculty Advisory Committee, meetings of the Professorial and General Faculty, Committee on Faculty Affairs, Committee on Bylaws and Rules, Committee on Departmental Review, and the Nominating Committee for the Professorial Faculty. Reports of these committees can be found in the document *Summary Reports of the Standing Committees of the Medical College*.

Agenda items for the meetings of the General and Professorial Faculty included Update on Professionalism Initiatives, JMC Programmatic Research Themes, TJU Industry Relationship Policy Update, Council on Diversity and Inclusion, University Faculty Senate, Jefferson Academy of Distinguished Educators, JMC Knowledge Map, 50 & Forward Event and the Office of Technology Transfer Assessment. All approved meeting minutes and agendas are available online at the Pulse Web site at (<https://pulse.jefferson.edu/webapps/portal/frameset.jsp>).

Karen D. Novielli, MD

Vice Dean for Faculty Affairs and Professional Development

TABLE 1
2011 – 2012 JMC FACULTY DEVELOPMENT WORKSHOPS

Curriculum for Educators

- Effective Course Management Using Blackboard Seminar
- Effective Presentation Seminar
- Faculty Excellence in the Clinical Setting
- Faculty Fundamentals: Basic Skills for Teaching in the Health Professions
- Making Your Next Teaching Presentation Go Better Than Your Last
- Plagiarism: Managing Today's Academic Challenge
- Promoting Academic Integrity in the Health Professions
- Promoting Professional Accountability
- R.I.M.E.: A Tool for Providing Feedback and Evaluating Medical Students and Residents

Curriculum for Professional and Leadership Development

- Becoming a More Productive Writer
- Conducting Research with Knowledge-Based Databases, Search Engines and Managing Your Citations with RefWorks 2.0
- Constructing your Promotion Portfolio: Tips and Strategies
- Getting the Most out of a Mentor: A Workshop for Junior Faculty

- How does unconscious bias impact your work and workplace?
- “How Gender Works at Work”
- How to get promoted as an educator
- JMC Appointment and Promotion Tracks and Guidelines: An Overview for Faculty in the Academic Investigator Track and the Non – Tenure Research Track
- JMC Appointment and Promotion Tracks and Guidelines: An Overview for Faculty in the Clinical and Educational Scholarship Track and the Clinician Educator Track
- Public Speaking: The “Application”; Do's and Don'ts for the Academic Setting
- Public Speaking: The “Lecture”; Do's and Don'ts for the Academic Setting
- “Why So Slow? The Advancement of Women”
- Understanding Medical School Finances
- Using Social Media at Jefferson

Curriculum for Research and Scholars

- Mentoring Session for Early Career Investigators: Tips from the Experts!
- Obtaining industry support of investigator initiated research proposals

TABLE 2
2011-2012 FACULTY DEVELOPMENT PROGRAM RATINGS

Faculty Development Program	Number of Participants	Percent of Participants Rating Content Good or Excellent	Percent of Participants Rating Content as Relevant to Faculty Development Needs
<i>Curriculum for Professional and Leadership Development</i>	129	96	96
<i>Curriculum for Educators</i>	182	99	97
<i>Curriculum for Researchers and Scholars</i>	46	97	98
<i>Web-Based Modules</i>	23	95	94

TABLE 3
FACULTY AWARD RECIPIENTS 2011 - 2012

Career Educator Award

George L Spaeth, MD, Ophthalmology

Community Service Award

Alex Levin, MD, Ophthalmology

JMC Dean's Award for Excellence in Education

Kishor Gandhi, MD, Anesthesiology

Erica Johnson, PhD, Biochemistry and Molecular Biology

Wayne Bond Lau, MD, Emergency Medicine

Elisabeth Edelstein, MD, Emergency Medicine

Daniel R. Frisch, MD, Medicine/Cardiology

Gregary D. Marhefka, MD, Medicine/Cardiology

Jeffrey Miller, MD, Medicine, Endocrinology

Robert Coben, MD, Medicine, Gastroenterology

David Loren, MD, Medicine, Gastroenterology

Goran Rakocovic, MD, Neurology

Stuart Weiner, MD, Obstetrics and Gynecology

Edward Jaeger, MD, Ophthalmology

Howard Krein, MD, PhD, Otolaryngology

Thomas O. Willcox, MD, Otolaryngology

Gina Amoroso, MD, Pediatrics

Ann Marie Carr, MD, Pediatrics

Esther Chung, MD, Pediatrics

Bonnie Field, MD, Pediatrics

Christopher Raab, MD, Pediatrics

Thomas C. Benfield, MD, Psychiatry

Elisabeth Kunkel, MD, Psychiatry

Timothy Showalter, MD, Radiation Oncology

Sandeep Deshmukh, MD, Radiology

Lisa Tartaglino, MD, Radiology

Joshua Eisenberg, MD, Surgery

Nathaniel Evans, MD, Surgery

Warren Maley, MD, Surgery

Edouard Trabulsi, MD, Urology

JMC Dean's Award for Faculty Mentoring

Marja T. Nevalainen, MD, PhD, Cancer Biology

William B. Young, MD, Neurology

Vincenzo Berghella, MD, Obstetrics and Gynecology

Jonathan R. Brody, PhD, Surgery

JMC Early Career Investigator Award for Distinguished Achievement in Biomedical Research

Scott Mintzer, MD, Neurology

JMC Faculty Team Achievement Award

Sara Clarke, MD, Anesthesiology

Elia Elia, MD, Anesthesiology

Marc Fisicaro, MD, Anesthesiology

Vladimir Grodecki, MD, Anesthesiology

George Hsu, MD, Anesthesiology

Yoogoo Kang, MD, Anesthesiology

Jonathan Fenkel, MD, Medicine/Gastroenterology and Hepatology

Steven Herrine, MD, Medicine/Gastroenterology and Hepatology

Victor Navarro, MD, Medicine/Gastroenterology and Hepatology

Simona Rossi, MD, Medicine/Gastroenterology and Hepatology

Cataldo Doria, MD, PhD, Surgery

Adam Frank, MD, Surgery

Warren Maley, MD, Surgery

Carlo Rameriz, MD, Surgery

Marjorie A. Bowman, MD'76, Early Career Investigator Award for Primary Care

Iman Sharif, MD, MPH, MSc, Pediatrics

Michael and Melina Pellini Award for Innovation in the Biomedical Sciences

Gyorgy Hajnoczky, PhD, Pathology, Anatomy and Cell Biology

JMC Outstanding Clinician Award Hospital Based Medicine

Hospital Based Medicine

Alan Forstater, MD, Emergency Medicine

Primary Care

George Valko, MD, Family and Community Medicine

Subspecialty Medicine

Michael Sperling, MD, Neurology

Surgery and Surgical Subspecialties

Norman Rosenblum, MD, Obstetrics and Gynecology

JMC Research Career Achievement Award

Renato Baserga, MD, Cancer Biology

TABLE 4

COUNCIL ON DIVERSITY AND INCLUSION MEMBERS

Chair

Mark Tykocinski, MD, Dean, Jefferson Medical College

Members

Robert Bai, Medical Student
 Joanelle Bailey-Chandler, Medical Student
 Kenneth Boone, TJU Board Member
 Clara Callahan, MD, Lillian H. Brent Dean of Students
 John Caruso, MD, Associate Dean for Graduate Medical Education
 Stephanie DeLoach, MD, Medicine/Nephrology
 Carlos Fernandez-Ortega, Medical Student
 Anique Forrester, MD, mResident, Psychiatry
 Leonard Freedman, PhD, Vice Dean for Research
 Karen Glaser, PhD, Associate Dean for Undergraduate Medical Education
 Jay Greenspan, MD, MBA, Pediatrics
 William Keane, MD, Otolaryngology
 Elisabeth Kunkel, MD, Psychiatry and Human Behavior
 Hector Lopez, MD, Pathology, Anatomy and Cell Biology
 Angelica Manzur, Medical Student
 Niels Martin, MD, Surgery

Karen Novielli, MD, Vice Dean for Faculty Affairs and Professional Development
 John Ogunkeye, Executive Director/Vice President, Business Affairs - JUP
 Charles Pohl, MD, Senior Associate Dean for Student Affairs and Career Counseling
 Edmund Pribitkin, MD, Otolaryngology
 Vijay Rao, MD, Radiology
 Susan Rattner, MD, Vice Dean for Undergraduate Medical Education
 Natalia Riobo, PhD, Biochemistry and Molecular Biology
 Bruce Smith, MD, Director of the Office of Human Research for TJU
 Robert Taylor, Esquire, Senior Counsel for Employment and Commercial Litigation for TJU
 Luz Cathy Tello, MD, Resident, Medicine
 Scott Waldman, MD, PhD, Pharmacology and Experimental Therapeutics
 Latoya Walker, MD, Resident, Obstetrics and Gynecology
 Aerik Williams, MD, Resident, Medicine
 Robert Winn, MD, Family and Community Medicine
 Charles Yeo, MD, Surgery

TABLE 5

JADE EXECUTIVE COMMITTEE

Executive Committee

Chair

Howard Weitz, MD, Medicine/Cardiology

Members

David Abraham, PhD, Microbiology and Immunology
 Matthew DeCaro, MD, Medicine/Cardiology
 Karen Novielli, MD, Faculty Affairs and Professional Development
 David Paskin, MD, Graduate Medical Education
 Susan Rattner, MD, Undergraduate Medical Education
 Ernest Rosato, MD, Surgery
 Richard Schmidt, PhD, Pathology, Anatomy and Cell Biology
 Marion Siegman, PhD, Molecular Physiology and Biophysics

JADE Members

James W. Heitz, MD, FACP, Anesthesiology
 Stephen McNulty, DO, Anesthesiology
 Diane Merry, PhD, Biochemistry and Molecular Biology
 Peter Ronner, PhD, Biochemistry and Molecular Biology
 Fred W. Markham Jr., MD, Family & Community Medicine
 Michael P. Rosenthal, MD, Family & Community Medicine, Christiana Care
 Steven K. Herrine, MD, FACP, Medicine/Gastroenterology and Hepatology
 Matthew J. Burday, DO, FACP, Medicine/Internal Medicine, Christiana Care

Virginia Collier, MD Medicine, Christiana Care
 Gretchen Diemer, MD, FACP, Medicine/ Internal Medicine
 Anthony D. Donato, MD, FACP, Medicine/Internal Medicine, Reading Hospital
 Gregory Kane, MD, Medicine/Pulmonary and Critical Care, Interim Chair
 Geno J. Merli, MD, Medicine/Internal Medicine, Senior Vice President and Chief Medical Officer, Thomas Jefferson University Hospital
 Thomas Butler, PhD, Molecular Physiology and Biophysics
 Moses Hochman, MD, FACOG, Obstetrics and Gynecology, Christiana Care
 Edward A. Jaeger, MD, Ophthalmology
 J. Raymond Shea, PhD, Pathology, Anatomy and Cell Biology
 Carol Beck, PhD, Pharmacology and Experimental Therapeutics
 Nethra Ankam, MD, Rehabilitation Medicine
 Gary Lindenbaum, MD, FACS, FCCP, Surgery
 Gerald A. Isenberg, MD, Surgery
 Herbert E. Cohn, MD, Surgery
 Karen Chojnacki, MD, FACS, Surgery
 Michael S. Weinstein, MD, FACS, Surgery
 Dale Berg, MD, University Clinical Skills and Simulation Center
 Katherine Berg, MD, University Clinical Skills and Simulation Center
 Joseph F. Majdan, MD, FACP, University Clinical Skills and Simulation Center



OFFICE OF FACULTY RECORDS

The Office of Faculty Records supports the administration of academic faculty appointments, promotions, the verification procedure for faculty appointments and/or promotions, and maintenance of accurate faculty records.

During the 2011-2012 fiscal year, the Office of Faculty Records processed 208 appointments and 76 promotions.

Table 1 on the following page depicts the faculty appointment and promotion process. Table 2 contains the current Faculty Census.

Christine McGonigal-Glaser
Supervisor, Office of Faculty Records

TABLE 1
FACULTY APPOINTMENT AND PROMOTION PROCESS

<p>Department Chair meets with applicant (Departmental Committee approves)</p>	<p>No appointment/promotion considered</p>
<p>Chair initiates verification for faculty appointment/promotion by forwarding completed Nomination Form to the Office of Faculty Records</p>	
<p>Completed application packet is then submitted to the Office of Faculty Records. Packet must include:</p> <ul style="list-style-type: none"> • Transmittal letter from Chair to Dean • Completed application with contact information • Signed, dated Application for Faculty Appointment, Promotion, Change of Status • CV's (2 paper copies) • Copies of graduate, medical school, other professional transcripts (in English – Foreign Graduates only) • Copy(s) of current state license registered in each state where applicant practices (active status) (if applicable) • Copy(s) of DEA or other license (if applicable) • Copy of Board Certification (if applicable) • Copies of acceptances for manuscripts in press (if applicable) • Copy of ECFMG certificate (if applicable) • If foreign graduate, packet must include: contact person, contact e-mail address, contact fax number, contact telephone number, mailing address for all education, training, etc. • Teaching Portfolio (if applicable) • Teaching Evaluations (if applicable) • DD214 Military Discharge Papers (if applicable) <p>If applicant was verified at time of new appointment or previous promotion, the Office of Faculty Records will only verify information dated AFTER initial verification. Documents needed include:</p> <ul style="list-style-type: none"> • Nomination form from Chair • Transmittal letter from Chair • Attestation Certificate (Sec. M, page 24 of Application) • Authorization form (Sec. N, page 25 of Application) • Updated CV (2 paper copies) • Appropriate letters of recommendation • Teaching Portfolio (if applicable) • Teaching Evaluations (if applicable) • Acceptances of manuscripts in press (if applicable) 	

Office of Faculty Records receives and verifies application material.

Verification includes (not all listed will be applicable):

- Previous education
- Residencies and fellowships
- Administrative positions
- Academic positions
- Publications
- Licenses
- Board certifications
- Medicare sanctions

Information for **VERIFICATION**
INCOMPLETE – packet sent back to Chair

Applicant is given a 6-month **temporary** faculty appointment and is eligible for employment at Jefferson.

Department prepares packet for Committee on Appointments and Promotions. Applicant will automatically be scheduled for the Committee agenda within three (3) months following the temporary appointment issue date. Department **must** have completed packet to the Office of Faculty Records **no later than 3 weeks prior** to that assigned meeting date. Items needed in order for the packet to go to the Committee meeting include:

- Transmittal letter from the Chair
- Updated CV – properly formatted per the Committee guidelines
- Teaching portfolio (if applicable)
- Teaching Evaluations (if applicable)
- Appropriate letters of recommendation

Completed packet materials must be returned to the Office of Faculty Records three (3) weeks prior to the meeting or applicant is rescheduled to the following month's meeting of the Committee on Appointments and Promotions.

Completed application packet is submitted to the Committee on Appointments and Promotions, the Executive Council Jefferson Medical College, the Scientific and Academic Affairs Committee (SAAC), and the TJU Board of Trustees for review and final approval.

TABLE 2
FACULTY CENSUS

	Fully Salaried	Partly Salaried	Non-Salaried	Total
Professorial	368	11	555	934
General	458	37	1349	1844
Total	826	48	1904	2778
Administration	27		6	33
Basic Science	184	1	59	244
Clinical Science	642	47	1845	2534
Total	853		1910	2811
Professor	203	4	276	483
Associate Professor	165	7	279	451
Assistant Professor	318	22	726	1066
Instructor	140	15	623	778
Total	826	48	1904	2778
Women	262	22	488	772
Men	564	26	1416	2006
Total	826	48	1904	2778
Emeritii	Honorary			
50	363			



OFFICE OF ADMISSIONS

The Office of Admissions supports the efforts of the Committee on Admissions, made up of 49 faculty and three student members. The dedicated Committee members and first- and second-year students interviewed 840 applicants this year. The Student Admissions Coordinators present an informational program, and first- and second-year students conduct tours of the campus (in addition to submitting written evaluations of each applicant) prior to the faculty interviews. Agreeing to serve on the Committee on Admissions represents an extraordinary commitment of time and effort unequalled by any other committee in this institution. The dedication of this Committee to the selection and recruitment of the best and the brightest students deserves the highest praise and the gratitude of the entire Jefferson community.

The number of applicants to Jefferson Medical College continued its upward trend. Nationally there were 45,775 applications submitted to AMCAS vs. 43,775 for the same time last year (+3.2%). We received 10,018 applications compared to the 9,912 last year (+1.1%). Specifically, our “special programs” continue to attract significant interest. The Penn State Accelerated Program received 673 applications, a 3.7% increase over last year. To be considered for this highly competitive program requires a total minimum score of 2100 on the SAT or a composite score of 32 on the ACT, as well as a rank in the top 10th percentile of their high school class. On February 8, 2012, we interviewed 95 candidates from 21 different states. The average SAT of

those selected for interview was 2302. Twenty-three students joined the entering class of 2012 on July 30 after completing at least two years at Penn State.

Historically the Physician Shortage Area Program (PSAP) attempted to identify, recruit, and matriculate applicants who agreed to pursue a career in family medicine and to practice in a medically underserved area. The expansion of eligibility for the program, to include all students from rural areas who plan to return to practice in a rural location, increased its attractiveness to applicants. This year we accepted 14 PSAP applicants and had seven students matriculate.

The Delaware Institute for Medical Education and Research (DIMER) Program continues to flourish at Jefferson. Of the 67 applicants in the national pool from Delaware, 62 applied to Jefferson (54 from New Castle County, four from Sussex County and four from Kent County). We interviewed 25 applicants, accepted 24, and matriculated 16 students (15 from New Castle County and one from Kent County), for the entering class of 2012. These numbers included two DIMER applicants who were accepted last year but who deferred their matriculation for a year.

Our links with the Post Baccalaureate Pre-Health Programs at the University of Pennsylvania, Bryn Mawr College and Columbia University continue to attract highly qualified applicants who have chosen to change careers. Nine of this year’s matriculants come from these linkage programs.

The Medical Scholars Program with the University of Delaware, now in its seventeenth consecutive year, matriculated one student in the 2012 entering class. This early assurance program has, to date, graduated 123 students from Jefferson Medical College.

For the entering class of 2012, the combined MD/PhD degree program between Jefferson Medical College and the Jefferson College of Graduate Studies received 169 completed applications for our five fully funded MD/PhD spots. Thirty-four candidates interviewed at both the graduate and medical schools, and nine offers of acceptance were made to fill the program.

Class of 2016

The current first-year class is made up of 260 students who reflect a diversity of backgrounds. They received their undergraduate degrees from 115 different colleges and universities. The first-year students are from 26 different states, Argentina, Bangladesh, Canada, Norway, Senegal and Zimbabwe. Twenty-three (8.8%) members of the class are from groups identified as under-represented in medicine, and 30% identify themselves as belonging to a nonwhite ethnic group. Fifty percent of the class is female. The average age is 23 with a range from 19 to 36 years. Nineteen percent of the class is 25 years of age or older.

International Students

At the current time, we have a total of 56 students in JMC with student visas: 21 from Canada, 10 from Malaysia, six from India, four from Nigeria, three from South Korea, and one each from Albania, the Bahamas, China, Ghana, Iran, Jamaica, Kenya, the Maldives, the Philippines, Poland, the UK, and Venezuela. A number of foreign students have indicated a desire to attend Jefferson, but have been unable to do so because of the financial limitations imposed, a problem that is becoming increasingly difficult each year. Foreign students are not eligible for federal- or state-subsidized loans and cannot obtain loans from U.S. banks to finance their education without a US citizen as cosigner.

Recruitment Efforts

Attracting outstanding students continues to be a major thrust of the Office of Admissions. The Office hosted its seventh annual "Second Look" recruitment event. This two-day affair began in the afternoon of April 26 and included an evening reception, as well as a full day program on April 27. Highlighted were Financial Aid and Student Records services, a description of the curriculum, demonstrations of various learning resources and simulators, tours of clinical departments, presentations on international and cultural diversity programs, an overview of a typical day in

the life of a medical student and community outreach activities available to them. Of the 100 accepted applicants in attendance, 75 matriculated on July 30, 2012.

Recruitment of students from groups underrepresented in medicine remains a priority. This year we interviewed 102 under-represented in medicine students, accepted 84 and had 28 matriculants – 8.8% of the incoming class. Despite efforts to provide additional educational and financial support and increased efforts at recruitment by our faculty and students, as well as the efforts of the Office of Diversity and Minority Affairs, the financial packages offered at many other medical schools were more competitive than those that we were able to offer.

We continue to participate in sponsored programs for the Northeast Association of Advisors for the Health Professions (NEAAHP) in conjunction with local health profession advisors from colleges and universities in the tri-state area. Our involvement with the Northeast Consortium on Medical Education (NECOME), a group consisting of the premedical advisors from Amherst, Bowdoin, Hamilton, Haverford, Holy Cross, Middlebury, Swarthmore, Wesleyan and Williams and medical school admissions officers from Albany, Albert Einstein, Dartmouth, Harvard, Jefferson, Tufts, University of Connecticut, University of Pennsylvania, and the University of Rochester, continues.

The admissions process at Jefferson continues to be highly regarded by both applicants and advisors. This almost universally favorable reaction is largely due to the efforts of the Admissions Office staff, the current medical students who conduct the interviews and tours and, most of all, to the enthusiasm, courtesy, and friendliness of the members of the Committee on Admissions who make the interview a conversation rather than a confrontation. Most of the students who choose to go to other medical schools have written or called to indicate how difficult the decision was and how impressed they were by their visit to Jefferson and by the friendliness of the students and faculty.

The students who matriculate at Jefferson are intelligent, concerned, and dedicated individuals who have chosen medicine, in many cases, in spite of being advised to select another career by family, friends and physicians. I am confident that our students and graduates will continue to provide competent, compassionate medical care to the sick and injured and will be a credit to the profession and to Jefferson Medical College.

Clara A. Callahan, MD

The Lillian H. Brent Dean of Students and Admissions



Student Affairs and Career Counseling

The goal of the Office of Student Affairs and Career Counseling (OSACC) is to be available for academic and personal advising, to advocate for student needs, to foster career counseling, and to improve student access to the medical college. The office's intranet Pulse site serves as a vehicle to enhance this mission.

Student Affairs Committee and Student Bulletin

The Committee on Student Affairs meets monthly to support Jefferson Medical College students and to promote student-faculty interaction and to provide more comprehensive and cohesive student programming and services. Two editions of the *JMC Student Bulletin* were published to foster communication between students, faculty, and administration of JMC. The student information and resources displayed on the Jefferson Medical College Web site and the OSACC's intranet Pulse site were reorganized to be more accessible and user-friendly.

Medical Student Orientations

First-Year Orientation

The First-Year Orientation provided a comprehensive introduction to all of Jefferson. The core values of professionalism, the patient-physician relationship, and the Hippocratic Oath were emphasized. The Freshman Assistance Committee (FAC), a group of 30 second-year students, welcomed new students and helped them get comfortable in their new roles as medical students. At the conclusion of the orien-

tation week, the students and their families participated in the Jefferson Medical College Opening Exercises. This event, which was conducted by Dean Mark Tykocinski, incorporates the White Coat Ceremony and the Shared Professional Values. Dr. Janice Nevin, the Chief Medical Officer of Christiana Care Health System, provided the keynote address.

Second-, Third-, and Fourth-Year Orientation

The upper-class orientations prepared the students for their academic year. The programs continued to introduce the respective curriculum to the students as well as the required OSHA regulations and HIPAA training. Information about career counseling and the residency application process was also included.

Student Clinician's Ceremony

The Student Clinician's Ceremony, supported and partially funded by The Arnold P. Gold Foundation, has as its goal to enhance the students' transition into clinical medicine. The program was incorporated into the third-year orientation. As part of the ceremony, six outstanding residents, who had been chosen by the rising fourth-year class were recognized and honored with the Gold Foundation's Humanism and Excellence in Teaching Award.

JMC Learning Societies

The eight learning societies, which were designed to promote communities of students and faculty that are commit-

ted to the core values of Jefferson Medical College and to nurture professional and personal development, flourished this year. Approximately 32 students from each medical school class formed each learning society. As a major goal of the Societies was to highlight the importance of community service, each of the societies was active in promoting service to their designated community, as well as participating in a myriad of social events, fundraisers, and clinical learning activities. The Olympiad competition where individual societies competed in academic, social and community outreach ventures was continued.

Gold Humanism Honor Society

Under the leadership of Brian Lee (JMC '12), the Jefferson chapter of The Gold Humanism Honor Society flourished during its second year of existence by implementing meaningful initiatives to promote a culture of humanism for the Jefferson community and to recognize individuals with exemplary humanistic qualities. The members organized a service day on August 6, 2011 where matriculating students provided social support and activities for children living in homeless shelters and assisted in gardening projects to beautify the city. The members also continued the Gold Humanism Cafés as well as JeffCHAT (Compassion, Humanism, Altruism and Trust) to preserve a community of humanity, enhance empathy for patients, and explore vulnerabilities that are faced in health care. The students also initiated a Gold Nugget program and participated in the Arnold P. Gold Solidarity Day on February 14, 2012. An induction ceremony was held for 28 third-year students, six residents and one faculty member on March 23, 2012. The honorary speaker for the ceremony was Dr. Gregory Kane, Interim Chair and Professor of Medicine of Jefferson Medical College.

Campus Enrichment Initiatives

The Dean's Concert Series, "Tuesdays @ Twelve" with six musical excursions was continued this year to promote music appreciation and esprit de corps for the Jefferson medical students and Jefferson community. JMC also continued to collaborate with the Curtis Institute of Music to provide a venue for students from each of these institutions to socialize and enjoy an evening of classical music. The two evenings, which included more than 71 medical students, were hugely successful.

Support Systems

"Personal" Dean Assignment

To allow each student to develop an in-depth relationship with someone in the OSACC, each student is assigned a "personal dean." Drs. DeSimone, Lopez, Pohl, and Traves took responsibility for a fourth of each of the four classes. Every student meets annually with his/her assigned dean.

An OSACC dean was available by beeper at night and on weekends in the event of an emergency.

Clinical Mentor Program

The Clinical Mentor Program pairs first-year students with clinicians to provide a clinical role model to incoming medical students. This year, over 90 clinical faculty participated in the program.

Alumni Association and the Women in Medicine Society

The Jefferson Alumni Association continued a program to help foster mentoring at JMC by having Alumni from an array of specialties meet in small groups for lunch with first-year students. The Women in Medicine Society in conjunction with the University Activities Office sponsored an event highlighting women in medicine. This year, many students and alumna participated in the 50 and Forward events to celebrate the matriculation of the first class of women to JMC.

Academic Support

The Deans for the OSACC maintained a proactive stance regarding student academic performance by having annual meetings with their assigned students. In addition, they, along with course directors and the Deans for Undergraduate Medical Education, regularly monitored the students' performance. Depending on the situation, the OSACC referred students to other counseling services. Dr. Joseph Majdan, the Director of Professional Development for the University Clinical Skills and Simulation Center, continued the student remediation program for Jefferson medical students to address specific student problems and/or needs identified by the course and clerkship directors. A reference guide for students with academic issues is printed in the JMC Student Handbook and posted on the OSACC Pulse.

Transfer Students and Returning MD/PhD Students

The OSACC along with the Undergraduate Medical Education and University Registrar Offices monitored students on medical and nonmedical leaves of absence and their subsequent re-entry to medical school. The expanded clinical refresher program was continued again this year to better transition upcoming third-year students who had an interruption of their medical training or who were new to Jefferson (e.g., Malaysian transfer students).

Personal Counseling

Jefferson offered several options to students seeking counseling. In addition to the deans of the OSACC and the Jefferson faculty, the students utilized the JMC Student Personal Counseling Center. The counseling center was available for confidential evaluation and management of

students' personal issues, had organized an internal as well as external mental healthcare network, and developed a wellness seminar series. A member of the Department of Psychiatry was available at nights and on weekends in the event of an emergency. To ensure a smoother transition as well as academic success, the policies on voluntary and involuntary leaves of absence were reviewed and updated by key constituents from the Medical College and University.

Efforts have continued to incorporate stress management into the medical school curriculum. Students learned that stress is a normal part of daily life in the Introduction to Clinical Medicine I and II courses. Many students also participated in stress management programs sponsored by the Student Personal Counseling Center, the University Activities Office, and Center for Integrative Medicine.

Wellness Initiative

The JMC Student Affairs Wellness Committee, which was coordinated by Dr. Trayes, continued to promote student wellness on campus. The committee continues to publish the *JMC Wellness Committee Newsletter* three times a year. A new electronic format of these publications was introduced this year. Additionally, the committee continued the residency panel series to address topics of balancing work and life during residency.

JMC Student Leadership Forum

Dean Mark Tykocinski launched a new initiative, the JMC Student Leadership Forum, to identify and nurture a talented and diverse group of leaders among the student body as well as coordinate leadership opportunities for the campus at large. Under the leadership of Dr. Pohl, 15 second-year students were selected from 48 self-nominated people and met with the dean on three separate occasions to begin developing a skill set to be an effective leader.

Medical Student Research

The OSACC assisted students in obtaining research opportunities throughout all four years. Students met individually with the Deans in OSACC to discuss their career plans and develop an individualized approach to the students' research needs. Additionally, Dr. Lopez served as the faculty mentor for the Student Research Committee of the JMC Student Council, which conducted a variety of educational sessions on student research throughout the year. Dr. Lopez also served as an advisor to the Office of Scientific Affairs for the JMC Summer Student Research Program as well as the JMC College within a College – Research Track.

Career Planning and Clinical Counseling

The career planning Web site within Pulse (under the organization "JMC Student Affairs") provided students with

a range of material pertinent throughout all four years of medical school. While much of the information contained in the pages are presented to students in both formal didactic sessions as well as individually through meetings with student affairs deans, the Web site provides students with a convenient and accessible reference source.

The OSACC coordinated Career Day, under the direction of Dr. DeSimone, targeted second- and third-year students and was held on November 30, 2011. Faculty and alumni, representing 28 different medical specialties, held brief sessions to review and answered questions about their fields. In addition, Dr. Pohl discussed the residency application process.

Deans for the Office of Student Affairs and Career Counseling participated in the two sessions held by the University Office of the Registrar to assist second-year and third-year students in planning their upcoming clinical schedules. Dr. Pohl also held three meetings with the Class of 2013 regarding fourth-year curriculum and planning for postgraduate training. In addition, videos were produced and incorporated into these sessions to highlight ways to improve performance during clinical rotations and to provide tips on the residency application and the interviewing process. Four career workshops for first- and second-year students were held, and Dr. Lopez also maintained the student research opportunities in a user-friendly Web site in collaboration with the Learning Resource Center.

Postgraduate Application Process

Twenty-five members of the faculty comprised the Postgraduate Recommendation Committee. They interviewed the "rising" fourth-year students and wrote the Medical Student Performance Evaluations (formerly known as the "Dean's Letters") based primarily on excerpts of course evaluations. Dr. Pohl reviewed and signed all of the letters which included a histogram that plots each student's performance against the aggregate performance of their classmates for each of the core rotations, as well as third-year class rank.

Match 2012

Match Day was March 16, 2012. Of the 252 senior students (Class of 2012), 239 (95%) participated in the National Resident Matching Program (NRMP). Of the match participants, 11 students (5%) were unmatched for PG-1. One of the 11 unmatched students, though, had secured a PG-Y 2 position. Nationally, the unmatched rate was five percent. Eleven of the unmatched students were subsequently matched to good positions or attained a research position. Thirteen (5%) students elected not to participate in the match either because of a commitment to one of the armed services, the participation in the Canadian match

program, an acceptance of a position outside of the match (i.e., only participated in the NRMP SOAP), or deferment of their training.

The specialties chosen most frequently by the 250 seniors going on to postgraduate training were internal medicine (16%), emergency medicine (11%), pediatrics (10%), and family medicine (8%). Of this year's seniors going onto residency training, 100 (40%) initially entered primary care specialty training programs including internal medicine, family medicine, pediatrics, medicine-pediatrics or obstetrics and gynecology residency. Seventy-one percent of seniors participating in the NRMP matched at a university program for their PG-1 year. Eighty-five (36%) students accepted PGY-1 appointments in Pennsylvania, and 64 (27%) students accepted appointments in institutions that are the responsibility of Thomas Jefferson University Hospital or its affiliated hospitals.

Charles A. Pohl, MD

Senior Associate Dean for Student Affairs and Career Counseling

Kristin L. DeSimone, MD

Associate Dean for Student Affairs and Career Counseling

Bernard L. Lopez, MD

Associate Dean for Student Affairs and Career Counseling

Kathryn P. Trayes, MD

Assistant Dean for Student Affairs and Career Counseling

TABLE 1
JMC NRMP MATCH PROGRAM SELECTED DATA

	2012	2011	2010	2009	2008	2007	2006	2005	2004	2003
# In Match	239	244	231	249	206	204	213	214	217	184
# Unmatched	11	11	13	15	6	12	11	16	21	11
Specialty Preferences of Unmatched Students	3 EM 1 Ent 1 FM 4 Ortho 1 Ped 1 PreMed*	1 Ent 2 NS 1 Ortho 4 PreMed* 1 Psych 2 Surg	2 EM 2Ent 1 OB 4 Ortho 2 PreMed 1 Ped 1 Rad	1 EM 1 Ent 1 OB 3 Ortho 1 Plast 5 PreMed 1 Psych 2 Rad	2 EM 2 Ent 1 Ortho 1 PreMed*	2 EM 1 Ent 5 Ortho 1 Ped Rad 1 Surg 1 Trans*	1 Derm 1 Ent 1 OB 2 PreMed* 3 Surg 1 Trans* 1 Plast 1 PreSurg*	2 Anesth 1 Derm 1 EM 1 FM 2 Med 1 OB 1 Ped 5 PreMed* 2 Surg	3 Derm 1 FM 1 Med 4 Ortho 2 Path 1 Plast 2 PreMed 1 Rad 1 Rehab 5 Surg	1 Med 1 No List* 3 Ortho 1 Ped 1 Psych 2 Rad 1 RadOnc 1 Trans*
# Match at University Programs or Primary Medical School Affiliates**	169	159	155	159	130	156	156	159	163	140

*One of these students matched for a PG-2 residency position, but not for PG-1 position.

** Includes PG-1 and 2 (if known)

TABLE 2
INITIALLY UNMATCHED STUDENTS IN THE NRMP

2012	2011	2010	2009	2008	2007	2006	2005	2004	2003	2002
5.0%	4.5%	5.5%	6.0%	3.0%	6.0%	5.0%	7.0%	9.5%	6.0%	5.5%

The unmatched rate for all graduating U.S. seniors was 5.0% in 2012.



Office of Diversity and Minority Affairs

Diversity Affairs

The Office of Diversity and Minority Affairs' (ODAMA) mission is to promote multicultural initiatives that affirm Jefferson's commitment to maintain a culture of understanding, sensitivity and mutual respect within the Jefferson Community. Efforts to promote diversity and educate students in the provision of cross-cultural competent healthcare continue to be a focal point for this office. For 2011-2012, ODAMA sponsored a series of lectures, cultural events and educational programs. Students, Faculty and staff from Jefferson Medical College, the School of Health Professions, the School of Nursing, the School of Population Health, the School of Pharmacy and the Graduate School of Biomedical Sciences, were reached.

Multicultural Initiatives

Lecture Series

The lecture series is divided into three categories: Diversity/Cultural Competency Lecture, Open Forum/Hot Topics Lecture and a Community/Healthcare Disparities Lecture. The lectures focus on underlying issues concerning all categories of diversity, healthcare issues of ethnic minority groups, health policy, disparities in healthcare amongst ethnic minority groups, in addition to the provision of culturally and linguistically competent care for all patients.

Celebratory Events/Activities

Included in ODAMA's multicultural initiatives were cultural/ethnic events and activities. The following offices have collaborated with ODAMA in cosponsoring events throughout the academic year: the TJU Activities Office, Office of International Exchange Services and Department of Nutrition and Dietetics. In addition, ODAMA works closely with and funds the following organizations that help to plan activities that promote cultural awareness and sensitivity throughout the Jefferson community:

The Diversity Council (DC), Student National Medical Association (SNMA), Jefferson Latino Medical Student Association (JLMSA), Jefferson Southeast Asian Medical Student Association (JSAMOSA), Jefferson Medical Interpreters (JMI), Asian Pacific American Medical Student Association (APAMSA), Hawaii and Native American Medical Student Society (HNAMSS), Jefferson Islamic Association, Jefferson Queer Straight Alliance (JQSA) and International Medicine Society (IMS). The following months were celebrated: Latin Heritage Month, LGBTQ History Month, Disabilities Awareness Month, Expressions of Asia, Women's History Month and Diversity Week. A list of all multicultural events/activities follows this report in Table 1.

Jefferson Medical Language Immersion Program (JEFF MED-LIP)

The Jefferson Medical Language Immersion Program (JEFF MED-LIP) was designed to address the need of today's diverse patient population whose members are either limited or non-English proficient. The program enables our students to learn medical terminology, social-cultural norms and nuances, in addition to prevalent diseases within the Latino sub-groups. To put into practice the language skills and competencies acquired in the classroom setting, students do community outreach by volunteering at nearby community clinics that have a large percentage of Latino patients.

Medical Spanish

The Medical Spanish course offers students the opportunity to learn medical terminology in addition to prevalent diseases and healthcare disparities of each Latino sub-group. Social-cultural issues are highlighted and students have the opportunity to volunteer in a local community clinic that predominantly serves a Latino patient base. Three levels are offered: Basic, Intermediate and Advanced. The students volunteer at Puentes de Salud and Esperanza Clinic. The courses are taught by instructors, certified to teach medical terminology, at the Masters and doctoral levels.

Additional Medical Terminology Courses Offered

Medical Chinese (2010) and Medical Korean (2012) have been added to the medical terminology courses offered through the Office of Diversity and Minority Affairs; a collaborative effort with the Asian Pacific American Medical Student Association. The courses run for 10 weeks (biweekly), once a week, for an hour. Both courses are taught by instructors at the doctoral level.

Global Health Initiative: Clinical Shadowing and Language "Immersion" Experience Abroad: A summer "immersion" experience in a foreign country, where that specific language is spoken, is offered as part of the program. Students are able to travel abroad for six-to-eight weeks and experience first-hand that country's healthcare delivery system.

The Dominican Republic (UNIBE–Universidad Ibero Americana School of Medicine) and Mexico (UAG–Universidad Autonoma de Guadalajara School of Medicine) continue to serve as primary sites for this program. In 2007-2008, the sites were expanded to include Argentina, Peru and Chile. The programs in Argentina, Peru and Chile are in collaboration with ECELA (Escuelas y Centros de Espanol en Latinoamerica), a member of the International Association of Language Centers in those three countries.

Student Support

Annually, ODAMA has partially funded students to participate in either a global health experience or clinical rotation abroad. This year, four students were funded to participate in a global health experience. Two students, a first- and fourth-year, traveled to Rwanda; two first-years traveled to the Dominican Republic.

ODAMA fully funds, through JEFF MED Interpreters, the cost associated with certifying our students as interpreters by the Health Federation of Philadelphia. This year, 13 students were certified.

Diversity Council

The Diversity Council actively works with ODAMA to plan and promote programmatic activities. This year, 20 students were members of the Diversity Council. Most of the members are student leaders and members of the various ethnic organizations on campus. Their active participation in promoting these programs ensures a large turnout in all initiatives providing a highly successful year for ODAMA.

Minority Affairs

Undergraduate Recruitment and Retention

One of the primary goals for the Office of Diversity and Minority Affairs is to implement a plan of recruitment to address the lack of diversity within the Jefferson Medical College student body. Effective recruitment at the undergraduate level is critical since most of these students are at the nearest point of becoming applicants. Following the initial strategic recruitment plan, active recruitment takes place throughout the country targeting underrepresented minority students (URMs). Some of the recruitment venues include: professional conferences; national and regional conferences held by medical student organizations such as the Latino Medical Student Association (LMSA) and the Student National Medical Association (SNMA); Historically Black Colleges and Universities (HBCUs), Hispanic Serving Institutions (HSIs) and Native American Tribal Colleges; graduate and professional recruitment fairs; and, summer enrichment programs designed specifically for URMS. Networking with pre-health advisors throughout the nation has been established in an effort to create strong bonds. A summary of all recruitment trips made by Assistant Dean Luz Ortiz for 2011-2012 in addition to those made by URMS that have worked closely with the office in its recruitment/retention efforts is included on Table 2 following the report.

Open House

For the past eight years, Jefferson Medical College's Office of Diversity and Minority Affairs has hosted an annual Open House. Students are offered a full-day program. The

program includes presentations from representatives from Jefferson Medical College's Office of Admissions, the College of Graduate Studies and Financial Aid. Participants are given a tour of the TJU campus.

They end the day with a tour of the Clinical Skills Center's Simulation lab where they have the opportunity to have some hands-on experiences through various didactic sessions.

Admissions Data

ODAMA makes a concerted effort to recruit through all venues that produce a high yield of URM applicants to Jefferson Medical College. Throughout the past ten years, ODAMA has had the opportunity to work closely with the Office of Admissions and current URM students who wish to help in our recruitment/retention efforts. There has been a steady increase in the URM applicant pool since the inception of this office.

High School Recruitment

Recruitment efforts at this level are imperative to create a "pipeline" of qualified students for the medical school. ODAMA is effectively playing a role in this effort. Since students begin to make career decisions early in their edu-

cational life, they need to be exposed and encouraged to pursue a career in medicine before they begin college. The following details efforts by ODAMA.

Future Docs Program

The Future Docs High School program is for high school juniors and seniors who have an interest in the sciences. The program runs for ten consecutive weeks, once a week, for two hours. The program includes a Basic Anatomy course, sessions on careers in graduate biomedical research and the health professions, and a multi-disciplinary list of guest speakers. The Anatomy Lab and Clinical Skills Center provide the students with hands-on experiences. This enrichment program also includes effective guidance and counseling for successful preparation as an applicant to U.S. medical schools. Once requirements are fulfilled, students are awarded a certificate of completion at the end of the program.

Thirty-two schools from the greater Philadelphia were contacted; 17 were represented. This year, 107 students participated and completed the program.

Luz M. Ortiz, MA

Assistant Dean for the Office of Diversity and Minority Affairs

TABLE 1

ODAMA ACTIVITIES AND EVENTS

2011 - 2012

<ul style="list-style-type: none"> • Latin Heritage Month- Guest Speaker-Iris Reyes, MD UPENN “Don’t Get Lost in the Translation: The Use of Interpreters in the Clinical Setting” Sept. 27, 2011 • LHM Cultural Evening Sept. 23, 2011 • LHM Salsa/Zumba Lessons Oct. 5, 2011 • La Isla: CKD in Nicaraguan Cane Worker April 19, 2011 • National/Regional (NE) LMSA Conference-Networking/ Recruitment February 3-5, 2011 • UCI Diversity Coalition Conference Fall 2011 • NHMA Conference- Networking/ Recruitment April 26-29, 2011 • Disability Awareness Month- Guest Speaker-NY Times Best Seller: Rachel Simon Oct. 2011 • LGBTQ Month-Guest Speaker John P. Sanchez, MD Clinical Instructor-Montifiore North Emergency Medicine - “Building a Supportive Institutional Climate for the LGBTQ Community” Oct. 17, 2011 • Holidays Around the World Celebration Dec. 2011 • APAMSA’s Introductory Talk Sept. 16, 2011 • APAMSA National Conference Oct. 14-16, 2011 	<ul style="list-style-type: none"> • APAMSA’s Dr. Hann Talk Jan. 10, 2012 • APAMSA’s Origami Folding Session Jan. 18, 2012 • APAMSA’s Eastern Medicine Dinner Talk Jan. 19, 2012 • Expressions of Asia Jan. 20, 2012 • APAMSA’ Refugee Health Lunch-time Talk Feb. 9, 2012 • APAMSA Tutoring Program Party Mar. 6, -12 • RHP/APAMSA Tutoring Introductory Mtg. Feb. 29, 2012 • APAMSA’s Medical Education and Healthcare System in China Lunch-time Talk Mar. 23, 2012 • APAMSA’s Asian Culture Showcase at Diversity Week Cultural Show Apr. 16, 2012 • Hep B Screening May 6, 2012 • Pipeline Program 3/3, 4/14, 5/5, 6/2 • Dr. Deborah Witt - My Experience as a Physician Oct. 6, 2011 • Black Heritage Month Working in the Community: Addressing African American Health Feb. 7, 2012 • Malcome X: Exploring the Man Behind the Infamy Feb. 27, 2012 	<ul style="list-style-type: none"> • Diversity Week-“Black Folks don’t...”: Addressing Stereotypes Apr. 18, 2012 • URM Mixer Apr. 27, 2012 • Diversity Show Apr. 20, 2012 • JeffLGBTQ: World AIDS Day Bake Sale supporting Foyer of Philadelphia (held outside of abridged RENT performance) Dec. 1, 2011 • JeffLGBTQ: Transgender Surgery Talk with Dr. Christin McGinn Apr. 16, 2012 • JeffLGBTQ: National LGBT Health Student Symposium April 20-22, 2012 • Diversity Council - Guest Speaker May 14, 2012 • JeffMED Interpreters - Initial Interest Mtg. Sep. 21 • JeffMED Interpreters-Training, Didactic and Practical Session Didactic Session: 10/1, 10/8 Practical Training Sessions: 10/6, 10/8, 10/10 • JeffMED Interpreters - Testing 10/8, 10/15 • JeffMED Interpreters - Follow up meeting for certified interpreters Varied per language group Mid October • JeffMED Interpreters-Regular Interpreting Services at Health Centers year-long
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TABLE 2
RECRUITMENT VISITS AND PROFESSIONAL DEVELOPMENT CONFERENCES
2011 - 2012

AND
PROFESSIONAL DEVELOPMENT CONFERENCES

2011-2012

ATTACHMENT 2

DATE	LOCATION	EVENT	APPROXIMATE # OF STUDENTS
July 15, 2011	Piscataway, NJ	BCP Research Symposium	150
July 22-25, 2011	Bethesda, MD	NIH Recruitment Fair	300
Sept. 14-19, 2011	San Juan, PR	AGMUS Research Symposium	250
Oct. 7, 2011	Princeton, NJ	Princeton University Recruitment Fair	150
Oct. 18-26, 2011	Miami, FL	Univ. of Miami Florida International Univ.	300
	Gainesville, FL	AMSA Diversity Pre-Med Forum	200
Nov. 2-10, 2011	Denver, CO	AAMC – National Meeting	250 Professional Dev.
Nov. 14, 2011	Dover, DE	Delaware State Univ.	50
Dec. 2, 2011	Piscataway, NJ	Rutgers Univ. - ODASIS	250
Dec. 3, 2011	Philadelphia, PA	SNMA Region IX Conference	200
Feb. 3-5, 2012	Ithaca, NY	BBMTA Conference	200
Feb. 15-20, 2012	Philadelphia, PA	NAMME-NE Regional Conference	250 Professional Dev.
March 23-25, 2012	New York, NY	City College	200
April 18-22, 2012	Philadelphia, PA	NEGSA-CODA	200 Professional Dev.
April 26-29, 2012	Washington, DC	NHMA Conference	200 Professional Dev.
June 6-12, 2012	San Juan, PR	AAMC-PDC Recruitment – UPR-RP	Professional Dev. 200
June 20-24, 2012	Baltimore, MD	NAAHP	200

*Asst. Dean Luz Ortiz works closely with a group of URM students, years 1-4, who help in ODAMA's recruitment efforts. The asterisk represents those events they recruited at this year.



STUDENT COUNCIL

JMC Student Council is comprised of elected representatives from each class at Jefferson Medical College. Each year, the first through fourth years vote to elect two co-Presidents, a Secretary of External Affairs, a Secretary of Communications and a Treasurer, as well as six representatives from each of the four classes. Additionally, select students are chosen to sit on University administrative committees, including Admissions, Alumni, Affiliates, Curriculum, Student Advisors, Student Affairs, Research, Technology and Wellness.

Major responsibilities of Student Council include supervision of student organizations, disbursement of university funds, and the dissemination of information on issues pertinent to student life. Most importantly, Student Council serves as a liaison between the students, faculty, and administration. This allows student issues such as safety, housing, and internet access to be brought to the attention of the proper department, facilitating timely and adequate resolution. Student Council works closely with the Office of Student Affairs and Career Counseling to address student concerns and improve student life.

The Student Council Executive Board oversees the Student Council budget. Along with providing funds for JMC's student organizations, Student Council also helps support JeffHOPE, Jefferson's student-run clinic, the Yearbook and dedicates yearly funds toward improvements in the Medical Student Lounge and the Wellness Center. Another significant portion of the budget is set aside for conference travel and registration expenses for attending students presenting

their research. Finally, a portion of the budget is reserved for events promoting student interaction and relaxation, such as an ice cream social or a coffee for concerns.

This past year, Student Council worked with the administration and the student body to better the function of the council and to alleviate any concerns of JMC students. A primary concern of this past year was about the usage of the Hamilton Building's study rooms. A collaborative effort between the Registrar, Committee of Student Advisors, Campus Security, the Student Council Executive Board, and the Deans of Student Affairs produced a compromise where a certain number of study rooms were to remain open past the usual closing time of the floor. To maintain the relationships we built in this endeavor, a new committee was established to sit in with the Student Advisors so that a line of communication is always available in the future. Our website has been redone and updated with a plethora of information relevant to students. The events that we have organized, including campus-wide study breaks, mixers with other local medical schools, ice cream socials, end-of-the-year parties and post-exam parties have all been well received and enjoyed by all attendees. Following is a summary of activities and organizations funded by Student Council:

Student Activities and Organizations *Announcements Emails*

The Student Council Secretary of Communications sends out announcements two times per week to the entire stu-

dent body listing upcoming student events. Emails are organized chronologically, to facilitate ease of reading. A Google Calendar of events to which all students can subscribe, is also maintained and updated regularly by the Secretary of Communications.

JeffHOPE

The JeffHOPE Homeless Shelter Clinic Project is a student-run health clinic that provides free medical care and education to indigenous populations in Philadelphia. The project is supervised by the Department of Family Medicine (James D. Plumb, MD is advisor), but faculty from many departments pledge their time, resources and support.

Each week, under the supervision of volunteer Jefferson faculty, more than 30 students treat homeless men, women and children at various shelters including the Eliza Shirley House, Ridge Shelter, ACTS Shelter and Our Brother's Place. On Saturday mornings, JeffHOPE conducts a clinic in association with Prevention Point, a needle exchange program in North Philadelphia. For first- and second-year medical students, the clinics provide invaluable early exposure to patient care. Third- and fourth-year students have the opportunity to examine and treat the homeless population as well as teach first- and second-year medical students the fundamentals of physical examinations, history taking and the pathophysiology of common diseases.

JeffHOPE receives funding from Student Council, private and public grants, and individual donations. The annual JeffHOPE Ball, held at the Crystal Tea Room, also raises money and awareness for the project. More than 600 faculty and students attend each year, making it JeffHOPE's largest fundraising event and providing the chance to honor faculty, students and others who have been integral to the success of the organization.

Specialty Dependent Organizations

Student Council supports over 15 different specialty dependent organizations, such as the Internal Medicine Society, the Gibbon Surgical Society, the Orthopedic Society, the Emergency Medicine Society, and the Family Medicine Interest Group. These groups organize lunchtime lectures, panel discussions, and clinical skills practice sessions, focusing on topics such as residency applications and skills relevant to their specialty, such as how to place an IV or tie surgical knots.

Cultural Student Organizations

Student Council encompasses over 10 different cultural and ethnic clubs ranging from JeffSAMOSA to APAMSA to the Hawaii Club. Cultural celebrations such as an Asian diversity night, an Indian cultural show, and a Hawaiian Luau are organized yearly by students in each group and feature dances, authentic food, and a discussion of pertinent cultural issues.

National Medical Associations

Many of the prominent national medical organizations boast a strong presence in the Jefferson community. With over 65% of the JMC student body enrolled, the Jefferson AMA chapter is very active on the national and regional level. The Jefferson AMSA chapter is currently operating an innovative, student-run HIV-testing program and has trained more than 75 students to perform rapid-response HIV tests in the Methodist Emergency Room. AMWA has been organizing events on-campus with relevance to women's health and female physicians and medical students. Events have included mentor programs, lunch seminars, an after-school tutoring program and the annual women's forum.

Addendum

The activities and organizations presented above are a small sample of the many noteworthy Jefferson student organizations. For each organization highlighted, there are a dozen others also actively educating Jeffersonians and serving the campus. The diversity and breadth of JMC's student organizations is one of the most unique facets of Jefferson. Student Council is proud to represent such an engaged and dynamic student body. A complete listing of organizations is follows this report.

Student Council Officers

The following students serve as the Student Council Executive Board for 2011-2012:

Madeline Carroll

President, Administrative Affairs, Class of 2014

Trent She

President, Legislative Affairs, Class of 2015

Amy Toporowski

Secretary of External Affairs, Class of 2014

Nicole Sgromolo

Secretary of Communication, Class of 2015

Rino Sato

Treasurer, Class of 2015

TABLE 1
JMC STUDENT ORGANIZATIONS

Special Interest	Faculty Advisor	Student Contact
Arrhythmias	Elizabeth Brooks, DPM	chelain.goodman@jefferson.edu
Bookstore Advisory Committee	Patricia S. Haas, MBA	charity.marshall@jefferson.edu
Colleges Against Cancer at Thomas Jefferson University	Colleen Dempsey, BART(R)	andrea.st.cyr@jefferson.edu
Jeff Earth	George C. Brainard, PhD	katherine.wilhemlmy@jefferson.edu
Jeff ISPOR International Society of Pharmacoeconomics & Outcomes Research	Vittorio Maio, PharmD, MPH, Laura Pizzi, PharmD, MPH	dante.gravino@jefferson.edu
Jeff SAPHE Student Activities for Public Health Education	Nancy L. Chernett, MA, MPH	<u>katelyn.hurley@jefferson.edu</u>
Jeff SEES	Tara Uhler, MD	<u>anthony.parendo@jefferson.edu</u>
Jeff SOAR Students Organized Against Rape	Abigail Wolf, MD	kelly.mcnamara@jefferson.edu
Jefferson Arts Organization	Mitchell Cohen, MD	anna.escuder@jefferson.edu
Jefferson Book Club	Joanne Gotto, EdM	leah.winer@jefferson.edu
Jefferson Chamber Orchestra	Bruce Fenderson, PhD	<u>madeline.carroll@jefferson.edu</u>
Jefferson FUNCTIONAL	James D. Plumb, MD	chelsea.dalsey@jefferson.edu
Jefferson History of Medicine Society	Salvatore Mangione, MD	carey.myers@jefferson.edu
Jefferson Students for Life	Marianne Ritchie, MD	jonathan.corsini@jefferson.edu
Married Student and Significant Other Society	Kristin DeSimone, MD	spenser.morton@jefferson.edu
Medical Students for Choice	Brett Worly, MD	stephanie.teng@jefferson.edu
Military Medical Students Association	Edith Mitchell, MD	lloyd.tannenbaum@jefferson.edu
Move4Health	Patrick McManus, MD	glenna.smith@jefferson.edu
Outing Club	Richard Schmidt, PhD	Kevin.chung@jefferson.edu
Wellness Center Advisory Committee	Patricia S. Haas, MBA	justin.holman@jefferson.edu
Wilderness & Disaster Medicine Society	Edward Jasper, MD	william.warrender@jefferson.edu

Athletics	Faculty Advisor	Student Contact
Jeff Hockey	Robert Winn, MD	<u>daniel.altman@jefferson.edu</u>
Jefferson Badminton Club	Jeffrey Joseph, DO	<u>wei.diao@jefferson.edu</u>
Jefferson Football League	David Abraham, MD	michael.fickes@jefferson.edu
Jefferson Karate Club	Hideko Kaji, PhD	lauren.rosenblum@jefferson.edu
Jefferson Soccer Club	Matthew DeCaro, MD	matthew.walsh@jefferson.edu
Jefferson Volleyball Club	Nancy Philp, PhD	andrew.zheng@jefferson.edu
Jefferson Winter Sports Club	Christopher Dodson, MD	edward.podgorski@jefferson.edu
Ultimate Frisbee Club	Fred W. Markham, Jr., MD	<u>monica.pham@jefferson.edu</u>

Career Oriented	Faculty Advisor	Student Contact
American Medical Student Association at Jefferson Medical College (AMSA)	Kathryn Traves, MD	jenna.fox@jefferson.edu
American Medical Women's Association (AMWA)	Karen D. Novielli, MD	cherilyn.cecchini@jefferson.edu
Ars Medica	George C. Brainard, PhD	lena.edelstein@jefferson.edu
International Medicine Society	Janice Bogen	alexander.chalpin@jefferson.edu
Jefferson American Medical Association Medical Student Section (AMA)	Stephen L. Schwartz, MD	mausam.kuvadia@jefferson.edu
Jefferson Anesthesia Society	Zvi Grunwald, MD	sejalvirani@jefferson.edu
Jefferson Dermatology Society	Matthew Keller, MD	daria.kemp@jefferson.edu
Jefferson Emergency Medicine Society (JEMS)	Elisabeth Edelstein, MD	alex.koo@jefferson.edu
Jefferson Internal Medicine Society (JIMS)	David Axelrod, MD, JD	nichoals.schenk@jefferson.edu
Jefferson Medical Oncology Society	Edith Mitchell, MD	sandra.ho@jefferson.edu
Jefferson Orthopaedic Association	Alan Hilibrand, MD	michael.ciccotti@jefferson.edu
Jefferson Otolaryngology Society	Gregory Artz, MD	mara.modest@jefferson.edu
Jefferson Pediatrics Society	William McNett, MD	andrew.baron@jefferson.edu
Jefferson Physical Medicine & Rehabilitation Society	Adam Schreiber, DO, MA, FAOCPRM, FAAPMR	paul.kitei@jefferson.edu
Jefferson Preventive Medicine Society (JPMS)	James Plumb, MD	laura.odorizzi@jefferson.edu
Jefferson Psychiatry Society	Abigail Kay, MD	priya.joshi@jefferson.edu
Jefferson Public Health Society	James D. Plumb, MD	kaela.pearce@jefferson.edu
Jefferson Radiology Society	Levon Nazarian, MD	andrew.karasick@jefferson.edu
Jefferson Urology Society	Costas Lallas, MD	ross.kalman@jefferson.edu
Kathryn MacFarland Ob/Gyn Society	Abigail Wolf, MD	alexis.braverman@jefferson.edu
Med-Peds Society of Philadelphia	Allen R. Friedland, MD	martin.guerrero@jefferson.edu
Neurosurgery Student Interest Group	Jack Jallo, MD, PhD	alex.whiting@jefferson.edu
Pathology Interest Group (The Nutmeg Society)	Ashlie Burkart, MD	megan.lundgren@jefferson.edu
Peter Amadio, Jr. Family Medicine Society	Fred W. Markham, Jr., MD	jenna.fox@jefferson.edu
Physician-Scientist Association of Thomas Jefferson University	Michael Root, MD, PhD	david.ritter@jefferson.edu
Student Interest Group in Neurology (SIGN)	Christopher Skidmore, MD	annie.ashok@jefferson.edu
Student National Medical Association (SNMA)	Deborah Witt, MD	owokunile.otubusin@jefferson.edu
Thomas Duane Ophthalmology Society	Edward Jaeger, MD	brittany.rogers@jefferson.edu

National Honor Societies	Faculty Advisor	Student Contact
Alpha Omega Alpha Honor Medical Society	Clara Callahan, MD	alyssa.perez@jefferson.edu
Gold Humanism Honor Society	Charles A. Pohl, MD	desmond.wilson@jefferson.edu
Hobart Amory Hare Honor Medical Society	Gregory C. Kane, MD	anne.mainardi@jefferson.edu

Cultural/Religious	Faculty Advisor	Student Contact
Chinese Students and Scholars Association (CSSA)	Xinliang Ma, PhD	xiaoliang.wang@jefferson.edu
Diversity Council	Luz M. Ortiz, MA	alexandria.starks@jefferson.edu
Jeff SAMOSA South Asian Medical Student Association	Madhu Kalia, MD, PhD	charu.dhavalikar@jefferson.edu
Jefferson Christian Fellowship (JCF)	Loren Chen, MD	youna.park@jefferson.edu
Jefferson Jewish Student Association	Leonard Eisenmann, PhD	jonathan.edias@jefferson.edu
Jefferson Latino Medical Student Association (JLMSA)	Luz Ortiz, MA	audra.zimmer@jefferson.edu
Jefferson Muslim Student Association	Luz Ortiz, MA	Abdul-razaq.adeniyi@jefferson.edu
Louis Pasteur Roman Catholic Society	Patrick McManus, MD	laura.odorizzi@jefferson.edu

JMC Related	Faculty Advisor	Student Contact
Jefferson Medical College Ambassadors	Elizabeth Brooks, DPM	lauren.nicholls@jefferson.edu
Jefferson Medical College Student Council	Charles A. Pohl, MD	madeline.carroll@jefferson.edu
Jefferson Medical College Student Professional Conduct Committee (Student PCC)	Charles A. Pohl, MD	naomi.sell@jefferson.edu
Student Admissions Coordinators	Elizabeth Brooks, DPM	Desmond.Wilson@jefferson.edu

Community Service	Faculty Advisor	Student Contact
Jeff Cares for Kids	Steven Bachrach, MD	tina.ahmadinejad@jefferson.edu
Jeff HEALTH Helping Africa Link to Health	James D. Plumb, MD	neethu.tharu@jefferson.edu
Jeff HOPE Health, Opportunity, Prevention & Education	James D. Plumb, MD	shelly.dutt@jefferson.edu
Jeff Mentors	Patrick McManus, MD	greg.cannarsa@jefferson.edu
Jeff Reads	Tara Berman, MD	annie.ashok@jefferson.edu
Jeff YES Youth Emergency Services	Patrick McManus, MD	christine.chang@jefferson.edu
Jefferson Clowns for Medicine	Bruce Fenderson, PhD	shivam.saxena@jefferson.edu
Jefferson Medical Interpreters	Luz Ortiz, MA	keith.morse@jefferson.edu
Refugee Health Partners	Marc Altshuler, MD	nikhita.dharbhamulla@jefferson.edu



UNIVERSITY OFFICE OF THE REGISTRAR

During the 2011-2012 academic year, the University Office of the Registrar reported an opening fall enrollment of 3,730 students in the combined six academic divisions of the University: 1054 in Jefferson Medical College (28.3%), 279 in the Jefferson College of Graduate Studies (7.5%), 825 in the Jefferson School of Health Professions (22.1%), 1,060 in the Jefferson School of Nursing (28.4%), 313 in the Jefferson School of Pharmacy (8.4%) and 199 in the Jefferson School of Population Health (5.3%).

Courses and Online Course Offerings

Review of TJU's curricula (both didactic and clinical) shows that during the 2011-2012 academic year, the University Registrar's Office managed 2,815 course and course sections. This compares to 2010-2011, with 2,471 and 2009-2010 with 2,485. Only courses and sections that had a student enrollment were included and the figures do not reflect all active course sections offered during the academic year. The increase in number for the 2011-2012 academic year is mainly attributable to the School of Pharmacy's initial fourth year class and changes to the clinical course offerings in the Medical College.

Technology Enhancements

As part of the Academic Affairs/Undergraduate Medical Education-led initiative to provide timelier reporting of student clinical evaluations, the Registrar's Office has worked closely with the JMC Dean's Office liaisons and Jeff-IT to enhance the evaluation submission process between New

Innovations and the Banner student system. Nearly all third-year, and select fourth-year, clinical rotation evaluators utilize New Innovations to submit written clinical evaluations, which are automatically entered in the Banner student system. An additional feature in the New Innovations/Banner interface was added this year to insert the final evaluation grade indicated on the New Innovations final evaluation into Banner. This added interface eliminates additional steps previously required to manually transfer final grades to Banner and greatly enhances the timeliness of final grade reporting to students, as well as reducing the possibility of entry error in the prior process.

Student focus groups were held during the year to gather student views of various aspects of information and services provided throughout the student life-cycle from inquiry to graduation. One area of concern expressed related to the "look and feel" of the student Banner Web system. Further focus group activity is planned for the up-coming year to address this item.

The graduation application process was also moved to a Banner Web-based process which allowed applicants to complete the formerly paper intensive process online. Expected graduates could apply for graduation, indicate exactly how they wished their name to appear on their diploma, as well as how name and hometown information would be printed in the Commencement program. They could also indicate the address to which the diploma should

be mailed if they were not planning to attend the ceremony. An additional feature allowed students to order academic regalia online. This process provided a much greater level of student satisfaction than the previous in-person “graduation fair” where paper forms were required to be submitted to our regalia vendor. The process provided much more efficient administrative processing and tracking abilities than was previously available.

A trial process on Pulse was also introduced to faculty and administration invited to attend the commencement ceremonies by which they could respond online if they planned to attend and to order academic regalia, if needed. For those who responded via the online process, it provided an ability to quickly provide information and avoid possible delays using the postal system. This process worked well and plans are to send commencement invitations to faculty and administration electronically for the upcoming year.

The office was again invited to attend the JMC Admissions Office “Second Look” program held for students accepted to the incoming fall class. An overview of the online capabilities and services available to students via Banner Web were demonstrated and students were encouraged to ask questions related to office services.

Comparable to other universities and colleges, Thomas Jefferson University has had a long standing contract with the National Student Clearinghouse (NSC) to provide student loan deferment and enrollment certification services.

In February, 2010 NSC’s Degree Verify services were added to the complement and during 2010-2011, NSC processed 2,152 degree verifications for Jefferson graduates. In 2011-2012, 2,839 degree verifications were processed, reflecting an increase of 32% from the prior year.

NSC’s online services were further supplemented during 2010-2011 with the addition of the Transcript Ordering Process. As of July 1, 2011 all authorization and implementation steps were completed to make this service available to Jefferson students and graduates. NSC’s Transcript Ordering allows individuals to request the mailing of their academic transcript to themselves or a third party (e.g., prospective employer) and further provides the capability of tracking the completion of this request on-line. If required, the transcript can also be sent electronically with full security measures. In the first year of operation during

the 2011-2012 academic year, just under 4,300 transcript requests were received and fulfilled utilizing this added feature.

The Registrar’s Office continues to work with the services provided by NSC. Two initiatives that are currently being implemented are the use of the NSC Student Self Service and the Student Tracker functions. Student Self Service allows students to use their secure Banner Student Web portal to request and receive enrollment and degree verifications as well as request unofficial and official transcripts. The Student Tracker is an Institutional Research function that the office will use in the further development of outcome assessment reporting.

Challenges

The increasing overall university enrollment has led to a corresponding increase in the volume of services required from the University Office of the Registrar. These services include responding to licensure, transcript, certification and verification requests, both from currently enrolled students and graduates. While the services in place with NSC help alleviate some of the transcript and verification volume, significant effort is still required to fully serve our constituents, which includes the academic departments as well as students, in a timely manner. Continued efforts will be dedicated to further streamlining processes. These efforts include the review of specialized administrative policies, which are unique to individual academic programs, and discussion of whether these policies can be revised in the context of broader policies that apply to multiple academic programs.

The issue of adequate office and storage space continues to be a challenge. Efforts to identify areas that will allow for a combined student academic services model, with provision of acceptable office and sufficient storage facilities, are ongoing.

Raelynn Cooter, PhD

Associate Vice President for Student Services and University Registrar

David R. Clawson

Senior Associate University Registrar and University, Director of Student Records



UNIVERSITY OFFICE OF STUDENT FINANCIAL AID

The University Office of Financial Aid is responsible for providing educational-financing services to students in all six colleges/schools of Thomas Jefferson University, as well as debt-management counseling for TJU students and Jefferson Health System (JHS) house staff. During 2011-2012, more than \$96,000,000 was administered to 2,529 students enrolled in the University. The data in this report focuses specifically on Jefferson Medical College.

Sources of Financing

Table 1 and Figure 1 following this report show the total aid awarded to Jefferson Medical College students during the 2011-2012 academic year. In reviewing this data, it is important to note additional characteristics regarding the composition of total funding.

Of the \$36,392,081 borrowed during 2011-2012, \$27,779,750 was from unsubsidized sources (Federal Unsubsidized Stafford, Federal Graduate PLUS, and private alternative loan programs). The amount shown indicates only the principal borrowed; however, interest accrues to the student's account from the date funds are disbursed.

Of the \$7,893,106 awarded in grant and scholarship funding, \$2,711,949 was from service-obligation programs (National Health Service Corps, Armed Forces Health Professions Scholarship, and Federal Work Study). Receipt of these funds requires an "in-school" or post-graduation employment obligation.

Federal Work Study

Federal Work Study (FWS) is a program by which students may defray a portion of their educational expenses through employment, either on campus or in the surrounding community. The total amount earned during 2011-2012 is shown in Table 1.

As part of this program's community-service efforts, Federal Work Study remains a primary funding source for summer employment through the Bridging the Gaps (BTG) program. During the 2011-2012 year, \$94,713 in Federal Work Study community service funding was earned by 66 university students; \$55,507 community service funds earned by 39 JMC students. Eighteen University students working in literacy projects earned \$14,407. Federal Work Study Program regulations require that at least 7% of Federal Work Study funds be earned in community service and include at least one literacy program. As in previous years, the Financial Aid Office continues to meet these federal requirements and an effort to increase community service projects will continue in the 2012-2013 academic year.

Federal Work Study earnings have remained consistent over the last three years. Students are utilizing this program to assist in meeting educational expenses while gaining valuable employment experience. As employing departments pay 25-30% of the student's wage, this program continues to be very competitive among University

departmental employers. Since the 2006-2007 academic year, earnings for Jefferson Medical College students has nearly doubled from \$136,146 to \$237,787 in 2011-2012. Forty-one percent of Jefferson Medical College student earnings were attributed to the Dean's Summer Research Program while other students worked in other research and lab positions.

Student Indebtedness

Table 2 shows the average debt for Jefferson Medical College's graduating class of 2012, with comparative data for the nine preceding years (2003-2011). As shown in Table 2, the average debt for the Class of 2012 had a large increase from the previous year. Student borrowing continues to outpace increases in tuition rates and increases in the consumer price index. This has occurred even though the level of scholarships awarded by JMC remains consistent, and the family (parental) financial strength has remained relatively consistent among classes. Increased Federal Direct Stafford Loan limits of \$2,000 a year as well as the availability of the Federal Graduate PLUS Loan, both introduced in 2006, have contributed to the increased debt level. Also, the increasing cost of the USMLE Clinical Skills Exam and the new federally permitted inclusion of residency interview and travel costs in the student aid budget may continue this trend of rising debt among JMC students. This trend will continue to be reviewed in the 2012-2013 year.

The private lending market has "bounced back" this last year with many additional lenders entering the market offering very competitive rates. This is a result of a number of items including new federal regulatory legislation, competition with the fixed rate (7.9%) Federal Graduate PLUS and less market volatility. Lenders are offering lower rates, between 2.5% and 9% for variable interest rate loans borrowed with a credit worthy cosigner, and lenders have also begun to add fixed interest rate private loans at interest rates below 7.2%. These new fixed rate private loans offer terms that allow for the loan to be cancelled upon death or permanent disability and carry a co-signer "release" after two to three years of on-time payments. These parameters are being offered to compete with the Federal PLUS loan program which offers the same provisions. While private borrowing in JMC has remained consistent since 2008-2009 with the amount borrowed totaling an average of \$700,000, we may see students borrowing more from private sources in the future if the terms continue to be more competitive than the federal loan programs.

Debt Management Programs

The Financial Aid Office's long-standing debt-management program for students and JHS residents provides services in the form of seminars, individual counseling and informational publications. The seminar series continues to

be widely attended by all students, JHS residents, and the JCGS Post-Doctoral population. The positive evaluations demonstrate that the seminar series will meet the future needs of the TJU student/resident population.

This series (which includes segments on debt management, insurance planning, investment basics, considerations of signing a hospital, practice, or employment contract, and mortgage basics) continued to receive high praise and strong requests for continuation. Suggestions for additional segments will be considered in the future based on resources and available presenters.

This spring, a Tax Basics workshop was offered to all students to enhance their understanding of Federal Income Tax fundamentals. This includes circumstances for which a tax return must be filed, how to prepare a tax return, what documents are needed, what form to use, the different tax filing status', and reviewing the qualifications for the educational tax credits offered by the government. Over 50 TJU students attended this workshop and the feedback endorsed providing this workshop on an annual basis.

The number of JHS residents accessing the individual debt-management counseling services provided by this department remains steady. This is due to the increase in the client pool as publication and word-of-mouth efforts have increased awareness of the available service, rising levels of medical-graduate debt, and expanded and somewhat more complex loan repayment options.

The complicated nature of developing an effective repayment strategy, as well as periodic changes in the educational debt market will result in the continued reliance of TJU students, alumni, and JHS house staff on the Financial Aid Office's counseling services.

Legislative Issues

Budget Control Act of 2011

On August 2, 2011, President Obama signed into law the Budget Control Act of 2011 which affected all federal student loans. While these changes did not take effect until July 1, 2012, the Financial Aid Office was on a campaign this year to educate and prepare students for these changes as they will have a significant impact on their student debt and repayment. Communication with students has been done via newsletters, emails, the financial aid Web site, and various presentations. These changes include:

Graduate and Professional Students: Elimination of the in-school interest subsidy on Federal Direct Stafford Loans for Graduate and Professional students effective for any new loans made on or after July 1, 2012. The annual maximum amount (of what was previously subsidized and unsubsidized) does not change, but interest now accrues on

the entire loan disbursement. Previously, the \$8,500 borrowed in Federal Direct Subsidized Stafford Loan had interest paid by the government while in-school and during the six-month grace period. It is this subsidy that has been eliminated.

Undergraduate Students: On December 23, 2011, President Obama signed into law the Consolidated Appropriations Act of 2012, which eliminates the interest subsidy provided on a Federal Direct Subsidized Loan during the six-month grace period. This change will be effective for new Direct Stafford Loans made on or after July 1, 2012 and before July 1, 2014. Since the interest subsidy was eliminated for Graduate/Professional students via the federal Budget Control Act of 2011, this will only affect undergraduate students.

All students: Reduction or rebate of loan fees will no longer be available for Federal Direct Stafford and Federal Direct Graduate PLUS loans. Currently, the federal government is subsidizing a portion of the fees charged on these loans. Beginning with the 2012-2013 academic year, the fee on the Federal Direct Stafford Loan will be 2% and the Federal Direct PLUS loan will be 4%. This is an increase in fees from the current .5% and 2.5% respectively charged this current year. Additionally, the government will no longer offer a 0.25 interest rate reduction as an incentive for students who set up automatic online payment for their federal loans.

While these federal changes will increase student debt through increased interest accrual, this increase will not reflect in the average debt calculated by the Financial Aid Office as average debt only includes principal borrowed.

FAFSA Data Retrieval Process

The IRS Data Retrieval Tool allows students and parents to access their IRS tax return information needed to complete the Free Application for Federal Student Aid (FAFSA). Students and parents may transfer the data from the IRS directly into their FAFSA. Applicants must have filed their federal income tax returns before they can use the IRS Data Retrieval Tool. This process eliminates the amount of data verification needed and, in most cases, the need to submit copies of Federal Income Tax Returns to the Financial Aid Office. The Department of Education had indicated that the IRS Data Retrieval Process was required of all 2012-2013 aid applicants and as such, the Financial Aid Office spent many months this year modifying the application and verification processes to accommodate this new requirement. Unfortunately, the government has not been entirely consistent in applying this requirement to all students. Even so, we have found that this new IRS Data Retrieval Process has promoted the accuracy of student applications

and will definitely assist in further streamlining the application review process.

"Pay As You Earn" Repayment

The "Pay As You Earn" repayment is a revamping of the current Income Based Repayment (IBR) Program, where payments to loan debt are based on the borrower's income. Under the current IBR program, eligible low-income borrowers who qualify for IBR have their maximum monthly federal student loan repayment set at 15 percent of their discretionary income and any portion of the loan remaining after 25 years of payment will be forgiven. Under the new law, the maximum monthly payment is reduced to 10 percent of discretionary income and the repayment period is reduced to 20 years with any portion of the loan remaining after 20 years of payment forgiven. This new repayment option will provide significant benefits for Jefferson students.

Program Integrity Rules

The rapid growth of enrollment, debt load, and default rates at for-profit institutions in recent years prompted the Obama administration to embark on an 18-month negotiation with the higher education community over new regulations that strengthen the integrity of the federal student aid programs and ensure that taxpayer funds are used appropriately. During the negotiation, the Department worked to develop a set of proposals around 14 specific issues. Of these 14 issues, State Authorization of online coursework and Gainful Employment have required the most action. Below is a synopsis of these two issues and the efforts that have taken place this year to meet these regulations.

State Authorization: (NOTE: the effective date for this regulation was postponed to 2014 as long as good faith effort to gain approvals is shown.) To offer online educational opportunities to other states' residents, Jefferson must comply with states policies for distance education and be able to demonstrate compliance upon request. If found not to be in compliance, Jefferson would not be allowed to participate in any federal grant or loan program. Under the leadership of Raelynn Cooter, PhD, Associate Vice President, Student Academic Services, University Registrar, the Financial Aid and Registrar's Offices are the coordinating entities of a multi-departmental task force to accomplish this requirement. Many webinars were attended by members of the group and a draft document was created outlining the regulatory and institutional requirements and proposed administrative plan. This committee continues to meet to ensure the university's compliance with this regulation.

Gainful Employment: All certificate program information must be made transparent and provide students and families with information about the value of these programs,

specifically that they lead to gainful employment in recognized occupations. The Financial Aid Office is required to report information about students who start and complete a program. This information includes costs, debt levels, graduation rates, and placement rates. This required information was reported to the federal government in November 2011 which included all certificate enrollees for the academic years 2006-2007 to 2010-2011. Per the current regulation, this information must be reported on a yearly basis.

Technological Advancements

An enhancement to the delivery of financial aid award notices was made effective March 2012. With the help of Jeff-IT, the Financial Aid Office began utilizing a computer job that “auto-emails” applicable students nightly at their Jefferson email account, notifying them that their financial aid award is ready to view on Banner Web. While paperless, our previous process required award notification emails to be sent manually to allow special documents to be attached. Due to our website redesign in January 2012, generic documents have been placed on the Financial Aid Web page for our students to link to directly from the award notification

letter. This has eliminated the need for manual attachments of documents. The changes to our award notification process and to the Financial Aid website have taken our office from an award notification process that took a few days, to a process that sends notifications within hours of the completion of the student’s award by the Financial Aid Office. This enhancement to our service has greatly assisted our students and this streamlined process has proved very beneficial to the University Office of Student Financial Aid and TJU as well.

Personnel Changes

Again, this year has been one of change regarding the Financial Aid Office staff. Most notably, Sean Duffy joined our staff replacing Brian Eicholtz as a financial aid coordinator for the School of Nursing. Atheia Mobley also joined the staff replacing Ryan Pauline as a financial aid/Federal Work Study coordinator. Also, Usha Nair and Nicole Bailey have joined the staffs of the Financial Aid Office and Registrar’s Office, under new Student Service Coordinator positions.

Susan McFadden

Director, University Office of Student Financial Aid

TABLE 1
SUMMARY OF STUDENT FINANCIAL AID, 2011 - 2012

Type of Award	Amount
Institutional Scholarships	\$3,564,236
Institutional Loans	\$1,136,200
Other Scholarships	\$4,091,083
Other Loans	\$35,255,881
Federal Work Study	\$237,787
Total	\$44,285,187

TABLE 2
AVERAGE INDEBTEDNESS* OF GRADUATING SENIORS**

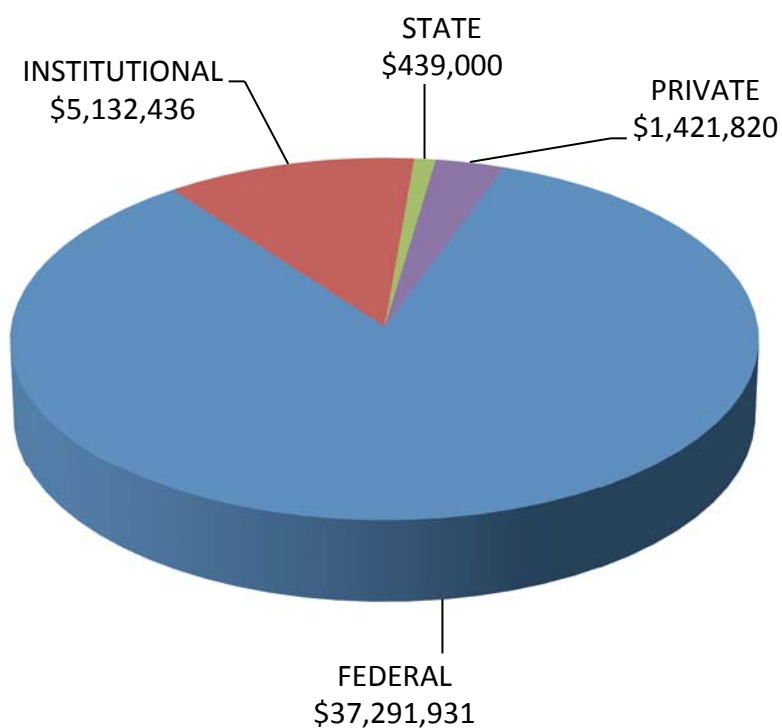
Graduating Class	# of Borrowers	Average Debt
2012	206	\$192,915
2011	198	\$176,706
2010	198	\$175,326
2009	215	\$174,864
2008	174	\$170,855
2007	185	\$159,887
2006	184	\$161,029
2005	195	\$145,472
2004	198	\$140,916
2003	151	\$136,439

* Includes funds borrowed prior to the student entering Jefferson Medical College.

** In calculating the average, the population included only those students with cumulative debt level greater than zero.

FIGURE 1
TOTAL FINANCIAL AID JEFFERSON MEDICAL COLLEGE ACADEMIC YEAR 2011 - 2012
DISTRIBUTION BY SOURCE

TOTAL AID \$44,285,187





Undergraduate Medical Education

Patient Encounter Log System (PELS) serves as the vehicle for assuring that all students meet core requirements (targets) for their patient care activities, and is critically important in meeting the LCME standards for monitoring clinical education. The use of a Web-based, data entry portal allows students to conveniently enter patient encounter data while on rotations at all locations. Students can choose to access PELS from desktop computers, tablets and smart phones with Web access.

Jeff-IT staff has continued to refine the PELS reporting tool that provides the clerkship staff with “real-time” data on patient encounters. This allows the student experiences to be adjusted during a clerkship to fill the “clinical gaps” identified by PELS data. This software enables the clerkship staff to examine clinical encounter data for individual students, for individual affiliates or for the entire clerkship. The data can also be customized for any period of time desired. This flexibility allows clerkship directors to synthesize this data easily for monitoring as well as for academic projects.

Continued progress has been made this year in the transition to an online evaluation system (New Innovations) for student rotations. New Innovations has refined their UME software so that it better resembles the GME module. This improved user interface has made managing the schedules and evaluations of our students more efficient than ever. In 2011-2012, all core clerkships were using the

New Innovations system, and the Ophthalmology, Radiation Oncology, Neurology, Dermatology and Rehabilitation Medicine clerkships were added. The remaining third year selectives will be transitioned to use of New Innovations during the 2012-2013 academic year.

The effort to develop an automated interface between New Innovations and Banner has entered its second phase. For the upcoming academic year the interface will be broadened to include transfer of grades electronically, with the goal of eliminating the current paper-based report of grades. Custom reports will be developed to allow better “real-time” monitoring of Banner for grade timeliness and completion rates.

Committee on Curriculum

The Curriculum Committee and its subcommittees, under the leadership of Gerald Isenberg, MD, Professor of Surgery, had a very productive year. All course/clerkship directors serve on the Years 1+2 Subcommittee (chaired by Peter Ronner, PhD) and the Core Clerkships Subcommittee (chaired by Dr. Abigail Wolf). These subcommittees draft curriculum and evaluation proposals for review and action by the Curriculum Committee and other standing committees of the medical college. The Year 1 and Year 2 Steering Committees, comprising student liaisons and course directors, meet monthly as a forum for brainstorming, problem-solving, and interim course reviews. The Clinical Liaison Committee meets every six weeks to discuss issues of gen-

eral interest and concerns. Student liaisons meet regularly with their clerkship directors and the Vice Dean to provide updates.

The following courses and clerkships were reviewed by the Committee in 2011-2012: Clinical Skills/Physical Diagnosis, Molecular and Cellular Basis of Medicine, the Third Year Family Medicine Clerkship and the Fourth Year Emergency Medicine Clerkship.

The following curriculum proposals were reviewed and approved: Medical Cineforum (elective), Trauma/Surgical Critical Care (fourth year elective at Paoli Memorial Hospital), Senior Medicine (new fourth year requirement). The fourth year clinical elective, "The Gateway" was offered in March 2012; 40 students participated in this opportunity to hone skills requisite to effective PG1 performance. Course content included "must know on day 1" didactics, sign-out skills, night float skills and "teaching to teach" modules, health literacy and patient advocacy, end of life and "time of death" issues. Feedback from the students was extremely positive with 94% agreeing that they would recommend this course to other students; 60 students have enrolled for the March 2013 course.

The Committee formally reviewed the plans to establish a Delaware Clinical Campus. This is a new voluntary option for students who wish to do all of their third and fourth year clinical rotations at Delaware affiliates. A proposal was submitted to the LCME requesting recognition of the Delaware Clinical Campus as an official branch campus; approval was granted in February 2012.

A proposal to require students to pass USMLE Step 2CS prior to graduation was approved and sent to the Committee on Student Promotion (COSP) for final approval. It was subsequently approved by COSP.

Curriculum Highlights

Two task forces were appointed following the May 2011 Curriculum Retreat to follow up on critical issues highlighted in retreat discussions. The "Technology in the JMC Curriculum" Task Force, chaired by John Caruso, MD was charged to examine how to effectively use technology to enhance the curriculum and what we must teach students about technology to use it most effectively in the practice of medicine. Work to date by task force members has included 1) analysis of options for increased use of computer-based testing, 2) development of an EMR-like case-based learning module which was used as a laboratory session in Infection, Immunity and Disease and 3) planning of a project to teach effective communication skills in an EMR-equipped office with implementation scheduled for July 2012.

The Teaching Critical Thinking Skills Task Force, chaired by Drs. Gerald Isenberg and Fred Gorstein, was

charged to develop a "Jefferson" working definition of critical thinking and determine how we can facilitate our students' ability to think critically and problem-solve most effectively. Work to date by this task force has included 1) review of the literature and development of this definition, 2) conduct of a survey of current Jefferson curriculum that emphasizes development of critical thinking skills, 3) identifying faculty and programs around the country with experience in this curriculum area and 4) planning for a curriculum retreat to engage in broad discussion of this topic. Quentin Eichbaum, MD, PhD, Associate Professor of Medical Education and Administration at Vanderbilt University School of Medicine has been invited to present the Curriculum Retreat keynote address "Thinking Outside of the Box" – "Cognitive Skills for the 21st Century" on October 19, 2012.

Professionalism

Since 2009, John Spandorfer MD, the Roger B. Daniels Associate Dean of Professionalism in Medicine, has had oversight of professionalism activities at Jefferson Medical College. A major focus of his work is the development of a longitudinal JMC curriculum. In 2011, a new peer assessment module was incorporated into anatomy lab component of the first year Human Form and Development course. This curriculum emphasizes constructive feedback skills and teaches the benefits of peer feedback. In the third year, students participate in three professionalism workshops, which consist of small groups led by faculty facilitators, as well as an all-day inter-clerkship session on professionalism. Dr. Spandorfer's work is integral to several committees related to professionalism, including the JMC Judicial Board, the JMC Committee on Professionalism, and the Student Advisory Committee on Professionalism.

"College within the College"

The development of programmatic tracks providing students with academic opportunities outside of the traditional medical curriculum represents a national trend in medical education. The College within the College Scholarly Concentrations (CwiC) Program at Jefferson began in the Fall 2010, and has now enrolled two cohorts from the Classes of 2014 and 2015 in two tracks: Population Health and Clinical-Translational Research. The Population Health curriculum, led by Drs. James Plumb and Rickie Brawer, emphasizes public health, global health and community medicine. The Clinical-Translational Research curriculum, led by Dr. Walter Kraft, emphasizes the rapid movement of discovery in the laboratory to the bedside. This curriculum is carefully woven into the academic schedule in years one to four, culminating in scholarly projects. Students participate in group seminars and longitudinal mentored relationships, creating a graduate school-like experience within a

medical school program. There are currently 22 third-year (Class of 2014) and 35 second-year students (Class of 2015) in the CwiC Population Health track; there are currently 20 third-year and 25 second-year students in the CwiC Clinical-Translational Research track.

National Board of Medical Examiners (NBME) Subject Examinations

The achievement of a minimum passing percentile score on the Microbiology/Immunology NBME Subject exam was added to the course requirements for Infection, Immunity and Disease this year. Students who did not meet the minimum passing percentile were counseled and required to sit for a reexamination. This earlier experience with an NBME examination, in conjunction with the use of the Comprehensive Basic Science Examination as a “practice USMLE Step 1” has aided students in their USMLE Step 1 preparation, minimizing the overall failure rate and improving score performance.

NBME Clinical Subject Examinations were again administered as end-of-clerkship assessments for the third-year clerkships in Surgery, Pediatrics, Obstetrics and Gynecology, Psychiatry and Internal Medicine. The new Web-based Family Medicine and Psychiatry NBME Subject Exams were piloted in 2011-2012. All six major clerkships will be using Web-based NBME Subject Exams in 2012-2013.

Myeshai Brooks-Wilkerson, backed up by Bernice Sykes in the Office of UME, serve as our Chief Proctors for these examinations. They oversee the very dedicated group of Core Clerkship Coordinators: Sherry Weitz, Sybil Fullard-McLaurin, Stacey Lee Mullen, Danielle Stull and Brenda Harkins. Natalie Nederostek will be proctoring the Family Medicine exam in the next academic year.

USMLE Performance

The USMLE Step 1 is not only the first step in the U.S. licensure process but also the final comprehensive examination for the first- and second-year curriculum; the Step 2 CK examination is also the final comprehensive examination for the core clinical curriculum. The most recent score reports for Step 1 (Class of 2013), Step 2CK and Step 2CS (Class of 2011) are shown below:

	Jefferson Performance	National Performance
Step 1 % Pass	95	94
Step 1 Mean Score	227	224
Step 2 CK % Pass	98	97
Step 2 CK Mean Score	232	233
Step 2 CS % Pass	98	98

Foundations of Clinical Medicine

Foundations of Clinical Medicine (FCM) is a multidisciplinary course designed to prepare second-year students for the third-year immersion in clinical medicine. Parallel large and small group teaching sessions in Introduction to Clinical Medicine II and hands-on instruction in the UCSSC amplify and clarify course content. An effective and empowered student-faculty liaison committee (the Year 2 Steering Committee) as well as the Year 1/Year 2 Course Directors Subcommittee, continue to be central to the improvements seen in this course.

Student feedback about this course continues to be very positive. Key improvements this year include 1) implementation of a new software platform for the examination item database (LXR), and 2) increased use of team teaching, especially in the hematology/oncology section. Planned refinements to the course include further increased emphasis on interactive learning opportunities by expanding the use of team-based learning and the in-class audience response system.

Committee on Student Promotion

Thomas Butler, PhD (Department of Physiology) serves in the key role of Chairman of the Committee on Student Promotion (COSP). COSP reviewed and took action on more than 230 student issues this year in addition to hearing appeals and administrative review of USMLE results and grade changes.

Dr. Glaser, an adult learning specialist, provided over 100 individual student contacts for consultation and development of study and test taking plans this year.

Remediation Programs

Medical student remediation efforts span all four years of medical education. The Individual Education Plan (IEP) system tailors support for students with academic difficulty identified by COSP. There were approximately eight formal IEPs for students. Dr. Glaser and Dr. Joseph Majdan, Director of Remediation in the Clinical Skills and Simulation Center, oversee the remediation process for students. There is special emphasis placed on remediation of clinical skills in years three and four. Dr. Majdan also continues his individual work with students who are referred to him directly by the Office of Student Affairs or the Clinical Clerkship Directors.

Graduate Medical Education Activities

Dr. Glaser continued to lead a Professional Development Group for interns in the Department of Psychiatry and Human Behavior and the Balint group for third- and fourth-year residents. She has also continued her work in facilitation of group discussions for interns and residents in the

Department of Obstetrics and Gynecology and with an intern group in the Department of Medicine, co-led by Dr. Caruso.

International Activities

Foundation for the Advancement of International Medical Education and Research (FAIMER) FAIMER and the FAIMER Institute were founded by the Educational Commission for Foreign Medical Graduates (ECFMG) with the mission of creating educational opportunities for health professions educators from developing regions in Africa, Asia and Latin America.

JMC and TJU have had an academic affiliation with FAIMER since 2007. On October 10, 2011, Drs. Rattner and Glaser hosted the FAIMER faculty fellows for a day-long educational program on our campus. Plans are now underway for the next cohort of first-year faculty fellows to spend the day at Jefferson on October 5, 2012. The day's events include an introduction to the Jefferson Longitudinal Study, a hands-on information resources session in the Learning Resource Center, lunch with medical students, faculty and residents and a session in the UCSSC.

UME Educational Recognition and Activities

Dr. Glaser participated in an International Balint Federation workshop on group leadership in Copenhagen this year. In May, she was credentialed by the American Balint Society as a Certified Balint Group Leader. The 18th International Balint Congress took place in Philadelphia this year with local attendance from Balint leaders from Allen-

town, Chestnut Hill College, University of Pennsylvania and Jefferson.

Dr. Rattner continues to serve as an LCME ad hoc site visit team member and as a member of the NBME Biostatistics and Epidemiology Task Force. Dr. Herrine is currently leading the development of a competency-based hepatology transplant fellowship pilot program under the auspices of the American Board of Internal Medicine and the American Association for the Study of Liver Diseases.

Drs. Glaser, Herrine, Rattner, Caruso and Spandorfer continue to teach small groups in the Introduction to Medicine 1 and Introduction to Medicine 2 courses.

Susan Rattner, MD, MSCE

Vice Dean for Academic Affairs/Undergraduate Medical Education

Karen Glaser, PhD

Associate Dean for Academic Affairs/Undergraduate Medical Education

John Spandorfer, MD

Roger B. Daniels Associate Dean for Professionalism in Medicine

John Caruso, MD

Associate Dean for GME and Affiliations

Steven Herrine, MD

Assistant Dean for Academic Affairs/Undergraduate Medical Education



Office of Graduate Medical Education

The Division of Graduate Medical Education provides oversight, guidance, and support to all Graduate Medical Education programs at Thomas Jefferson University Hospital and the affiliates for which the Hospital is the sponsoring institution. It also provides administrative and oversight support for the Internal Medicine residency, Med/Peds residency and Cardiology, Interventional Cardiology and Nephrology residencies at Christiana Care and the Pediatric Medical and subspecialty medical residency programs at A.I. DuPont and the Hand/Elbow Fellowship at the Rothman Institute. The Division, consisting of David L. Paskin, MD, Vice Dean for GME and Affiliations; John Caruso, MD, Associate Dean for GME and Affiliations; John Kairys, MD, Associate Dean for GME and Affiliations and Connie Baker, Administrative Assistant, works in concert with the Office of House Staff Affairs headed by Debra Cifelli in concert with Heather Barbash, house staff affairs manager. The Hospital and the Medical School have a common goal of achieving excellence in Graduate Medical Education. The GME division works closely with both the division of Undergraduate Medical Education and with the Office of Faculty Affairs to support a unified educational effort in the continuum of medical education.

The Division continues to serve both evaluative and consultative functions. The internal review site visits performed at the midpoint of each program's accreditation cycle are a highly productive tool for ongoing quality improvement in our GME programs. For this academic year, the Division

performed ten such internal reviews for TJUH GME programs. An additional five reviews were conducted for the programs at Christiana Care Health Services and The A.I. duPont Hospital for Children. The Division continues to refine its internal review process to serve our GME programs, notably highlighting and cataloging the responses of the program directors to the ACGME concerns in the reporting process. This allows other program directors to review and learn from these responses. In addition an alert system has been initiated to track duty hours in such a way that as a resident nears the maximum allowed hours, warnings to the resident and program director are generated. We have expanded our services to include intensive consultation and intervention, in cooperation with Program Directors, for programs that require major revisions in order to come into compliance with new RRC regulations. We continue our RRC site visit preparation process which includes careful review and editing of all Program Information Forms (accreditation visit applications), and on site departmental preparation sessions prior to the site visit with attendance by all faculty and residents who will be part of the interview team by the RRC visitor. "Best Practices" component continues to be a very effective tool. Specifically, the GME Division staff have selected ideal responses to ACGME questions, and have distributed these to all program directors as a learning tool. With the increasing role of simulation in training, evaluation and credentialing, the division of GME has established its oversight in this arena and has been a major contributor and driver.

GME Committee

The GME Committee continues to increase its involvement in, and oversight of, all aspects of residency education in the hospital. The GME Committee has devoted significant effort to several major initiatives. One is the development of standardized duty hour monitoring, the product of which is referred to above. The GME Division staff has worked with “New Innovations” to develop a unified method for trainees in all programs to log duty hours. This initiative has also produced improved reports for program directors to monitor their residents’ hours and required time off. As we move “from compliance to excellence” in GME, it is anticipated that the GME Committee will be deeply involved in all aspects of GME, and will oversee GME strategic planning for the institution as well as increasing our inventory of simulation models for all incoming house staff and more advanced simulation models for the advanced post-graduate years. We have paid strict attention to the ACGME’s NAS (Next Accreditation System) which will change the paradigm of oversight in such a way to generate frequent institutional visits and less frequent site visits to individual programs. Safety, quality improvement, transitions of care, team work and work environment will be stressed.

ACGME Outcome Project

The ACGME Outcome Project and the implementation of competency-based education continues in all of our GME programs, and continues to be monitored by the Division. The ACGME has moved into the third phase of the Outcome Project, that being full integration of the competencies and of their assessment. The focus of the third phase is the use of resident performance data and external measures (such as patient satisfaction surveys and clinical quality indicators) to make data-driven improvements in residency education programs and patient centered care. The Division continues in assisting programs in the identification and development of assessment tools toward this purpose, and in the development of processes within the programs to ensure that resident and program performance levels are accurately assessed, with the goal of making targeted and effective program changes to improve education and patient care.

The division has developed institutional evaluation forms for the faculty evaluation of the training program. Additionally, to support the need for “360 Degree” evaluation mandated by the ACGME, we continue to use forms developed in-house that programs may use for their patients to evaluate the residents who served as their caregivers.

Research

The longitudinal study of residents continues, which provides program evaluations by residents and fellows at each

level of training, in addition to annual program director evaluations of each resident and fellow. These evaluation tools are currently being used at all Jefferson Health System institutions that sponsor GME programs. This data will provide new insights into the process of graduate medical education, and supply material for new research in this area.

Affiliations Committee

The Affiliations Committee did meet this year on the first Thursday of February. All of the affiliates were represented. The day prior to that a full day of faculty development courses were well attended and the highlight was a session with Gerald Hickson dealing with disruptive behavior. There was a dinner meeting later that evening for the affiliate faculty which was very well attended and was a much appreciated addition.

Medical students continue to have excellent educational experiences at our affiliated teaching institutions, as indicated by review of clerkship evaluations. The contributions of the faculty and residents throughout our affiliated network remain superior, and are routinely praised by the students of the College. Comprehensive long term academic affiliation agreements are in place with Einstein and Main Line Health (Lankenau, Bryn Mawr, Paoli and Riddle). The Delaware Health Sciences Alliance (DHSA) with University of Delaware, Christiana Care Health System and A.I. DuPont/Nemours is fully functioning, and is a great collaborative effort. This alliance enables the creation of extensive relationships in education, research and clinical matters. To the faculties at Reading, York, Latrobe, Abington, Crozier, Wilmington VA, Aria (Frankford), Wills, Magee, Underwood, Virtua, the DHSA, Main Line Health and Einstein, we extend our gratitude and congratulations. We appreciate their tremendous efforts on our learners’ behalf.

The Continuum of Education

The mission of the division of Graduate Medical Education and Affiliations is to link undergraduate and graduate medical education at Thomas Jefferson University Hospital and the affiliates in order to promote faculty development, as well as excellence in resident education and teaching and the most efficient and effective patient-centered care. This, in turn, provides the Jefferson Medical College student with a consistently excellent cadre of teachers at Thomas Jefferson University Hospital and the Affiliates.

David L. Paskin, MD

Vice Dean for Graduate Medical Education and Affiliations

John Caruso, MD

Associate Dean for GME and Affiliations

John Kairys, MD

Associate Dean for GME and Affiliations



Office of Continuing Medical Education

The Office of Continuing Medical Education (OCME) at Jefferson Medical College (JMC) is responsible for JMC's ability to offer continuing medical education credits in pursuit of its overall mission of education, research and patient care. The OCME at JMC is nationally accredited as a provider of continuing education for physicians by the Accreditation Council for Continuing Medical Education (ACCME) in the coveted category of "accreditation with commendation."

Leadership

In FY12, Joseph L. Seltzer, MD, Professor of Anesthesiology, was the Senior Associate Dean for CME. He provided a focus on clinically relevant continuing education and research in continuing medical education, and stressed the importance of service to the University community. Jeanne G. Cole, EdD, Director, is responsible for JMC's compliance with national accreditation standards, developing educational designs, overseeing and improving logistical operations, fund raising, and identifying and securing new opportunities. In conjunction with the Director, the Assistant Director, Pauline Sylvester, MBA, and five other staff members ably support the work products of the OCME.

At the end of FY12, Dr. Seltzer stepped down as Senior Associate Dean for CME and Karen D Novielli, MD, Vice Dean for Faculty Affairs and Professional Development took over senior leadership. A new position, Assistant Dean for CME, was created effective July 1, 2012, and Dr. Cole was named to the position.

JMC's Committee on CME is integrally involved in the review and development of appropriate activities certified for AMA Category 1 credit. The Committee was chaired by Dr. Carmen Sultana, Clinical Associate Professor of Obstetrics and Gynecology. The Committee also sets policy and direction for the overall CME program at Jefferson. There are 15 members of the Committee on CME, representing 14 departments/divisions of the Medical College.

Jefferson's CME Mission

The Jefferson CME Mission was reviewed and approved at the October 2011 meeting of the Committee on CME. The CME Mission is reviewed annually by the Committee on CME to assure it is in step with the changing role of CME in the continuum of medical education. A full copy of the Jefferson CME Mission Statement can be found at <http://jeffline.jefferson.edu/jeffcme/>.

Accreditation

Jefferson's CME program has been recognized by the ACCME with its designation of "Accredited with Commendation," a ranking achieved by fewer than 15% of all ACCME accredited providers. Jefferson's CME program has held this ranking since 2000. In the past fiscal year, we completed the reaccreditation process, by developing and writing the reaccreditation self-study application, submitting documentation on activity files selected for ACCME audit in December 2011, and participating in a reaccreditation survey in March 2012. The reaccreditation decision

(received in August 2012) reconfirmed Jefferson's status as "Accredited with Commendation," the third consecutive such designation for Jefferson's CME Program.

JMC's Certified CME Activities

The OCME manages a large variety of CME activities certified for Category 1 credit, including typical medical school activities like Grand Rounds and local/regional symposia. Additionally, Jefferson maintains a national CME presence through the certification of enduring materials, national symposia, journal-based CME, and national lecture series as well as through the presentation of online CME modules.

American Medical Association (AMA) PRA Category 1 credits™ are awarded through the Office of CME for sponsored and jointly sponsored live activities, regularly scheduled series, and enduring materials. During the 2011-2012 academic year, the Office of CME certified more than 191 activities totaling over 2,690 Category 1 credits (including over 1,000 patient safety-related credits), serving more than 20,000 participants. To place this in context, this means that on any given day of the year, JMC provides approximately 7.5 credits (hours)!

Featured Educational Activities

OCME continues strong partnerships with the Gastroenterology and Hepatology Division of the Department of Medicine, the Department of Family and Community Medicine, the Division of Ultrasound of the Department of Radiology, and AISR of the Scott Library. Many of these have resulted in growth in long-established CME offerings. For example, the GI Division's 32nd Annual Advances in GI program held in June 2012 helped the division maintain its position as the premiere GI educational event in the region. The Department of Family and Community Medicine's 35th Annual Eastern Shore Medical Symposium provides a valuable review and update and had another record breaking number of participants. The success of these activities not only advances Jefferson's reputation as a resource for physicians who must update their knowledge and skills to provide the best care, they also add to the financial viability of their sponsoring departments by generating revenue.

Working with Dr. Lauren Collins of the Department of Family and Community Medicine, as well as external partners, JMC developed and implemented a series of CME certified activities entitled, Rheumatoid Arthritis: Primary Care Initiative for Improved Diagnosis and Outcomes (RAPID). This multi-year initiative was funded through a series of educational grants from multiple sources, administered by the OCME, totaling over \$1M. The RAPID initiative in FY12 focused on implementing new components (a monograph, a Web-based CME activity, and three additional live symposia) and beginning the tasks of outcomes

analysis for all activities, evaluating the impact of these activities on participants and the patients for whom they care. As the initiative analyzed medical claims data against published health data to identify gaps in care during planning stages, the outcomes analysis will also reexamine medical claims data to see if participant physicians' diagnosis and referral rates related to rheumatoid arthritis increased. The initiative has increased JMC's presence through multiple national activities; in addition, a presentation regarding RAPID was made at a national CME meeting in January 2012. A manuscript outlining the outcomes for submission to appropriate journals will be developed collaboratively with the educational partners involved in this initiative.

CME for Significant National Organizations

Jefferson OCME continues to work collaboratively with the National Board of Medical Examiners (NBME) to provide CME credits to participants for their learning based on the NBME exam item writing process. In addition, Jefferson is the CME provider for the ACGME Annual Education Conference held every spring.

Focus on Educational Effectiveness

During the past year, the Office of CME utilized a wide variety of educational formats to best meet learners' needs and give them opportunities to match their preferred learning style to a spectrum of educational delivery systems. These included face-to-face conferences offering lecture-driven meetings, case-based learning groups, experiential learning opportunities and one-on-one educational experiences. In addition, distance learning opportunities through the Internet and other technologies, instructional materials including print, audio, video, and journals are provided. The OCME successfully partners with other accredited and non-accredited organizations when appropriate to expand the reach of Jefferson's CME programming. These partnerships provide revenue streams that enable the OCME to contribute to the College's bottom line and bring new revenues to those departments and divisions that produce CME activities.

Evaluation stands at the center of Jefferson's CME process as the essential driving force necessary to maintain and/or improve educational quality. In FY12, Jefferson OCME improved online evaluation tools and methods to assess the effectiveness of our activities. As appropriate, we implemented pre- and post-surveys of participants to better assess the impact of JMC CME activities on participants' competence, performance, and patient outcomes. Follow up surveys utilizing a Commitment to Change model were also implemented.

Results drawn from the Reaccreditation Self Study document the impact of Jefferson's CME programming, fo-

cusing on changes in participant competence and practice. In the recently concluded accreditation cycle, change in knowledge scores averaged 4.29; and practice scores averaged 4.1 (all on a Likert scale of 1-5, with 5 being highest). Results from the regularly scheduled series outcomes analysis from FY11 (the most recent year available) revealed 50% or more of responding participants (n=948) reported they made the following changes in their practices as a result of these sessions: 86% identified areas for improving their practices, 64% suggested changes to practice systems, 51% adopted a new clinical guideline into practice, and 50% incorporated new patient education materials (50%). In addition, 20% reported conducting chart audits on specific topics they wanted to improve.

Professional and Academic Activities

As an educational unit within a leading academic institution, the OCME seeks out opportunities to present its work in CME to a larger audience. Research activities include studying the processes and results from our pilot projects in performance improvement CME, with an eye toward presenting and publishing our experiences. Academic activities include presentations at national and international conferences relating to the Jefferson OCME experiences in CME research and/or accreditation.

As part of maintaining Jefferson's presence in the national CME environment, and to assure that Jefferson's OCME remains up to date with the rapidly changing environment of CME, the Director serves as a volunteer ACCME Site Surveyor. In this capacity, she receives regular updates from the ACCME about implementation and compliance issues, and takes part in accreditation reviews of other CME accredited providers.

National Presentations in FY12

The following Jefferson CME Research and Accreditation activities were presented nationally in the past year:

- Cole, JG; Braster, C.; Wright, D. (Podium Presentation). Innovations Booth: Demonstrating the Use of Online Processes to Improve the Management of Regularly Scheduled Series (RSS). CME Congress 2012 (Toronto, Canada), June 2012.

- Bender, S; Cole, JG ; Connelly, S; Faulkner, M. (Podium Presentation): Application of Medical Claims Data in the CME Environment. Presented at the 2012 Alliance for CME Annual Conference (ACME) (Orlando FL), January 2012.

Technological Activities

The OCME Web site at <http://jeffline.tju.edu/jeffcme>, redesigned in FY11, is continuously updated and provides improved information, access, and navigation to our users. It incorporates a calendar of events, online registration capabilities, access to participation records for JMC certified activities since 2003, links to relevant CME sites, information on Pennsylvania requirements for licensing vis-a-vis CME credits, and postings of a variety of Internet-specific CME activities. A new online registration and event planning system was adopted in early 2012, replacing software from the early 1990s. Transitions and training to the new system has been a priority for the OCME. The regularly scheduled series Web pages now incorporate more online processing, reducing paperwork for everyone involved in these sessions. The goals of improving OCME communications with its clients and users, and of realizing cost savings in the delivery of those services, are being achieved.

Administrative Activities

Advances in technology serve to improve access and communications between the OCME and various individuals and groups. For example, OCME administers JMC's Visiting Professor programs in Delaware, Pennsylvania and New Jersey. OCME maintains the "JEFF-ETC" service. Jefferson Electronic Transcripts and Certificates (JEFF-ETC) provides participants in JMC-sponsored CME activities online access to the documentation of their participation in CME activities. Healthcare professionals can quickly obtain their records on demand in a customer friendly and cost effective manner.

Karen D Novielli, MD

Vice Dean, Faculty Affairs and Professional Development

Jeanne G. Cole, EdD

Assistant Dean for Continuing Medical Education



Office of Human Research

The OHR is located in Suite 1100, 1015 Chestnut St. The office provides research support services for the six colleges/schools of Thomas Jefferson University (TJU). The OHR staff provides infrastructure support for the following research programs and Committees: Division of Human Subjects Protection (Institutional Review Boards); Division of Clinical Trials Support; Research Biosafety Program; Institutional Biosafety Committee; Volunteer Program.

Division of Human Subjects Protection (DHSP)

The IRBs and their administrative support staffs are organized under the Division of Human Subjects Protection (DHSP) within the Office of Human Research (OHR). The primary responsibility of the IRBs is the protection of human subjects involved in biomedical and behavioral research. The major work of the IRB consists of the assessment of research related benefit-risk ratios, and assuring that informed consent is properly obtained and documented for research subjects. IRBs have a responsibility to society and to the Jefferson community in particular, to review and approve worthwhile studies in a timely fashion.

Thomas Jefferson University (TJU) has three IRBs approved under its Federalwide Assurance (FWA) from the Office of Human Research Protections of DHHS. Each IRB has the requisite expertise for review of biomedical and sociobehavioral human subjects research in both adults and children.

The IRBs review research protocols, consent forms, adverse events, amendments to protocols, advertisements for recruiting research subjects, and any other matters pertaining to the conduct of research on human subjects. Protocols extending beyond one year require a continuing review. A central purpose of the IRBs is to sustain a collaborative and supportive balance among the interests of participant safety, researchers at TJU/TJUH, and the requirements of federal regulations. Maintaining this balance demands significant effort and time from the faculty, Hospital and University employees and outside members who constitute the IRBs, the Chairs and Vice-chairs of the Boards, the Director and Associate Director, and the DHSP administrative staff.

The Director and Associate Director of the DHSP, and the IRB Chairs and Vice-Chairs, are sincerely appreciative of the tremendous effort of the many conscientious IRB members, and the administrative staff of the DHSP. The contributions of these highly motivated and dedicated individuals help make our human subjects protection program one that is highly regarded both locally and nationally.

National Accreditation for the TJU Human Subjects Protection Program

The Thomas Jefferson University Human Research Protection Program (HRPP) was first fully accredited by the Association for Accreditation of Human Research Protection Programs (AAHRPP) in June 2008 and, as a result of our application for re-accreditation, will remain fully accredited

through June 2016. AAHRPP accreditation is a coveted designation which provides evidence for sponsors, researchers, and subjects involved in clinical research studies that TJU has adopted the highest ethical and professional standards that can be applied to human subjects research. It means that Jefferson not only safeguards study participants but that our data is reliable and credible and that we are committed to continuous quality improvement. It provides sponsors, faculty, and regulatory agencies with assurance that we have an efficient operation with comprehensive protections for researchers and subjects. It is documented that Federal inspectors find fewer problems with accredited programs than with non-accredited programs. Accreditation also enhances our ability to attract high quality innovative clinical trials. Increasingly, accreditation is becoming a condition for research support. Finally, it enhances Jefferson's reputation in the community and indicates to potential research subjects that they can place their trust in Jefferson. TJU's HRPP is one of only 12 programs in Pennsylvania to be fully accredited. As of September 9, 2011, there were 234 fully accredited HRPPs world-wide with 228 being in the United States and six in other countries. The vast majority of accredited HRPPs are at hospitals, universities, and VA facilities.

IRB Transactions July 1, 2011 – June 1, 2012

The TJU IRBs review and oversee Phase I-IV clinical trials, epidemiological and behavioral research, basic research involving use of human tissues, and human translational and gene transfer research. The following table provides a breakdown of the activities of the three on-campus IRBs from July 1, 2011 to June 1, 2012.

Submissions	Number Reviewed
New Submissions- Full Board Review	167
New Submissions- Expedited Review	471
New Submissions- Meeting Exempt Criteria	96
Continuing (annual) Reviews	695
Full Board = 198	
Expedited = 497	
Amendments	1,166
Full Board = 107	
Expedited = 1059	
Serious Adverse Event Reports	348
Unanticipated Problem Reports	229
Final Reports	188
Disapproved Studies	3

There are currently 1,384 active studies in the TJU Clinical Trials Repository. Funding sources are as follows:

• Departmental Funds	51%
• Industry Sponsored	19%
• Federally Funded	18%
• All Other	12%

Personnel Changes - IRB Administrative Staff and Boards

IRB #152: Esther Chung, MD, Chair; Noreen Hickok, PhD, Vice Chair. New Board members are Aleez Sattor Moss, PhD, Myrna Brind Center for Integrative Medicine, and John Furlong, RN, Neurosurgery (transfer from the Chambers Board). No longer on this Board are Scott Mintzer, MD, Neurology and Peter Chang, PhD, Pharmacology and Experimental Therapeutics.

IRB #2405: Christopher Chambers, MD, Chair; Mark Chaballa, PharmD, Vice Chair. New members of this Board are Steven Cohen, MD, Rothman Institute and Jieru Egeria Lin, PhD, from Pharmacology and Experimental Therapeutics. No longer serving on this Board are Danielle Papeika, DHSP Quality Improvement Coordinator; Erine Kupetsky-Rincon, DO, Pharmacology and Experimental Therapeutics; and Supriya Shah, PhD, Cancer Biology.

IRB #153: Stephen Weinstein, PhD, Chair; Walter Kraft, MD, Vice Chair. New members include Mitchell Freedman, DO, Rehabilitation Medicine, Rothman Institute and Guanjun Kia, MD, PhD, Pharmacology and Experimental Therapeutics. Doreen Kornrumpf, MSN, JD of the Office of University Counsel, formerly a voting member of all three Boards, has been made an alternate member of all Boards. Whether or not in attendance, she provides valuable advice regarding real or potential conflicts of interest of investigators and key personnel listed on human subjects research protocols and on relevant federal and state laws as they relate to human subjects research. She has extensive experience in health and research-related law.

We wish to extend our sincere appreciation for the hard work and dedication exhibited by our IRB members – past and present. We also welcome the new members and trust they will find IRB membership an educational and rewarding experience.

Quality Improvement Program

The mission of the DHSP Quality Improvement/Education Program is to augment and facilitate continuing review of on-going clinical trials, enhance protection for research subjects, and ensure compliance with regulations and ethical guidelines. The program's goals are to: 1) develop a collegial relationship with clinical investigators and study

coordinators and, 2) to assist them in developing effective procedures to conduct and monitor all aspects of their human subjects research. In this way DHSP encourages a culture of compliance within the institution and a partnership between the research community and the DHSP. During the reporting period, 18 sets of IRB Minutes were audited. Twenty-two audits were completed at the request of an IRB (possible “for cause” audits) or the Director/Associate Director; only two required a non-compliance meeting with DHSP staff.

Education and Other Activities

The Director and Associate Director of the DHSP participate in numerous educational activities for TJU faculty and staff regarding protection of human subjects in research. These include participation in on-going faculty improvement seminars, the new faculty orientation program, presentations to coordinator groups and presentations to Departments and Divisions. They also organize and participate in the mandatory Research Coordinator Course. Dr. Smith coordinates a 12 week summer course in the College of Graduate Studies (GC-690, entitled “Regulatory Issues in Human Subjects Research.”) Mr. Conner also participates as a lecturer in that course.

The *IRB Newsletter*, published three-four times yearly contains information about current issues in human subjects research, provides information about new federal regulations governing human subjects research and new or updated IRB forms, and a description of recent noncompliance issues and how to prevent them.

Two DHSP staff member, three IRB chairs, two vice-chairs, the Director and the Associate Director attended the annual IRB national meeting organized by Public Responsibility in Medicine and Research (PRIM&R) in December 2011 held at the Gaylord Conference Center in National Harbor Maryland. These meetings provide education and insight regarding historical and current issues regarding protection of research subjects.

Since joining the CITI human subjects training program in July 2010, 3,573 individuals have completed initial or renewal research certification (2,742 completing the basic course and 831 the refresher course). During the reporting period, required social and behavioral research certification was completed by 383 individuals and 98 completed the required annual refresher modules. Also during the past year, we initiated a requirement for biomedical researchers to take the complete course in Good Clinical Practice and 552 researchers and coordinators have completed these modules. The DHSP website provides a link to a spreadsheet that contains training status for all Jefferson personnel which is updated on a weekly basis.

The mandatory course for research coordinators has continued with one session completed during the reporting period. To date, 301 Jeffersonians plus some personnel at affiliated institutions have completed the course.

DHSP Web Site

The content of the DHSP Web site is updated on a regular basis. The Web site lists, among other things, DHSP personnel with their contact information, the membership of each of Jefferson’s IRBs, and all current IRB-related forms. A link to the CITI Training site is provided as are links to the *DHSP Policy and Procedure Manual* and to the *TJU Policy and Procedure Manual*. The *DHSP Policy and Procedure Manual* is also updated on a regular basis. It is book-marked and searchable. The Web site has been redesigned during the past year and now also includes archived issues of the *IRB Newsletter*.

Division of Clinical Trials Support

The Clinical Trials Support Office was established to foster clinical research and to hold such research to the highest standards. The Associate Director of the Division of Clinical Trials Support is Roseann Talarico. The Office of Clinical Trials Support has three main missions. These are 1) supporting faculty members involved in clinical trials research by providing administrative infrastructure support services, 2) framing policy and operating issues surrounding clinical trials, and 3) providing education and training to the research community at TJU. An additional key function of this office is to monitor and support Jefferson faculty’s uploads to the clinicaltrials.gov website. The Clinical Trials Support Office hosts the Jefferson Clinical Research Forum (JCRF), a very well attended monthly meeting of research coordinators and research administrators at which timely topics in clinical research are presented and discussed. The office also supports the Liaison Committee of Clinical Coordinators (LCCC), a group of senior research coordinators who meet on a monthly basis with Ms. Talarico and the Director, DHSP, to discuss and plan implementation of programs that will improve the clinical research effort at TJU. During the year this office, in conjunction with Doreen Kornrumpf (Office of University Counsel) and Maureen McDade (Senior Director of Operations, JUP), and members of the LCCC, was instrumental in establishing policy allowing research coordinators access to the JUP EMR for research planning and monitoring purposes and for uploading approved informed consent forms.

Research Biosafety Program

The Research Biosafety program involves the inspection and certification of all laboratories and investigators conducting research. In addition, all proposals for research are reviewed and approved by the Institutional Biosafety Com-

mittee (IBC). The Institutional Biosafety Officer (BSO), Sue Gotta, MS, is also a member of the IBC. She conducts laboratory inspections, certifies investigators for work in the biosafety level-3 (BL-3) laboratories, conducts biosafety training, reviews protocol submissions and acts as a resource person for investigators.

Institutional Biosafety Committee

Under the NIH Guidelines for Research Involving Recombinant DNA Molecules, each institution conducting or sponsoring recombinant DNA research covered by these Guidelines is responsible for ensuring that the research is carried out in full conformity with the provisions of the Guidelines. The institution must establish and implement policies that provide for the safe conduct of recombinant DNA research and ensure compliance with the Guidelines. The institution must also establish an IBC whose responsibilities need not be restricted to recombinant DNA. If the institution is engaged in recombinant DNA research requiring BL-3 containment, it must appoint a Biological Safety Officer (BSO) who shall be a member of the IBC.

The IBC functions as a critical component of TJU's Research Biosafety Program. The Committee's actions are detailed in an annual report filed with the Office of Biotechnology Activities of the National Institutes of Health. The following paragraphs summarize the major responsibilities and actions of the IBC during the past year.

Under the Occupational Safety and Health Agency (OSHA) Bloodborne Pathogens Standard (29 CFR 1910.1030), the University is obliged to ensure that employees whose work requires them to come in contact with human blood or other potentially infectious material shall be adequately protected. The IBC inspects and monitors, through the BSO, those research laboratories conducting research using human blood and tissues and body fluid contaminated with human blood.

The IBC is responsible for working with the Institutional Animal Care and Use Committee (IACUC) to ensure that animal experiments in which biohazardous agents are used are conducted in a manner commensurate with the above guidelines and/or regulations.

The IBC is also responsible for interacting with the University Health Services to ensure that investigators conducting research involving biohazardous agents are offered immunization against the agent being studied, in so far as immunization is available.

On behalf of the Institution, the IBC is responsible for:

- Reviewing recombinant and pathogens research for compliance with the NIH Guidelines for Research Involving

Recombinant DNA Molecules and the NIH/CDC Guidelines for Biosafety in Microbiological and Biomedical Laboratories and approving those research projects that are in conformity.

- Reviewing research and inspecting laboratories using human blood, cells or tissues for conformity with the provisions of the OSHA Bloodborne Pathogens Standard.
- Keeping abreast of mandated guidelines and other sources of good safety practice (GSP).
- Establishing laboratory compliance and inspection guidelines that facilitate documentation that the IBC has met GSP requirements.
- Making an independent assessment of the containment levels required for the proposed research and of the facilities, procedures and practices of the investigator proposing to carry out the research.
- Setting containment level.
- Initially, and periodically, inspecting and certifying the laboratories conducting research
- Adopting emergency plans covering accidental spills and personnel contamination resulting from such research.
- Reporting to the appropriate institutional official and to the NIH Office of Biotechnology Activities any significant problems with, or violations of, the Guidelines and any significant research-related accidents or illnesses.
- Review of animal protocols submitted to IACUC for biosafety issues.
- Review of protocols submitted to the Institutional Review Board involving gene transfer for biosafety issues.
- Serving as a resource to provide guidance for investigators who are designing their biosafety plans.

The IBC comprises 14 members, so selected that they collectively have experience and expertise in recombinant DNA (RCDA) technology and/or pathogenic organisms, biological safety and physical containment and the capability to assess the safety of experiments utilizing recombinant DNA and/or pathogens and any risk to public health and to the environment.

Two of the members are not affiliated with the Institution and represent the interests of the surrounding community with respect to health and protection of the environment. The Biological Safety Officer (BSO) is a member and Vice Chair of the IBC. The TJU IBC has been registered with the OBA as the IBC of record for Christiana Healthcare System and will review applications for research involving human gene therapy or transfer trials in conjunction

with the Christiana IRB. We expect to be reviewing several trials of this nature yearly. We wish to thank the members of the IBC for their time and effort in support of the committee's activities, and for their dedication to maintaining a safe campus environment.

This past year, the IBC reviewed and classified a total of 36 new and revised research proposals. In addition, the Biosafety Officer performed 35 inspections to certify laboratories for work at the BL-2 or higher containment level. Laboratories functioning at the BL-2 are inspected every two years, BL-2/3 are inspected annually, and those at the BL-3 level are inspected biannually.

Theresa Wilson, Administrative Assistant in the Office of Human Research, is secretary to the IBC. Ms. Wilson has also been trained by Ms. Gotta to perform laboratory inspections up to the BL-2 level and she is now conducting such inspections without direct supervision.

The IBC continued to improve the internal form for submission of studies to the IBC. Submission of the internal forms continues to be done electronically.

A new and more comprehensive data base has been established for IBC protocol tracking. Thanks to Jack London, Research Associate Professor in the Kimmel Cancer

Center, the database is up and running and we are working to transfer information to the new database.

Volunteers in Research Laboratories

Individuals volunteering to work in the TJU research laboratories of the Medical College must qualify for such activity according to TJU Policy 110.16, "Policy for Volunteers and External Employee Participation in Research Laboratories." Volunteers are processed through the OHR (scope of work), University Health Services (review of immunizations), and Department of Security (background check and IDs). During the past year, 91 volunteers were approved for participation/training in the activities of on-campus laboratories.

J. Bruce Smith, MD, CIP

Associate VP, Research, TJU

Professor of Medicine

Director, Office of Human Research

Director, Division of Human Subjects Protection

Gerald B. Grunwald, PhD

Professor of Pathology, Anatomy and Cell Biology, JMC

Dean, Jefferson College of Graduate Studies
Chair, IBC



Center for Research in Medical Education and Health Care

The Center for Research in Medical Education and Health Care provides technical support to the faculty in evaluating the knowledge, skills, and professionalism of students throughout the MD curriculum. It provides information to the administration concerning key indicators used to evaluate the effectiveness of policies related to admissions, curriculum, and students' academic progress. The Center continues to receive external support for its health services and policy related research. Center faculty collaborate in scholarly work with other JMC faculty and publish and present medical education and health services research projects in US and international journals and at scientific meetings.

Medical Education

The Jefferson Longitudinal Study of Medical Education, developed and maintained at the Center, is the most extensive, comprehensive, uninterrupted longitudinal database of its kind, encompassing academic and career outcome data on more than 11,000 Jefferson students and graduates since the entering class of 1964. This database provides JMC with vital information about the intermediate and long-term outcomes of the curriculum. One-hundred-eighty-five research studies based on the Jefferson Longitudinal Study have been published in peer-reviewed journals since 1976. Many are described in a compendium entitled *Abstracts: Jefferson Longitudinal Study of Medical Education* available at <http://jdc.jefferson.edu/jlsme>. *Academic Medicine* chose to highlight the contributions of the Jefferson Longitudinal Study in its March 2011 issue.

Throughout the year Center staff prepare routine reports to the Curriculum Committee, Dean's Office, clinical departments, and 24 affiliated hospitals to help assess the quality of education at the clinical teaching sites. We provide the faculty with comprehensive student testing services and assist faculty and administration with a variety of Web-based and paper surveys. We continued to provide technical support for the administration and analysis of NBME subject examinations in clerkships and implemented a new computer system to help the preclinical course directors automate their test item databases.

The Jefferson Scale of Empathy (JSE) (which has been translated into 42 languages), the Jefferson Scale of Attitudes toward Physician-Nurse Collaboration, and the Jefferson Scale of Physician Lifelong Learning (JSPLL) are used by medical educators and researchers worldwide. Our study of the relationship between clinical outcomes and physician empathy for patients with diabetes mellitus, conducted in collaboration with colleagues from our Department of Family and Community Medicine, was published in the March 2011 issue of *Academic Medicine*. It was described by the media as a landmark study. The AMA's *American Medical News* described it as the first scientific analysis to link empathy with patient outcomes. An updated report of the status of Jefferson empathy research in medical students and physicians was published in the July 2012 issue of the *AAMC Reporter*.

In a recent project, the JSE was used to examine physician empathy and metabolic complications in a large scale study including 242 primary care physicians and their 20,961 diabetic patients in Parma, Italy. Findings confirmed that patients of more empathic physicians experienced fewer occurrences of acute metabolic complications. This study will be published in September 2012 issue of *Academic Medicine*. The JSE is being used to study relationships between empathy and attitudes toward teamwork, and changes in the empathy among allopathic and osteopathic medical students in collaboration with the Cleveland Clinic. In another ongoing large scale, longitudinal study, the effects of medical schools' learning environments on students' empathy are being examined. This nationwide study is part of the Innovative Strategies for Transforming the Education of Physicians (ISTEP) project endorsed by the AMA. In addition, we continue our collaborating with the Jefferson School of Nursing and the Department of Emergency Medicine on research on nursing students' empathy and strategies to enhance empathy among emergency medicine residents.

Additional medical education services include:

- Psychometric support to the clinical departments using the TJU Simulation Center to gauge medical students' proficiency on clinical simulations. A three-year study of the validity of the formal assessment of students' clinical skills at the end of the surgery clerkship was published in *The American Journal of Surgery*.
- Collaboration with the Dean's Office, Jeff-IT, and the clinical clerkship directors in the design, operation, and continuing improvement of Jefferson's Patient Encounter Log System (PELS).

Health Services Research

Center researchers continued work on a major series of projects being performed in collaboration with the Regional Health Care System of Emilia-Romagna, Italy. We have developed models to predict risk of hospitalization for patients with chronic disease. The results of these models are being used to provide reports to primary care physicians of their high risk patients and to newly formed "medical homes" to assist in efforts towards proactive management of patients with chronic disease. A collaborative grant application submitted by the Regional Health Care Research Agency and Jefferson to refine these models has been selected for funding by the Italian Ministry of Health.

At the request of the director general of the regional health care system, we analyzed the distribution and outcomes of major cancer surgery in the region focusing on the relationship between volume of procedures performed and patient

outcomes. We continued the refinement and application of a method for assessing the timeliness and appropriateness of acute hospitalization, development of "profiles" of care provided by primary care teams, and studies of the integration of hospital and outpatient care. A study of follow-up care for breast cancer survivors was accepted for publication in *Tumori*.

Newly initiated projects include:

- Development of an atlas of health care in the Emilia-Romagna region that will highlight intra-regional variation in care practices among the 11 local health authorities in the region.
- Analyses of quality of care at the end of life for patients with cancer.

With support from the Stevens Family, the Center is collaborating with the office of the TJUH Chief Medical Officer in the analyses of data from the Jefferson Hospital for Neurosciences (JHN). Projects include the development of a JHN brain tumor registry linking data from the hospital discharge abstract system, laboratory data, and pharmacy data. We have analyzed the prophylactic use of heparin and enoxaparin and the incidence of venous thromboembolism, and processes and outcomes of care for JHN patients with hyponatremia.

Teaching

Center faculty taught a module on health care organization and financing as a part of the Introduction to Clinical Medicine course for first-year medical students, as well as HPL 500: US Healthcare Organization and Delivery in the Jefferson School of Population Health and have served as guest lecturers at Catholic University in Rome and the University of Pisa.

More details of Center projects are available in the annual report of the Center for Research in Medical Education and Health Care or at <http://www.jefferson.edu/jmc/crmehc>

Joseph S. Gonnella, MD
Director

Clara A. Callahan, MD
Deputy Director

Daniel Z. Louis, MS
Managing Director

J. Jon Veloski, MS
Director, Medical Education Research

Mohammadreza Hojat, PhD
Director, Longitudinal Study



Office of Animal Resources

The Office of Animal Resources provides professional oversight and management of the University's laboratory animal care and use program, including all research and educational activities using laboratory animals.

Guidelines for Humane Care

Animals used in research must be provided with humane care and an environment conducive to their welfare for both ethical and scientific reasons. The Office oversees a comprehensive animal care and use program designed to provide this in support of the research mission of the University. It is responsible for management and operation of centralized animal-research facilities of 39,000 square feet located at three campus sites. A staff of animal caretakers and technical personnel provides daily care of laboratory animals. Veterinarians with special training and credentials in laboratory animal medicine oversee the veterinary-care program.

The Office provides professional guidance to the Institutional Animal Care and Use Committee (IACUC), which is charged with reviewing all research protocols involving laboratory animals. The IACUC's goals and legal obligations are to ensure that all activities involving laboratory animals are carefully reviewed and conducted in accordance with the highest standards of humane care for the animals used by its scientists in pursuit of medical advances. Currently, 458 protocols have an "Approved" status, with 135 principal investigators associated with these protocols.

Occupancy

Approximately 99% of the animals used in research are rodents, a percentage that reflects the national trend for species used in biomedical research and education. There has been a decrease in occupancy over the past fiscal year. The restraint by the federal government in funding research proposals has affected many areas, including animal

research. Our average occupancy for the 12-month period ending June 30, 2011 was 8,602 cages. Our average occupancy for the 12-month period ending June 30, 2012 was 7,687 cages.

Accreditation

The animal care and use program and facilities at Jefferson are accredited by the Association for Assessment and Accreditation of Laboratory Animal Care (AAALAC International). Accreditation is recognition of the high standards maintained by Jefferson. We also receive periodic unannounced inspections by the USDA to enforce the Preparing for the Future program. For the last four years, the USDA has found no deficiencies on their unscheduled inspections. Similarly, AAALAC inspected the animal care program in June 2011 and had no significant findings.

Animal research continues to be an integral part of Jefferson University. Recent renovations in Jefferson Alumni Hall have resulted in improved infrastructure for the animal facility. These improvements in the HVAC and electrical systems not only improve daily operations but also provide for reliable emergency systems. In addition, a grant application has been submitted to modernize the cage wash facility. In the Bluemle Life Sciences Building, funding was secured to replace the rack washer. This has resulted in improved efficiencies and positive environmental effects. This type of progressive approach to facility needs is a positive indicator of the institution's dedication to the humane care and treatment of laboratory animals and the quality research that leads to scientific gains that benefit people and animals.

Judith S. Daviau, DVM
Director, Office of Animal Resources



Office of Research

The JMC Office of Research is led by the Vice Dean for Research, Dr. Leonard Freedman. He is assisted by the Associate Dean for Research, Dr. Theodore Taraschi. Dr. David Whellan recently joined the office as the Assistant Dean for Clinical Research. This Office is responsible for advancing the medical college's research mission by developing a clear, coordinated strategy that drives the effective integration of the clinical/educational expertise on campus with Jefferson's strengths in basic, translational, and clinical research. Major accomplishments during the past year include the establishment of the Dean's Programmatic Pilot grant program. This program provided four \$50,000 pilot grants to groups of investigators who needed support to gather the last pieces of data necessary to prepare and submit collaborative grant applications. The JMC Office of Research initiated a partnership with Jeff IT and the Office of Research Administration to develop a comprehensive grants dashboard. This tool will provide a current inventory of funded extramural grants and submitted applications and features a wide array of data analytics. A long-term strategic initiative developed by the Office is the formation of the Jefferson Institute for Individualized Medicine (JIIM). An organizing framework has been constructed, which is designed for Jefferson to become the leading academic-based health system in the region (and beyond) by providing next-generation healthcare delivery, research and education anchored in individualized medicine.

The JMC Office of Research hosted the third annual Dean's Research Awards Symposium. The recipients for 2011-2012 were Gyorgy Hajnoczky, MD, PhD (Michael and Melina Pellini Award for Innovation in the Biomedical Sciences); Scott Mintzer, MD (Early Career Investigator Award for Distinguished Achievement in Biomedical Research); and Renato Baserga, MD (Research Career Achievement Award). The Office Web site was updated to allow more facile navigation of research resources, and now includes a comprehensive list of extramural funding organizations and opportunities for non-federal foundation grants. The office continues to partner with the Jefferson Foundation to identify new sources of funding opportunities available to Jefferson faculty to support their laboratories.

The Office of Research is actively seeking strategic alliances to build inter-institutional collaborations with other medical centers, universities and industry regionally, nationally and internationally. Examples of this include TJU's partnership with Christiana Care, Nemours, and the University of Delaware through the Delaware Health Science Alliance (www.delawarehsa.org) and the Delaware Valley Institute for Clinical and Translational Sciences. We are also in the process of establishing new research-based collaborations with Chiba University in Japan and several Israeli research centers and hospitals.

The Office of Research oversees several working groups that address key operational issues which impact JMC investigators, with the goal of optimizing the overall faculty experience at Jefferson within the scientific discovery realm, including the Jefferson Technology Transfer Board. Three JMC committees under the direct purview of the Office of Research are the Jefferson Shared Research Resources Committee, the Research Technologies Advisory Committee, and the Committee on Research. The Office of Research oversees the Summer Research Program for JMC students, and works closely with the College within the College on the Clinical Research Program.

Leonard Freedman, PhD
Vice Dean for Research



Alumni Association

The major goals of the Alumni Association are as follows:

- Strengthening ties with the alumni, graduate and post-graduate, to foster greater involvement with Jefferson.
- Introducing students and residents to the Alumni Association with programs and events that encourage them to become active alumni.
- Striving to increase both the participation percentage and dollar amount raised from our 16,000-plus alumni each year.

The Alumni Association's programs, events and publications are designed to accomplish these goals.

The Alumni Association sponsors many events for our medical students throughout the year. Incoming freshmen and their parents were welcomed on July 30 through August 3, 2012 during Orientation Week. At Opening Exercises, the freshmen received their white coats, a symbol of the physician, as a gift from the Alumni Association.

Freshmen are invited to lunch with members of the Alumni Association throughout the year.

The Parents' Day program was held on February 24. It allows second-year students to share a bit of their medical school experience with parents and spouses. The program opened with a Welcome Reception with presentations given by four faculty members, followed by lunch in the cafeteria. Dean Mark Tykocinski, MD was present to welcome the students and their guests.

A Women's Forum took place on March 8. This is a networking opportunity and panel discussion on issues of special interest to women medical students and house staff.

Senior students who are traveling across the country for postgraduate program interviews use our Host Program to arrange overnight accommodations in the homes of local alumni.

The Alumni Association was a contributing sponsor of the AOA spring banquet, the Jeff HOPE charity ball, the 2012 *Clinic* and the Black and Blue Ball

Alumni stay in touch with Jefferson and each other through the articles and class notes section of the *Alumni Bulletin*. *The Bulletin*, which is published and mailed to all constituents four times a year, is also available in electronic format on the Internet. The Alumni Association's home page on the Internet is another way for alumni to stay in touch with Jefferson. In addition to learning about ongoing programs and upcoming events, alumni can register for our new password-protected online community, where alumni can contact former classmates, search geographic areas for Jefferson alumni, change their address, send in class notes and make online contributions to Annual Giving.

During the year, the Alumni Association held receptions for our alumni bringing them together in a social setting to hear the latest news about Jefferson from members of the administration or faculty. Alumni receptions were

held during the annual meetings: Association of American Medical Colleges in Denver, CO on November 6 and the American Medical Association in Chicago, IL on June 17. In addition the Alumni Association hosted a Phillies event in Clearwater, FL on March 10 and Jeff at the Beach in Stone Harbor, NJ on July 28, 2012. The Alumni Association also organizes several alumni receptions at specialty meetings in various cities across the country.

Alumni Reunion Weekend was held in the fall on September 23 and 24. The Alumni Achievement Banquet took place on Friday evening at the Philadelphia Academy of Fine Arts during which the Alumni Achievement Award was presented to Amilu Stewart, MD '65 and Carol Miller, MD '65.

The Saturday morning program included two clinic presentations, and the Dean's Taste of Philadelphia luncheon followed. On Saturday evening, 12 reunion dinners were held at the Loews Hotel.

At the Alumni Executive Committee Annual Business Meeting on April 25, Marianne Ritchie, MD '80, became the president. The other elected officers are: president-elect M. Dean Kinsey, MD '69; vice presidents Clara A. Callahan, MD, PD '82; James J. Purtill, MD '93; Joseph Majdan, MD, IM/CD '81; Patricia Curtin, MD '88; and secretary Matthew Keller, MD '05.

The Alumni Annual Fund Giving concluded on June 30, 2012. We thank the 2,785 alumni and postgraduate alumni, as well as non-graduate faculty, and surviving spouses, who contributed \$1,795,794 to advance the mission of the Medical College.

Phillip J. Marone, MD '57, MS '07

Associate Dean for Alumni Relations

Executive Director of the Alumni Association



Jefferson University Physicians

FY12 was another year of noteworthy accomplishments for Jefferson University Physicians (JUP), accented with continued steady growth in volume and revenue. The practice plan saw additional faculty recruitment of 29 physicians, which resulted in our total physician complement of 604 for the year. The addition of this faculty, in concert with our existing complement, contributed significantly to the performance of the group. Some key highlights for the year include the following:

Implementing an Electronic Medical Records several years ago placed JUP in the unique position to qualify for the federally funded CMS Meaningful Use incentive program. JUP was able to leverage the EMR to achieve a 96% adoption rate for eligible providers, resulting in over \$4 million dollars in government incentives. JUP also continued to expand quality initiatives working with both local and national commercial payors to incorporate at risk dollars for clinical outcomes within our contracts.

In conjunction with TJU Finance Leadership, JUP and JMC developed FY13 budgets based on faculty effort allocated by mission of revenue and expenses. This was a significant undertaking for the organization and involved development of principles associated with fund flow transfers in support of the academic mission and clinical services.

A joint planning effort was undertaken incorporating institutional leadership (JUP/TJUH) to develop the framework for the development of an enterprise ambulatory strategy, both on and off-campus. Targeted effort was spent in the analysis and growth opportunity for the revitalization of the Voorhees site. This plan incorporated a primary care presence within the site and expansion of

the multi-specialty practice. In addition, significant effort was undertaken to develop the Lease model option for JUP and beta tested with a physician group interested in joining JUP. This model provides an opportunity to leverage our position in the market to help grow the organization.

Volume and Financial Highlights

- Ambulatory visits were 1.6% favorable to budget and 5.2% higher than prior year.
- Admissions were 4.3% favorable to budget and 7.7% higher than prior year.
- Surgical cases were 10.3% favorable to budget and 6.8% higher than prior year.
- Patient charges were 4.1% favorable to budget and 5.0% higher than prior year.
- Patient receipts were 4.5% favorable to budget and 7.0% higher than prior year.

In the coming year, management will continue to focus on enhancing the patient experience at Jefferson. The emphasis will first focus on patient access and then to developing a standardized “best practice” approach to managing the patient’s visit as well as navigating the patient through the total continuum of care.

Diana Murphy

Interim Executive Director, Jefferson University Physicians

William Keane, MD

Medical Director, Jefferson University Physicians

Statistical Abstract: Students and Graduates of JMC 1964 - 2012

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Satisfaction with Jefferson

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Exhibit 1 Undergraduate Science GPA

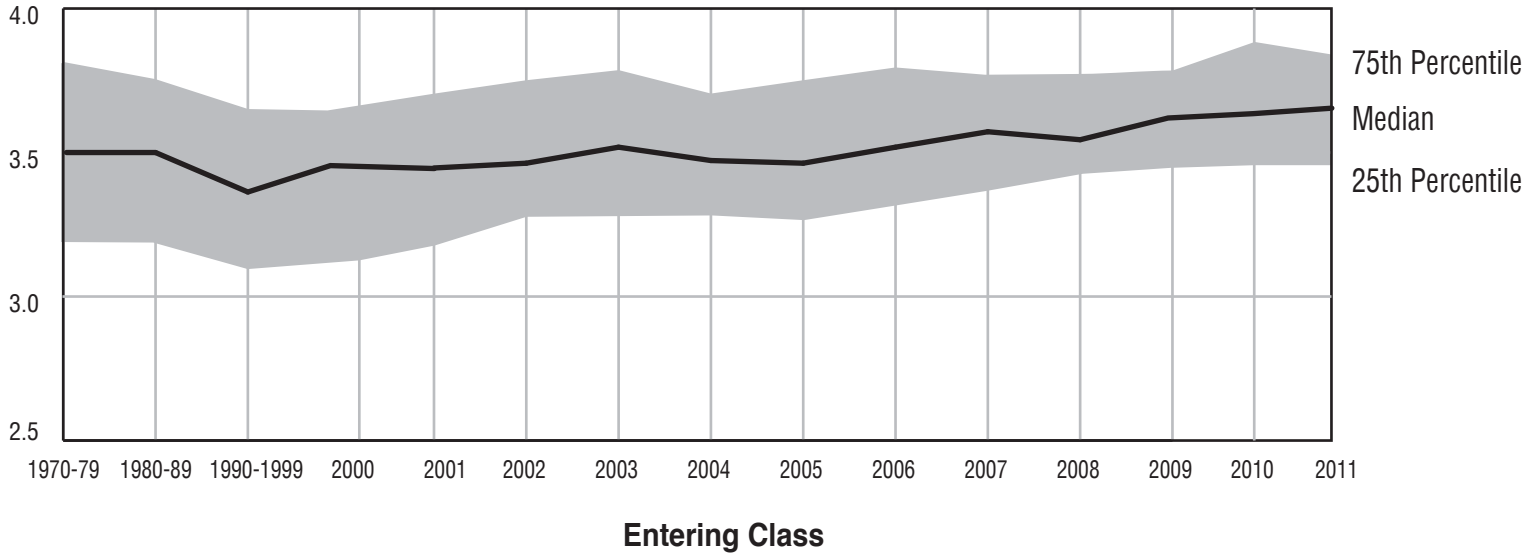


Exhibit 2 Undergraduate Non-Science GPA

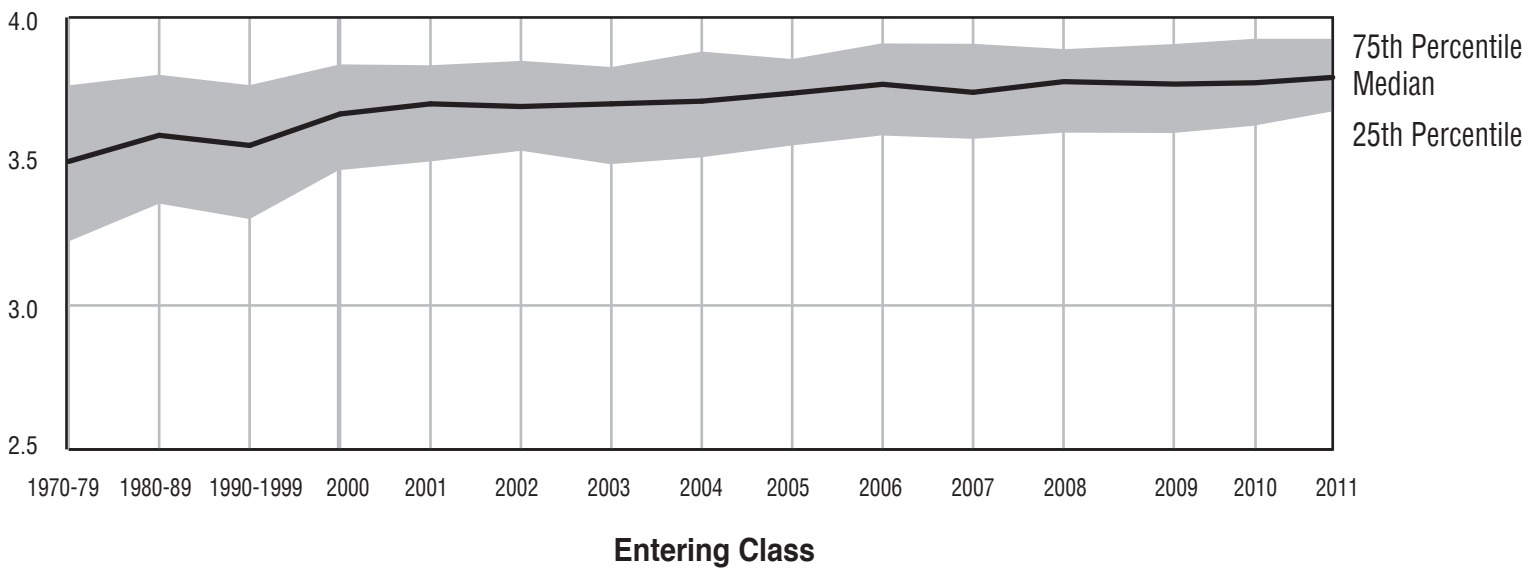
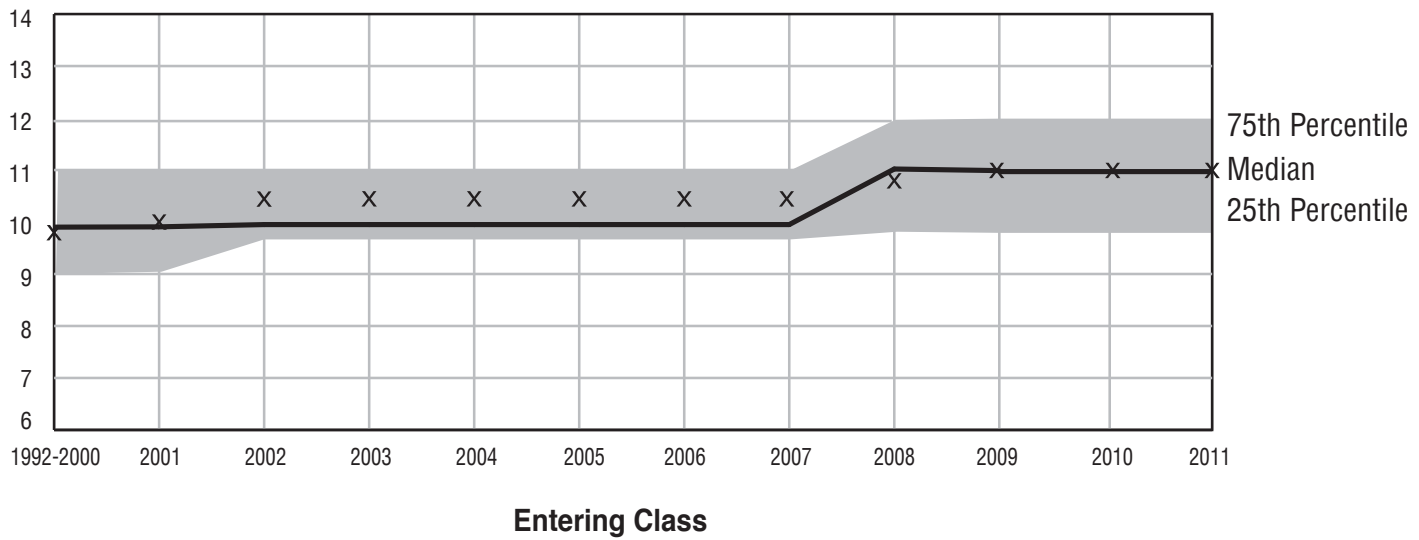


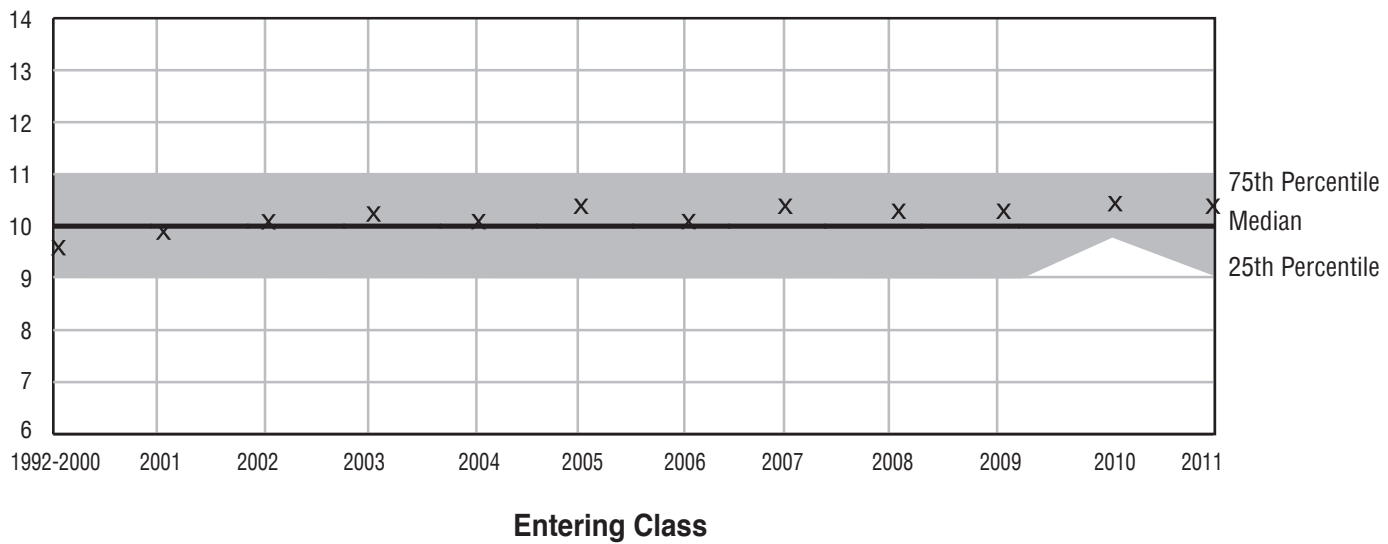
Exhibit 3 MCAT Biological Sciences¹



X = Mean

¹ Highest score was used for students with more than one set of scores.

Exhibit 4 MCAT Verbal Reasoning¹



X = Mean.

¹ Highest score was used for students with more than one set of scores.

Exhibit 5

Percent of Women Matriculants

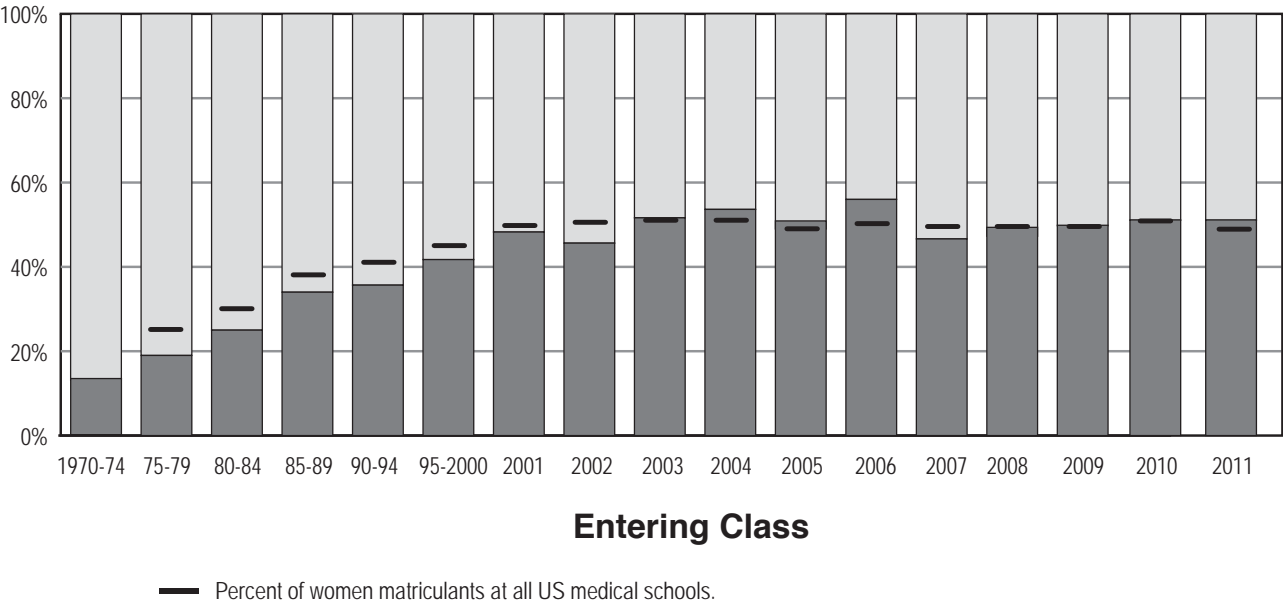
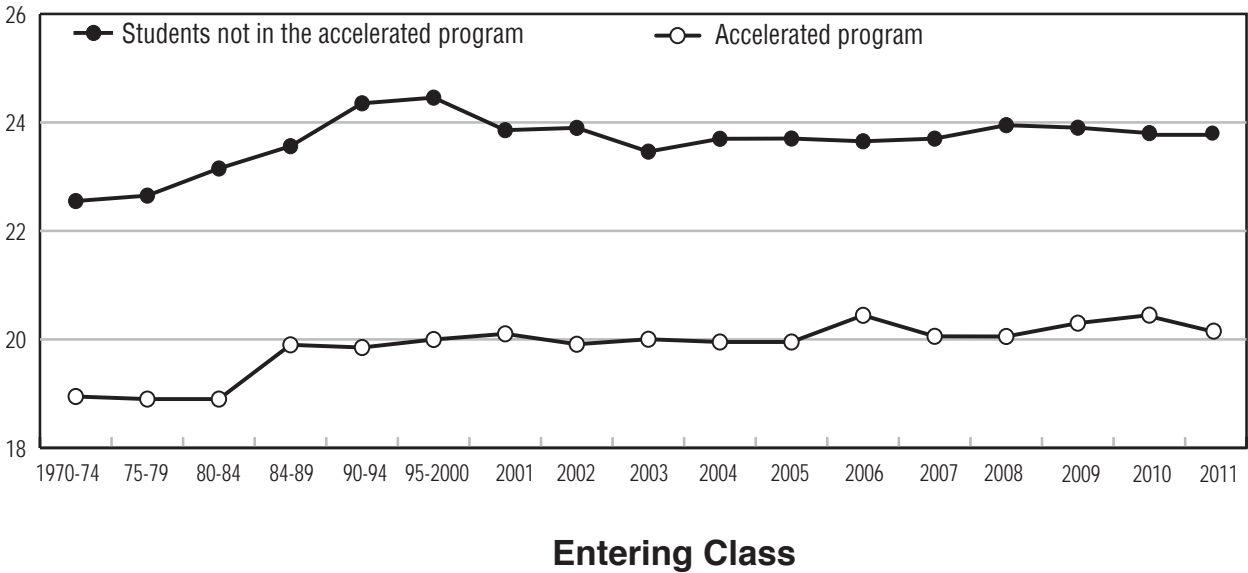


Exhibit 6

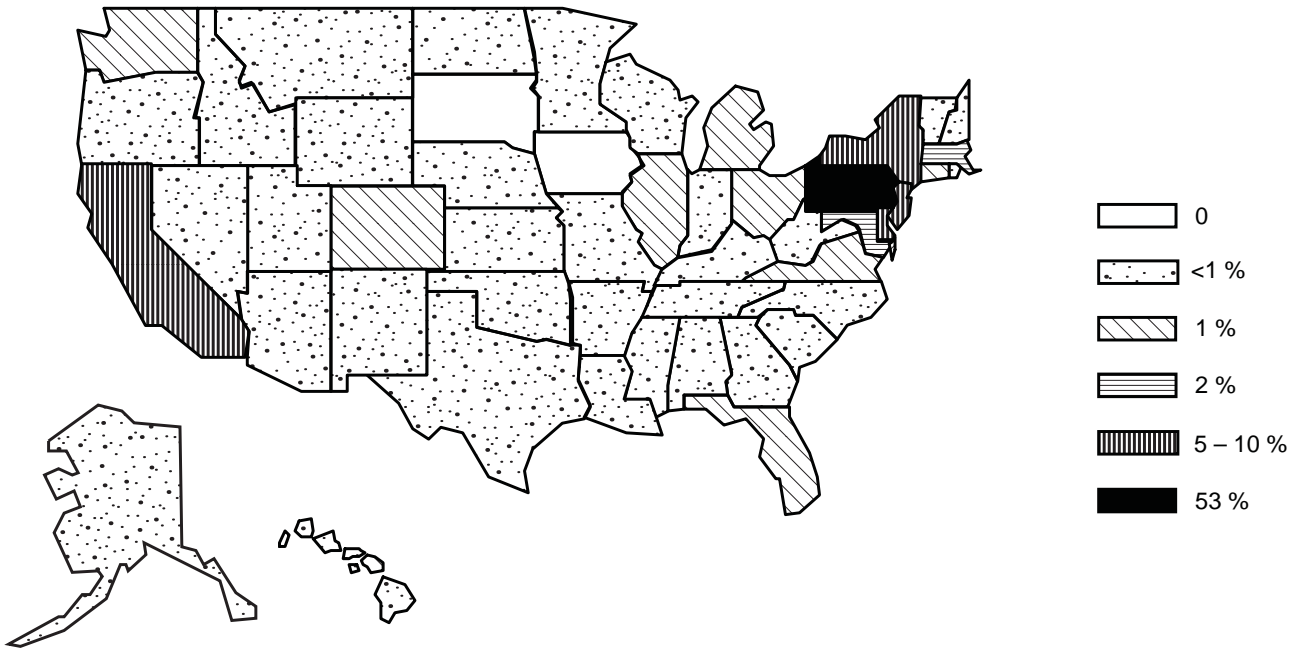
Mean Age at Matriculation



¹The accelerated program had been a 5-year combined BS-MD program before 1984. During the transition year 1984, no students were admitted to the program. Thereafter, it became a 6-year program.

Exhibit 7 Home State

Classes of 1970 – 2011



Classes of 2002 – 2011

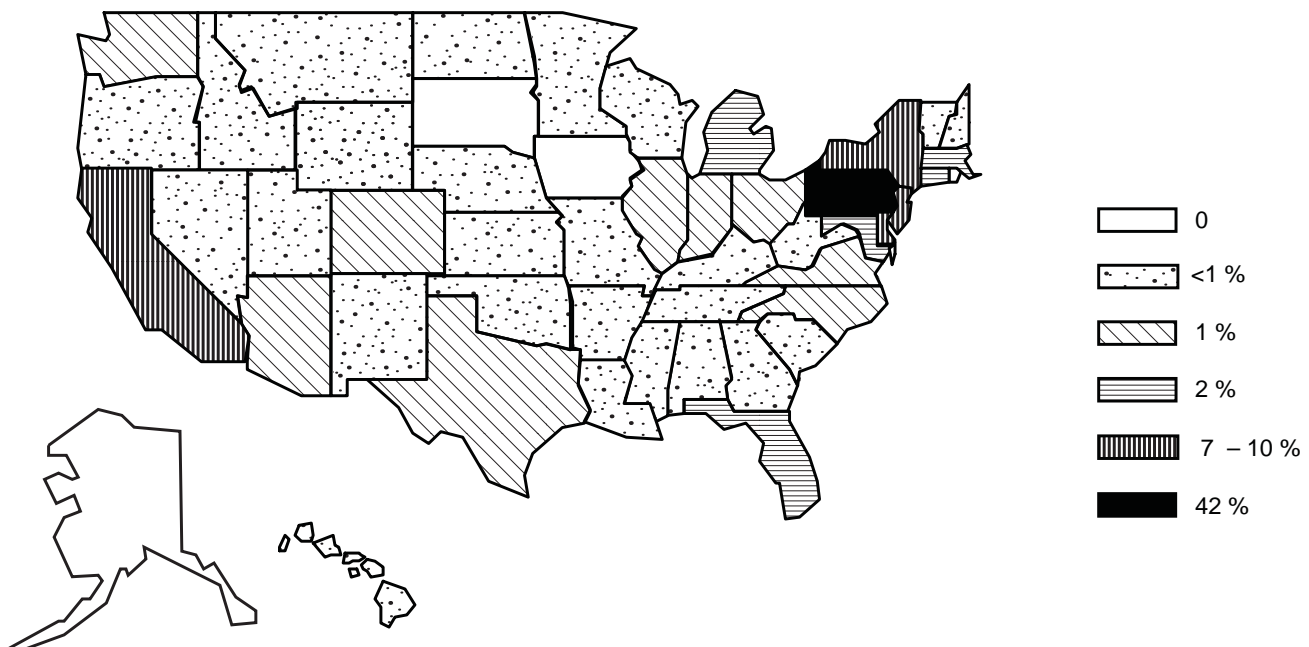


Exhibit 8
Graduation, Transfers, and Attrition
Entering Classes of 1970 - 2007

Entering Class		% Graduated			% Transferred	% Did Not Graduate***
Year	Size	On Time*	Late**		-	-
			Academic	Non Academic		
1970 – 1974	1090	92%	2%	2%	<1%	3%
1975 – 1979	1114	92%	3%	2%	1%	2%
1980 – 1984	1112	90%	4%	2%	1%	3%
1985 – 1989	1117	88%	4%	3%	2%	3%
1990 – 1994	1137	90%	3%	2%	1%	4%
1995 – 1999	1116	88%	4%	4%	1%	3%
2000	222	90%	4%	4%	0%	2%
2001	224	90%	4%	4%	0%	2%
2002	227	88%	4%	3%	<1%	5%
2003	229	89%	4%	2%	1%	4%
2004	228	85%	2%	9%	<1%	3%
2005	254	89%	2%	7%	0%	2%
2006	255	86%	4%	7%	0%	2%
2007	259	85%	3%	10%	<1%	1%

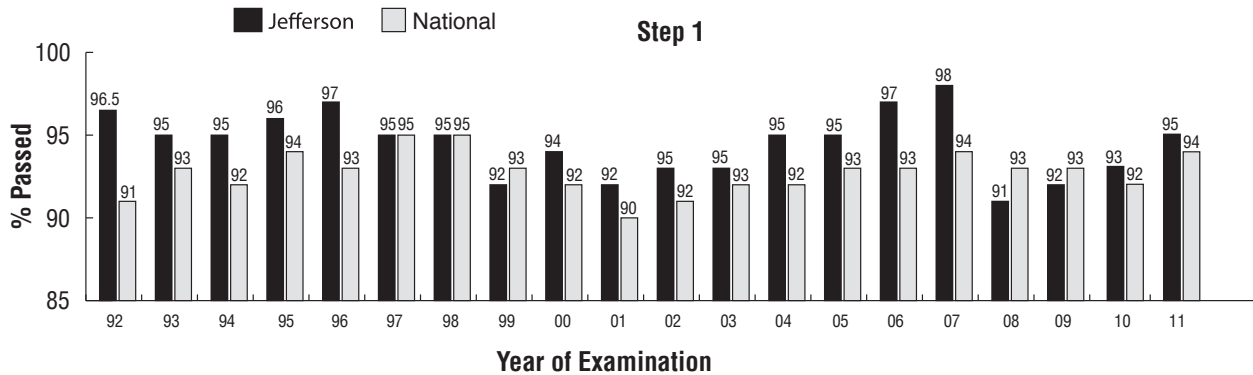
* Includes graduates from combined degree programs.

** Delayed graduation for current students includes those on leave of absence.

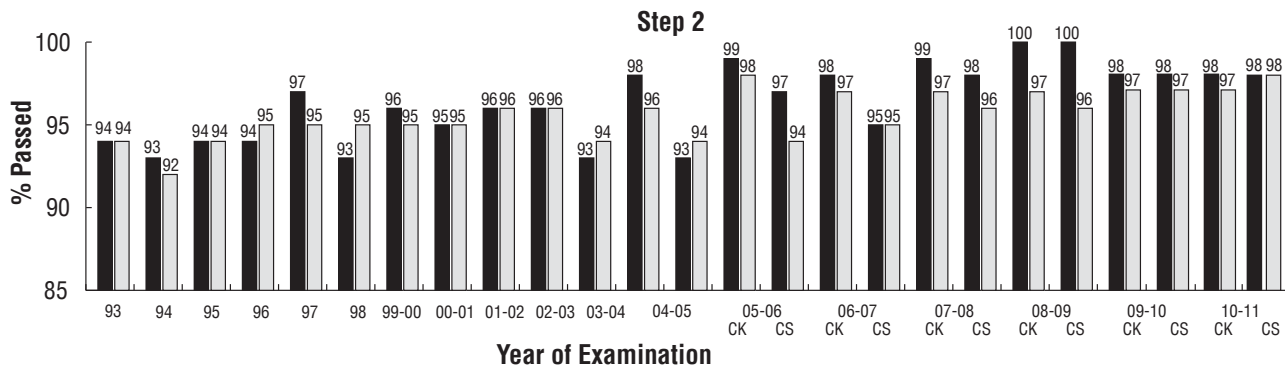
*** Includes withdraw, dismiss, and deceased students.

Exhibit 9

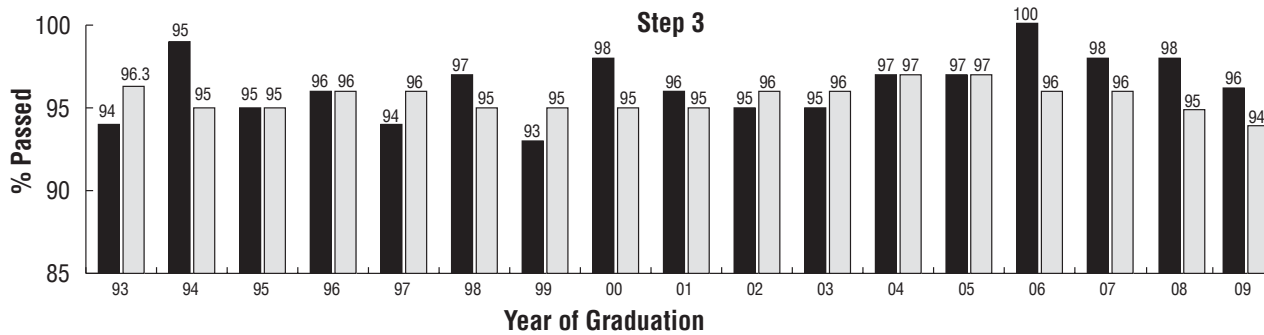
Pass Rates on the United States Medical Licensing Examinations (USMLE)



* Data is presented for the candidate reference group who took the examination for the first time each year and who were two years from expected graduation.

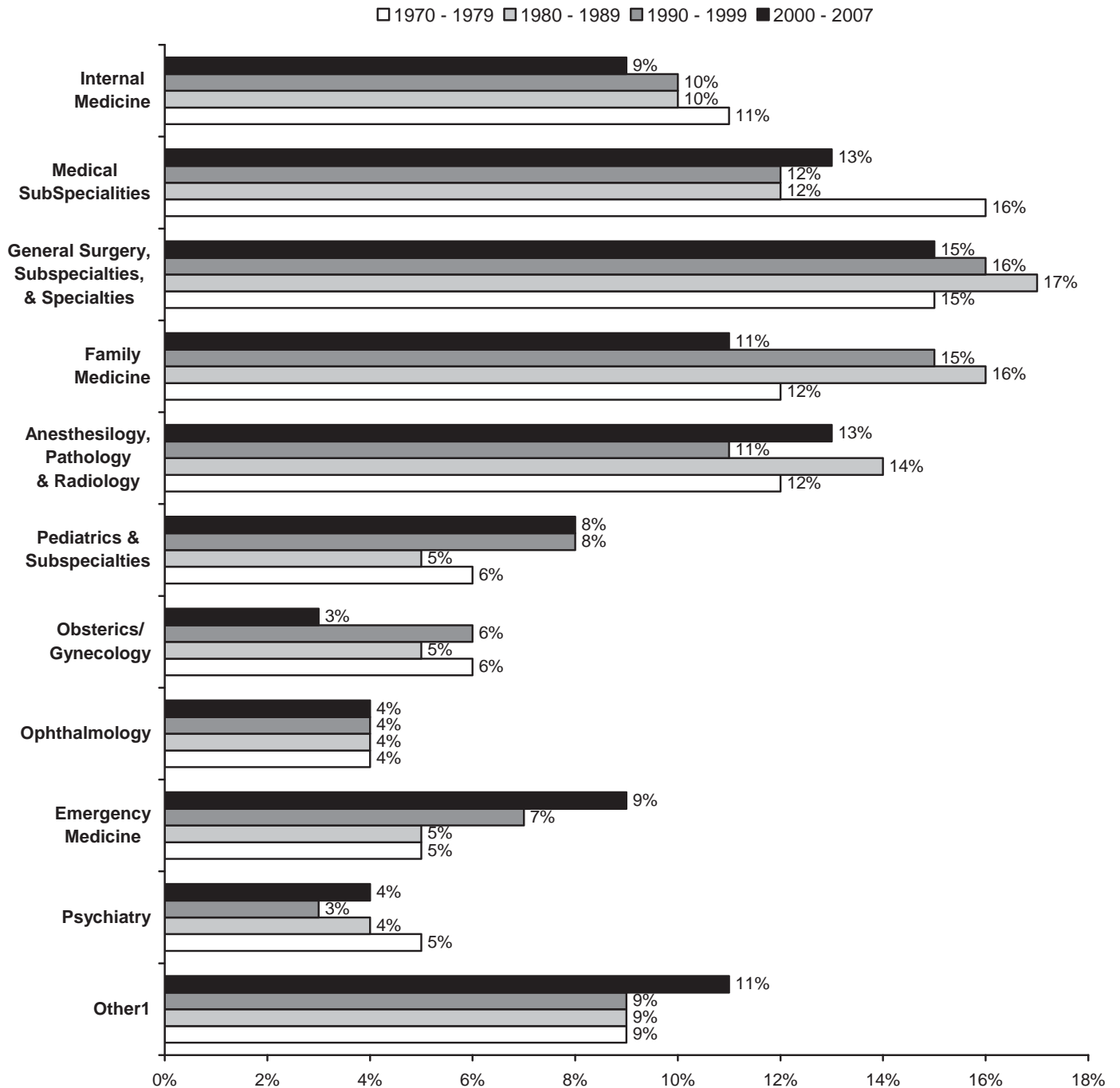


* Data is presented for the candidate reference group who took the examination for the first time each year and who were one year from expected graduation. Starting from July 2004, Step 2 reports 2 scores, one for Clinical Knowledge (CK) and another for Clinical Skills (CS).



* Data is presented for graduates who took the examination for the first time in each year.

Exhibit 10 **Specialties of Alumni*** **Graduating Classes of 1970 - 2007**

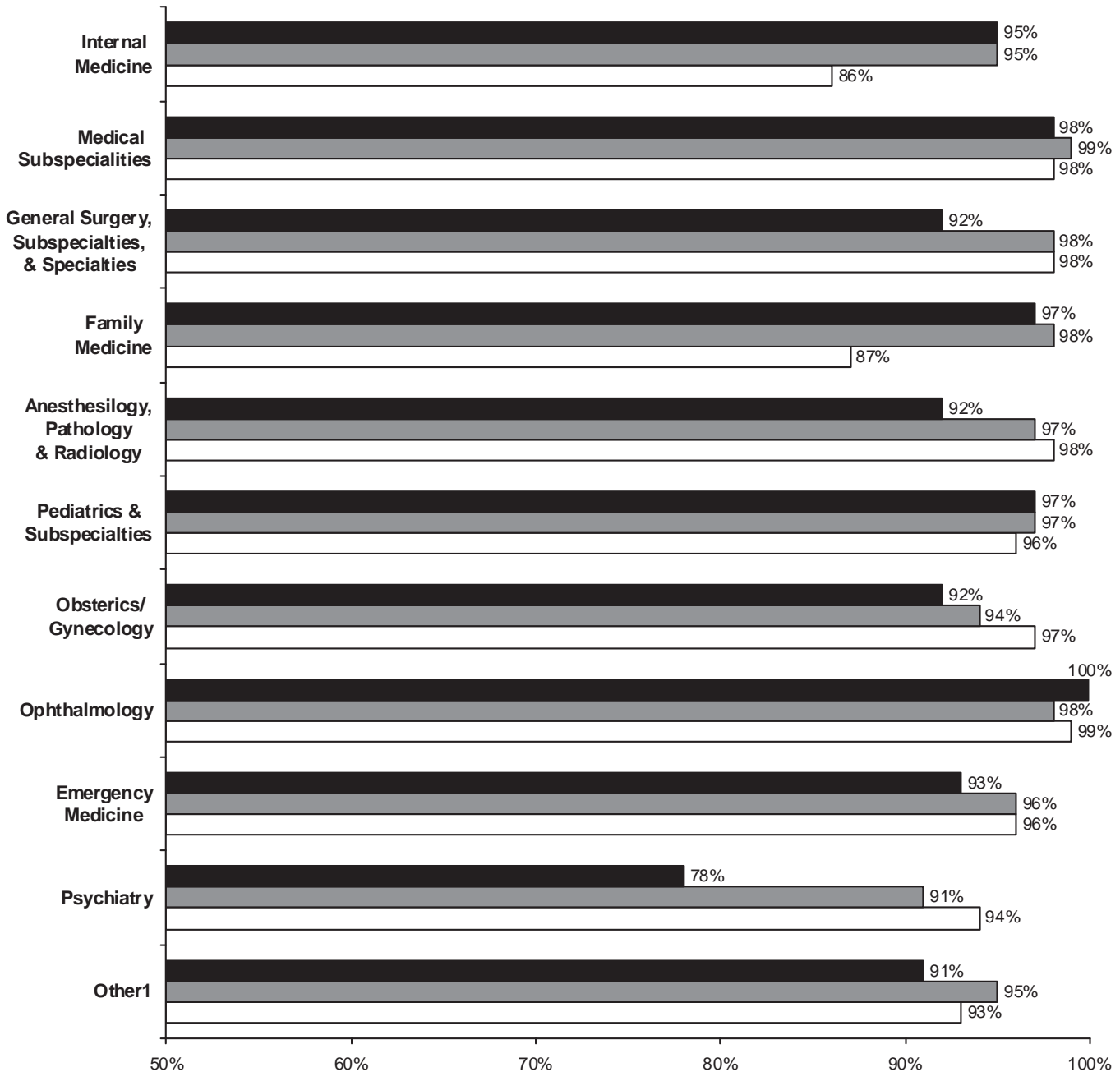


* Source: American Medical Association, American Board of Medical Specialties,

* "Other" includes specialties and subspecialties, each representing less than 2% of the total alumni.

Exhibit 11 **Board Certification Rates of Alumni by Specialty*** **Graduating Classes of 1970 - 2000**

□ 1970 - 1979 ■ 1980 - 1989 ■ 1990 - 2000



* Percentages are based on the total graduates in each specialty

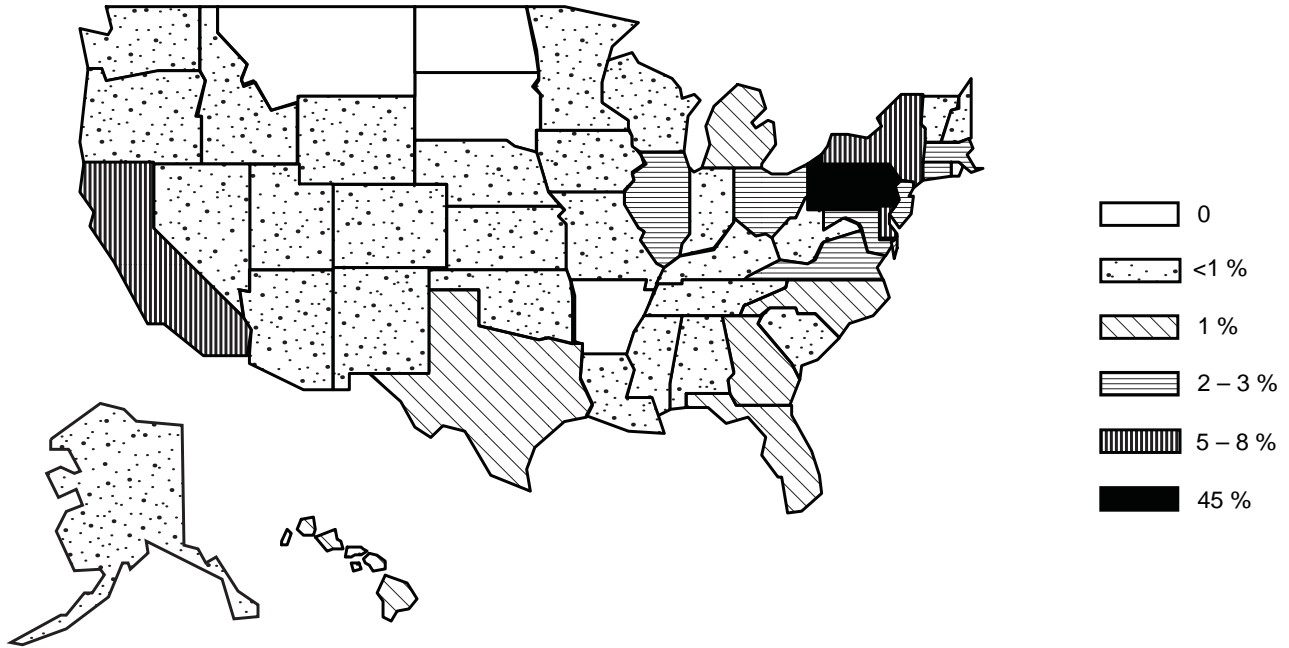
¹. "Other" includes 29 Specialties and subspecialties, each representing less than 2% of the total alumni.

Sources: American Medical Association.

Exhibit 12

Location of First Year Postgraduate Education

Classes of 1970 – 2012



Classes of 2003 – 2012

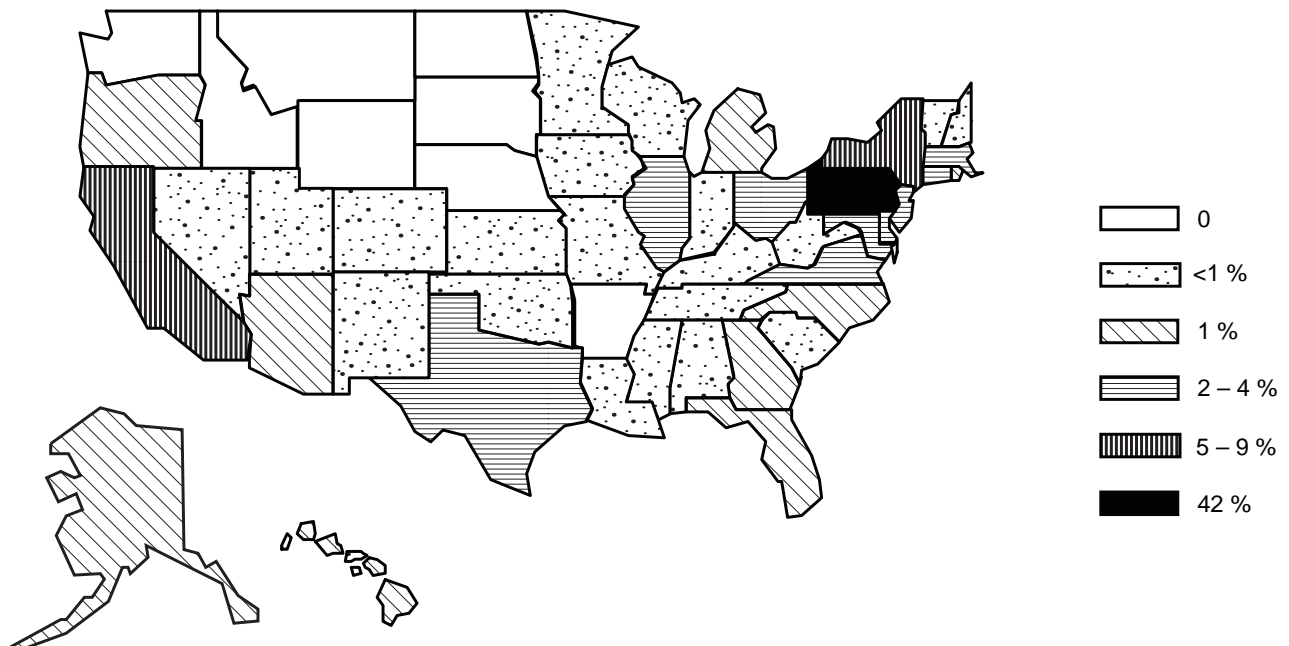
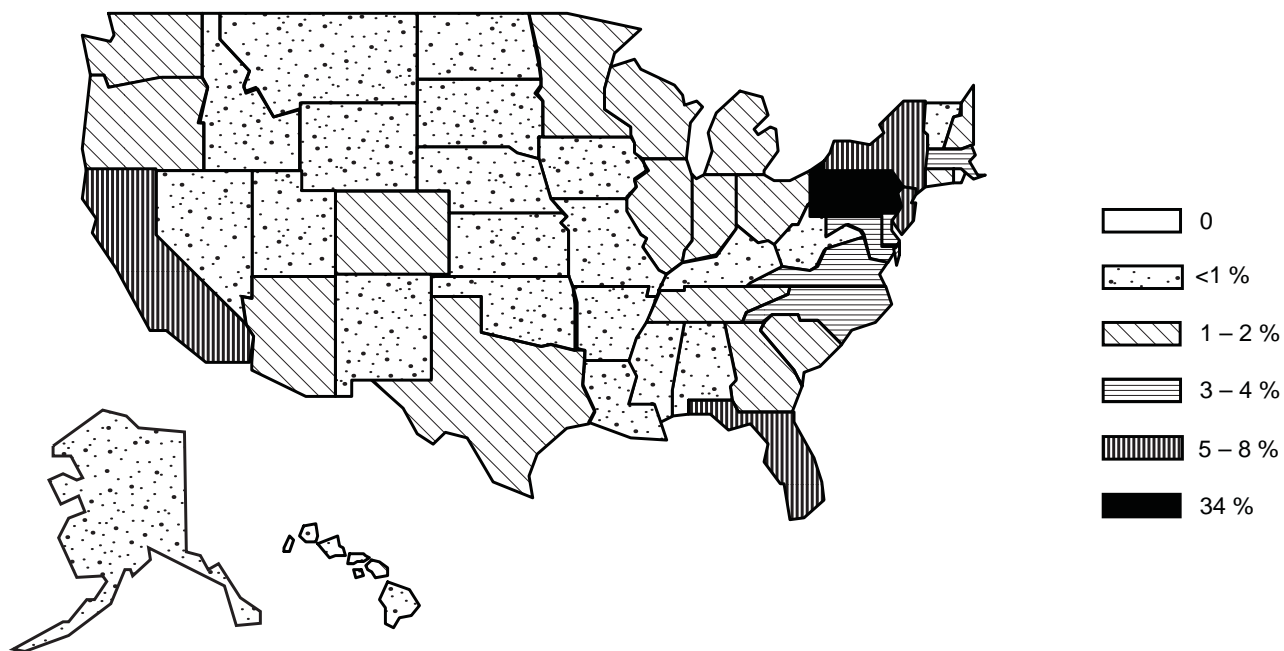


Exhibit 13

Current Location of Living Alumni*

Classes of 1970 – 2007



Classes of 1998 – 2007

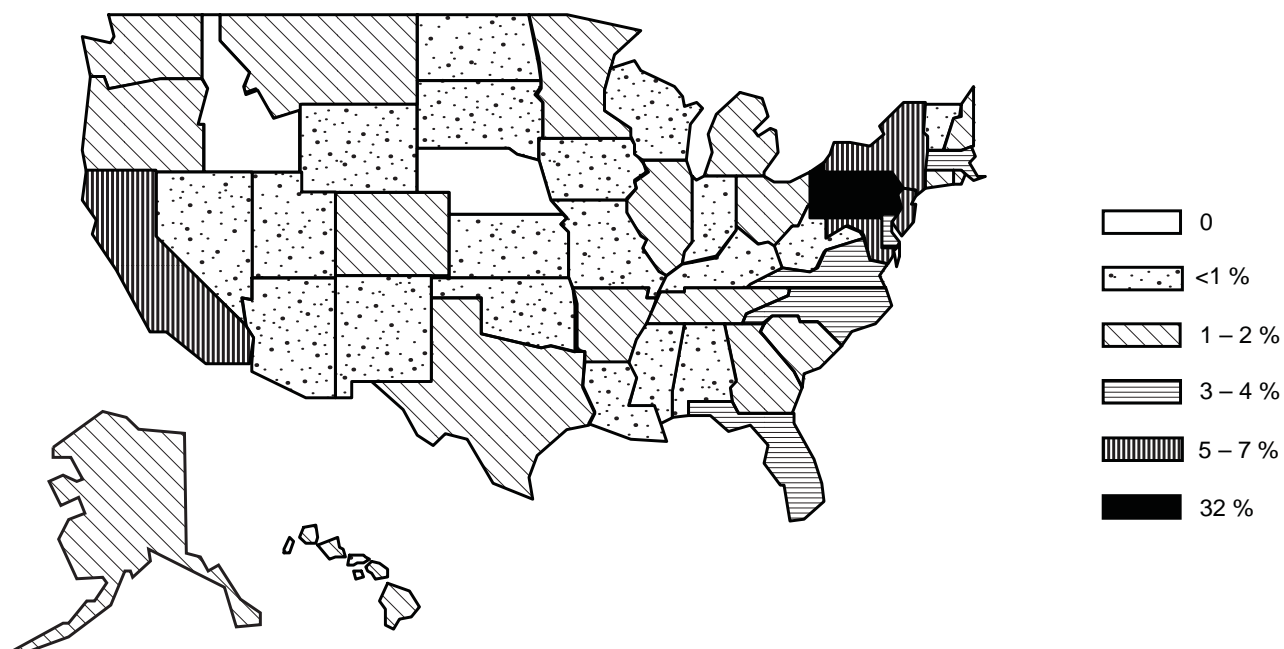
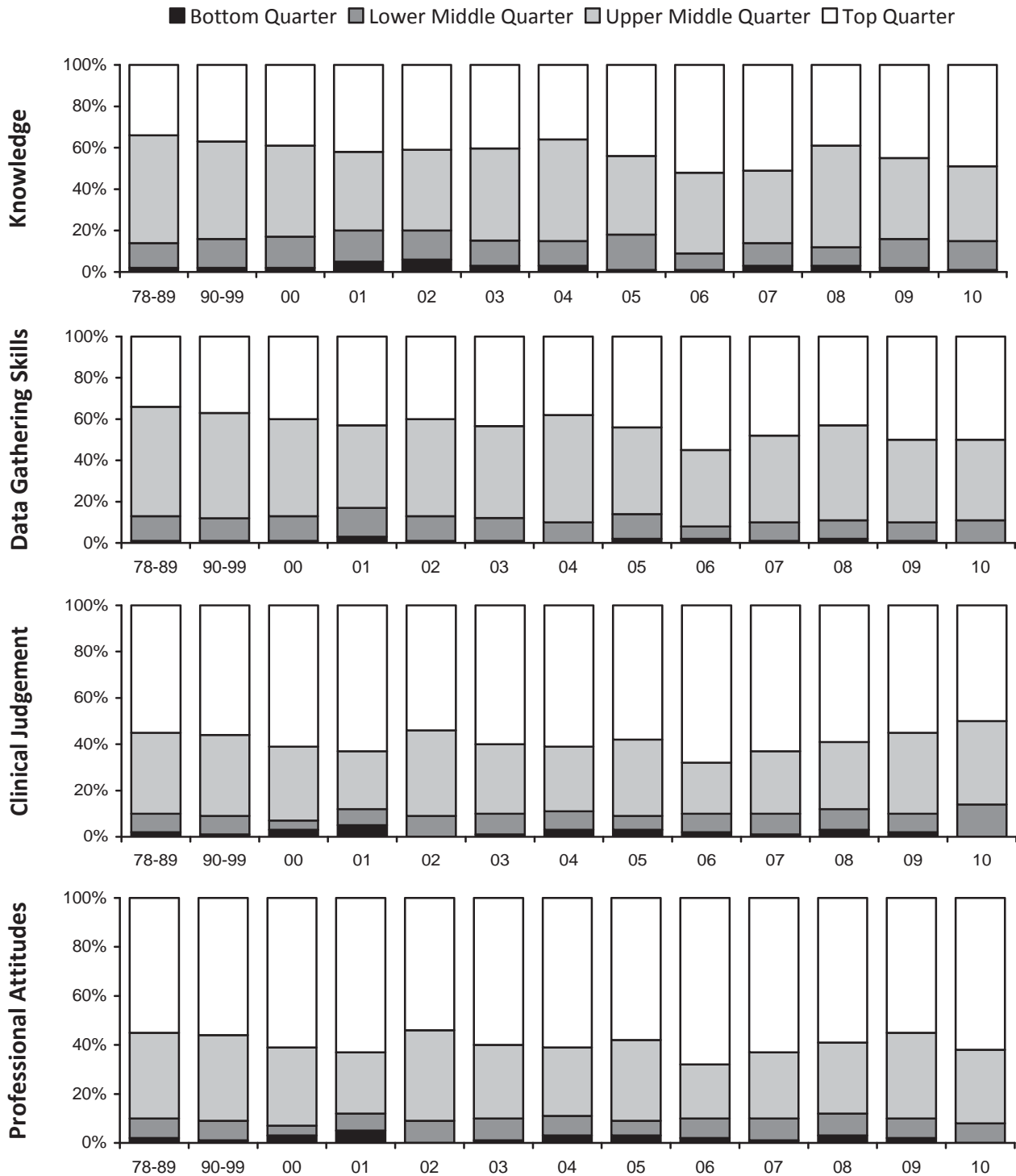


Exhibit 14
Program Directors' Ratings in the First Postgraduate Year*
Graduating Classes of 1978 - 2010



* Response rates vary for different classes from 45% to 75%.

Program directors rated the graduates on a 4-point Likert scale comparing them with all graduates they ever supervised.

Exhibit 15
Full-Time Salaried Medical School Faculty Appointments of Alumni
Graduating Classes of 1970 – 2007*

Medical School	N ¹
Jefferson Medical College	144
University of Pennsylvania	72
Harvard Medical School	53
Pennsylvania State University	35
Johns Hopkins	31
University of Pittsburgh	28
Drexel University	27
Robert Wood Johnson (Camden)	26
Mayo Medical School	24
Temple University	23
Robert Wood Johnson (Rutgers)	23
Albert Einstein University	19
Tufts University	19
Cornell University	19
University of Maryland	18
University of Washington	17
Case Western Reserve University	15
Boston University	14
Georgetown University	14
University of Rochester	14
University of Massachusetts	13
Northwestern University	13
University of Colorado	13
USUHS (Uniformed Services)	12
Columbia University	12
Ohio State University	12
New York University	11
University of California – Los Angeles	11
Vanderbilt University	11
Duke University	11
University of Wisconsin	10
Emory University	10
University of Miami	10
Yale University	10
George Washington	10
Mt. Sinai Medical School	10
New York Medical college	10
University of Utah	10
Medical School of Virginia	10
University of Arizona	9
University of Cincinnati	9
University of Virginia	9
Baylor College of Medicine	9
Dartmouth Medical School	9
University of Michigan	9
Oregon Health Services University	9
University of California - Irvine	8
Washington University – St. Louis	8
University of California – San Diego	8
University of California – San Francisco	7
University of Kentucky	7
University of Florida	7
East Carolina University	7
University of Tennessee	7
University of New Mexico	7

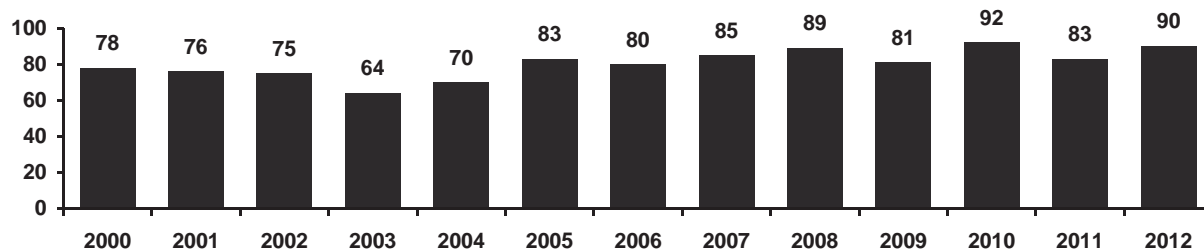
Medical School	N ¹
University of Texas – South Western	7
University of Vermont	7
University of Chicago	7
Albany Medical College	6
Oakland University – Beaumont School of Medicine	6
University North Carolina – Chapel Hill	6
Indiana University	6
University of Illinois	6
Eastern Virginia	6
Tulane University	6
University of California – Davis	5
Eastern Tennessee (James H. Quillen)	5
University of Connecticut	5
Medical College of Wisconsin	5
University of Minnesota / Minneapolis	5
Northeastern Ohio Universities	5
Brown University	4
Bowman Gray School of Medicine	4
Virginia Commonwealth University	4
Stanford University	4
SUNY – Stony Brook	4
Saint Louis University	4
West Virginia University	4
University of Georgia	4
Wake Forest University	4
UMDNJ-NJSOM	4
Southern Illinois University	3
University of South Carolina – Columbia	3
University of Hawaii	3
University of Oklahoma	3
University of Southern California	3
University of Texas – Houston	3
Wayne State University	3
Wright State University	3
Loma Linda university	3
Michigan State University	3
SUNY / Buffalo	3
University of South Florida	3
Virginia Tech – Carilion School of Medicine	2
SUNY – Upstate – Syracuse	2
University of Alabama	2
University of Missouri – Kansas City	2
Louisiana State University	2
Loyola University	2
Medical College of Ohio	2
University of Michigan	2
University of Iowa	2
Rush Medical College	2
University of Louisville School of Medicine	2
University of Puerto Rico	2
Morehouse School of Medicine	2
University of Southern Alabama	2
University of Texas – San Antonio	2
Schools with one Jefferson graduate	13
Total	1185

* Source: Association of American Medical Colleges (AAMC).

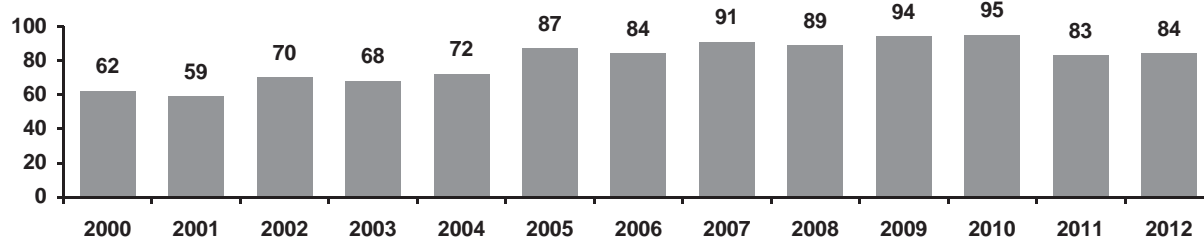
¹. Approximately 14% of the graduates had a full-time salaried faculty appointment at some point during the past five years.

Exhibit 16
Percentage of Graduating Students Who Were Satisfied With the
Jefferson Medical College Educational Programs*

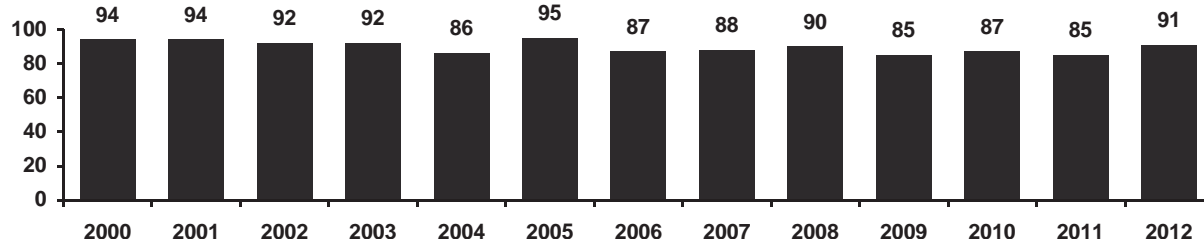
First Academic Year



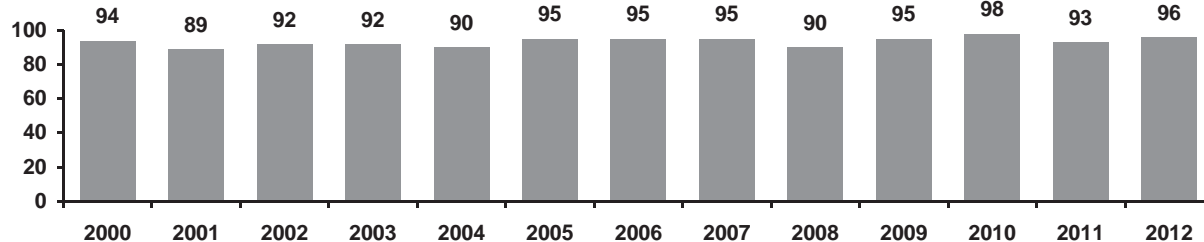
Second Academic Year



Third Academic Year



Fourth Academic Year



Graduating Class

* From the graduation questionnaire of the Jefferson Longitudinal Study asking medical students the extent of their satisfaction with each medical school year on a 4-point scale (4=very satisfied, 3=satisfied, 2=dissatisfied, 1=very dissatisfied). Response rates ranged from 70% to 94%.

Exhibit 17
Percentage of Graduating Students' Responses to the Following Question:
*“How well do you feel that your education at Jefferson
 prepared you for a career in medicine?”¹*

Scale Points											
Graduating Class	1 Very Poorly	2	3	4	5	6	7	8	9	10 Extremely Well	Mean Score
2000	0	<1	1	<1	<1	10	24	35	17	6	7.59
2001	0	<1	4	3	5	12	24	39	10	3	7.17
2002	0	<1	1	2	5	8	28	32	17	5	7.51
2003	0	0	1	4	5	7	29	36	15	3	7.44
2004	0	0	2	4	11	6	21	32	20	4	7.35
2005	0	1	0	1	2	6	17	42	21	10	7.98
2006	0	0	0	1	1	3	19	43	25	9	8.11
2007	0	0	0	1	2	4	21	39	27	6	8.00
2008	0	<1	0	2	1	6	12	38	29	11	8.10
2009	0	0	0	1	3	5	18	38	29	7	8.00
2010	0	0	0	0	2	4	12	39	27	16	8.33
2011	0	0	0	3	1	6	20	39	26	5	7.84
2012	0	0	0	0	1	3	17	43	28	8	8.18

¹ From the graduation questionnaire of the Jefferson Longitudinal Study. Response rates ranged from 70% to 94%.