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| **March 2012**   * Leadership training programs developed to help medical students who  hope to pursue administrative roles in their careers * AAMC releases report stressing the importance of behavioral and social science foundations for future physicians * NYU students test a program to learn anatomy using a digitally-dissectible cadaver with 3D technology * The University of Arizona has pioneered a focus on biomedical informatics in its medical school curriculum * Canadian Primary Medicine group provides Public Health Primer * Medical Students' and Residents' Clinical and Educational Experiences with Defensive Medicine * Uncertainty over long-term federal funding for graduate medical education remains   **Leadership training programs developed to help medical students who  hope to pursue administrative roles in their careers**   A competency-based leadership development curriculum aims to train medical students in strategic planning, budgeting, and team management. These skills are important if students want to pursue administrative roles. The Cleveland Clinic program is highlighted [[Read More](http://lists.aamc.org/t/162168/993346/16361/18/" \t "_blank)].  **AAMC releases report stressing the importance of behavioral and social science foundations for future physicians**  The AAMC report emphasizes that behavioral and social sciences play a large role in providing medical care. The article features University of California San Francisco School of Medicine which integrates behavioral and social science concepts across all four years of medical school. The report also features a learning matrix to help educators develop an effective curriculum [[Read More](http://lists.aamc.org/t/162168/993346/16362/19/" \t "_blank)].  **NYU students test a program to learn anatomy using a digitally-dissectible cadaver with 3D technology**  Students at NYU School of Medicine are testing a program to learn anatomy using a digitally-dissectible cadaver presented in 3D. The dissection program features animations to mimic the features of live human body. The developers of the program are hoping to design the program like “Google maps” of the human body, available to the public. They also believe it would aide physicians explaining health conditions to their patients (article in *NY Times*) [[Read more](http://lists.aamc.org/t/162168/993346/16363/20/" \t "_blank)].  **The University of Arizona College of Medicine has pioneered a focus on biomedical informatics in its medical school curriculum**   Students at University of Arizona College of Medicine must complete 45 hours of training in structured and integrated coursework in bioinformatics. The increasing role of bioinformatics in the healthcare field has driven the inclusion of the component. The article features curriculum specifics of development, principles and evaluation of the program (article in *Academic Medicine*): [[Read more](http://lists.aamc.org/t/162168/993346/16364/21/" \t "_blank)]  **Canadian Primary Medicine group provides Public Health Primer**  The Association of Faculties of Medicine of Canada has published an online Public Health Primer for clinicians. The primer features instruction on the basics of public health and  covers the objectives necessary for Canadian medical students set by the Medical Council of Canada. It is designed to give a basic background and knowledge to medical students and clinicians [[Read more](http://lists.aamc.org/t/162168/993346/15732/22/" \t "_blank)].  **Medical Students' and Residents' Clinical and Educational Experiences with Defensive Medicine**  The article, “Medical Students' and Residents' Clinical and Educational Experiences with Defensive Medicine,” was featured in Academic Medicine in February. The article published the results of a survey of  fourth  year medical students and third year residents regarding their experiences with defensive medicine. The survey specifically asked students to assess whether medical malpractice liability caused practices of avoidance or reassurance (article in *Academic Medicine* [[Read more](http://lists.aamc.org/t/162168/993346/16365/23/" \t "_blank)].  **Uncertainty over long-term federal funding for graduate medical education remains**  In late November, the super committee announced it was unable to reach an agreement, triggering automatic across-the-board cuts in federal discretionary and mandatory spending, a process known as sequestration, beginning in January 2013. This would result in reductions of Medicare payments, reduced federal funding to health programs, the National Institutes of Health as well as many others. These cuts would also affect medical education [[Read More](http://lists.aamc.org/t/162168/993346/16366/24/" \t "_blank)] [[AAMC Funding for GME Home](http://lists.aamc.org/t/162168/993346/12671/25/" \t "_blank)]. |
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Association of American Medical Colleges, 2450 N Street, NW, Washington, DC 20037-1126