

University of Hawai‘i John A. Burns School of Medicine

Objectives for Graduation

Graduates of the University of Hawai‘i John A. Burns School of Medicine are lifelong learners. They apply their knowledge of foundational and clinical sciences, demonstrate a deep appreciation for their community, and communicate effectively in the care of their patients, particularly the peoples of Hawai‘i and the Pacific Basin. They practice medicine with the highest professional standards while maintaining their wellness and resiliency. All medical students at JABSOM must demonstrate achievement of these objectives prior to graduation.

I. Lifelong Learning

Graduates will be lifelong learners.

Following PBL tutorial, patient care interactions, or in anticipation of future learning needs, students will be lifelong, self-directed learners by:

- A. Identifying gaps in knowledge and utilizing learning activities to refine their knowledge base.
- B. Addressing learning needs by acquiring, integrating, and evaluating their ability to utilize credible resources.
- C. Demonstrating commitment to obtaining new knowledge associated with improving patient/population outcomes.
- D. Demonstrating commitment to improving personal performance and acknowledging limits in knowledge.

II. Foundational Knowledge and Discovery

Graduates will understand the foundational knowledge and discovery supporting clinical medicine.

Students will apply foundational knowledge and discovery to the practice of medicine by:

- A. Describing the normal structure and function of each organ system and their interaction within the human body as a whole.
- B. Explaining the biological (molecular, cellular, and biochemical) mechanisms and non-biological (social, behavioral, psychological, and environmental) determinants that maintain the body’s homeostasis and maintenance of good health.
- C. Explaining the various biological (molecular, cellular, and biochemical) and non-biological (social, behavioral, psychological, and environmental) causes of illness and the way in which they impact the body and mind (pathogenesis).

- D. Describing the altered structure and function (pathology and pathophysiology) of the body and its organ systems and tissues that are seen in various diseases and disorders.
- E. Explaining the mechanisms by which various treatment modalities impact the pathogenesis and natural history of diseases and disorders.
- F. Discussing the principles of biomedical research methods, common biostatistical tools, scientific rationale, and evidence-based medicine in determining the cause of disease and the efficacy of conventional, complementary and/or alternative therapies, to evaluate the validity and application of research results.

III. Care of Patients

Graduates will provide patient-centered care that is compassionate, appropriate and effective for the treatment of health problems and promotion of health in the ambulatory and hospital setting.

When seeing a patient presenting with a concern or illness in the ambulatory or hospital setting, students will be able to care for that patient by:

- A. Approaching each patient with an awareness of and sensitivity to the impact the patient's age, gender, culture, spiritual beliefs, socioeconomic background, lifestyle, social support, sexuality, and healthcare beliefs may have on the diagnosis and treatment of their illness.
- B. Understanding the components of the informed consent process and being capable of obtaining informed consent for tests, procedures, and/or other interventions while respecting patient confidentiality and autonomy, and preserving patient dignity.
- C. Applying clinical reasoning and critical thinking to develop functional problem lists and differential diagnoses during a patient encounter.
- D. Performing a complete or complaint-focused history and physical exam following an appropriate exam sequence as indicated by the context of the encounter and utilizing correct technique in a manner that reflects a clear understanding of the manifestations of common illnesses.
- E. Selecting and interpreting appropriate diagnostic tests with careful consideration of the test characteristics, risks, potential complications, discomfort to patients, cost, and patients' overall therapeutic goals.
- F. Performing routine procedural skills under appropriate supervision that are considered essential for a particular area of medical practice.
- G. Developing and implementing an appropriate treatment plan, including the practice of order and prescription entry, that takes into account efficacy, adverse effects, socioeconomic, safety, and compliance issues in the context of the patient's values and overall goals for treatment.
- H. Recognizing and initiating therapy for acute life-threatening conditions.
- I. Understanding the complex decision making that is intertwined with palliative and end-of-life care for patients.
- J. Incorporating principles of interprofessional, high quality, team-based patient care.

- K. Learning to apply the principles of quality improvement and systems-based practice to the care of patients.

IV. Communication and Interpersonal Skills

Graduates will be able to communicate effectively with patients, families, and other providers in the interdisciplinary healthcare team.

When in a classroom, clinical, or other healthcare setting, students will communicate effectively with others by:

- A. Communicating and effectively educating patients, families, and members of the interprofessional team across a broad range of backgrounds and identities, demonstrating collaboration, sensitivity, cultural modesty, and respect for individual perspectives.
- B. Demonstrating emotional awareness needed to develop and manage interpersonal interactions. This may include how one's own biases, identities, and lived experiences may influence one's perspectives, interactions, and clinical decisions.
- C. Effectively conveying clinical information and reasoning, with appropriate assertiveness, in all types of formal and informal oral and written presentations.
- D. Effectively documenting clinical care in medical records.
- E. Delivering and receiving feedback effectively from peers, faculty, administration, staff, and patients.

V. Population and Community Health

Graduates will understand, advocate, and apply principles and strategies of population and community health that will result in equitable care of diverse patients and communities.

When in the classroom, clinical or community setting, students will provide equitable care of diverse patients and communities by:

- A. Demonstrating an understanding of Native Hawaiian and other Indigenous peoples' views of health and illness, the impact of social and cultural determinants on their health status, and applying effective strategies for providing culturally safe, appropriate, and competent care to improve their overall health and wellbeing.
- B. Demonstrating meaningful participation in collaborative community health activities that optimize the health and quality of life of all persons who live and/or work in a defined community or communities.
- C. Evaluating the influence of social determinants of health, including economic, psychological, behavioral, environmental, political, and cultural factors, as well as the effects of racism, that contribute to the maintenance of health and the care of patients, their families, and communities.

- D. Demonstrating knowledge of the physician's role in global health issues such as climate change, emerging infections and pandemics, bioterrorism, war, and environmental disasters.
- E. Utilizing data from medical records, insurance claims, or other datasets to identify important public health or population health management strategies (including telehealth) that support the health of communities.
- F. Applying the epidemiology of common illnesses within diverse populations to integrate systematic approaches in reducing the incidence and prevalence of such illnesses.
- G. Caring for all patients, regardless of ability to pay, and advocating for equitable access to health care for underserved and vulnerable populations.
- H. Integrating important legal considerations in the practice of medicine by understanding the relationship between public health practice and national and state laws.
- I. Effectively tailoring healthcare strategies to constantly changing conditions faced by populations and their communities.

VI. Professionalism

Graduates will be professional and ethical and demonstrate an enthusiasm for medicine while delivering compassionate care to their patients.

When practicing medicine or representing JABSOM both in and out of the classroom or clinical setting, students will exhibit the highest standards of professional and ethical behavior by:

- A. Applying the theories and principles that govern ethical decision-making including those related to the major dilemmas in medicine.
- B. Adhering to JABSOM policies regarding academic integrity, completing school and professional requirements in a timely manner, cheating, plagiarism, fabrication, and falsification and to JABSOM and UHM policies regarding student conduct.
- C. Showing respect, honesty, altruism, accountability, honor, excellence, integrity, and humility.
- D. Presenting with professional attire and demeanor.
- E. Respecting patient confidentiality and preserving patient dignity.
- F. Recognizing potential conflicts of interest inherent in various financial and organizational arrangements in the practice of medicine.
- G. Dealing with professional mistakes openly and honestly in ways that promote patient and clinical team trust and self-learning.
- H. Acknowledging personal limitations, ability to reflect and self-assess, and the need for lifelong learning.
- I. Contributing to a safe and positive environment by active participation in JABSOM learning opportunities, willingness to teach and support others, and demonstrating respect for diversity.
- J. Incorporating principles of interdisciplinary collaboration, especially in the areas of communication and patient safety.

- K. Developing professional identity formation to embody the JABSOM Professionalism Philosophy.

VII. Wellness and Resiliency

Graduates will have the skills and strategies to maintain wellness and resiliency.

Students will maintain their wellness and resiliency by:

- A. Describing strategies to maintain personal physical and mental health while fostering positive connections with others.
- B. Stating healthy habits to manage stress and exam anxiety.
- C. Stating strategies to maintain personal safety and the safety of others in both academic and clinical environments.
- D. Debriefing critical clinical incidents, such as unexpected outcomes and mistakes, with colleagues to reflect on lessons learned.
- E. Identifying resources available for treating physical and mental illness, including substance use disorder and other forms of physician impairment.
- F. Stating the key elements of the student mistreatment policy, including the definition of mistreatment and how to report it.
- G. Recognizing and reflecting upon the importance of wellness and its impact on one's personal and professional life.

Resources

Association of American Medical Colleges. The Medical School Objectives Project:

- *Report I. Learning Objectives for Medical Student Education Guidelines for Medical Schools 1998.*
- *Report II. Contemporary Issues in Medicine: Medical Informatics and Population Health 1998.*
- *Report III. Contemporary Issues in Medicine: Communication in Medicine 1999.*
- *Report IV. Contemporary Issues in Medicine: Basic Science and Clinical Research 2001.*
- *Report V. Contemporary Issues in Medicine: Quality of Care 2001.*
- *Report VI. Contemporary Issues in Medicine: Genetics Education 2004.*
- *Report VII. Contemporary Issues in Medicine: Musculoskeletal Medicine Education 2005.*
- *Report VIII. Contemporary Issues in Medicine: The Prevention and Treatment for Overweight and Obesity 2007.*
- *Report IX. Contemporary Issues in Medicine: Oral Health Education for Medical and Dental Students 2008.*
- *Report X. Contemporary Issues in Medicine: Education in Safe and Effective Prescribing Practices 2008.*

Association of American Medical Colleges. New and Emerging Areas in Medicine Series:

- *Quality Improvement and Patient Safety Competencies Across the Learning Continuum 2019.*
- *Telehealth Competencies Across the Learning Continuum 2021.*
- *Diversity, Equity, and Inclusion Competencies Across the Learning Continuum 2022.*

Liaison Committee on Medical Education. Function and Structure of a Medical School.

Accreditation Council on Graduate Medical Education (ACGME) Common Program Requirements: General Competencies 2007.

The Royal College of Physicians and Surgeons of Canada. CanMEDS 2005 Physician Competency Framework.

Coalition for Physician Accountability. The Coalition for Physician Accountability's Undergraduate Medical Education-Graduate Medical Education Review Committee (UGRC): Recommendations for Comprehensive Improvement of the UME-GME Transition. 2021.

American Board of Internal Medicine. Project Professionalism 1995.

National Academies of Sciences, Engineering, and Medicine. 2019. Taking Action Against Clinician Burnout: A Systems Approach to Professional Well-Being. Washington, DC: The National Academies Press.
<https://doi.org/10.17226/25521>.

New England Journal of Medicine. Topic Collections.

- *Climate Change: https://www.nejm.org/climate-change?query=main_nav_lg (Accessed 13 Sep 2022)*
- *Race and Medicine: https://www.nejm.org/race-and-medicine?query=main_nav_lg (Accessed 13 Sep 2022)*

University of California Davis School of Medicine. I-EXPLORE Graduation Competencies.

<https://health.ucdavis.edu/mdprogram/curriculum/graduation-competencies.html> (Accessed 13 Mar 2022)

University of California Davis School of Medicine. Legacy Graduation Competencies.

<https://health.ucdavis.edu/mdprogram/curriculum/legacy-competencies.html> (Accessed 13 Mar 2022)

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