

# THE PANACEA

A Guide to Life at the University of  
Missouri School of Medicine



Brought to you by the Medical Student Affairs Council and the Office of Medical Education

*Panacea: “A cure-all; a remedy claimed to be curative of all diseases.”*

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## Foreword

We would like to be among the first to welcome you to the University of Missouri School of Medicine. With a combination of perseverance, intuition, and a little good fortune you have made it to this point. The good news is that as long as it is still your desire and you work hard during these next few years, you will be a doctor.

Some of you have wanted to be physicians your whole lives. Others have made this decision more recently. But for probably all of you, this is your first time in medical school. Things may seem quite intimidating at first. Perhaps you doubt if you are as smart as the rest of your classmates or if you are going to be academically successful. We know that nothing we write here will be able to completely alleviate your fears, but believe me that you will be just fine. You really should not be fixated on exams at this point, but passing the first set of exams is probably what is concerning you most right now. There is no reason for concern as long as you continue to work hard and study effectively.

If you don't have enough confidence in your own abilities to stop your anxiety, you can at least have confidence in the people writing the exams. The people who write the tests for the University of Missouri-Columbia School of Medicine are incredibly intelligent individuals whose job is to make exams such that smart students who have studied will pass. You are smart; otherwise you wouldn't be at medical school. Therefore, all you have to do is study hard and you will do well on the exams which were *designed* for you to pass.

Now that you don't have to spend time worrying, what are you going to do with your days? Medical school here is not at all what you may have seen in the movies. Take every scene in *Patch Adams* and throw it out the window. The only movie that even comes close to describing life at this medical school is *Ishtar* (you should rent it; it's really good). The reason things here are so different is because of the Patient-Based Learning (PBL) curriculum. Since we aren't expected to sit through eight hours of lecture on irrelevant aspects of highly focused subjects, there is a little more free time compared to other medical schools. As you won't be memorizing inane facts, PBL gives you the opportunity to really integrate all of the subject matter and not lose focus on what is probably the most important – learning how to deal with and develop relationships with human beings. People at traditional medical schools will tell you how much they hate their lives. Take advantage of what you have here. Spend time with your family. Volunteer at a clinic. Go out with your friends. Play intramural sports. Join medical school organizations. Run for an executive office. Be active in your place of worship. What you can't do is sit idly. The beauty of this curriculum is that it gives you the time to be a well-rounded person, so make good use of it. It is very easy to become preoccupied with the study of medicine, as it is quite possible to interact only with medical students for months at a time. Be sure to stay in good contact with your non-medical student friends, and family as they will keep you from losing perspective and from transforming into a person who only thinks about and talks about medicine.

The best advice is to stop and enjoy the little moments. You should do everything in your power to get the most out of these next four years.

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# GETTING STARTED

## Setting Up Your Utilities

By Dan Bytnar,  
Updated by Kelsey Knobbe

The City of Columbia has a really great website that features a New or Current Resident Guide. You can get most of this info plus other facts about Columbia at [www.como.gov](http://www.como.gov) . If you would like additional information, go to the City of Columbia website and click on the “Living in Columbia” and then “More Services” link!

### **Cable TV and Internet**

#### **Mediacom**

901 N. College

Approximate prices:

Internet with Digital Cable or Phone Service: \$90.00

Installation Fee: \$25 (Sometimes less or even free)

Be aware that these are usually introductory deals that will become more expensive after 6-12 months. Internet without cable will be about \$60. Also, make sure you call in advance to get an appointment! These guys get booked fast!

[www.mediacomcc.com](http://www.mediacomcc.com)  
(573) 443-1535

#### **DirecTV**

<http://www.directv.com>  
1-(888) 777-2454

To get prices you have to check the website: You will need to enter your address to see what kind of deals they have. Like Mediacom, any introductory deals will become more expensive after the first few months.

#### **CenturyLink**

[www.centurylink.com](http://www.centurylink.com)  
1-(800) 201-4099

Depending on the package, CenturyLink may be more or less expensive than Mediacom but from personal experience tends to be more reliable.

#### **Spectrum/Charter Cable**

1510 Boone Industrial Dr.

[www.spectrum.com](http://www.spectrum.com)  
1-(888) 871-4485

This may be another good option, depending on what your preference and needs are. Check out their website and put in your street address in the area provided to see what kind of offers they have!

### **Gas**

#### **Ameren UE (Union Electric)**

If your home has gas, call and tell them you're moving in. No installation fee or deposit.

1-(800) 552-7583

### **Electric/Water/Trash/Sewer**

#### **City of Columbia**

(573)-874-7380

701 E. Broadway

Call them with your move-in date, address, and social security number. You can do this up to 30 days in advance of your actual move-in date. To avoid a same day service fee DO NOT leave this until the day you move-in. The earlier you set this up the better. Again, check the [www.como.gov/utilities/ucs/](http://www.como.gov/utilities/ucs/) website for more information.

### **Local Telephone**

Most people just have cell phones, but if you want a landline, CenturyLink is probably your best bet. Their number is (573) 886-3336.

## **Immunization, Insurance, and Drug Screening**

By Mariah Dreisinger and JP Prouty

Updated by Kelsey Knobbe

### **Required Immunizations (doses)**

Polio (5)	Tetanus/diphtheria/pertussis w/in 10 years
Hepatitis B Series (3)	MMR (measles, mumps, rubella) (2)
2-step TB Skin testing (PPD) with annual update	Varicella (2)

You can get these immunizations at the Student Health Center, which is in the University Physicians building just east of the hospital.

### **Mandatory Urine Drug Screen**

The School of Medicine requires a urine drug and alcohol screen prior to matriculation. This must be completed before orientation. More information will be emailed to you at the beginning of July before your M1 year. The cost of the screening is \$25.00 and the screen can be completed at one of the Boyce and Bynum Pathology Laboratories near you.

### **Insurance**

Every student is required to have health insurance coverage. The medical school will require proof of insurance at the beginning of each academic year. If you are uninsured, the university offers special plans to students through Aetna. You can enroll in health insurance through the university by going on your myZou Student Center. The approximate cost is \$2,900 annually for an individual. Additional plans are available for an additional cost for students with significant others or families. Benefits, exclusions, limitations, etc. are too lengthy to be listed here but if you need more information, feel free to email Cheri Marks at [marksc@health.missouri.edu](mailto:marksc@health.missouri.edu). Additionally, if you have a medical emergency and cannot pay for it, talk to Cheri Marks about finding a financial resource to help!

## **Parking**

By Mariah Dreisinger and JP Prouty

Updated by Kelsey Knobbe

Let's face it: for students at major university campuses like MU, respect is spelled P-A-R-K-I-N-G. Since the founding of this particular university, administrators have delighted in

charging students outrageous fees to park in not-so-conveniently located former quarries somewhere in the approximate vicinity of Ashland (15 miles away), then routinely ticketing those same students for not parking in their proper (albeit unmarked) gravel spaces.

The good news is that medical students are now allowed to park in **Parking Structure 7** (known better as PS7). Be warned though, traffic can get pretty bad in the mornings! Now that we have the new PCCLC medical school building, it is about a 10-12 minute walk from your car on the top floor of PS7, to the flat classroom on the second floor of the PCCLC. So, plan accordingly and make sure to leave early the first week so you aren't late! For older students (mainly M2s), seniority rules and M2 parking is located in the **Tiger Avenue Parking Structure** (aka "TAPS"), located just outside the circle entrance to the PCCLC (near the Emergency Department).

Another thing to note – students who live close to campus often choose to walk, bike, skateboard, roller blade, etc. to class, especially in the first two years.

You should have received several emails regarding the setup of your parking pass. Parking passes are now conducted entirely electronically using your license plate. Students are allowed to park in most of the marked university lots around the hospital from 5:00pm to 6:00am. This does NOT, however, apply to parking garages, VA parking lots, or the faculty lot by the library. You are also not allowed to park in TAPS or PS7 on home football game days, which is kind of a pain. Don't try to park in any of the aforementioned spots without valid hangtags or stickers, because you will be caught, ticketed, towed, imprisoned and/or kicked out of medical school, for the first offense.

Money saving tip: If you get a parking ticket for an expired parking meter, take it to the Turner Avenue Garage within 48 hours, and they will usually reduce it to half (read the fine print on the ticket). Secondly, if you are fortunate to live close enough to school to walk every day, but dread when the weather changes to snow, ice, rain, etc., wait until the weather starts to get nasty before buying a parking pass. Often, the parking permits are "pro-rated" and you can save yourself some money by enduring the elements as long as possible.

Final note: parking isn't that bad at MU, or even that expensive (\$168/year)...look at some of the med schools downtown in big cities. Although no student is allowed to graduate from MU without receiving at least one wrongfully tendered parking ticket, you can always challenge your interpersonal relational skills by trying to talk your way out of paying for the sin of parking in the Dean's personal spot.

## **Books & Supplies**

By Bidisha Ray

Updated by Kelsey Knobbe

When it comes to books and supplies there are two basic ways to go. The first is to buy *everything* and the second is to buy the bare minimum and mooch off the people that bought everything. While both options are viable, it is probably healthiest to be somewhere in between and share different books on similar subjects amongst your study group if there isn't a consensus about which is the best.

When deciding what books to buy, you should consider your previous education in the subject, the amount of time you plan on studying the particular book, and your budget.

Questions to ask yourself include:

- Will I actually read this book or use it as a resource?

- Is this book available for free through the library? ALWAYS check the Health Sciences Library (HSL) first for hard copies and electronic editions through Access Medicine and Clinical Key.
- Will I be able to understand this book? Is it too advanced or too simple for me? Is it too in depth for what we are expected to learn and cover throughout this block?
- Can I afford this book? (the answer is probably no...but you'll buy the book anyway)

**Typically a book list will be given to you during orientation week. These are the books the faculty recommends you utilize during the first year of med school. Many of these books will be available at the book fair that the previous class will be hosting. The book fair is also a time to ask the M2 class about what they used and recommend. If you want to wait till the block starts, don't worry! A lot of the older students will periodically post their used books for sale on the All Class MU SOM Facebook page, so that is a great option too.**

In my own experience, I have found it helpful to ask some of the upper classmen about what study resources they have found most helpful. If I had to list the five most helpful resources for year one off the top of my head, I would say:

- 1.) BRS Biochemistry
- 2.) Costanzo Physiology – or BRS Physiology if you want the “meat and potatoes” and a more condensed version (FYI both are actually written by Linda Costanzo)
- 3.) Clinical Neuroanatomy Made Ridiculously Simple – some love this one, some prefer other sources. I also know some people in my class loved Blumenfeld's Neuroanatomy book.
- 4.) How the Immune System Works by Sompayrac – personally, this was my best study resource for Block 4
- 5.) First Aid, or if you prefer more words and explanation, I have heard awesome things about Crush Step 1.

Other students who appreciate online videos versus text, love to use Dr. Najeeb. Still, other students in my class prefer sources completely outside this list. Anyways, these are the resources I found most helpful during M1 year and they worked for me. You know yourself and your learning style best, so go off of that. Every person has a different preference on which sources to use for each block! To each their own. My advice – find what works for you and roll with it.

As for other miscellaneous supplies, **DON'T BUY ANYTHING UNTIL AFTER ORIENTATION!** Lab coats and scrubs can be useful for Anatomy Lab. Very few people wore lab coats during lab and they really aren't necessary. Scrubs are FREE from the hospital and can be swapped out between labs easily (Ask an M2 and we will show you where to get them). You will be provided with a stethoscope during orientation week. Other supplies that you may purchase are diagnostic kits (otoscope & ophthalmoscope), tuning forks and reflex hammers. Most of these are available in the simulation center and in exam rooms during ACE; thus, I would not spend the money unless you feel the need to have a home examination kit. I recommend buying supplies later once you've gotten your bearings on what you'll actually need and use.



# Computers

By Kevin Ponciroli and Nathan Ratchford  
Updated by Kelsey Knobbe

## Computers and Medicine

You really cannot expect to successfully complete medical school without a computer (and who doesn't own one these days anyway?). They will be vital to your education and your career. Some of you are likely asking, "Can I use my iPad?" The answer is yes and no. Tablets that can access Blackboard and run PowerPoint can be used for lectures, notes, and studying. It would, however, be difficult to type your CRE exam using a small tablet keyboard and unfortunately the campus IT services do not support printing from an iPad. If you refuse to get a laptop, the library is your savior. The medical school library contains a multitude of great computers that allow you to do all sorts of things. However, owning your own laptop gives you all these plus the convenience of being able to complete these tasks when you can find time for them, not when the library can find time to be open.

It doesn't matter what kind of laptop you get—Mac, PC. It just has to have wireless internet and be able to have the print server applications installed on it (so Mizzou can properly bill you for your printing pleasures). Either way, be sure that your computer meets all of the hardware/software requirements sent out by the OME so that you can keep up.

## Important Websites:

### Health Science Library

<http://library.muhealth.org/>

The *Resources for Medical Students* section can connect you to great sites that will help you complete your objectives and answer those questions on your clinical reasoning tests.

### MyZou

<https://myzou.missouri.edu/psp/prd/?cmd=login>

This website contains your financial aid as well as other administrative information.

### Canvas

<https://courses.missouri.edu/>

All of your lectures and handouts for class and studying will be available here. There are many other resources that can be found on Canvas such as your PBL and IPC block calendars and study strategies to help you be successful throughout your first year. Through Canvas you can also contact MU Tech support, request an academic, M4 tutor or set up a meeting with someone from the OME (such as Dr. Laine Young Walker) through MU Connect.

### Box

<https://missouri.app.box.com/login>

Box will become your best and worst friend this next year. Box is where everyone uploads their study guides and powerpoints for objectives each week. Throughout the block, nice, generous classmates will likely upload supers (more on that later) and other study materials that they want to share. If you are as lucky as our class was, towards the end of the block right before exams, Box will run out of space that MU Tech has allotted us. No worries, a quick email from your class president to Tech support will fix it (hopefully) pretty quickly!

## Health Sciences Library

Updated by Kelsey Knobbe

Block one, day one: You've just been handed your first PBL objective. You're panicked. You're confused. What do you do? Head to the library...welcome to your new home!

The hours for the library are:

Monday – Thursday: 7am – 10pm

Friday: 7am – 6pm

Saturday: 10am – 7pm

Sunday: 12pm – 10pm

The hours are extended during exam weeks. For hours of operation during breaks see the website: <http://library.missouri.edu/hours/?id=307>

OK, so your conscience gets the best of you and you decide you should at least start your objective before you go home and call your mom to tell her about your first day of med school. Where do you start? Although there are many places you can look, the most popular source for Block 1 is the Health Science Library Website, <http://library.muhealth.org/>. You can find a multitude of sources under the “Resources For...Medical Students” tab, but I suggest starting with the “Quick Links” section:

- **Access Medicine** – This online collection of medical texts includes *Harrison's Principles of Internal Medicine* which is considered the ultimate resource by many med students. The online version allows you to search quickly and include figures without the need for a scanner.
- **UpToDate** – A resource for concise information on diagnosis and treatment of diseases, procedures and pharmacology of some drugs. This is a good (and much used) source for information but beware that the information is not always correct.
- **Clinical Key** – This is another sweet collection of medical texts. One awesome book for pathology can be found there called Robbins and Cotran pathologic basis of disease. This is one of the bibles for path.
- **Ovid MEDLINE** – With this, you can search journal articles for a specific subject. You'll be able to link to most of the full text online either as PDFs or clicking FindIt@MU. For the few times that you can't, bound journals are on the top floor, the most recent ones are on the main floor, and the issue you want is always being bound. MEDLINE is a great resource, but we suggest that you start with textbooks and the above databases first. MEDLINE is best when you need very specific and very current information. Limit your searches to English language and review articles (under the limit menu)! And, the librarians love to show students how to search.
- **Dynamed** – This site gives you a short summary of any condition you are researching. It also has links to a variety of research journal articles, making it a great source for exams.
- **eMedicine** – This site is great for looking up diseases and finding epidemiology, clinical signs and symptoms, basic pathophysiology, and basic treatment. The pages are updated and in an easy format for searching a differential list to find the diagnosis.

Also, don't forget that the most recent textbooks are on permanent reserve. You can check them out for two hours at the circulation desk with your student ID

Need help with any of this library stuff? The reference librarians at the information desk know all. Don't hesitate to ask them!

If you hate taking notes, you can photocopy the information you need in the copy room (on your right when you enter the library). When you're done with the books, put them back where you found them.

So, you've got all your information and you want to type-up an outline or a handout. You can type this up on your own laptop or you can head downstairs to the first floor of HSL. Most of the newer computers are down here and it is usually a quiet spot to study and work on objectives. If you choose to work on one of the school's computers, you will either need to bring your USB drive to save on, email it to yourself, or save in the user file (but be careful, sometimes this can get erased!). Scanners are available if you'd like to add figures.

If after all this you still feel like studying the day's lectures (it's the first week, go home!), there are medical school study rooms on the third floor. If you want to use these, contact the OME for a combination code to unlock the room. Just be sure to shut the door fully once you are done so our study rooms aren't over-taken with nursing, pharm or undergrad students! Soon you'll be a library genius, and you can help the PBL-deprived residents and docs do their research!

## **Four People You Should Know**

By Tim Maus  
Updated by Kelsey Knobbe

In no particular order, some important people you need to know are:

**1). Cheri Marks** is the financial aid guru for the medical school. Right away you'll want to meet Cheri, because she is the most essential person in making sure you have enough money to cover anything from your extra caffeine for exam week to that you-cannot-live-without-it laptop. Her office is in LC356 in the OME (third floor of the PCCLC). She will talk to you at the beginning of the year about financial aid in general, and will have an entrance interview with each student to go over the particulars of each student's financial aid. The interview may also be completed online with the loan counseling. You are at medical school to learn medicine, not worry about money...Cheri Marks will see that you don't have to. If you have questions throughout the year, feel free to email Cheri at [marksc@health.missouri.edu](mailto:marksc@health.missouri.edu)

**2). Dr. Laine Young Walker** is the Associate Dean for Student Programs and Professional Development. Dr. LYW is very friendly and will help you with anything from lending an ear, to helping you work through any concerns you may have. She's heard it all, so don't be afraid to talk with her if you have a concern! She's always working to improve students experience here at MU School of Medicine, so if you have any questions at all, feel free to send her an email or stop by her office! Dr. LYW office is LC351 (third floor of the PCCLC) and her email is [youngwalkerl@health.missouri.edu](mailto:youngwalkerl@health.missouri.edu)

**3). Dr. Mark Costley** One thing that is new and exciting about MU SOM is that we have two clinical campuses for M3 and M4 year. Students have the option of staying in Columbia, MO or moving down to Springfield, MO for their clinical rotations. Dr. Mark Costley is the Interim Associate Dean and Chief Academic Officer for the Springfield Clinical Campus. If you have any interest

in the Springfield campus, he is a great resource to get additional information from. You can [contact him via email at costleyc@health.missouri.edu](mailto:costleyc@health.missouri.edu) if you want more information.

**4). Dr. Kathleen Quinn** Dr. Quinn is the Associate Dean for Rural Health. If you are interested in rural health for your future career, are considering a rural rotation during your clinical years (M3/M4 year) or are a Bryant Scholar, you will likely get to know Dr. Quinn quite well. Feel free to stop by her office, LC346 in the PCCLC or email her at [quinnk@health.missouri.edu](mailto:quinnk@health.missouri.edu) if you ever have any questions!

# WELCOME TO MIZZOU MED

## Weekly Overview

By Sarah Jeffery

Update by Kelsey Knobbe

So, you've heard that we are not like a traditional medical school here at Mizzou. What exactly does this mean for you? Non-traditional means less lecture time! Now how great is that?! Your schedule is set up to maximize your group and individual learning time. It gives you ample time to get your objectives done or study for the ever-looming exams. Here is an example of a typical week:

Monday – 1 hour of lecture, 3 hours of PBL, (lunch break), 2-3 hours of IPC lecture

Tuesday – 1 hour of lecture, 2 – 3 hours of anatomy lab

Wednesday – 1 hour of lecture, 3 hours of PBL

Thursday – 1 to 3 hours of lecture and/or anatomy lab

Friday – 3 hours of PBL, 1 hour for case wrap-up

\*schedule subject to change based on block\*

In addition, you will also be spending about 2 hours with your lab group doing IPC small group sessions. This will occur once a week, either on Tuesday, Wednesday, Thursday, or Friday afternoons, depending on your lab's assignment – check canvas if you aren't sure of your lab's assigned time!

## PBL...What is it Exactly?

By Kevin P. Boyd

Updated by Kelsey Knobbe

PBL is Patient-Based Learning. For the abbreviation-challenged, this translates to learning concepts through real-world applications as opposed to a lecturer speaking for several hours while cradling his overhead projector. Don't get me wrong, you still get lecture time but just not as much as your friends at other medical schools. The end result is that you start to think like a doctor and you have more fun in the process. So, how does it all work?

Each person in the small PBL group has different responsibilities on different weeks, and the tasks rotate. For instance, one week one person will be the **quarterback**, thus he or she calls the plays for that week and lead the group through discussions. Another person will be a **scribe** and, with the group's help, will write information encountered in the case and objectives on the whiteboard, or the giant TV screens that hook up to your computer. The **dictionarian** (not a word, I know) will look up medical jargon that sounds like a foreign language that you encounter as you try to crack your cases. Typically, the quarterback will bring breakfast on Friday. **\*\*First QB – be sure to bring something yummy and set the bar high for the next QBs in future weeks!** On a more random note, for Friday breakfasts be sure to ask your PBL group about food allergies and diet restrictions first. **\*\*** Your lab facilitator, usually a faculty member, sometimes a 4<sup>th</sup> year student, will be there at each lab session and may be very involved or minimally involved. Regardless of their style, the facilitator will make sure that the group considers many possible disease processes when coming up with hypotheses, but he or she will also keep the group on track if the group wanders too far from the topic at hand during discussion.

*Monday:* Through this three-hour session you are introduced to the patient in each new case through 3-4 sheets of useful information (history, physical exam, lab results, etc.). You receive one page at a time, have your scribe write out **pertinent info**, and form a list of **hypotheses**—possible causes of the patient’s condition. You then consider how you will **manage** the patient and what **tests you would like to order** to help prove or disprove some of your hypotheses. Hopefully, you will find some of the labs you wanted on the next page handed to you by the facilitator, and thus the learning continues. As you discuss the case with the new information given to you, you will encounter lab tests, drugs, and diseases that may be unfamiliar to you. The scribe keeps track of these foreign and unfamiliar concepts – these will become your student learning objectives (things you need to research and understand more about). At the end of the session, each person selects a learning objective to research and makes a hand out or powerpoint for Wednesday to help explain the concept and important “high-yield” information to the group. Objective topics will vary based on your group and can be anything from a FANA assay, to discussing what strategies children use to cope with a chronic illness.

*Wednesday:* Your quarterback will review the case and ask you to present your objective either during or following the case summary that he or she makes and reads aloud. Usually, the quarterback arranges the objectives in an order that makes the objectives easier to follow: for instance, the biochemistry or physiology of an organ or an organ system may be presented before the objective on the disease processes that affect that system. After all information has been presented, you might discuss the case in light of the newly found information and then delve into the new set of sheets that contain additional information about the patient. By day’s end, you will likely have come to a diagnosis for the patient and the facilitator will pass out objectives over information the faculty wants you to know (these are your faculty objectives and this stuff is important to know!). During your first year all lab groups receive identical faculty objectives to research for Friday. In the second year students generate their own learning objectives for Friday (but you don’t need to worry about that yet). On Friday, you will give a presentation of the learning objective that you have chosen to research for your group.

*Friday:* Usually, objectives are presented, questions are answered, and a few sheets may be handed out that neatly tie up the case. The morning starts off, however, with breakfast supplied by someone in your group (usually the quarterback). Don’t forget to bring breakfast. Once all business is handled, you will go to case wrap-up, which aims to tie the info from the case together and to answer any further questions. It is important to write down questions for the case wrap up, especially if your group was struggling understanding a lab value or why a test was ordered during the sheets from earlier in the week. Now that you have finished the week’s case, you may notice that the lectures for that week and case correlate to a certain degree. Congratulations...you have just been exposed to the madness (the good kind) behind the method that is PBL. You will be told frequently that the point of the PBL system is not to get the diagnosis; rather, it is to understand the *process* of PBL and to use this process during the exams, as well as apply it towards your eventual practice. You will also, undoubtedly hear the phrase “Trust the process” over and over again from older students, throughout your first year. Honestly though, trust the process! I swear it works!

*Objectives:* They should be concise and, at the same time, fully answer the objective...no more, no less. A thirty-five-page objective is not welcome (yes, it has been done). You will see that after 8 weeks and with ~16 objectives per week, you will have a lot to study for test week. Be nice to your fellow lab mates...or they will hate you by week 8. Usually, 3-5 pages for your

study guides will suffice, but there may be exceptions that require more pictures and explanations.

*Resources:* A lot of information is readily available on the Internet. The problem for the researcher becomes sorting out what is reputable and reliable. Good sources include journal articles (primary resources are preferred), books, AccessMedicine, UpToDate, review articles, etc., all of which can be found in the OVID or MERLIN databases, to which you will be introduced by the helpful librarians. Check primary literature to get the current information from experts. Search engines like Google may lead you toward good information but should never appear as a source for your objectives. I've especially found Medscape to be a helpful resource during my first year. Your textbooks will also prove to be useful for some of the objectives. If you use a website, use the actual web address as a reference so your classmates can get to it if need be. You should have at least two sources for every objective, and do not forget to list them at the end of your objective study guide and presentation. The citation should be clear enough so someone trying to look up your source will be able to find it. And for the English majors among you, much to your chagrin, internal citations are unnecessary.

## **Guidelines for Patient Based Learning (PBL)**

The effectiveness of PBL depends upon the understanding and participation of students and faculty in the PBL process. Some of the elements of this process are:

**Discovery** – students are presented with new information

**Active, student-directed learning** – students determine what they need to learn, then carefully research the problem and teach other students what they have learned

**Teamwork** – more than simple acquisition of knowledge, PBL requires communication skills, judgment, critical evaluation, and professionalism

The following guidelines are intended to ensure a high quality PBL learning experience for students.

- Students shall attend all PBL sessions and shall be prompt in their attendance.
- Students should avoid activities that gain or provide unfair advantage to themselves or others
- Students shall actively participate in PBL sessions, such participation to include a conscientious effort to research and clearly present objectives
- Students shall utilize appropriate resources in the preparation and presentation of objectives, that is, resources that are current and of high quality
- Students shall not solicit or receive information about a PBL case from students or others who have previously utilized that case
- No student who has already been tested on the knowledge content of a PBL case shall provide information to a student who has not been successfully tested on the case.
- Students shall strive to function as a cooperative, collaborative group
- PBL group members shall participate in evaluation of effectiveness of individual and overall group function
- Facilitators shall be prompt, attentive and engaged in the PBL process
- Facilitators shall facilitate the group's process and provide constructive feedback in an encouraging manner
- Facilitators shall be prepared for PBL case study
- Facilitators shall not provide faculty objectives before the designated time of their presentation to students in first year. Facilitators shall not provide objectives to students in second year. Facilitators will, through open-ended questions and comments, prompt and guide students to explore appropriate issues and learning outcomes.

### **Gross Anatomy**

By Nate McNeil

Updated by Kelsey Knobbe

Gross anatomy is what most people picture to be the core medical school course. In my personal opinion, even if you're not an aspiring surgeon, gross anatomy is a crucial part of medicine. A doctor who doesn't know anatomy is like a mechanic who doesn't know what different parts of a car look like. There is more to knowing anatomy than just memorizing the verbal descriptions of the human body. There is a tactile and visual memory that must be



assigned to the verbal descriptions for a full mastery of the subject. This is the added dimension that gross anatomy provides. Here at Mizzou, we dissect cadavers almost every Tuesday and Thursday throughout all four blocks of M1 year. The course information focuses on the back and arm, abdomen, thorax, neuroanatomy including the head and neck, pelvis and legs.

There are many different approaches to studying anatomy. Since many people learn different ways, I will try and provide a number of strategies and let you decide what works best for you. At the beginning of each block, you'll be given a check-list of the items you'll be responsible for knowing. The way anatomy is tested, you must first be able to visually identify and name what is tagged, then answer a second question as to its function or clinical relevance. You aren't allowed to touch or move anything during the anatomy exams. A problem some students run into is that they can identify everything on their cadaver, but have trouble applying what they know to other cadavers. For exams, any and all dissected cadavers are used for labeling and identification. To solve this problem, many students will go in on the weekends or on free afternoons to look at other cadavers (the anatomy room is open 24/7, but I personally don't recommend going in at 4:00am because that's just creepy...). This time can be used to review everything you've learned that week, either alone or in small groups. DON'T put this off! The points you earn on the anatomy portion of the KBE can make the difference of passing the entire KBE test.

**Test taking tips:** Anatomy in the past was easy points. More recently it has become more clinically based, not just simple identification, but rather complete integration into your knowledge base. The anatomy portion can be one of the more difficult portions of the knowledge based test. You will likely have thirty completes and one hour to complete this portion. The format of the test is similar to that of other lab practicals you may have had in the past. An approach that worked well for me in the past was to review in the lab with friends on different cadavers, but also thoroughly review the anatomy lectures! Good luck!!!

## **Introduction to Patient Care (IPC)**

By Sarah Jeffery

Updated by Kelsey Knobbe

In addition to learning the basic sciences and disease processes in PBL, it is important that you learn about the clinical aspect of medicine. IPC is a good chance to learn the skills that you can't learn by simply reading a book or going to lecture. IPC consists of a lecture or two at the beginning of the week to learn about a general topic. Then, you will have a small group session with your lab group and a faculty member one other afternoon that week to work on practicing your clinical skills.

First block is when you work on your interviewing skills. You will take turns playing the role of doctor and patient. It seems silly at first because you are asked to role play, but if you can get past the 'acting' aspect of it, you can really learn some valuable techniques. Second block is dedicated to learning how to do the physical exam. You learn everything from listening to the heart and lungs to learning how to use the otoscopes and ophthalmoscopes to look in the ears and eyes. You also learn how to palpate and how to perform the ever-challenging neuro exam. Third block is entitled "breaking bad news." Many find this to be one of the more stressful IPC times. It is similar to first block in that you will take turns being the patient and doctor. Instead of interviewing them though, you skip right to the heart of the interaction. In addition to breaking bad news, you also learn how to detect, interact with, and help those suffering from substance

abuse, physical abuse, and sexual abuse, to name a few. Although the topics are very upsetting and uncomfortable at times, it is an aspect of medicine that we will face in the future, and a necessary evil for us to learn. Fourth block changes in tone dramatically. You may not visit the simulation center at all this block. You will learn about epidemiology and how to interpret different studies that you will inevitably come across.

At the end of each block you will be given a written exam over IPC. With the exception of Block 4, you will also have a practical exam where you will dress nicely, put on your white coat and name tag, and practice the skills in the simulation center that you have learned in front of a faculty member who will grade you on your performance. During your first year, you spend considerably less time in IPC than PBL. This does not mean however, that it is any less important. You still have to study for it, and you will definitely need the skills you learn down the road. You will start having patient interactions beginning in Block 2...and will be surprised at how thankful you are to have had IPC.

## **Ambulatory Clinical Experience (ACE)**

By Joe Turner

Updated by Kelsey Knobbe

After the overwhelming workload of block one makes you wonder how on earth you can possibly have any more demands added to your schedule, along comes block two and the first ambulatory care experience (ACE) for many of you. Although it may seem daunting to make time for the additional course, seeing patients and going to clinic will help keep you motivated as you begin to lose sight of why you decided to go to medical school. ACE can be a very valuable learning experience. During this time, you may observe physician-patient interactions, see what it's like to welcome a new life into the world, perform a rectal exam, or do some other wondrous feats of medical magic. This experience is in the afternoons once every other week during the block. Most physicians are happy to help you with your experience, and don't worry, no question is too stupid to ask. Hopefully your preceptor is young enough to remember being a stupid first-year med student him- or herself. During blocks 2 – 4, ACE is assigned (you don't get to pick whether you are with a family med doc or an OB/GYN etc.), but during your second year, ACE can be specifically requested, depending on what kind of medicine you would like to explore and the availability of preceptors.

**What to bring:** First of all, you must dress appropriately to show respect for yourself, your patients, and your colleagues. Don't forget your white coat, stethoscope, and name badge. If there are questions about what attire is appropriate during your ACE experience don't hesitate to ask a faculty member or older student. If you are male be sure to wear your tie unless otherwise instructed to do so. Don't worry about taking your otoscope, ophthalmoscope, or tuning fork (for those of you overachievers who bought them in the first place). The clinics all have the former and, frankly, you will not need the fork for anything during year one. Take a pen and a small notebook. If there are any questions that you want to remember to ask later, these items will facilitate your memory. Otherwise, take a smile, be gracious to your preceptors, and enjoy the experience!

## Exam Week

By Sarah Chittenden and B.J. Schultz

Updated by Kelsey Knobbe

During your first year, Monday will host the Clinical Reasoning Exams (see next section). Tuesday is a free day/study day. Wednesday morning usually involves a 4 hour multiple choice/short answer exam for IPC. You will also be given a 15 minute IPC practical, which could be given on Tuesday, Wednesday or Thursday (your PBL group will be assigned a time-slot one of these days). Thursday is a free day/study day (unless you have your IPC practical then), which is great because you can study for Friday...the day of the dreaded Knowledge-Based Exam.

## Clinical Reasoning Exams

By Sarah Chittenden and B.J. Schultz

Updated by Kelsey Knobbe

For some, the most unpredictable and anxiety-inducing aspect of exam week is the clinical reasoning exam (CRE). Here are a few words about what to expect, and some helpful hints about how to get through the day. This examination consists of patient presentations and a series of questions requiring analysis and synthesis of information. Clinical reasoning examinations are typically "open-book" tests requiring library research but may take other formats. The past couple years, the OME has been working to restructure the CRE so there is a high likelihood that your CRE format will be different than what we older students have experienced. **You will learn details regarding the examination format during orientation week or the first week of class.**

Based on how CREs have been formatted thus far, you will likely receive two cases which will include a history of present illness, review of systems (ROS), physical exam, and initial labs. There are questions to answer; the most common two are "What are your hypotheses?" and "What are the next steps in the management of this patient?" Often the question will ask for your top hypotheses (3-5). These should be the top hypotheses that **BEST** fit the patient profile based on the information you have received, and are the most likely and best supported. For your differential diagnosis, be sure to use the pertinent findings from the history, physical examination and labs to explain why each of your hypotheses could be the correct diagnosis. If there are pertinent negatives, give those too. It is important to have a well-supported argument for why your hypothesis is feasible but you certainly can't leave out or ignore the lab results or findings from the physical examination that "rule down" this hypothesis. For management, provide steps in treatment based on each differential diagnosis. For example, if someone comes to the ED in a coma, don't forget about fluids and serial labs. Don't forget psychosocial aspects as well – such as how to help the family members cope with this diagnosis. If instead the patient is coming in for a heart attack and tells you in the history that he is a smoker, you will eventually want to address this health risk. For diagnostic steps, order what you think is pertinent to the case. Just be sure to be explicit about what you are looking for and how it could help narrow your differential. What findings would "rule up" your differential and what lab findings are you asking for that could "rule down" your differential? The questions will include recommended page limits. These are provided to help you limit your answer to the most relevant and best supported hypotheses and next steps.

There are often two to three additional questions after you have come up with a differential diagnosis, and have listed next steps in management or diagnostic tests you would like ordered. Often, these questions will require you to think critically about how you came to your hypotheses and then ask how (if at all) your differential would be different had you also received for example, a high creatinine laboratory result or had the patient been experiencing seizures in addition to mental status changes. These questions can seem difficult and it may very well be that you have no idea what the correct answer is or what the grader is looking for. It is important to do your best to give an educated answer, even if you feel that your differential diagnosis is weak or you do not fully understand the question.

One thing that is important is to take time to fully read and think through the case before starting to google random symptoms. Identify the most important findings and consider possible explanations. Pertinent negatives will help distinguish between the most and least likely. **DO NOT** try to “Guess” an extremely rare and unusual diagnosis without sufficient supporting evidence unless all more likely and common diagnoses have been all but ruled out. Don’t worry about other people typing the whole time, it is important to take time to think and prepare what to write.

If you feel overwhelmed and don’t know where to start, find one or two things about the case that you think you know a little about and work from there. Or make a list of the findings that seem especially peculiar to you and work off of that. Make certain you understand what is going on with the patient. If there are any findings you are unfamiliar with, research them from a physiological standpoint, do not look up possible diagnoses to explain them first. Try to explain as many of the most critical findings with each hypothesis that is reasonable. Avoid searching for the strange and unusual first. When the common and most likely are ruled down appropriately, only then is the rare and unusual appropriate to consider. It is important to make sure that the labs you ask for, your hypotheses, and your management of the patient flow logically.

### **Helpful test-taking tips**

1. Bring food! Even in the library. Especially during your first few clinical reasoning exams, you may be too worried to make time to break for lunch. My personal favorites are chocolate and trail mix, coffee and Cheez-Its; they seem to give me a much-needed boost in the middle of the exam. Also, FAMS usually has breakfast, lunch, and snacks for us on test days!
2. Library or PBL lab? Where you take the test is up to you, although you want it to be quiet. If you are planning on using a school computer, get there early if you want dibs on a particular one. Some people bring in their laptop from home, which can be used in the labs or the library. **Save often!** Save in multiple media! It is a very good idea to increase the frequency of your autosave function on your processing software. (Also very helpful while preparing objectives.) Make sure that the laptop you are using for your exam has been configured to print from whatever location you choose to take your test in (i.e. you need to set up an additional printer on the Print Smart application to be able to print in the HSL basement!)
3. Take a break every now and then, even if it’s just taking an extra minute or two during your bathroom break. This will help you stay focused.
4. List your sources at the end of each part. Be very specific: not just “Harrison’s” or “StatRef.” Be sure to include the name of the author, the title of the article, and its source. The library has a webpage that demonstrates how to cite sources- it is good to have this handy during the exams. When possible, include page and edition numbers. Remember your primary

resources! The graders will deduct points if you forget your sources or are not meticulous when listing them. Do not list “First Aid” as a source!!!

5. Do not fret if you don't get the correct diagnosis. This is a test of your clinical reasoning ability. As long as you show a logical thought process and your management of the patient as well as your hypothesis are logical, you should pass.
6. It is helpful when you are studying for this test and going over your cases, to remember the main disease/pathologies on the differential when a patient presents a certain way. For instance, if a patient presents with shortness of breath, you want to consider pulmonary causes (pneumonia, pulmonary embolism) and/or cardiac involvement (MI) or an immune system process (asthma), with specific disease processes in mind. Remembering important differentials will give you a good list of hypotheses as you progress through the test.
7. Be complete in your answers and show your thought process. If you think a diagnosis is plausible, but not likely due to “x”, say that. If you think you should give IV fluids, but don't know whether to admit, say that.
8. On the night before the test, remember to create your template for the exam. Or, at least make sure you have a game plan of how much time you are going to spend reading the exam, researching to come up with a differential list and answering the questions. One of the most difficult aspects of the CRE is the limited time frame. You will feel rushed and it is important to manage your time effectively throughout the exam, so that you have time to complete BOTH cases. Once you decide on a game plan, find a way to relax and get a good night's rest. There is really nothing you can learn in the last 24 hours that will make up for being too sleepy to think clearly.

### **Things NOT to do**

- 1) Spend too much time reading and not enough time thinking.
- 2) Focus too quickly on one diagnosis—instead, try to include a little about all the possibilities.
- 3) Get too discouraged if you feel totally confused or not sure of a correct diagnosis —there are probably at least 80 people who are confused with you and silently freaking out.
- 4) Get frustrated if you find out that you didn't get the right diagnosis or that you forgot to order some tests— it's not the end of the world, I promise!
- 5) Forget to include your sources at the end of each section (an easy way to lose points)
- 6) Wait until the last minute to print your work. Most likely, 90% of your classmates will also be trying to print and this causes a traffic jam at the printer.
- 7) Freak out if the internet stops working. Everyone is in the same boat, and you'll probably get extra time at the end – if you do have ANY technical difficulties during the exam though, go up and tell them on the third floor so that you are not penalized some way for this.

## **Knowledge Based Exam**

Updated by Kelsey Knobbe

Friday is the knowledge-based exam (KBE). This is by far the exam that gives me the most stress and causes me to lose sleep during exam week. Although taking the KBE feels dreadful, and seems like it will never end, I promise it will and chances are pretty good that you will pass. So study hard and be well prepared, but don't stress too much! To give you an idea, the KBE is closed book (hopefully by now you have some knowledge), lasts pretty much all day, and consists of multiple choice/short answer/laboratory identification. The histology practical

starts at 8am, goes until 9am, and consists of about 20 multiple choice identifications. The PBL and lecture portion of Friday's exam begins as soon as you turn in the histology practical, and the anatomy practical is (often) in the afternoon (different labs will go into the anatomy lab at different times). Multiple choice questions are based on the material presented to you in lecture (~40%) as well as objectives presented to you with each PBL case (~60%). The anatomy practical consists of tagged structures on the cadavers. You will either identify the structure or answer a question about its function, blood supply, innervation, or embryological origin. As part of this exam, you may also be asked to identify structures on cross-sections, skeletons, or radiographs (x-rays, CT, etc.)

## Studying for Exam Week

By Marcy Swogger

Updated by Kelsey Knobbe

**WHO?** Study on your own, with a friend, or in a group. Do whatever works best for you. One method that seems to work well for a lot of people is studying on their own first, to get a basic understanding of the material. Then, join up with a friend or group to discuss everything and quiz each other. It's a good way to be comprehensive and really master the material.

**WHAT?** What should you study? Study your lecture notes as well as all of the PBL objectives. About two-thirds of the test is based on PBL cases, so it is very important to understand all aspects of the case, why certain clinical decisions were made, as well as all of the objectives. One helpful method is to find a good review article (or two!) for every case that covers the main aspects of the diagnosis (including epidemiology, clinical presentation, differential diagnosis, pathogenesis, treatment, etc.). The exam is multiple-choice and many questions will be clinically-based vignettes. This is to test your ability to apply the concepts you've learned to real clinical scenarios. In Blocks 1 – 4, there will also be practical tests for anatomy and histology. These parts of the test can deliver easy points, but you *must* put in the work to learn it all! Don't let these wait until week 8!

**WHEN?** When should you start studying? This varies from person to person. Some start from day one while others wait until much later in the block. My recommendation is to keep up the entire block by reviewing lectures every week. Also, get a group together with people from different labs to review the PBL case every week. This way, you stay on top of the cases and you also get input from other groups (they may have talked about something your group missed). Start your more intensive studying no later than week five.

**WHERE?** Where should you study? There are plenty of places to do your studying—PBL labs, the library, your apartment, a blanket outside. Try out a few spots and you'll find what works best for you.

**WHY?** Sometimes in undergrad you could get away with not studying very much and still do well in a class. Don't expect to be so lucky in medical school. There's just too much to know! Basically, if you don't study, you won't pass!

**HOW?** You obviously know how to study otherwise you wouldn't be in medical school! You know what works best for you. That being said, however, you will probably study more than you ever have before, so you might need to tweak your study methods a little bit. Here are just some suggestions.

- Notecards – Rewrite key points from lecture notes and objectives, then quiz yourself throughout the block. This works well if you write note cards every week and start studying them around week 6 or 7.
- Review sheets – Create a comprehensive summary sheet for every PBL case, including a review article. Go over this several times before the exam. Making review sheets of lectures is also very helpful.

- Multi-task – I like to study while doing other things (it helps me feel productive). For example, I could be found watching Histo videos or reading First Aid at the Rec Center. Sometimes, I read IPC material while biking or doing the elliptical!
- Find a friend – I think it helps to study with someone else. Then you can ask one another questions as well as quiz one another on important topics.
- Take breaks – Get up, walk around, take a trip to the coffee shop. Give your brain a break at least every hour. It can also be helpful to change locations every few hours; it's kind of like tricking yourself into thinking that you've just started!
- Make summaries of objectives – Find a group of 6 – 10 people who are willing to put in a bit of work over the weekend. Each person takes 1 or 2 objectives to summarize. Not only does this give you a smaller, condensed version of each objective, but it helps you in case something important wasn't covered in your lab.
- Class web sites – Due to ensuing technology, lecturers have been providing CDs and DVDs on topics such as histology, neuro-anatomy, and microbiology. Previous years have taken these extensive videos and trimmed them down to sizable PowerPoint reviews and quizzes. They then post these studying tools for everyone in the class to utilize. In addition, students post their objectives, as well as individual study guides, to the class website (Box).
- Stay organized! With all this information, keeping it organized is key. Most people use binders to keep all the cases and lectures organized, but do whatever works best for you. If you start off in week 1 keeping all your papers together, you'll thank yourself in week 8 when you're frantically trying to cram everything into your brain.

## **Make-up Exams/Remediation**

If you are ill, seriously injured, or incarcerated during exam week, you should immediately contact the Office of Medical Education (573-882-9219). Depending on your particular problem, you will receive an Incomplete and a make-up exam will be scheduled at the discretion of the block director. If you receive an unsatisfactory grade on a block, in most cases you will be allowed to take a remediation examination to rectify it. These examinations are usually scheduled during block breaks and in June. Students are permitted to review examinations and submit a written appeal if they disagree with the grading.

## **When Things Go Wrong**

By Sophia Abaricia  
Updated by Kelsey Knobbe

Let's face it—medical school is not easy. This combined with the possibility of bad test days, lack of sleep, extraneous circumstances and life that is still going on around us will inevitably result in some people receiving an unsatisfactory grade during exams. The most important thing to remember is that it is not the end of the world...and to be honest, many students who have come before you have had to remediate an exam at some point in their medical education. Accept it, and move on. It does not define your future in medical school, so please don't think that it does! To handle remediation exams, the OME goes to great lengths to help students with these difficulties. Here is how the remediation process works...

The scores required to pass exams are as follows:



- |  |                  |
|--|------------------|
| 1.) Clinical Reasoning Exams           | 70%              |
| 2.) PBL and IPC Facilitator Evaluation | S (Satisfactory) |
| 3.) Knowledge Based Exams              | 65%              |
| 4.) IPC Exams                          | 70%              |
| 5.) IPC Sim Encounter                  | S (Satisfactory) |

If you fall below these percentages you will receive an unsatisfactory grade (U). One of the first things you will need to do is make an appointment with Dr. Laine Young Walker, Associate Dean for Student Programs. Don't be intimidated; she is a real advocate for students and is there to help. Next, go to the basement floor of the Health Sciences Library and look over your exams. If you feel there was an error in grading or you deserved more points for some particular reason, you can appeal your grade. An appeal can be made in writing during the 1<sup>st</sup> week after grades are released. Be careful and be sure to turn in your appeals online by the deadline outlined! Appeals for Clinical Reasoning Exams are considered by the block director and the person who graded your exams. Appeals for multiple choice exams are made to a group of lecturers and faculty who are knowledgeable about the material covered in that exam.

If you did not appeal your grade or your appeal did not raise your percentage high enough to get a satisfactory grade, the Committee for Student Promotions (CSP) steps in. The CSP is composed of facilitators, lecturers, faculty, and one student representative from each class. It should be stated that everything discussed by the CSP is confidential, and the purpose is not to weed people out of medical school (we went through enough of that in trying to get in)! The CSP does make recommendations to the Dean on what happens to students if they receive unsatisfactory grades or need a leave of absence. No matter what the CSP recommends, the Dean has the final say and must approve all recommendations.

The recommendations are as follows: One unsatisfactory grade will result in a recommendation to remediate/retake the exam. This usually occurs during the winter, spring break, or summer (typically in late May or early June). Two unsatisfactory grades result in a recommendation to retake the failed exam and to be placed on academic probation. Once a third unsatisfactory is reached you are still required to remediate exams. However, remediation of the entire year is a consideration as well. Rarely is dismissal from school recommended instead. Dismissal from medical school is not a decision taken lightly. The CSP considers many aspects such as grades, facilitator/tutor evaluations, and the interactions members of the CSP have had with you. Students are also requested to come and speak to the committee to explain why they feel exams have not gone well. In addition, your class representative and Dr. Laine Young Walker can come to bat for you. But the only way they can do this is if you let them know your side of the story, so be sure to talk to them!

One final thing to mention is the following: there are tutors provided by the OME if things get particularly difficult. They are available to any and all students and they can be extremely helpful. The tutors are fourth year medical students, so they know precisely what we are all going through and they know exactly how to help.

Okay, one last thing...if you have any kind of disability that may infringe upon your test taking, studying, etc., please let the OME know so assistance can be provided.

So remember, while this may seem like a terrible thing to happen, you are not alone. We are all here to help, so please do not try to do it on your own. Each of us has struggles that we have to deal with while trying to stay focused on our studies. You will soon find out that your

classmates become like a family and we can help each other one day at a time. Medical school is great. Take each moment as it comes, do your best, and you will be just fine.

### **Hearing Committee**

Here at Mizzou, we take honesty very seriously. That's why the Dean's Office created the Honor Code. Basically, the Honor Code allows us a lot of freedom. With the Honor Code, we get to take our exams in a variety of places. For instance, PBL exams can be taken in the PBL labs or in the library. The knowledge-based exam can be taken anywhere in the entire medical school. In exchange for this freedom, the Dean's Office asks us to sign the Honor Code Statement at the end of exam week. What the Honor Code Statement says is that you did not cheat, nor did you see anyone cheating. This also includes not seeing anything that is suspicious of cheating. If you can sign the Honor Code in good faith, then you are asked to do so on the Friday of exam week. If you think, even in the back of your mind, that you may have seen an act that was dishonest, then you shouldn't sign your Honor Code. You should simply write your name on it and leave the signature space blank. When everyone is done with the exam, the two elected Hearing Committee Representatives for your class will collect the Honor Codes. They will contact everyone who did not sign a code or did not turn in a code. This will be your chance to describe to your representative the event that you saw. Your class representatives will then take into account your description of the event and, if anyone else saw the same thing, their description. If your representatives feel that there is enough evidence that a classmate did act dishonestly then they will ask you and anyone else who saw the event to compose a short letter stating the name of the person being accused, the date of the event, and a short description of the event. Then they will ask you to sign the letter and they will make copies and distribute them to the Hearing Committee (composed of 2 representatives from each class) and the person being accused. A meeting will be called where you and the person being accused of cheating will be allowed to tell your sides of the story. After this meeting, the Hearing Committee will decide if the situation merits further attention by the Honor Council.

The Hearing Committee was designed so that students conduct themselves with integrity. Not only does the Honor Code apply to exam week, it also applies to everyday life at school. For example, it is against the Honor Code for second-year students to pass down PBL cases to first-year students and so on. It was also designed so that even the most timid students can have their say in the happenings of the Committee. If a student sees anything even remotely suspicious, all they need to do is not sign their name on the Honor Code Statement and the Hearing Committee representatives should take over after that.

### **Honor Council**

By Tim Mayfield

Updated by Kelsey Knobbe

The University of Missouri School of Medicine's Honor Code has its origins in the Hippocratic Oath and the Declaration of Geneva, which are two of the vaguest collections of good-natured sentiments ever written. With overtures to ideals of honor and dignity, these canons provide no concrete plan of action when faced with the realistic stressful situations in which honor is relative and dignity is questioned. Further, these statements do not appear relevant to the medical student whose only patient contact will come in times of personal illness.

The Honor Code can be thought of as a student-specific Hippocratic Oath. It calls upon students to act according to their highest moral ideal, especially during times of high stress and

little direct supervision. During your first two years, the most important implications of the Honor Code will be the contact you have with patients during ACE and your conduct during exams. When the honor of an individual student is called into question, the Honor Code allows for a judicial process to determine if a violation took place. If the hearing committee finds sufficient evidence, then the matter is brought to the Honor Council. The Honor Code requires that the Honor Council be composed of ten people: all the class presidents, one delegate from each of the M1 and M2 classes, and two delegates from the M3 and M4 classes. The Council investigates, hears statements, rules on the matter, and makes recommendations pertaining to the accused. As stated above, the current Honor Code is fairly vague as it pertains to certain aspects of student conduct; therefore, the Council is guided to a large extent by their own moral code and may interpret the Honor Code as broadly or narrowly as it sees fit.

# SURVIVING MED SCHOOL

## Study Spots

By Angela Yu

Updated by: Emma Frank, Lisa Morris and Ebony Page

Want pita bread and hummus while you study? Want to browse magazines on your break from memorizing biochemical pathways? Whether you need to study with a gourmet cup of coffee at hand or just a spot quiet enough to hear a pin drop, Columbia has a place for you! Here are my top picks for the best places to study (in no particular order):

**1. Lakota** (24 S. 9<sup>th</sup> St., [lakotacoffee.com](http://lakotacoffee.com))

With its own roasting apparatus for the beans, Lakota offers quality coffee and a good but often-crowded environment for studying. Internet is free here, too. The wooden chairs seem abnormally large for the small tables, but if you get uncomfortable you could opt for one of Lakota's rocking chairs instead.

**2. Kaldi's Coffee** (29 S. 9<sup>th</sup> St, [kaldiscoffee.com](http://kaldiscoffee.com))

This is a nice big coffee shop downtown. Very popular and has many great tasting drinks and snacks. It is frequently packed.

**3. The Grind Coffee House** (4603 John Garry Dr & 2601 Rangeline St., [thecolumbiagrind.com](http://thecolumbiagrind.com))

Located south of campus, The Grind has recently become a popular spot to post up and spend the day studying. This cozy shop has ample tables, outlets, and Wi-Fi, along with a variety of food and drinks. It usually only gets crazy busy around undergrad finals week, when it stays open 24 hours.

**4. Health Science Library** ([library.muhealth.org](http://library.muhealth.org))

This is the place of choice for people who need complete silence to study. There are three floors to choose from, seating at big tables or individual cubicles, and study rooms on the top floor. If necessary for your PBL objectives, you can access hard copy medical journals here.

**5. Columbia Public Library** (100 West Broadway; [www.dbrl.org](http://www.dbrl.org))

The unique architecture of this library makes it one of a kind ("google image" it to see what I'm talking about). The large 3<sup>rd</sup> floor circular reading room is almost entirely surrounded by windows that offers a scenic view of Columbia and is a fun place to watch those crazy Missouri thunderstorms. Several sections of the library allow you to have food and drink, and Lakota coffee is sold in the main lobby. Only downside is that it closes at 5pm during the weekends.

**6. PBL Labs**

I recommend this more for weekend studying when there are less people coming in and out, which can turn a study session into social hour if you're not careful. The labs are nice since you have internet, your books, and usually other classmates around to ask questions. And instead of spending money on food and coffee, you can bring your own.

**7. Panera** (Broadway & 63, Columbia Mall, South Providence)

This is St. Louis Bread Company for all you STL natives out there. Free internet, good coffee and food, and free parking make this a popular study spot. During mealtimes it gets pretty crowded so bring your headphones to drown out the noise.

**8. Barnes and Noble** (Columbia Mall, [www.barnesandnoble.com](http://www.barnesandnoble.com))

The bookstore's small Starbucks café is usually quiet and located conveniently by the mall's food court in case you get hungry. Also, where else can you go on a study break and come

back with a new outfit? The only bad part is that wireless internet isn't free, but you might end up studying more when you can't be distracted by Facebook and YouTube. I know I do.

## 9. Home

Why leave home to study when you can have your own comfy chair, refrigerator, and your choice of study music to listen to? Just beware of distractions like the television, video games, chatty roommates...or a couch just begging you to take a nap.

### Other places to try out

- **Student Center** (MU campus, across from the Rec), ample study spaces
- **Memorial Union** (MU campus, across from Ellis Library)
- **Café Berlin** (220 N. 10<sup>th</sup> Street), often crowded on the weekends
- **Uprise Bakery** (10 Hitt Street)
- **Coffee Zone** (11 N. 9<sup>th</sup> Street)
- **Dunn Brothers** (1412 Forum Blvd)
- **Shortwave** (915 Alley A)
- **Starbucks** (304 9<sup>th</sup> St., 2500 Broadway Bluffs Drive, and 2901 W. Broadway)

## Balancing School and Your Family

By Simon McKeown

Updated by Marina Litvin; modernized by Emily Griffard

Often when we encounter another medical student who is married or has children, the natural reaction is to pity them/lump them into the “them/not fun/old” category. They must be so busy. How do they find time to study and take care of a family? They wouldn't appreciate an invite to a bar on...gulp...a school night. Surely there must be some major conflicts going on in their life.

What many students don't realize is that it is becoming more and more common for students to be married or raising a family while in medical school—especially at MU. Some are already parents when they begin while others become parents during the course of their studies. Still more students are married or plan to get married while they are still in school, and have the career plans of a spouse to consider alongside their own. The traditional notion, that life should be put on hold for four years until graduation, has largely disappeared. Family relationships are seen as beneficial to the student's medical school experience because they can provide a source of mental and emotional stability and support. A spouse can be a reassurance in times of stress, and children can provide a welcome distraction when studying becomes intense.

However common, having a family and working through medical school is still a balancing act. Matters of home and school will inevitably spill over into each other and the roles of parent, spouse, and medical student need to be juggled constantly to satisfy one's own needs and the needs of one's family. Some students like to keep work and home separate, but it should be remembered that spouses and families are seen as an important part of the medical school experience. There is no single game plan for achieving the right balance, since every family is different. It is important that all mature members of the family are equally committed to the coming four years of medical school and ensuing residency.

Personal commentary by Simon McKeown: For me, spending time with my family provides a welcome break from studying. My wife, Julie, has enjoyed getting to know members of the class and other spouses, and we have been able to enjoy plenty of the social side of

medical school together. Several of my classmates have served as baby-sitters for us this past year, and my children provided very willing subjects for the pediatric physical exam in block two. The financial and emotional considerations of studying while raising a family can be daunting, but the benefits can be great. MU School of Medicine has a reputation for providing a supportive environment for the “nontraditional” candidate, and this has definitely been my experience. I have received plenty of help and encouragement from faculty and fellow students. More than that, I have a wife who constantly reminds me that we’re in this together, which is the greatest benefit of all.

## **Daycare**

Updated by Angela Richmond

If you have children, you probably already know how important it is to have reliable childcare. One of the great things about Columbia is that there are a large number of working parents and student parents, so there are many options available. Daycare centers and at-home daycares are also very strictly regulated in the state of Missouri, so childcare facilities are generally very safe and well maintained.

In previous years, the Student Parent Center and the Child Development Lab, two daycares on campus, have come highly recommended. Both locations make them very convenient, and they have great facilities and programs. The Student Parent Center is for children up to three years of age and is open 7:30 a.m. – 5:30 p.m. These hours would generally work during first year, but as your schedule changes, they may not be flexible enough. The Student Parent Center is also closed for five weeks during the year and has shorter summer hours (7:30-4:00 p.m.), but if you have a spouse or family member that is able to pick up your children, it may still be a good choice. The Child Development Lab is another amazing facility that provides nearly one-on-one care. It is open from 7 a.m. – 6p.m. every day. However, the CDL has a long waiting list and there is no guarantee you will get a spot. If you are put on the waiting list at the CDL, I would recommend lining up other daycare options just in case. Bright Star Learning Center and Columbia Montessori School are other popular options that medical students have used and love. Also, many churches in the area offer daycare services that are worth looking into.

My advice with any daycare is to begin the search early. I would recommend looking at web sites, submitting applications and getting on waiting lists as soon as you decide to come to medical school, or as soon as you find out you are expecting a child if you have already started school. As I said before, there are many great childcare options in Columbia, but many of them will have waiting lists. Beginning early will ensure that you have time to tour different facilities and find the right childcare provider before school begins. A great resource to find childcare is the Child Care Aware of Missouri (Missouri Childcare Resource and Referral program). Using your information, (such as when you will need childcare, the age(s) of your child(ren), whether you prefer centers or at-home care, etc.) they will compile a list of providers that have openings, and will also include how to contact them and whether or not the provider is accredited. The service is free and can take a lot of the work out of searching for a childcare provider.

During the first two years of medical school, your schedule will be similar to that of a normal workday, so nearly any daycare facility will be able to accommodate these hours. Once you begin clinical rotations, or if you need to study on the weekends, finding childcare may be more challenging. In my family, I have a set study schedule which works with my husband’s

work schedule. When exams are approaching, friends and grandparents can be lifesavers. Upperclassmen can also be invaluable sources of information and advice on reliable baby-sitters and tips for studying with children. A former student told me that kids don't seem to mind pathology or histology slides, and sure enough, it was true. My daughter and I watched many a histology DVD together on Saturdays during the first year.

With a little planning, it is definitely possible to make it all work and also keep some balance. It's been great having a family to share the ups and downs of medical school with, as well as providing some much needed distraction from studying.

#### Student Parent Center

<http://www.studentparentcenter.missouri.edu/contactUs.php>  
(573) 882-4224

Missouri Childcare  
Resource and Referral  
<http://mo.childcareaware.org>  
(573) 445-5437

Bright Star Learning  
Center  
[Brightstar-kids.com](http://Brightstar-kids.com)  
(573) 445-2418

Child Development Lab  
[cdl.missouri.edu](http://cdl.missouri.edu)  
(573) 882-4318

Columbia Montessori  
School  
[www.columbiamontessori.org](http://www.columbiamontessori.org)  
(573) 449-5418

## Student Organizations

Don't let the rigors of studying prevent you from pursuing your interests. Many students join medical interest groups and local chapters of national medical organizations. The groups typically meet at the beginning of each block and most meetings involve a lecture and meal (most often a free one). Intramural sports and mentoring programs are very popular as well. You will hear about how to get involved with these throughout the year.

There will be an activities fair during orientation. One piece of advice: you do NOT need to sign up for everything at the activities fair. It will behoove you and your checkbook if you think about it first. The number of organizations at the fair may seem overwhelming, but don't be fooled. There are even more organizations not listed which you will have the opportunity to join!

### Student Leadership

By Anna Witt, updated by Kelsey Klostermeyer

#### **Election Procedures.**

The M2 class officers organize elections for the M1 class. A question and answer session about the different positions will be held during the first week of block two. If you are interested in running there will be a sign-up sheet posted in the M1 lab area. Speeches and voting will be held during the second week of block two. Ballots will be passed out in your PBL labs. The results are tabulated by the M2 Honor Council Representatives and verified by the Office of Medical Education. A quick description of each office is as follows:

## Class Officers

- **President.** The president has the responsibility of attending meetings and serving as the class spokesperson. The deans recognize the president in this capacity and expect the president to serve as the primary link between themselves and the class. Individual and class concerns should be directed to the president. Most action happens behind the scenes.
- **Vice President.** The vice president is responsible for organizing everything from class social events to working with the other officers to keep objectives neat and orderly. The M1 vice president will also work closely with the M2 vice president to organize major events like End-of-Block parties and A Review.
- **Secretary.** The secretary is responsible for class announcements, taking minutes at class officer meetings, recognizing birthdays, and helping to organize intramural sports teams.
- **Treasurer.** The treasurer is responsible for raising funds, collecting dues, and managing the class account. The treasurer is elected with the understanding that it is a four-year term. Raising funds is serious business. Your class has to raise its own money to pay for graduation, something on the order of \$10,000.

## Class Representatives

- **Committee for Student Promotion (CSP).** The CSP representative is responsible for attending a three-hour meeting once per block where discussion is based on students encountering academic difficulty as well as students requesting leave of absence. The CSP representative should also be available to classmates that wish to speak about their situations.
- **Curriculum Board.** This is a committee composed of eight faculty members and four student representatives. A student is elected from each class to serve as a non-voting member of the committee. The curriculum board meets once a month for about 1.5 hours to discuss matters concerning the curriculum (shocker). Some of the topics include: adding admissions requirements, development of policies to ensure that learning objectives are consistently covered in PBL, and evaluation of teaching through awards and recognition of educators.
- **Ethics.** The ethics representative attends monthly meetings with the hospital ethics committee. At this meeting the team discusses the challenging cases that the committee was asked to be involved in over the past month. The committee also creates educational materials for the hospital when they see the same issues recurring. The ethics representative can be as involved in this process as their time and interest allow them to be from sitting back and observing to actively participating.
- **Families Assisting Medical Students (FAMS).** Two members of each class are selected to be FAMS representatives. The representatives serve as a link between the parents who coordinate FAMS and the students. FAMS is a wonderful group of parents that provide breakfast for us during every test week. They also do other encouraging things for us throughout the year.
- **Graduate Professional Council (GPC).** The Graduate Professional Council is the graduate student's equivalent of the undergraduate student government. One representative will be the go-between for your class and the graduate school. Meetings are held monthly. It is an extremely important position since the referendums passed by GPC affect the entire university, not just the School of Medicine.



- **Health and Wellness.** The health and wellness representative ensures that the class is remembering to take care of themselves. One of the ways in which this is done is by pairing new M-1s with a big brother/sister (an M-2) so that new students effectively adjust to the rigors of medical school. Other responsibilities include updating the magazine rack in the common area, and organizing health/wellness activities.
- **Hearing Committee.** The hearing committee representatives are the first responders to any questionable academic honesty. They are the gatekeepers of all honor code violations submitted by the student body, responsible for screening and submitting serious issues to the honor council. Other duties include confidentially contacting students who might have observed a violation of the honor code. Two members are selected for each class.
- **Honor Council.** The Honor Council Delegates (along with the class presidents) represent their respective classes during meetings of the Council, which convene following a report from the Hearing Committee alleging the violation of the Honor Code by one or more students. The Council further investigates the alleged violation in the areas of academic and professional dishonesty and unprofessional conduct, then makes appropriate recommendations concerning appropriate actions to the Dean. Delegates are expected to maintain the highest standards of academic and professional honesty, conduct and confidentiality among their peers.
- **Medical Student Affairs Council (MSAC).** This committee oversees all of the organizations and classes within the medical school. It is kind of like “student council”.
- **MUtation.** The MUtation representative(s) are responsible for helping the yearbook staff, with M4s usually running the operation. The range of commitment and responsibility varies according to your interest and what is needed, but can include taking photographs of social events, collecting photographs from classmates, writing captions and formatting yearbook pages. No yearbook experience is necessary.
- **Organization of Student Representatives (OSR).** The OSR representative has the responsibility of representing the University of Missouri School of Medicine at the regional and national meetings of the AAMC. This is the only opportunity for students to have a direct voice to the Council of Deans. On a national level, the representative has input in AMCAS (the medical school application service), ERAS (the residency application service), NRMP (the residency matching service), USMLE (the licensing examinations), and the LCME (the accreditation body for medical schools).
- **Student Advisory Council (SAC).** The class president has the opportunity to appoint a Student Advisory Council, which is composed of five selected students and the class president who meet monthly with Dean Hosokawa to discuss pertinent academic issues. Because of the dynamic nature of medical education, this group is responsible for representing their class by expressing satisfactions and concerns on issues including block organization, lecture quality, resources, and examinations. Possible constructive solutions are also discussed in these meetings.
- **Student Professionalism Committee (SPC).** Two members of each class serve on the Student Professionalism Committee. This body focuses on promoting a professional environment among students and faculty. Its purpose is to monitor the trends in professionalism and if a negative atmosphere develops it is the duty of the SPC to discuss such matters and develop a plan to correct the course. Representatives actively participate in this discussion as well as provide feedback to the Dean's office

regarding policy decisions that may affect the professional attitude of the School of Medicine. Meetings are held once per block.

### **Student Clubs**

#### **Alpha Omega Alpha (AOA)**

Founded in 1902, Alpha Omega Alpha is the only national honor medical society in the world. The society was established to recognize and perpetuate excellence in the medical profession. AOA elects outstanding junior and senior medical students, graduates, and honorary persons for membership. The honor of being elected as a member of AOA is a distinction that accompanies a physician throughout his career. Not only does membership in AOA serve as a source of recognition and valuable contacts, but it also provides a forum for the exchange of ideas.

The purpose of this organization includes the promotion of scholarship and research in medical school, the encouragement of high standards of character and leadership in the medical profession, and the recognition of high attainment in the medical sciences, practice, and related fields. The spirit of the society is set forth in a modern interpretation of the Hippocratic Oath: "It is the duty of members to promote its ideals, to foster the scientific and philosophical features of the medical profession, to look beyond self to the welfare of the profession and of the public, to cultivate social mindedness as well as an individualistic attitude toward responsibilities, to show respect for colleagues and especially for elders and teachers, to foster research, and in all ways to ennoble the profession of medicine and advance it in the public opinion. It is equally a duty to avoid what is unworthy, including the commercial spirit and all practices injurious to the welfare of patients, the public or the profession."

#### **American Medical Association (AMA)**

The American Medical Association is the largest organization of physicians (MD and DO) in the world. The AMA looks out for the healthcare of everyone, and is the strongest voice for the medical community in D.C. The Missouri State Medical Association (MSMA) is the state counterpart to the national organization and is your voice in Jefferson City. Every student, doctor, and health-care provider has benefited from the AMA in one form or another.

For students, there are many ways to get involved. State and national meetings are held throughout the year to develop health policy that will shape the direction of US medicine. Current issues being tackled by the students' section of the AMA include providing healthcare for the uninsured, universal healthcare, medical school debt, and patient safety. Lobbying opportunities are available in D.C. and Jefferson City to discuss issues with legislators that affect you and your future practices. There are numerous national boards for students to serve on ranging from the National Board of Medical Examiners (oversees Step 1, 2, and 3 board exams), Liaison Committee on Medical Education (accredits MD medical schools), to the National Residency Match Program (places all medical graduates in residency programs). The AMA is the voice of organized medicine and there are real ways for you to get involved as a student and stay involved throughout your medical career.

Is the AMA all politics??? Well, mainly, but we also have a lot of fun! By joining the AMA and MSMA for \$100 for 4 years, students have attended meetings all over the U.S. These meetings are a great place to meet other students and also to get to know some very influential physicians. And don't worry about partisanship; liberals, conservatives, and independents are all well represented.

Membership definitely has its privileges. Besides all the meetings, you will receive a medical dictionary, subscription to *JAMA*, *American Medical News*, and *Missouri Medicine*. These items alone are worth over \$500. You'll also get discounts on textbooks, car rentals, opportunities for international internships, and lots of stuff like gold cards, Palm software discounts, and insurance.

### **American Medical Women's Association (AMWA)**

The American Medical Women's Association is a national organization of 13,000 women physicians and medical students founded in 1915 to promote women's health, improve the personal and professional well-being of its members, and increase the influence of women in the medical profession. This organization is not only for women medical students. We encourage and support male members who are concerned about women's health care issues and are interested in participating in our projects.

Nationally, AMWA is a leading advocate for a variety of women's health issues such as breast cancer, cardiovascular disease, tobacco abuse, violence against women, gender equity, osteoporosis, and reproductive health. Locally, AMWA works to support one another and educate its members about women's health in fun ways outside of the classroom.

Some AMWA-sponsored programs are:

- Mentor Dinner: Meet with other female physicians for advise and networking
- Motherhood in Medicine: Panel of mom-docs share their experiences and tips
- Happy Hours: Learn about women's health in a fun atmosphere
- Charity fundraisers
- Conferences: AMWA annually holds regional and national conferences.

### **Association of Student Internists (ASI)**

The Association of Student Internists (ASI) is an organization aimed at promoting an understanding of career choices available to students interested in General Internal Medicine as well as specialist careers in medicine. Meetings are held monthly and are aimed at giving students both practical information (i.e., practical interpretation of EKGs, X-rays, patient management problems) and personal (i.e., residency information, preparation for residency interviews, a chance to interact with faculty members, and an opportunity to learn more about future career options). ASI is open to all medical students, and M-1s are encouraged to join. Officer positions are available currently for two representatives from the M-1 class. Members of ASI are able to obtain student membership in The American College of Physicians, a national organization of both generalist and specialist physicians.

### **Christian Medical and Dental Association (CMDA)**

CMDA is the medical component of the larger Christian Medical & Dental Associations (CMDA), which serves as a voice and ministry for Christian physicians, dentists, and students in these respective professions. At the national level, CMDA promotes positions and addresses policies on healthcare issues, conducts medical missions (Global Health Outreach), coordinates a network of Christian doctors and students for fellowship and professional growth, and provides many other resources and services to both its members and the global community. National membership is free for students and encouraged, but is not required for involvement with our local chapter.

Locally, CMDA offers opportunities for students to interact with area Christian physicians and to learn appropriate ways to integrate faith, studies, and practice. These include weekly Sunday night meetings on-campus with physician/resident/student speakers and monthly off-campus dinners in physician's homes for food, fellowship, in-depth studies. Student-led Bible studies meet weekly for prayer and encouragement. Medical mission trips have been organized in recent years to Guatemala and Mexico and take place over one of the Springbreaks (to find out this year's location, come check out our booth at the activities fair!!). There are also CMDA sponsored activities each block such as barbecues, hayrides, volleyball games, or other family-friendly activities. Opportunities are also available to participate in community service, and regional and national conferences.

### **Emergency Medicine Interest Group**

The Emergency Medicine Interest Group (EMIG) is organized as a source of support for medical students interested in emergency medicine. EMIG holds monthly meetings that cover core topics in emergency medicine, advice on how to apply for an emergency medicine away rotation or residency, and several skill workshops such as suturing and intubation. This year we hope to add a helicopter ride-along opportunity for those interested in shadowing a flight-for-life paramedic. EMIG also holds Journal Club every other month where current topics in the literature are reviewed and discussed under the leadership of the EMIG faculty adviser, Dr. David Wells. Most importantly, EMIG facilitates networking among current students, faculty, alumni, and outside emergency medicine advisors/physicians.

### **Families Assisting Medical Students (FAMS)**

FAMS is run by the parents and spouses of medical students. FAMS traditionally provides breakfast and lunch for every exam, which relieves you of having to figure out how you're going to eat during that stressful week! FAMS also helps out with other events, like the Orientation picnic. FAMS has also been known to help provide financial assistance to those traveling to interviews and international rotations. Encourage your parents to join, because you definitely will get their money's worth!!!

### **Family Medicine Interest Group (FMIG)**

The Family Medicine Interest Group seeks to educate medical students about the breadth and opportunities of the family practice specialty. In today's health care system family physicians are in great demand, and the family physician is guaranteed a rewarding and satisfying career by virtue of the personal, continuing contact with patients, their families, and the community.

FMIG educates students through noon hour discussions and evening dinner forums. In these venues the topics vary from daily activities of family practitioners to unique opportunities for medical students. The FMIG also reaches out to the community with Tar Wars, a tobacco education program that is taught to area fifth graders. As a member of FMIG, students benefit from automatic membership in the Missouri Academy of Family Physicians and the American Academy of Family Physicians. These organizations promote family practice via the *American Family Physician* journal and via monthly newsletters. The Missouri Academy and the American Academy also promote primary care issues within the state and national legislatures.

### **Geriatrics Interest Group**

Between now and 2030, the number of Americans over age 65 will double, with seventy million people in this age group. Almost all physicians will play a role in caring for older patients and will need to be aware of the issues specific to the geriatric population. The Geriatrics Interest Group seeks to raise awareness of the many factors important to the care of older adults. We plan to have regular lunch or dinner meetings allowing medical students and faculty to exchange ideas and concerns regarding geriatric medicine. During our meetings, geriatricians will deliver presentations on caring for older adults, and we will also discuss career opportunities available in this growing field. Other possibilities in this new group include patient presentations and community service events. For more information, contact Erik Lindbloom, MD in the Department of Family and Community Medicine, lindbloome@health.missouri.edu or 882-4991.

### **Graduate Professional Council (GPC)**

The Graduate Professional Council (GPC) is the umbrella organization representing all 5000 graduate, veterinary, law, and medical students at MU to the powers that be at the University, including the chancellor and Board of Curators. MU campus issues, UM system issues, and national issues such as student health insurance, professional student tuition, and tax exemption of graduate stipends are addressed by GPC. Together with the undergraduate student government, the Missouri Student Association, MSA/GPC serves as the student voice to the administration and organizes many student activities including concerts, movies, and lectures. GPC also has an annual Research and Creative Activities Forum (RCAF) and hosts monthly graduate gatherings (with free food) to encourage interaction among graduate/professional students at MU.

Every medical school class elects one member to the General Assembly of GPC. Discussed at the monthly meetings are graduate/professional policy decisions, travel scholarships, as well as funding for many campus projects and conferences (with an annual budget of over \$200,000, GPC is a great source for money for an event).

### **Humanism in Medicine**

This group's mission is to reaffirm the recognition that the clinical practice of medicine is both an art and a science and to foster the development of well-rounded health professionals who are not only highly skilled but inspiring, open-minded, and compassionate practitioners. They annually produce a literary/arts magazine featuring creating writing, poetry, photography, drawings, paintings, and any other artistic contributions from students or faculty. They also promote musical/theatrical/cultural/dance performances around Columbia and hold discussions about topics ranging from law and ethics to philosophy and spirituality. Overall this group is dedicated to forming a community of like-minded healthcare students and faculty, strengthen the meaning of their commitment to humanity and medicine, and regenerate the humanistic aspects of themselves that they don't want to lose during the intense training of medical school.

### **Intramural Sports**

Work hard. Play Hard. RecSports offers a variety of sports for teams and individual competition. In years past, the M1 class formed teams for softball, football, basketball, volleyball, soccer, and ultimate frisbee. We were largely successful and most teams qualified for playoffs. The timing of playoffs is not super for the medical school (the final weeks of each

block and sometimes over break weeks), but teams were usually able to get it together and represent. Keep an eye out for sign-ups throughout the year.

### **Medical Student Affairs Council (MSAC)**

MSAC is the overall governing body of the students of the UMC - School of Medicine. Its duty is to deal with matters directly affecting students at this institution, whether curricular or extracurricular. This involves directly advising the Dean's Office and the Office of Medical Education. In addition, MSAC oversees student organizations and allocates funds endowed by the University and Medical School Alumni. It is also responsible for selecting student representatives to certain major committees and organizations such as the Admissions Committee, the Pre-professional Scholars Committee, and the Organizations of Student Representatives. In short, MSAC is a forum in which student issues are brought up and discussed, and actions are taken to bring about the most positive possible outcome.

MSAC's membership consists of its officers, the president and a representative of each class, the president or a representative from each official student organization, the chairperson or representative from MSAC's standing committees, and several at-large members. Meetings are open to all students and regularly attended by non-members, especially to bring issues to MSAC's attention. Standing MSAC committees include: The Curriculum Committee, Republic of Georgia Project, The Professional Conduct Committee, and The Library/Facilities Committee. These committees are open to all MU Medical Students. We strongly invite, encourage, and anticipate your participation!

### **MedZou**

The MedZou Clinic is a student-operated medical clinic that provides free primary healthcare. Their mission is to join with community partners to provide patient care and education for the residents of Columbia without insurance. A multi-disciplinary team of health professional students and faculty, including family medicine doctors, nurses, and social workers, contribute to providing a quality healthcare experience. Every medical student has an opportunity to volunteer for MedZou and to hold a leadership position within the organization

### **Military Medical Student Association (MMSA)**

The Military Medical Student Association is a quad-service non-profit organization that was formed by four medical students in 1987. It is a national organization that is comprised of members of the military medical community and staffed by students both at USUHS (The Uniformed Services University of the Health Sciences) and in the HPSP (Health Professions Scholarship Program). The MMSA's main goals include developing lines of communication among military medical students across the country, serving as an information source for those medical students, and promoting unity and esprit de corps among future military medical officers.

Whether you are a current member of the HPSP or a future applicant, membership in the MMSA is designed for you. As an HPSP Student, it is sometimes easy to forget about your future career in the military. Membership is encouraged for all HPSP students as well as for all of those interested in the military medical student's perspective. Membership in this dynamic and pertinent forum can help you make informed choices about your military career. Participation in the MMSA is a great way to get active in your profession and stay informed.

For student interest group information regarding Military Medicine, visit <http://www.amsa.org/military>. For more comprehensive information about military medicine, visit <http://www.armymedicine.army.mil> (*ARMY*); <https://www.afms.mil> (*AIR FORCE*); <http://navymedicine.med.navy.mil> (*NAVY*).

### **Organization of Student Representatives (OSR)**

The Organization of Student Representatives (OSR) is a medical-student organization that was developed by the Association of American Medical Colleges (AAMC) in 1968 to provide a means for student participation in the affairs of AAMC.

One first-year student is elected in the fall and remains active throughout all four years of medical school. National activities include representing the University of Missouri - Columbia School of Medicine in particular and all medical students in general, at the regional and national meetings of the AAMC. This organization is the only opportunity for students to have a direct voice to the Council of Deans. On a national level, we have input in AMCAS (the medical school application service), ERAS (the residency application service), NRMP (the residency matching service), USMLE (the licensing examinations), and the LCME (the accreditation body for medical schools). In addition, it is an excellent way to network, as members have the opportunity to interact with medical students, admissions staff, and deans from every medical school in the country.

Locally the OSR chapter has been instrumental in developing and maintaining the Careers in Medicine program and the Student Professionalism Committee (SPC). The chapter also nominates one faculty member each year for the national AAMC/Pfizer Humanism in Medicine Award. Aside from these specific duties, OSR is responsible for determining student opinion on various issues of importance. We also gather information about national issues and upcoming changes within each category and share that information with the MU medical school student body.

### **Physicians for Social Responsibility (PSR)**

Physicians for Social Responsibility (PSR) is a nationwide organization which provides health-care professionals and students with the opportunity to participate actively in sociopolitical issues and to contribute meaningfully to the communities in which they live. On a national level, PSR is committed to the elimination of nuclear and other weapons of mass destruction, the achievement of a sustainable environment, and the reduction of violence. PSR shared the 1985 Nobel peace Prize as the U.S. affiliate of International Physicians for the Prevention of Nuclear War.

Locally, student members of PSR are actively involved in several projects consistent with the overall missions of the organization. They serve as mentors to children in the community and provide companionship to patients in University Hospital as part of the 4 East program. They work in local free clinics and sponsor a medical service trip to Mexico. They have built homes with Habitat for Humanity and helped clean-up the Missouri River and the streets of Columbia. They have held discussions on domestic violence, gun violence, and the tragedy of September 11. In the coming year, PSR will participate in the ongoing programs mentioned above, as well as look forward to undertaking new projects that the student membership feels are appropriate.

### **Psychiatry Interest Group**

The Psychiatry Interest Group aims to provide an outside source of exposure to the field of psychiatry for all interested medical students, regardless of their career plans. We further serve as a support structure and resource for all students who are considering a career in psychiatry. The group meets monthly to discuss topics in the field of psychiatry, striving to make presentations accessible and interesting to all students. The group also helps coordinate the *Psychotherapy Interest Group*, which allows students to practice psychoanalysis on each other, and the *Celluloid Couch*, a monthly screening of movies pertinent to the field of psychiatry attended by both students and residents. Twice a year, we send students to the APA conference which serves as an excellent way to meet students and residency coordinators from across the country. Our organization has no dues and encourages students to participate in anything that catches their attention, even if they only come to one event.

### **Radiology Interest Group**

If you think that radiology is nothing more than sitting by yourself in a dark room all day looking at x-rays, the Radiology Interest Group (RIG) may be for you. The primary goal of RIG is to expose interested medical students to the wide variety of careers in this field that is at the forefront of the astounding advances being made in medicine today. Activities include a tour of the hospital's radiology facilities, a panel discussion with radiologists from many fields of radiology, and shadowing and research experiences. For students who may be interested in a career in radiology, a panel discussion with 4<sup>th</sup> year students and residents provides invaluable advice on how to prepare for a residency in this increasingly competitive field. As a member of RIG, you will have the opportunity to discover just how diverse and dynamic radiology really is, as well as build valuable relationships with older medical students and radiology faculty. Hope to see you at the first meeting!

### **Rural Medicine Interest Group**

If you are interested in eventually practicing medicine in a rural area, this is the group for you. The Rural Medicine Interest Group (RMIG) enables students to learn more about rural health and the physicians that practice in rural areas. We work closely with MU-AHEC and the rural track program. We also help sponsor the Rural Health Symposium. RMIG also hosts a BBQ within the first few weeks of school for all students. Lifetime dues are five dollars.

### **Senior Teacher Education Partnership (STEP)**

**Peggy Gray**

Do you want to make a positive difference in the lives of others? Are you interested in geriatrics, family medicine, or internal medicine? Do you want to become involved in the Columbia community? If you answered yes to any of the above, we have an exciting program that will surely interest you: the Senior Teacher Educator Partnership (STEP). STEP connects students with seniors who live in our community and focuses on their capabilities.

Did you know that 20 years from today, 20% of the US population will be 65 years or older? "With the possible exception of those who become pediatricians, each of our current medical students, regardless of their specialty choice, will care for older people," says Steven Zweig, MD, Professor of Family and Community Medicine and medical director of Care in Aging programs at University Hospital and Clinics. Mizzou's School of Medicine (SOM) is



rising to the challenge of preparing physicians who can be leaders in the care of older patients. Under Dr. Zweig and Michael Hosokawa, EdD, Professor, Family and Community Medicine and Assistant Dean for Curriculum, the SOM is enhancing the geriatric focus in the pre-clinical curriculum. STEP is an important part of this focus. Students are partnered with seniors living in the community so that they can understand the health-care system from their partner's perspective. Students and seniors stay in contact with each other and attend STEP events together. For more information, contact Peggy Gray in the Office of Medical Education, M245 Medical Sciences Building, 884-3337, [GrayM@health.missouri.edu](mailto:GrayM@health.missouri.edu).

### **Stethotones**

Like to sing or have a musical interest? Well there happens to be a group just for you. The Stethotones are the medical student singing ensemble. They perform at a handful of events and even do singing valentines to raise money. The group is widely talented and shows book up quick. Skip the line and join the band. They are always on the lookout for lively members with more than a heartbeat for rhythm.

### **Student Ambassadors**

If you love MU Med School and talking to people about it, Student Ambassadors is the group for you. You get the opportunity to take the students interviewing on a tour, talk about med school and why MU is the best, and calm their fears (who could forget how daunting interview days are?). You also have the opportunity to be the contact person for an accepted student. And as an added bonus you get a free lunch when you give a tour. It doesn't get much better than that.

### **Student Interest Group in Neurology (SIGN)**

The Student Interest Group in Neurology (SIGN) is an organization for those students interested in pursuing and/or developing an interest in the practice of neurology or research in this field. Joining this group is a good way to make connections with neurology residents, to get involved in research, and to establish connections with the attending physicians. Anyone possibly interested in neurology is encouraged to join!

### **Student National Medical Association (SNMA)**

The Student National Medical Association (SNMA) is the nation's oldest and largest organization focused on the needs and concerns of medical students of color. National membership includes nearly 5,000 medical students, residents, and licensed physicians. This organization is designed to serve the health needs of underrepresented communities, educate people about important health matters, and assure that medical education and services are culturally sensitive to the needs of diverse populations. Community service is the heart and soul of the SNMA and eliminating disparities in health care delivery, disease morbidity, and disease mortality are among our highest priorities. Here at the UMC-School of Medicine, we are committed to increasing the number of culturally capable and sensitive physicians as well as dedicated to the academic and clinical success of our medical students and pre-medical students. Through various programs, SNMA members work with youths from elementary school to college introducing them to science and serving as mentors. Also, SNMA works with the Dean's Office to improve minority student recruitment, admission, and retention.

### **Students Interested in Anesthesiology (SIA)**

SIA is an organization intended to foster and cultivate an interest in the practice of anesthesia and preoperative medicine. This field of medicine has recently experienced resurgence with the renewed interest in chronic pain relief and total amnesia during surgery. Many medical students, however, are not exposed to this exciting and innovative field of medicine until later years in medical school. SIA provides opportunities for 1<sup>st</sup> and 2<sup>nd</sup> year medical students to explore anesthesia as a possible career, and it gives interested 3<sup>rd</sup> and 4<sup>th</sup> year medical students a springboard for residency investigation. Meetings are held once a month and consist of organization business and lectures from faculty anesthesiologists on relevant topics. There will also be opportunities for clinical research and physician shadowing. All students with an interest in anesthesia or surgery as well as those who are uncertain about a career choice are welcome to attend meetings, which will be announced via email and door signs.

### **Students Interested in Global Health for Tomorrow (SIGHT)**

SIGHT is an organization of medical students committed to bringing awareness about global health to local communities. We provide a database of information regarding international rotations, exchanges, or other cultural experiences for students and health professionals who wish to participate in global medicine. SIGHT has proved to be of great benefit to M1s interested in gaining early clinical experience in an international setting during their first (and only!) free summer, as well as to M3s and M4s who wish to complete an international clinical rotation. We attempt to establish ongoing relationships between host communities abroad and Mizzou in order to gain understanding of other cultures and health care systems, broaden our clinical skills in a cross-cultural environment, and use this experience to better attend to the needs of underserved populations in Missouri. We provide a forum for exploration and discussion of global health issues by sponsoring presentations at several meetings each block. Speakers include faculty, students, and experts who have worked or conducted research in an international setting. Finally, we hold a variety of fundraisers in order to provide financial assistance to students who are planning cross-cultural experiences.

### **Students Interested in Pediatrics (SIP)**

The primary purpose of this group is to form an organized source of support for medical students interested in pediatrics. It also seeks to connect its members with the pediatric medicine community so that we may keep current on issues relating to child health. We are connected with the society as a whole through our affiliation with the American Academy of Pediatrics (AAP) to which we elect two representatives. Community relations are strengthened by events to benefit the Children's Hospital and by organizing events that promote child safety through the *SafeKids* program. This last December we delivered presents purchased by our members to children in the hospital. Other activities include going to elementary schools to give CHAMPs presentations, visiting pediatric patients in the hospital, learning how to perform a pediatric physical exam, hearing a case presentation about a pediatric patient, and having the opportunity to shadow a pediatric resident.

Children's Health and Medicine Program (CHAMPs) is sponsored by SIP, although absolutely any med students can participate. It works like this: Elementary teachers in the Columbia public schools sign-up for one of the presentations we offer. There is one on muscles and bones, one on germs, one on the organ systems (Highway of Life), and one on the five

senses. Each consists of games and activities to share with the kids for 30 minutes to an hour. The times of the presentations are posted and you sign-up and go have fun. There is a training session during which you will get an outline of the presentation.

### **Surgery Club**

This club provides students with a curiosity about surgery an avenue to pursue that interest. The group meets every month and sponsors speakers and panels on various topics such as surgical specialties, surgical residencies, etc. Besides the intellectually stimulating discussions and opportunities to meet surgeons in influential positions, another bonus is that the Surgery Department provides food and beverage at most of these meetings.

The club also sponsors activities that help members log time in the OR, as well as workshops to begin development of skills (i.e., knot tying, suturing, etc.). Through this club, students with an interest in surgery get early exposure to the field, guidance about how to be competitive for residency spots, and short breaks from the primary care emphasis stressed at this school. If you are at all interested in surgery, this club is a great way to get involved and prepare for your future.

### **Wilderness Medical Society**

WMS is a national non-profit educational organization composed not only of some of the world's foremost academic and field-based authorities on wilderness medical issues, but of health care professionals (physicians, nurses, EMTs, etc.) who advise and treat patients involved in outdoor activities. It is also composed of non-health professional (search and rescue, outing guides, outdoor programmers, outdoor enthusiasts) who want to learn about handling health-related issues as they pertain to outdoor or remote settings. Wilderness medicine focuses on medical problems and treatment in remote environments. It includes aspects of physiology, clinical medicine, preventive medicine, and public health. While wilderness medicine shares many interests and methods with other specialties such as sports medicine and emergency medicine, it incorporates a unique spectrum of topics and a distinctive perspective that validate it as an individual field of study. WMS has meetings in great places such as Colorado, Alaska, and Peru, and they offer a 3<sup>rd</sup> or 4<sup>th</sup> year rotation that features a week-long hiking/camping trip.

Wilderness Medicine at Mizzou has a strong following. We are avid outdoor enthusiasts, interested in camping, caving, cycling, hiking, rock climbing and anything else we can think of to have an excuse to be outside. We seek to care for people who may become ill or injured while pursuing their favorite activities, and we have career goals to work in such places as Mt. Everest Base Camp, Eco-Challenge, Rocky Mountain Search and Rescue, or even Antarctica! We will have activities and/or lectures during the year...look for one each block. Also, check out the national website: [www.wms.org](http://www.wms.org).

## **Fun Traditions**

Medical School isn't all books and cadavers, no matter what your friends and family may think! Besides the weekly TGIF happy hours, the end-of-block parties, and the impromptu games of frisbee tag and spades in the M1 cellblock, there are several regularly scheduled events throughout the year. This section lets you in on a few of the more popular...

- **Orientation Picnic:** FAMS traditionally puts on a wonderful picnic at the very beginning of the school year for the new MIs. These parents truly understand how much medical students

can eat and put out a great spread. You should definitely attend. It is a great way to relax and meet the new members of your class while starting the great tradition of all medical students: scarfing down as much free food as possible.

- **Family Day:** This event is held in the fall and is a chance for your parents to see that their pride and joy really is in medical school. There is FREE FOOD, and some very nice M2s and M3s will take you and your family on a tour of the hospital, which includes exotic locales like the PBL labs and the Library. The Deans and Faculty will also give your family some speeches about how hard you are working, how wonderful you are, yadayadayada, and soon they will understand why you fall asleep in lecture. This is a great day. Your parents are bursting at the seams with pride, making this an excellent opportunity to suggest they buy you an official med school sweatshirt and T-shirt.
- **Football Games:** Here in Columbia, football games are a big deal. If you do not plan on attending the game, you should avoid all major roads in the campus area that day. To show that our school spirit has not been completely overcome by our studying, the med school buys block seating for the season, so that we can all sit together (or stand I should say) and cheer on our Tigers!
- **Terrortoma:** This is a huge, all-school costume party sponsored by AMA. The money raised from it goes to MedZou. Always a very good way to celebrate Halloween with your buddies. Make sure to put some thought into your costume.... there is a contest with prizes!
- **Holiday Party:** In the true spirit of "political correctness," the Medical School throws an annual "Holiday" Party - and NO! It is NOT a Christmas tree, it's a HOLIDAY TREE! Usually during week 8 of block 2, a HUGE tree suddenly appears near the library, and it is our job to decorate it. MSAC organizes it, and the Dean's Office and the Alumni provide the supplies. It's a great excuse for a study break, and we all get a free dinner out of it. Families and friends are invited to help us decorate the tree, and don't worry about breaking the ornaments – it's all part of the fun (and a great stress reliever)!
- **MedProm:** This night is sponsored by the M2 class, and is a good excuse to get dressed up. It creates a slight memory of prom, but without the pressure to have the best dress, or the anxiety of showing up without a date. Whether you have a date or come on your own, you're sure to have a good time. It will be held in a banquet hall, and there will be food, adult beverages, and dancing. It is held in the spring semester, so no matter how much you might hate dancing or wearing those uncomfortable dress shoes, the other option of studying for neuro will always be worse.
- **Student Research Day:** This is a poster presentation day in the fall for those medical students, graduate students, and some undergrads who have done research. You can win money if you have a great poster, plus have something nifty to put on your curriculum vitae if you participate (especially if you win!).
- **End of Block and Grade Release Parties:** These are really up to you and your class representatives. They are informal get-togethers at various locations (usually downtown) to enjoy liberal libations and cavort gallantly through the streets in glee at the accomplishments of completing another milestone on the path to becoming a doctor.

## **Border Wars Basketball Tournament**

By Brad Emmerich

MU School of Medicine brought back the MU/KU rivalry in 2016 in the form of a basketball tournament between the medical students. Although beating down KU relentlessly has become one of the tournament goals, the ultimate goal is to raise funds for both MedZou and KU's JayDoc free community health clinics. These clinics, as you will soon know, play a vital role in providing medical care to the uninsured members of the community while allowing medical students a hands-on patient care experience. Medical student involvement with fundraisers is crucial in making these clinics sustainable. Whether you'd like to play or come cheer on your friendly neighborhood MedZou basketball team, plan on participating in the Border Wars Tournament this year! MUSOM and KU alternate hosting the event, and it is our turn to host Borders Wars here in Columbia this fall. Let's get ready to have a good time, do some good for our community, and dominant KU in every single way! See you there!

## Student Friendly Places to Eat

While this was a surprise to me, it is commonly said that med students live on a limited budget. Fortunately, many of us still manage to visit a restaurant or seven on occasion. For this reason, the following restaurants have been selected not only for their culinary delight, but also because of their friendliness to the limited student loans.

There are stars (\*) next to the really shouldn't miss restaurants. If you experience the same joy as I do eating at these places, bully for you ... If not, keep it to yourself.

- **Flat Branch Brewery \*** - Not only is Flat Branch the only microbrewery in Columbia, it is an inexpensive place to get great food and even better beer. My personal fav way to spend a lazy summer evening in Columbia is to kick back (on the gorgeous patio) with friends, drink fresh brewed beer, and gobble down multiple orders of Chokes & cheese (yes, multiple).
  - **Location:** 115 S 5<sup>th</sup> St in downtown Columbia
- **Peking\*** - If Chinese food is your gig, then Peking is your joint. With both an “American Chinese” and an authentic Chinese menu, all customers leave very full & satisfied. Hands down, Peking is the best Chinese in town. Bonus: it's the same price range with all those so-so Chinese Huts.
  - **Location:** 212 E Green Meadows Rd #4
- **Addison's** – If you want to feel like a sophisticated medical student, suggest friends meet here for drinks and apps (order the nachos) on a Friday evening. With fantastic food that varies from reasonable to expensive, this is a great place to start a night out or take a date.
  - **Location:** 709 Cherry St in downtown Columbia
- **Las Margaritas** – Some of the best Mexican food in Columbia and excellent margaritas. Be sure to experience the \$2 margarita deals on Thursday at least once in your first year (it will most likely be every Thursday).
  - **Location:** 10 Southampton Drive
- **Main Squeeze** – Great for vegetarian/vegans or any health-food lovers. Clean food that is mostly vegetarian with many vegan options, great smoothies, and fresh-squeezed juices.
  - **Location:** 28 S 9<sup>th</sup> Street in downtown Columbia
- **Cooper's Landing Thai trailer\*** - This is probably the most obscure, yet fun place on the list. Thai food and cheap beer are sold out of a trailer down by the river – with occasional live folk music next to the picnic tables. Definitely the place to go and catch up with your buds. The cooks: a Thai woman and her son.
  - **Location:** (address for the campground store next door) 11505 Smith Hatchery rd
- **Buckingham's** – A BBQ place that is my personal favorite in Columbia. All the meat is hickory smoked and super tender. They have the best beans I have ever tasted and you can get a Boulevard for \$1.50. While indoor seating is limited they have a nice patio and do takeout.
  - **Location:** 3804 Buttonwood Dr
- **G&D Pizza And Steakhouse** – This Greek Steakhouse located off Stadium is our favorite because the owners are super nice and the restaurant offers a large variety of food ranging from gyros to inexpensive fresh cut steaks, and pasta. Add a little baklava and you feel like you're in Athens.
  - **Location:** Steakhouse – 2001 W Worley St; Pizzeria – 2101 W Broadway

- **El Maguey** – If Mexican is your preference, this is probably the most inexpensive short of Taco Bell. The food is typical greasy spoon American/Mexican – really good if you’re in that sorta mood, and the salsa is excellent. This place shouldn’t cost you much as long as you don’t drink 3 buckets of margaritas.
  - **Location:** 901 E Nifong Blvd; 504 Business Loop 70 W; 21 Conley Rd #U
- **Shakespeare’s** – While not the cheapest pizza place around, it is arguably the best and has the coolest atmosphere – if you stand behind the glass waving at the pizza man, he’ll even throw dough at you. This is one of the few pizza places with a full bar and within walking distance to campus. Although you will get to sample some CoMo pizza at all those meetings during the first month of school, I highly recommend you visit this place in person to sample some original Columbia atmosphere. It’s also a good place to head for a quick inexpensive lunch.
  - **Location:** 225 S 9<sup>th</sup> St; 3304 W Broadway

### **Classy (read: Expensive, but worth it) Places to take a Date/Parents**

- **44 Stone** – Columbia’s Gastropub. Quality food, fine ales, and good whiskey. 44 Stone is a new favorite among the class. It is a restaurant and bar in the spirit of the comfortable, casual and convivial pubs of the British Isles. The menu is inspired by the food one might find in an English, Irish, Scottish, or Welsh public house, but with Contemporary American insight. Overall, it is a great place to eat, drink, and gather.
  - **Location:** 3910 Peachtree Dr
- **Sycamore** – expensive, but worth the price. With food as beautiful looking as it is tasty, this is a great place to impress that new chick or dude, and is also a wonderful place to take grandma, grandpa, mom or dad (read: whoever is coming to town + footing the bill) as it is snazzy, not crowded, and really darn good.
  - **Location:** 800 E. Broadway in downtown Columbia
- **Murry’s** - With a class atmosphere and a “to die for” menu, Murry’s is a great anniversary/special event place to go. The restaurant often features live jazz with a diverse and wildly-appealing menu (order the fried green peppers).
  - **Location:** 3107 Green Meadows Way
- **Sophia’s** – this is a classic Italian restaurant with a unique menu focusing on Southern European cuisine and a pretty decent wine selection (over 100 choices). The atmosphere is slightly more casual than others listed in this section with an earthy feel to the décor – a great background setting for a first date.
  - **Location:** 3915 S Providence Rd.
- **C.C. City Broiler\*** - If someone comes in town to take you to dinner and price is no object, head here (unless you are a vegetarian). They have, hands down, the best steaks & seafood in town. Unfortunately, it’s more expensive so it’s a great place to take visiting family/employed significant others. The atmosphere is as classy as it comes.
  - **Location:** 1401 Forum Blvd.
- **Glenn’s Café** – Glenn’s specializes in Southwestern fare with a New Orleans focus – walking on the old tile floor with the wide open dining room really helps the ambience. It also has a great brunch! And yes, they do have an oyster bar.
  - **Location:** 29 S 8<sup>th</sup> St in downtown Columbia

- **Kampai** – For sushi lovers, this is a great place. Full sushi menu with great cocktails and an awesome patio. Order the Brussels sprouts – they cannot be beat. Great place for a date or for a nicer dinner with friends.
  - **Location:** 907 Alley A in downtown Columbia.

## **Dining Near the Medical School**

Picture this: you're in the heat of studying for exams ... those first five weeks of the block flew by, and you have NO time for cooking, cleaning, laundry, pretty much anything outside of studying. What you need is fast, easy, semi-healthy, already prepared by someone other than you, food.

- **The Grille Downstairs** (cafeteria) – open from 6am – 2pm; bring your ID badge for a 10% discount. Great for a fast lunch with decent food.
  - **Location:** bottom (G) floor of the hospital
- **Essentials Café** (hospital lobby) – this is a healthier option and provides you nutritional information on the menu. Bring your ID badge for a 10% discount.
- **Lakota** – small café open all day in the hospital lobby. Great for a quick coffee break, missed breakfast, or delicious cookies.
  - **Location:** hospital lobby next to the hospital pharmacy
- **VA Cafeteria** – This is where you go if you want to eat cheaply at the hospital, but you want a little variety. There are different stations, each with a unique food, probably the most popular station has a variety of large sandwiches.
  - **Location:** no idea. Good luck!!!
- **9<sup>th</sup> Street:** located just 0.5 miles from campus, this street has a variety of restaurants that are quick, affordable, and great for a lunch or dinner off campus.
  - **Chipotle, Noodles & Co, Ingredient, Pickleman's Subway, Thai Express, Starbucks, Shakespeare's, Dunkin' Donuts, Insomnia Cookies**
- **MU Student Center** – This is also within walking distance (right across the street from the Rec), but in the main part of campus. Choices include BBQ, Italian, burgers, deli sandwiches, wraps, sushi and smoothies.

## **Places of Worship in Columbia**

Looking for a place of worship in Columbia? We have put together this list of local churches to try and help you. This list is not all inclusive as it would be devastating to the forests of the world if we put EVERY church in Columbia and the surrounding area in here. However, please know that Columbia is a diverse city capable of providing for the worship needs of just about anyone.

Basic information about each church is provided on the list including service information and, if available, the church's website. If you would like to know more about the church, its services, or the special ministries they offer, the phone number for each church is included. You can also consult your phone book for the all-inclusive list or visit <http://www.visitcolumbiamo.com/web/welcome/community/worship.php>.

These churches are not listed in any specific order. We attempted to roughly group denominations together so as to make browsing this list easier. The purpose of this list is not to



express any opinions but merely to provide you with a resource that will make looking for a place of worship in Columbia easier.

- **First Assembly of God**  
443-3626, 1100 N. 7th St.  
[www.columbiafirstassembly.com](http://www.columbiafirstassembly.com)
- **Woodcrest Chapel**  
445-1131, 2201 W. Nifong  
[www.woodcrest.org](http://www.woodcrest.org)
- **First Baptist Church**  
442-1149, 1112 E. Broadway  
<http://www.fbc-columbia.org/>
- **Grace Bible Church**  
449-6794, 601 Blue Ridge  
[www.gracebiblecolumbia.org](http://www.gracebiblecolumbia.org)
- **Victory Baptist Church**  
886-7834, 9401 E. I-70 Dr.  
[www.vbccolumbia.com](http://www.vbccolumbia.com)
- **Second Missionary Baptist Church**  
449-4703, 407 E. Broadway  
<http://2ndbc.com>
- **Memorial Baptist Church**  
443-1408, 1634 Paris Rd  
[www.memorialbaptist.org](http://www.memorialbaptist.org)
- **Our Lady of Lourdes Catholic Parish**  
445-7915, 903 Bernadette Dr.  
[www.ourladyoflourdes.org](http://www.ourladyoflourdes.org)
- **Newman Center**  
449-5424, 701 Maryland Ave.  
[www.newmancentercolumbia.org](http://www.newmancentercolumbia.org)
- **Sacred Heart Catholic Church**  
443-3470, 1115 Locust  
[www.sacredheart-church.org](http://www.sacredheart-church.org)
- **Columbia Chinese Christian Church**
- **Rock Bridge Christian Church**  
442-3957, 3316 Rock Quarry Rd  
[www.cccmo.org](http://www.cccmo.org)
- **Rock Bridge Christian Church**  
442-4677, 301 W. Green Meadows Rd.  
[www.rockbridgecc.org](http://www.rockbridgecc.org)
- **First Christian Church**  
449-7265, 101 N. 10th St.  
[www.firstchristian.org](http://www.firstchristian.org)
- **Eastside Church of Christ**  
449-7131, 5051 Ponderosa St.  
[eastsidechurchofchrist.net](http://eastsidechurchofchrist.net)
- **Columbia United Church of Christ**  
445-7931, 3201 I-70 Dr. NW  
[columbiaucc.com](http://columbiaucc.com)
- **Community of Christ**  
445-6313, 1111 S. Fairview Rd.  
<http://www.cofchrist.org/>
- **Broadway Christian Church**  
445-5312, 2601 W. Broadway  
[www.broadwaychristian.net](http://www.broadwaychristian.net)
- **First Church of God**  
449-7159, 1610 N. Garth
- **Christian Fellowship**  
445-8561, 4600 Christian Fellowship Rd.  
[www.christianfellowship.com](http://www.christianfellowship.com)
- **Family Worship Center**  
441-1140, 4925 E. Bonne Femme Church  
[www.familywc.org](http://www.familywc.org)

- **Centerpoint**  
256-1229, 1900 N. Providence  
www.cp- church.com
- **Victory Christian Church**  
499-9087, 212 Portland  
[www.victorychristianchurch.info](http://www.victorychristianchurch.info)
- **Evangelical Free Church**  
445-7206, 600 Silvey Street  
www.efreecolumbia.com
- **Calvary Episcopal Church**  
449-3194, 123 S. 9th St.  
www.calvaryon ninth.org
- **St. Luke's Greek Orthodox Church**  
817-0050, 901 Broadway W.  
saintlukecolumbia.org
- **Trinity Lutheran**  
445-2112, 2201 W. Rollins Rd  
www.trinity-lcms.org
- **Campus Lutheran**  
442-5942, 304 S. College Ave.  
[www.campuslutheran.org](http://www.campuslutheran.org)
- **Alive in Christ Lutheran Church**  
499-0443, 201 Southampton  
www.aic.org
- **Missouri United Methodist**  
443-3111, 204 S. 9th St.  
www.moumc.org
- **Community United Methodist**  
445-6131, 3301 W. Broadway\_  
[www.communityumc.net/](http://www.communityumc.net/)
- **St. Luke United Methodist**  
443-5423, 204 E. Ash
- **First Church of Nazarene**  
474-5787, 2601 Blue Ridge Rd.  
www.columbianazarene.org
- **United Pentecostal Church**  
442-4121, 211 Benton  
www.columbiaupc.org
- **Jehovah's Witnesses**  
474-3560, 2207 Holly
- **The Crossing**  
256-4410, 3615 Southland Drive  
www.thecrossingchurch.com
- **First Presbyterian Church**  
442-1164, 16 Hitt St.  
www.fpccolumbia.org
- **Trinity Presbyterian**  
445-4469, 1600 W. Rollins Rd.  
www.trinity-presbyterian.org
- **Korean First Presbyterian Church**  
442-1164, 16 Hitt
- **Islamic Center of Central Missouri**  
875-4633, 5th and Locust  
www.theiccm.org/
- **Healing Rooms of Columbia**  
256-4325, 201 W. Broadway  
www.healingroomsofcolumbmia.org
- **Hindu Temple and Community Center (Shanthi Mandir)**  
814-1286, 2006 Holly  
<http://shandthimandir.missouri.org/>
- **Bnai Brith Hillel Foundation**  
499-4855, 1107 University Ave
- **Forum Christian Church**  
573-443-3900, 3900 Forum Blvd  
<http://forumchristian.org/>

## RECREATIONAL TIME

### Columbia in a Nutshell

I remember sitting in the OME between interviews, contemplating whether or not I see myself living and going to school here. I had already decided that I really liked MU Med—the PBL program, although still somewhat a mystery, seemed like a more fun and social way to learn. The people seemed really friendly and genuinely pretty happy, and compared to any other option, the price tag was right. The only real problem: living in Columbia.

I considered myself a city girl. I grew up in St. Louis and went to undergrad in Atlanta (I didn't even consider any colleges not located in a substantial city). I was flipping through the old Panacea and came across this article entitled “Welcome to Columbia.” I realized it wouldn't quite be like the welcome Ludacris gives the people in Atlanta, but I was hoping for some sort of reassurance. The guy claimed he was also a city kinda guy, but that he liked Columbia. After all, he argued, it had 3 Walmarts—how small could it really be? Clearly not quite what I was hoping for.

When I was making my final decision, I came back to visit Columbia—knowing that having an endless supply of cheap shampoo and Sam's Diet Cola wasn't going to do it for me. I conveniently came on a day when most of Columbia was shut down, but I managed to find a coffee shop where I had my first ever Turkish coffee. And it was under the influence of the biggest caffeine buzz of my life that I decided I could handle Columbia. I was going to Mizzou Med.

I clearly remember driving to Columbia on my move, clenching my steering wheel and trying to console myself by repeating, “3 Walmarts. Good coffee. Football team.” True confession: the fact that there's football here may have played a role in my decision (and I'm glad it did, but don't tell the OME). And now, after living here for only a year, I've decided that I could also live here for residency—or maybe even permanently. Despite all my reservations, this city girl has fallen in love with Columbia. It has everything I wanted: lots of great coffee shops to study at, fun restaurants and places to go out, tons of parks and trails, and even a real mall. Plus, it has a lot of perks I never thought about. Traffic doesn't exist here (well, relatively speaking), downtown has a lot of character, everything is cheaper, there's this phenomenon called drink specials and late night happy hours, there are endless festivals and concerts, you can find parking, I feel safe walking around downtown, people are extremely friendly, and there's even a couple that has camels and a zebra in their backyard. My friends and I made a list of all the secret and not-so-secret finds of Columbia we wanted to experience, and we still haven't made it through them all. Plus, it's nice to be closer to home while in med school—you can get taken care of when you really need it (which you will at times).

Bottom line: Columbia's actually really great, even if you're used to living in wonderful cities. And if nothing else, the 3 Walmarts have now been replaced with 3 Super Walmarts. So obviously it can't be that small.

## Staying in Shape

Medical school is stressful. I am not going to lie to you. But, have no fear. Exercise can ease this tension from an intense pain to a mere dull ache. For those of you who like to pump the iron, cycle about the village, climb like monkeys, or just take a nice jog, Columbia has several options for you:

The first is the **Student Rec Center** (already paid for via mandatory student fees). It is just a few hundred yards north of the library down the big double sidewalk leading from the medical school. The SRC underwent major renovations in recent years and is now top of the line (voted best University Rec Center in the USA in 2006). Whether you are into lifting, cardio, climbing or aerobics they've got something for everyone. The facility boasts free weight rooms, machines, and a snazzy cardio theater setup and track. For those of you who like to hoop, there are 13 full-length indoor basketball courts. Other areas of interest include numerous racquetball courts, a climbing wall (lessons are required before attempting this), a mat room for sparing, and Tiger grotto (pool area) for everyone's enjoyment. Intramural sports (for a fee), which you will be able to participate in once classes begin, are coordinated through the SRC as well.

Since you are paying for it, you might as well try it out. I will warn you, however, that it does get pretty crowded (so get there before the undergrads get back in town). Although there are a ridiculous amount of activities to participate in, many of them have moderately priced fees, including the popular TigerX aerobics classes. Just contact the front desk and check out the Rec Services website for more complete information: <http://www.mizzourec.com/>

If the crowds or clientele at the Rec get on your nerves, as they sometimes do around test time, there are several other viable alternatives located throughout Columbia. **Key Largo Fitness** and **Wilson's Fitness** are both good choices for the student who doesn't mind paying a few extra bucks each month, approximately \$30 for Key Largo and \$40 for Wilson's. Key Largo is purported by some to have a better free weight selection and a "slightly more serious crowd". If you like to swim, and are not really hard core into free weights, Wilson's might be the place for you. Both gyms have free classes and two different locations to choose from, along with periodic student discounts. Give each a call and see which one you like best. Key Largo 573-441-0059 and Wilson's 573-446-3232.

## Golf

Here's a quick overview of what Columbia has to offer for golf; remember you have to learn sometime, you're going to be a doctor!

- **Perche Creek:** This has the biggest driving range in the Columbia area and is the only one where you have the option of hitting off real grass. There's also a very short par 3 course that is good for beginners as well as miniature golf, batting cages, and go-karts. It's located about 5 minutes west of Columbia on I-70. Ph: 573-445-7546.
- **A.L. Gustin:** This is the University course and very close to the medical school (about 1/2 mile west on Stadium). It's the best public course inside city limits, but it's also the toughest. It's very hilly and has some tight fairways. Cost: \$12 twilight; \$16 weekdays, \$20 weekends. Ph: 573-882-6016.
- **Lake of the Woods & LA Nickell:** These two courses are in great shape for being community owned public courses. They are both flatter and more open than Gustin. L.A. Nickell has no sand to deal with, but a few holes where you have to carry the water.

- Lake of the Woods is a little more challenging especially on the back nine. Cost: \$16 weekdays, \$21 weekends. Tee times for both courses call 573-447-4166.
- **Eagle Knoll:** We're lucky to have such a great course so close to Columbia. It's about 15-20 minutes south on 63 and was named 3rd best value in the nation and best rural course in Missouri by reader's digest. The views are picturesque and the golf is amazing! Cost: \$30 weekdays, \$49 weekends, \$33 twilight. Ph: 573-761-4653.
- Private courses: Old Hawthorne and Columbia Country Club- there's no need to think about these courses now...maybe in about ten years.

### **Other Sports**

If you are like me, and you can't stay sane without staying active, then Columbia has a lot in store for you. As already mentioned, there are some great places to work out or even play some golf in your free time (yes, there will be some free time). In addition to these, there are also opportunities to play just about any sport you could ever want to.

First, head over to the Rec Center or Stankowski Field and see what is going on. Oftentimes, there will be a game of soccer or touch football on Stankowski; there will be sand volleyball right outside the Rec; and inside, there will be basketball, racquetball, and/or volleyball games.

Second, check with the Rec Center ([www.mizzourec.com/programs/recsports](http://www.mizzourec.com/programs/recsports)) for their long list of intramural sports that take place throughout the year. This year, there were several groups of MIs that participated in various intramural sports, including: indoor volleyball, basketball, sand volleyball, soccer, and ultimate Frisbee.

If you like to get a little more serious about your sports, check out Mizzou's Club Sports information ([www.mizzourec.com/programs/club\\_sports](http://www.mizzourec.com/programs/club_sports)). Mizzou is home to an incredible array of Club sports—including all your mainstays plus archery, boating, badminton, ping pong, ultimate Frisbee (I play for the Mizzou men's ultimate club – the MUtants), water polo, roller hockey, triathlons, dancing, martial arts, fencing, lacrosse, rugby, and many others. Medical school will be one of the busiest times of your life (I'm sure you have figured that out by now), but there is no reason that you should not still do the things you love! I encourage everyone to take this recreational section seriously. If playing sports is not your thing, maybe going to the movies is.

### **Movies and Plays**

Due to the wonder of PBL and under 20 hour weeks, you actually have time to take a break from studying and relax a smidge. A few great ways to get away from studying include taking in a movie or seeing a play (classin' it up). The Missouri Student Association/Graduate Professional Council (MSA/GPC) provides very affordable movies each week, ranging from classics to current releases. They are shown in the auditoriums located around campus. You can purchase tickets at the door or at the MSA/GPC window located in MU Student Center. For those of you who just have to see the newest releases, Forum 8 Cinemas and Hollywood Stadium 14 Theaters have all the latest movies, and both offer student discounts with a valid student I.D.

For a more unique movie experience, check out the RagTag theater on 10th street. This theatre shows anything from foreign films to documentaries to movies that never made it to the

major box office. The atmosphere is great—the seating is old couches and a crazily energetic guy announces each film. They even have intermission, in which you can refresh your cup of coffee, get a cold beer, or even a glass of wine.

If classical music or ballet is more your style, the University Concert Series provides numerous opportunities to enjoy such performances. Events are held in Jesse Auditorium, and tickets can be purchased through the Concert Series Ticket Center in 409 Jesse 8-5 M-F (882-3781) or at the MSA/GPC ticket window in the MU Student Center. You can also enjoy fine theatrical performances presented either at the **Rhynsburger Theater** located in the Fine Arts Building or at the Corner Playhouse located in the Fine Arts Annex. Both are found at the corner of Hitt and University, and performances are held biweekly throughout the academic year. You can even take part in the productions, for the entire student body is eligible to audition. Tickets for the plays can be reserved in advance by calling 882-PLAY or by going to the Rhynsburger Theater Box Office in 124 Fine Arts Building (hours 2:30-5:30 M-F).

Any other events that come up during the school year can usually be found in the Maneater or on fliers posted on campus, in MU Student Center, or around town.

### **Movie Viewing**

I'll see your study break and I'll raise you one. All med students have the occasional urge to loaf in front of the tube and take in a flick. Whatever your purpose, we have put together a list of establishments that can take care of your viewing needs—along with prices and a small, incredibly biased blurb. Have at it.

#### **Theaters**

**Hollywood Stadium 14**                      2800 Goodwin Pointe Dr.                      817-0770

**Forum 8**                                      1209 Forum Katy Pkwy                      445-7469  
This theatre has the most comfortable seats of any movie theater I have been to. The armrests even move up if you have that special someone you want to get cozy with.

**Ragtag Cinemacafe**                      10 Hitt St.                                      443-4359  
The only theatre in town that you can buy booze at. This is a small, independent, foreign, and non-mainstream film venue. Yes, you can still be artsy when you are a med school dork. I promise they won't kick you out. If this is really your thing, sign up for the snail mail or email list and they'll keep you updated on what's showing.

**Ninth Street Video**                      10 Hitt St.                                      875-4112  
The place to find a variety of videos from new releases to independent films. There are a lot of weird eccentric movies that only we would like. They also have some daily specials that you can check out on the website: <http://www.9thstvideo.com/>

## Columbia Bars

**Even though you are a medical student, don't forget that you have to take time off in order to maintain your sanity.** For those of you so inclined, Columbia has a bar or two for everyone. If you feel like hanging out and tossing a few down, taking a hot date out, dancing the night away, or even getting sloshed, Columbia is the place to be. All drink specials are subject to change at the bars' discretion. As always, the place to be is where the drinks are cheap.

- **Addison's** – Around Cherry & 7th, this is not only a great restaurant but also a great bar. One of the bartenders, Dave, is full of personality and also painted all of the paintings in the establishment. This is also a great place to take a date. They have happy hour every evening after 10pm with 1/2 price appetizers and \$2 pints on draft beer (and they have really good beer – think New Belgium - on tap!)
- **Campus Bar and Grill (Big 12)** – corner of Elm and 9th. The great drink specials here make this a great place to go any night of the week, and the multi-TV environment is ideal for the sports connoisseur. With a double-level patio and a Cheers-like bar, it's an original bar for Columbia.
- **The Blue Note** – 17 N. Ninth St. A great venue for all sorts of live music. Performers in the past couple of years include: the Urge, The Bacon brothers, John Mellencamp, Vanilla Ice, Big Bad Voodoo Daddy, the Jayhawks, Salt and Pepa, Pat Green, the All American Rejects, Wilco, Pete Yorn, and many local/college bands.
- **Broadway Brewery** – 816 E Broadway. A great place to relax and enjoy a locally brewed beer. They also have a full line of domestics and drink specials throughout the week. The owners get their ingredients locally and the food is great.
- **Buffalo Wild Wings** - As the name implies, they have wings here. Not just any wings, but buffalo style, wild in their nature wings. They also have karaoke on Wednesday nights, which is why you should go there. Not a bad place to watch a game either, with their huge TV and multiple spawn of smaller TVs. Located next to the Hy-Vee at 505 E. Nifong.
- **Déjà vu** – 405 E Cherry. Columbia's best and only comedy venue. Comedians touring the college circuit perform once or twice a night on Thurs-Sat. Stay after comedy and dance. Sorry guys, only girls can shake their thing on the dry bar. They have bottomless cup on Friday. The Vu offers free “office parties” to the comedy shows that can make for a cheap night. Just fill out a card when you go to a show and you can win free tickets for you and 19 of your friends.
- **The Deuce** – Can you say fun in a nutshell? With sand volleyball, washers, great drink specials each night, and no cover if you show up before 8 pm...how can you really go wrong? Location: behind Gerbes on Nifong.
- **The Fieldhouse** – 1105 E. Broadway- Fieldhouse is more bar-like in the front and more club-like in the back. The dance club is usually wall-to-wall with underclassmen. \$1 bottles on Tuesdays and \$10 bottomless cup Fridays are longtime specials. Owned and operated by the same group as Willie's next door, they open the doors between the two bars at midnight every night so everyone can mingle! The air conditioning sucks though, which makes it pretty hot—just like the dancing.
- **Flat Branch Pub and Brewing** – Columbia's microbrewery! Excellent variety of microbrew beer and scotches. Good patio and good food. Patio fills up quickly when it's sunny. Great place to go if you want a laid back night. 115 S. Fifth St.

- **Harpo's** – 29 S. 10th St. Probably Columbia's best-known landmark after The Columns, Harpo's is full of Mizzou sports memories as well as occasional former athletes. It's a favorite spot for returning alumni, especially before and after Mizzou sporting events. Thursday night is quarter draw night at Harpo's, which transforms Harpo's into a wall-to-wall party. The deck upstairs is a great spot to enjoy a sunny afternoon. If you want a piece of the goalpost after a big football victory, the cops block off the street outside Harpo's until it's hacked up for the fans.
- **The Heidelberg** – The Berg is a longtime favorite of undergraduates at Mizzou. (Think “The Max” from Saved by the Bell...) The Berg is a restaurant that doubles as a bar at night, complete with an upstairs patio that is wonderful in the evenings. This is the place to go if you're looking for a chill night.
- **Lazer Lanes** – 3412 Grindstone Pkwy. If you are looking for a bit more action in your evening, look no further, Lazer Lanes has a variety of choices. Bowling, mini golf, lazer tag, or arcade. Their rates are reasonable and they have a fully stocked bar. They also are conveniently located next to two restaurants so you can spend your night enjoying your free time instead of travelling from one place to another.
- **McNally's** – Columbia's only “Irish Pub”. Strangely though, the interior decorator decided to mix Irish paraphernalia with an old Godfather's Pizza Place look, giving this bar a unique atmosphere reminiscent of some high school hang out with a touch of the Emerald Isle mystique (very little touch I might add). Perhaps this is why so many people who can “prove” they're 21, miraculously seem three or four years younger in here. However, it's probably the best spot in town if you're a Guinness drinker. Located on the north side of Broadway, on 6th Street, next door to Tropical Liquors.
- **On The Rocks** – On the Rocks is one of the newer bars in Columbia and is located at 10th and Broadway. Hang out in one of their booths or in the cozy couch area while enjoying a beer or the martini specials.
- **Gunterhäns** – A German-inspired pub with an amazing beer, whiskey, and wine selection + the BEST pretzels. They have happy hour deals every night and a great patio + vibe overall. Located on Hitt St by Uprise Bakery/Ragtag theater.
- **The Penguin** – Columbia's first dueling piano bar. This is a great place to go for something different—especially if you're celebrating a birthday. For a small donation, you can request songs and have your friends pulled on to the stage to be sang to or danced with by the unattractive yet funny pianist. This has become a favorite of the medical student. Go early to get a table, as this place gets packed quickly (there has been a line halfway down the block before). Drinks are a little on the expensive side, so you may want to hit up a happy hour beforehand. Located on Broadway next to Fieldhouse and Willie's.
- **Rooftop Bar at The Broadway** – 1111 E. Broadway. Located atop The Broadway hotel, this place has great views of the Columbia skyline. Recently opened, many are still eager to check this place out. As expected, it can get pretty busy in good weather.
- **Shiloh** – This is the place to be Friday and Saturday nights during football weekends. Alumni flock back to this place like the swallows of Capistrano. Everywhere you turn you'll find long tubs of iced-down Budweiser long necks, and if the temperature has taken a turn for the worse they'll break out the heated tents for your comfort and convenience. During the winter months the popularity of this bar wanes a little, but with



the return of summer the patio and the lure of live music once again make it a popular spot. Located on 6th Street, just north of campus. You can't miss it.

- **Teller's** – This is more of a "nice outfit" type of bar, so no, you can't wear your scrubs fresh from anatomy lab. They do martinis, wine, beer, and alcohol, with nice chill music in the background and art on the walls. It's a nice place to take a date for a cocktail and the food is pretty good, too. At the corner of 9th and Broadway.
- **Tonic** – Sitting on 9th St, this is a great place to dance – especially if you like Techno and Club. Only open Thursday and Saturday, they have a great hook to get people in the place – lots of dancing. The dance floor is kind of small though, and it tends to fill up quickly, especially on Thursday nights. Tonic has a VIP room in the back that is a little more laid back, so head back there if the dance floor has become too much for you.
- **Tropical Liqueurs** - Now this isn't really a bar, but this is the place for that kid in you who could never get enough of QuikTrip's slushee quarts. Of course these slushee drinks have a little kick to them. I think they have fifteen to twenty different drinks ranging from your typical frozen piña colada to their very own 57 Chevy. Unfortunately the drinks are expensive, but every once in a while they're worth it. Also, you can get them to go in discrete little white Styrofoam cups. Located at the corner of Broadway and Third Street Trops on Providence and Nifong. Definitely draws the crowds AND they have food!
- **The Winery Le Bourgeois** – One of the most loved drinking spots in Columbia (although it's not really in Columbia, but rather fifteen minutes away in beautiful Rocheport). The A-frame sits along the bluffs of the Missouri river, giving you a spectacular view. Not that you'll care after one or two bottles of their sweet wine is coursing through your veins. It is the perfect place to go on a sunny afternoon. Sit back, relax, have a basket of cheese and sausage, and drink a lot of wine after your hard day of ...studying?? (If you do that sort of thing). This is one place you will come to love and cherish, but it's cheaper if you buy their wine at the grocery store and then smuggle it in. After a hard week, lots of students head here after class on Fri.

### **Columbia by Foot**

If you are a runner, Columbia is a great place to be. As a city, Columbia is both safe and runner friendly. Few roads are without sidewalks, and there is an even distribution of hills and flat land. If you prefer road running, I suggest starting on the MU campus and making your way downtown as you get to know the area better. After that, you can just explore...and see where the roads take you. Road running is a great way to get to know the city (I can still find new places to run after five years in Columbia!).

If you prefer trail running, the **KATY TRAIL STATE PARK** is a 200-mile fine gravel trail that runs through Columbia. It is flat and well marked (every 1/2 mile) with entrances at Providence Rd., Forum Blvd., and Scott Blvd. If it is nature you crave during a short run, there is a small nature area (2 mile loop) located next to the Katy Trail at its Forum entrance. Most of the trails are dog friendly, and even have doggy bags located at the entrance for you to clean up after your pet. Also at the Forum entrance to the Katy Trail (about 1/2 mile to the left of the parking lot at Forum) there is a leash free park that runs along the side of a small lake – my dog always has a blast meeting new friends and scaring the turtles back into the pond. For a more difficult trail run with rough terrain and plenty of hills, try **ROCK BRIDGE MEMORIAL STATE**

**PARK.** This is located 7 miles south of Columbia on MO highway 163 (for more info, call 573-442-2249).

For you racers out there, the **Columbia Track Club** (CTC) (874-2407) is one of many organizations that sponsor runs throughout the year. If you want to become a member, the cost is \$15/year. As a member, you receive a monthly newsletter, a race calendar, and registration forms for upcoming events.

Last, but not least...running apparel. The best store in town is **TRIATHLETICS**, which is located off of Forum Blvd. on Chapel Hill Rd. They have the best selection of shoes and running gear as well as bikes and cycling equipment. In addition, they have current race information and registration forms available at all times (the owner is also the president of the CTC, I think).

### **Columbia's Best Kept Secrets**

When I first came to Columbia, the sheer number of interesting and beautiful people to which I suddenly had access floored me. Like any large state-college town, Columbia is a Mecca for bright and vibrant young individuals looking to find themselves and have a little fun along the way. Most, if not all, students at some time abandon this voyage of self-discovery and focus their energy on simply having fun. Accordingly, Columbia also has a bustling and eclectic collection of bars, nightclubs, and other public venues where you, too, can participate in this extended spring break atmosphere. What many fail to realize, however, is that Columbia is also full of a wide variety of hidden outdoor enclaves where one can spend an afternoon, an evening, and even the occasional sunrise by themselves or with that special someone.

Columbia is extremely wooded- and I don't mean only that there are a lot of trees, but that the city planners were wise enough to zone in and include several green spaces that are continuous with local and state parks. As such, it is not all that unusual to spot deer, turkey, and other wildlife within a mile or less from school. For someone like me from the southern part of the state, such sites are a welcome break from the typical social scene.

One of the best places to start out in your search for some peace and quiet is at **Rock Bridge State Park**. Take Providence Rd. south past Nifong until you reach Hwy 163. At the stoplight, turn left and continue for a few miles. Eventually, you will see two exits for the park. The first exit has access to BBQ pits, a small playground, and a few trails. The second exit is the main access to all the trails where you can walk or bike. The most well-traveled and well-marked trail is inaccessible to bikes. It provides access, oddly enough, to a natural rock bridge as well as a rather dubious sounding cave by the name of the Devil's Icebox. During the fall, you can receive guided tours of the cave, but be prepared to get muddy. This is a good place to go during the week, but on the weekends it might be a little crowded if privacy is your main concern.

Another place just outside of town is called the **Pinnacles**. It is a privately-owned, but publicly-accessible park containing several trails and some picnic areas. The centerpiece to this little beauty is a series of rock formations bearing the name of the park. This is quite possibly the best place to view a sunset in the Columbia area - make sure to take a camera. The Pinnacles are a ways out, but well worth the trip. Take 63 about 15 miles north of Columbia past the I-70 interchange. Eventually, you will come to the top of a hill and see a sign for Silver Meadows Girl Scout Camp. Make a right here and continue on as the road bends to the right; it will take you straight into the park.

Equally as famous among locals is **the Big Tree**. Since I drove all the way out there for the purposes of this article, I might as well write about it. And on that note, I (2nd author) drove all the way out to the wrong place first, and then to the Big Tree to re-write about it and one up you— so there 1st author. Take Providence south, 10 miles after you pass the Rock Bridge stoplight and burn through the bustling berg of McBaine, MO, you will see a large oak tree on the right side of the road. It is pretty distinct, as there is a large painted rock in front of it and a gravel loop where you can drive around it. This would probably be a good evening date spot, assuming you were alone. The hippies that were picnicking there when I stopped by seemed a little ticked-off when it looked like I might be encroaching on their dinner.

Within the city limits, there are also a few fairly rugged and undeveloped areas. **Capen and Grindstone Park** are right next to each other and provide areas for hiking, rappelling, and mountain biking. The parks are less than a mile from campus and access to both can be found about 1/4 mile south on Rock Quarry past Stadium. I used to run here from time to time, but I will warn you the trails can be kind of muddy and Columbia residents who enjoy letting their dogs off their leashes frequent the area. If you can avoid the mud and dogs, it is a very cool place in the early mornings, as the fog tends to roll in and settle in the valleys. If fishing or swimming is your game, **Twin Lakes** offers a great opportunity to do both within the city limits. Located just off of Chapel Hill Blvd., one lake is fully staffed and fenced off for swimming, while the other is stocked with fish & turtles, and also has a boat launch for small craft.

All right, I know this is going to sound a bit creepy, but the best place to see the sunrise in Columbia is from the **Columbia Cemetery**. It provides a full view of the eastern horizon with Columbia in the foreground. It is located behind the Walgreens on Providence, but access is through the gate on the Broadway side. A little note of caution, “technically” it is illegal to be there at night. So if some of Columbia’s finest happen to notice you there, you can try and explain why you are trespassing at 4:00 am or you can run. If you do run, make sure you run toward the south side of the property. The barbed wire fence there looks ominous at first, but it is easy to cross compared to the 10 ft chain length mammoths on the east and west ends. Heading south also puts you in a neighborhood with a lot of rental homes and fraternity houses. The police are so used to chasing those kids around they will probably just let you go. (2nd author speaking: yes, that was creepy.)

Located on the northernmost edge of Campus you will find **Peace Park**. If the name doesn’t clue you in, this area was dedicated after the Kent State shooting in the 60’s. Within its boundaries there are plenty of trees and some nice bench views. I will warn you that individuals who think the 60’s are still going on frequent the park. So be prepared to discuss the finer points of post-modernistic art and theater with some guy who looks like he just rolled off the Phish tour. Still, this place would be a good place to walk to some afternoon with one of your PBL group members to blow off some steam.

Last, but certainly not least, are the **Columns**. I’ll give you the freshman tour version first; “the Columns were part of the original Academic Hall which burned down in 1898 and all that is left standing of the original structure...” Tour guide mentality aside, they are one of the most beautiful and popular places on campus. This is another favorite late night date spot. If you do go there on a date, remember that campus police are more numerous and less friendly than Columbia PD so I suggest you stick to studying, picnicking, or tossing around a football.

# THE NEXT FOUR YEARS

## A Four-year Overview

You are embarking on the long road which, in four short years (believe me it goes by quickly), will culminate in a 40-foot walk across a stage to receive the coveted medical degree. And like most students since the dawn of medical education, you are wondering what important dates stand out amongst the vast amount of “stuff” that is going to have to be crammed into every available crevice of your brain (or anywhere else you can store it for that matter!). This section will hopefully provide an overview of what the next four years will bring. Academic calendars can be accessed through the School of Medicine website: <http://medicine.missouri.edu/students/calendars.html>

### Year 1

Your life will revolve in ten-week chunks of time called “blocks.” There are 4 blocks per year, and each block consists of eight weeks of class, one week of tests and one week of rest.

July 30 – September 29	Orientation + Block 1
October 1 – 5	Block 1 Exams
October 6 - 13	Block Break
October 14 – December 7	Block 2
December 10 - 14	Block 2 Exams
December 17 - 21	Block 1 Remediation
December 17 – January 6	Winter Break
January 7 – March 1	Block 3
March 4 – 8	Block 3 Exams
March 11 – 15	Block Break
March 18 – May 10	Block 4
March 25 – 29	Block 2 Remediation/Spring Break
May 13 – 17	Block 4 Exams

**Orientation:** The adventure begins! Orientation is great, not only because you will be getting to know the people who you will be spending the next four years with, but also because the M2s will be throwing you lots of parties in an effort to get to know you. Take some time this week to enjoy yourself because next week school will start in full swing. Make sure you have all the little things in order such as establishing bank accounts and finding your grocery store, and it will make your transition into real school a whole lot easier. Also, remember that during this week you will be meeting a lot of M2s. If you have any questions ask the M2s!

**First day of school:** You are sitting with seven other nervous people in a PBL room generating learning issues and coming up with great differentials such as, “I think he has an infection”. Don’t stress too much, everyone is just as nervous and you are going to be GREAT!

**Last day of first block:** Easily one of the best days of the school year.

**January – April:** Time to apply for summer research opportunities and clinical externships. The deadlines for many of these programs are surprisingly early. Some may even be in

December, so make sure you keep an eye on the bulletin boards for some of these opportunities. The programs offered from MU will arrive in your mailbox by April. The Dean's Office provides the listing for summer research projects. *Don't worry about research during Block 1, focus on studying and passing before moving toward extracurricular.*

### **Year 2**

Your life continues to move in ten-week chunks. Be happy, there are only four more blocks to go! You've returned from a summer of bliss or research, and hopefully you have not forgotten all the knowledge you so painstakingly stuffed into your brain.

**February:** Bring your checkbook – it's time to register for Step I of the boards! This is also when you will be informed of the rotation lottery.

**Late May/Early June:** The USMLE Step I!!! Results come back in 4-6 weeks. Between year two and year three you have 4 weeks off. You have this time to take the boards, so choose if you want more study time or more vacation time before rotations.

### **Year 3**

Blocks are now 8 weeks (instead of 10). You no longer have a week of exams, but you also do not have a week worth of vacation in between rotations. Learn to enjoy a long weekend!

**Late April or early May:** During this time you will register for the USMLE Step 2 and register for your senior electives. USMLE Step 2 has two parts: Clinical Skills and Clinical Knowledge. You will want to sign up for Clinical Skills by early May and take it ASAP as scores are slow to come back. These tests are expensive (Skills \$1000+ and Knowledge \$480) and you will have to travel for Skills so plan accordingly for extra money. You will also be told about the Dean's Letter and the Electronic Residency Application Service (similar to AMCAS).

### **Year 4**

Well, you have finally made it! You are a little wiser and your white coat is a lot dirtier. Unlike your third year, you can actually schedule vacations during your fourth year. You are only required to take eight months of rotations, although most students take as many as they can. June and July: Contact the people from whom you want letters of recommendation, and begin thinking about starting your MSPE (Medical Student Performance Evaluation, aka Dean's letter). Begin to rule-out or rule-in places you want to apply to for a residency. If you're not familiar with FREIDA, now would be a good time to start.

**June – November:** USMLE Step 2 Clinical Skills and Clinical Knowledge. These tests are not taken together so you will need to schedule two different dates.

**Late Summer/Fall to mid-December:** Residency applications.

**Mid-September:** Finish MSPE/Dean's letter.

**October 1:** Uniform release date of the MPSE/Dean's letter. Keep in mind that you should apply to programs before this date. Most places will accept a cover letter informing them that your dean's letter will follow.

**November 30:** NRMPB applicant registration deadline

**Late November – January:** It's interview time!!!

**December:** Military Match Released

**Late February:** Rank order lists are due from candidates and programs. If you are doing a couple's match, see someone important by October as this gets rather confusing.

**Mid-March:** Match results released. A little later that same day: BIG PARTY!!! For those students who do not have a Match, there is a Supplemental Offer and Acceptance Program (SOAP) which assists students in obtaining a Match in an unfilled program.

**Mid-March to mid-April:** Programs/applicants mail and receive letters of appointment.

**May:** You graduate!!!

(Editor's note: You will receive another "guide" before your third and fourth years which will explain all of this in more detail.)

## **Year 1: Block by Block**

### **Block 1**

Block one is your introduction to the medical basic sciences. Courses include biochemistry, cell biology, molecular genetics, histology, and gross anatomy. You will also be learning how to empathetically take a patient's history in Introduction to Patient Care (IPC). You are probably still trying to fathom the thousands of dollars you will owe by the end of school, so save some cash on books by picking up what you need at the Orientation Book Sale. If you have no idea which books to buy, ask a reliable M2 or check out the Books and Supplies section on page 5.

Block one will probably be your first experience with the proactive style of Patient Based Learning (PBL). Efficiently learning from this style may be a constant struggle throughout the year. There are vastly different opinions about the PBL process and what makes a successful PBL student. A common opinion is "you get out what you put in." You may think that this is trite advice, but if you master the knowledge required by the learning objective, your group will be able to intelligently discuss the testable learning issues and the facilitator will be more likely to add valuable insight to the conversation.

Socially you will be bombarded by close to 220 new names and faces between the M1 and M2 classes and faculty. Try to know the names of your group members and the faculty, especially your facilitator. While not mandatory, try to attend a few of the various interest group introductory meetings. They will educate you about potential extracurricular activities with peers and they're a great way to score a free lunch.

### **Ideas on studying**

If objectives are listed on lecturer's handout, know them. That is a good way to measure if you know the material. If you can get in the habit early, look over lecture material the same day you had the lecture. Then by the end of the block when you really start studying, you will have been over it already. If lecturers provide/recommend practice questions it is usually a good idea to take a look at them. Also, don't be afraid to contact professors if you are having trouble with something. Most of them are more than happy to be asked for help. For PBL, make sure you understand the faculty objectives. Each weekend try to go over the case and objectives, especially with someone not in the same group as you.

### **Anatomy**

For anatomy, you must know not only where things are located but also specifics like blood supply. Labs and lectures don't start until week 4, but start studying this early and save yourself some pain. Instead of everyone looking up all these secondary points, split it up among your group. Have each person take a week of anatomy and type a handout

with the information needed for that week and share amongst your group. Lectures help you understand material but you don't have to know all the extras they throw in. Just know what is listed on the handout and the secondary points mentioned on the syllabus. You are able to go into anatomy lab on your own time to study. Be sure and look at several cadavers since there are individual variations and you must be able to recognize structures on cadavers other than your own.

### **Histology**

The exam will have questions from lecture as well as pictures from the videos. Watch the videos (1.5 or double time will make the time pass a little faster) and maybe some kind souls in your class will make powerpoints or quizzes to help you study. Remember you won't be tested on the pathology presented – only normal appearances.

### **Biochemistry**

Know the pathways and important regulatory enzymes. Important enzymes will be specified, but it isn't much more difficult to know all of them. Practice writing out the different pathways and their enzymes. Know in which steps ATP is produced or used and know the effects of insulin and glucagon on different steps. You don't have to know many structures, but try to know the groups that have similar side chains, e.g. aromatics, amino acids, sulfur-containing and examples of each. It is probably a good idea to know the structure of basic sugars. Understand key concepts like  $K_m$  and  $V_{max}$ . For specific diseases mentioned in lecture or PBL, know which enzyme doesn't function properly and the genetics involved, or if given that a certain enzyme doesn't work which problems would occur or which intermediate would accumulate.

### **Pharmacology**

Know the specific mechanisms of action discussed in lecture or PBL and general concepts like therapeutic index, first pass effect, potency, efficacy, etc.. You do not have to know every individual drug or the exact manner in which drugs are approved.

### **Molecular Biology and Genetics**

Know the complexes involved in steps of protein synthesis, transcription, and translation. Know how phosphorylation affects enzymes, properties of DNA structure, and basics of molecular techniques such as RFLP and PCR. You need to know specifics on replication proteins, what they do, different polymerases for prokaryotes and eukaryotes, as well as concepts like recombination and specific differences between prokaryote and eukaryote RNA. For transcription factors and tumor-suppressor genes know the important ones emphasized in lecture. Understand inter/intracellular signaling and major differences between receptors.

### **IPC**

You will spend lots of time role playing and practicing your interviewing skills. Basically, ask open-ended questions, follow up on what patients say, listen, summarize, facilitate with body language. Most lectures follow the book and emphasize common sense. Understand the biopsychosocial model, know differences to consider for geriatric, adolescent, pediatric patients. Understand confidentiality, ethical considerations, and ethics definitions. Know how to ask about health habits in a non-confrontational way. You will have a standardized patient you will have to interview during exam week. This is graded satisfactory/unsatisfactory.

## **Exams (see pages 14-16)**

### **Clinical Reasoning exams (CRE) – Monday**

Clinical Reasoning exams are horrifying the first time you take them. Don't count on studying much on Monday and Tuesday after these exams; they are exhausting. During the exam, just research the case, display logical reasoning, support your information and tests and you will probably do better than you think, even if you miss the diagnosis. Most people finish block one clinical reasoning exams feeling that they failed. You will be stressed, but it will be ok!

### **Knowledge based exam (KBE) – Friday**

This is a multiple-choice exam based on everything from PBL and lecture. You do have to apply your knowledge for the questions, but most of the questions are still pretty straightforward. Anatomy practical makes up 15% (30 questions) of the 200-point exam and histology about 10% (20 questions).

### **IPC exam – Wednesday**

It is not difficult to study for and most of it is common sense. You should study the lectures because many of their main points are covered.

## **Block 2**

You survived block one! Congrats! But now is not the time to start getting “comfortable.” I found this block to be crammed full of important stuff to learn. Unlike block one there is not one main topic, but FOUR: **pulmonary, cardiac, renal, and GI physiology**. So do not wait until week six to start studying. It is a pain to start right away, but with the amount of material in this block it is important to keep up with the lectures and the cases.

You also need to know that this block is a little different than last block in that instead of just memorizing things, you actually have to understand and apply the information. It may be useful to study the information by yourself first and then meet with a small group of people to talk about it. This may help you remember everything a little better. Gross anatomy may take up a bit more of your time this block. Know the cross sections, too. As far as histology goes, watch the DVDs just like in block 1.

### **IPC**

IPC this block is much more fun. You get to buy your doctor toys and actually try them out on each other. It is up to you to buy an otoscope/ophthalmoscope set, but it is really not necessary. You do not need it for the test, and you will have access to them in all the clinics. It is a good idea to get a Mosby's Guide to the Physical Examination if you don't already have it. Remember, a physical exam is something you will be using the rest of your life, so try and become comfortable with the skills you learn. At the end of the block, you'll have a practical IPC test which you perform on a standardized patient (probably an M3 or M4).

This block you are also introduced to **ACE** where you will get dressed up in your crisp white coat and work with a doctor for four sessions. It is a great time to practice your interviewing skills and try the physical exam. Don't be afraid to jump in. Just go and have fun!

## **Block 3**



Block three emphasizes neuroscience and neuroanatomy. At first, the information seems very overwhelming and most of the terms are unfamiliar. However, as the block progresses, the pieces of the puzzle will start fitting together.

### **Anatomy**

The anatomy for this block includes gross anatomy (brain sections are provided), overheads, WebCT slides, and histology slides. The presentation of anatomy this block will seem disjointed and jumbled, but the key is that there are pathways linking everything together. Make note of these pathways and study them from the start. Use a brain atlas, make your own drawings, or make flashcards, whichever method works best for you, but start memorizing the pathways early. You will also learn the functions of and how to test cranial nerves, and what happens when there is a lesion. It is critical to memorize the cranial nerves, their functions, and how to test each one.

### **IPC**

For IPC, you will learn more interviewing skills, but these will focus on topics such as delivering bad news, alcohol abuse, physical abuse, child abuse, and other sensitive topics. This IPC block is emotionally taxing and is hard for some to get through. There will be more role- playing and standardized patient exercises. Relax, by now you've figured out how (or how not) to study for IPC. The exam will consist of a multiple-choice test and a standardized interview.

## **Block 4**

Gone are the brains, physiology, and biochem of earlier blocks. Here comes Immunology and Endocrine and Reproductive systems with some Microbiology mixed throughout. There are going to be lectures including a lot of each but the block will focus mostly on the immunology/microbiology aspects. Don't worry, anatomy and histology will still be there as familiar questions.

The PBL portion of block four can basically be divided into four separate areas:

1. Immunology
2. Medical Microbiology
3. Hemostasis/Blood Disorders
4. Endocrine/Reproductive Systems.

### **Anatomy**

The anatomy for this block focuses on the lower leg and pelvis, including reproductive organs. The pelvis is the most difficult part and should be a large focus in your anatomy studies.

### **IPC**

IPC has switched from talking about sexual tendencies (third block) to doing statistics and learning epidemiology...a rough trade. Have fun with the Community Snapshot, it is a truly joyous experience.

As the last few weeks of this block can get pretty hectic, start planning for your LAST summer early. Trying stuff like international study/work is definitely worth doing, and funding can be found if you start early on. Also, consider running for an office in a club for the upcoming year; most clubs seem to be run by M2s.

## **Summer Vacation**

The long and arduous journey known as the first year of medical school is over and never has the letter “S” meant so much to you. Since this summer will probably be the last summer that you are in complete control, do whatever you want to do. In the early spring there will be a meeting describing all the programs available. So what to do, you ask? Options include:

- Research (clinical or basic science) (6-8 weeks)
- Internal Medicine Clinical Internship (4-8 weeks)
- Springfield Summer Clinical Experience (4 weeks)
- Rural Track Internship (6-8 weeks)
- The annual SIGHT trip (2 weeks)
- Mini Med school counselor (2-3 weeks)
- Orientation Week Leader (2-3 weeks)

While this will be technically your last free summer, students are encouraged to do something productive with their time. One of the main benefits in doing something in the field you are interested in would be to get to know faculty in that field. It is never too early to get your name or at least your face recognized by the people who will eventually write you a letter of recommendation for a residency position. If you are unsure of a career choice after just one year of medical school, as a lot of students are, then use this summer as an opportunity to explore different fields. Some students decide to take the summer off, but it never hurts to continue your education any chance you get!

### **Clinical and Basic Science Research**

The general approach to obtaining a clinical research project utilizes the resources of the OME and your ability to independently seek out interesting projects. The OME offers summer programs similar to those offered for basic sciences. The basic rule is to examine the list of professors offering summer opportunities (generated by the OME), pick a few topics which spark your interest, and contact the appropriate professors. You can seek out projects independently outside of the OME by speaking with professors who may be interested in sponsoring you off of their own grants. As always, the earlier you start the better.

The rewards of clinical research are many. One of the biggest rewards is in establishing a relationship with a mentor. This mentor can be vitally helpful during the next three years of your medical education. The other reward is that you have advanced the scientific study of medicine (possibly even through a publication).

Basic science research is another option. Really, basic science research is about using the knowledge that you gained over the last several months to solve problems or understand the way things work. A summer of basic science research is an opportunity to let humanity get some good out of the vast scientific knowledge that you have accumulated and it is a chance for you to explore your ability to think outside the box. Clone a new gene, find out how a drug really works, you get the picture. Just give basic science a chance: read through the list of possible mentors and projects and see if anything interests you, and then enjoy a summer of using that scientific knowledge you always thought was useless.

### **AHEC Sponsored Programs**

In 1995, the University of Missouri-Columbia School of Medicine began a long-term effort to increase the supply of physicians for rural Missouri. Known collectively as the Rural

Track, the effort includes 1) **The Bryant Scholars Pre-Admission Program**; 2) a two-month **Summer Community Program**; and 3) a six-month program of **Rural Clinical Rotations** during third-year. While Bryant Scholars are given first preference, anyone is eligible to participate in the Summer Community Program and Rural Clinical Rotations. Preference is also given towards those students expressing interest in rural practice.

These programs are great for getting some real hands-on experience and have been increasingly popular each year. The Summer Community Program takes place the summer between your first and second years and allows students to live in a rural community for six or eight weeks (summer break is usually 12 weeks long). A typical student can expect to see about 750 patients, with involvement varying from observation to independently taking histories and physicals and then reporting to your preceptor. The Rural Clinical Rotations allow 3rd year students to complete half of their core clinical rotations in a rural setting. By alleviating the Attending physician-Fellow-Resident-M4-M3 totem pole, the program allows for more autonomy, a more diverse patient population, and greater one-on-one teaching from an experienced practitioner than is possible in rotations at the UMC campus.

## Year 2

So, you finished your first year of medical school. By now you are an old pro at PBL and have mastered the art of objectives. Second year is pretty much the same, but with a few alterations. PBL is now only two afternoons a week, leaving plenty of time in the mornings to get that objective done, run some errands—or sleep.

Second year is a great time to get involved in activities—you'll notice during your first year that those second years seem to be everywhere—running meetings, organizing events, eating your PBL breakfast. There is a lot of opportunity to participate in numerous different groups and events if you are interested.

Year two also brings a bit of concern as the boards approach. For the mere outlay of \$485.00 + (I haven't added in the countless sums of currency you will spend on review books and question banks) you are given the pleasure of taking this examination which has generated more angst in medical students than, well, nothing else. Things may get somewhat stressful while you are studying, but keep in mind that judging from Mizzou scores, our school prepares us pretty well for the boards. To ease the stress and anxiety of getting ready for boards, spend some time talking to M3s and M4s about their choices and above all don't get too frustrated. Flexibility is the key!

Overall, second year is great. You know your way around (although it's amazing how many shortcuts you'll still find), you know your classmates a little more (for better or for worse...), and you are more familiar with the routine.

## Year 3

This is it. A taste of the big time! You've spent two years cracking books, researching medical problems, sitting through lectures, and teaching each other in the patient based curriculum. Now it's time to put that knowledge to work. You get to play doctor!

Nothing can totally prepare you for the start of your third year. But, you will have the basic fundamentals behind you and First Aid for the Wards with you. You just have to apply your knowledge, and remember that learning is a life-long process. If you knew everything

already, you wouldn't be here. That attitude will make you feel a lot better the first time some overworked, stressed out resident yells at you for something you didn't really know you were supposed to do. Let it roll off your back.

Third year is really exciting. The first day you walk on the wards is terrifying because you just don't know the system. You'll probably open up the door to the broom closet at least once, thinking it's your patient's room. But within one week, all of that is old hat and you'll be quite the professional at obtaining information. You'll soon be able to concentrate on learning about your patients' diseases and personal problems. And no patient history is complete without asking about personal problems.

Some basic information to get you started. Your routine everyday for the most part will be to come in to see the patients assigned to you and look up their labs, x-rays, etc. This is called pre-rounding. You will then present this information to your residents and decide on a plan for the day for the patient. This is work rounds. Generally, you will then have a lecture and then attending rounds where you present your patient to the faculty doctor. Attending rounds are an excellent opportunity to learn because they can teach you things you can't find in books. Your call schedule will vary from rotation to rotation, but the residents don't bother you for every call they get from the nurses, and they generally try to make sure you get as much sleep as possible. Also, do not forget to eat during those long hours on call. You do not want to be that medical student that passes out in surgery, hits their head on the instrument tray, and ends up getting 10 stitches.

Inevitably at some point during your third year you will begin to think about doing rotations away from MU. There really is not a good or bad time to start looking into programs, and most places do not have a set time during which you have to apply. The competitiveness of the program usually determines how far in advance you need to schedule a slot. Talk to people who may have done away rotations to get a feel for when to apply. If you know where you want to go for residency, do a rotation there and make a good impression.

## **Year 4, Interviews, and The Match**

This is the fun year: your one and only chance to actually have some say over the electives you are going to take. You also can do almost your entire fourth year anywhere in the country (as long as you're approved by an accredited medical school and by our Dean's office). Hopefully, by the time you've finished your third year, you have some idea about what specialty you want to pursue for residency. Most people choose to take their Sub-I's (sub-internship) early in their fourth year. A Sub-I basically means you're supposed to act like an intern, but nobody will take your orders without getting them cosigned by a real doctor. Some people do their Sub-I's in different areas of the country in the hopes that it will help them when it comes time to apply for residency. This is the time to start asking for letters of recommendation for ERAS. You want whoever is writing them to think good things about you. So work your butt off, and ask for those letters of recommendation.

Now I'm sure you're wondering, what is ERAS? It's the electronic database into which you enter your letters of recommendation, personal statement, and application information. and your C.V. (i.e. a resume). Basically, ERAS is a database that holds all the information you need to apply for residency. Of course the system costs money, and the more schools to which you apply, the more money it costs you. After your application is submitted, you will be contacted for interviews.

Most people interview in December or January. You usually end up taking one of these months off, and taking an easy elective the other month so you can travel. You will spend lots of money during the interview process, especially if you are trying to get one of the more competitive specialties (derm, plastics, urology, etc.).

In February, you turn in your rank list of all the schools which you would consider going to for residency. Obviously you rank them in the order you would like to go to their program. The programs also rank the people they interview. If you rank a program, and that same program ranks you, you go there. They start with your number one choice and work down the list. This is a highly simplistic explanation; you can read the details on the web site when you're a fourth year.

The Dean's office finds out on a Monday in mid-March if you "matched." If you did not match, you would use the SOAP program to obtain a position have two days to scramble into a program that has an open spot. The letters go are given out on Friday (Match Day!) Thursday telling everyone to which program they matched and in what specialty. You're allowed four months off total your third and fourth year.

## The Boards

Aaah, the feared boards. Throughout your first year you will undoubtedly hear the M2s making several comments about their impending doom. And the "gunners" in your class will most likely be worrying about boards by week two, buying every board review book in sight. What are boards? Well, officially "the Boards" are a three-step process of becoming licensed to practice medicine. You'll hear about Step I and II during medical school, then later on in residency you'll discover Step III. Boards are put together by the USMLE (U.S. Medical Licensing Exam).

**Step I** is taken in June after your second year, just before your M3 year begins. It used to be a big, hairy, all-day exam that supposedly covered everything from your first two years. The test is computer formatted and takes seven hours (one day). A passing score (185) equals somewhere between 55-65%. Everyone always gets worked up over boards, and somehow your entire class will disappear from the face of the earth between the end of M2 exams and boards. A study showed that 70% of students come out of boards thinking they failed. Luckily the real numbers are only around 4-5%. Historically, MU has done fairly well on boards, with less than 2-3 students failing each year. And don't worry about the PBL curriculum hurting your score—the scores from this past year's M4s were better than MU had seen in years!

**Step II** of boards is taken during your M4 year. The content of this exam focuses on your M3 year clinical core curriculum. It seems that the M4s don't worry nearly as much about Step II as they did about Step I, since they've already been grilled on it day in and day out for nearly 365 days straight by attendings and residents.

There are two parts to Step II: Clinical Skills and Clinical Knowledge. Clinical Knowledge is similar in format and scoring to Step I—it is computer based and can be taken locally. Step II Clinical Skills is a practical exam in which standardized patients are examined, diagnosed and worked-up. This test is taken in select US cities that you must travel to (the closest site is Chicago) and costs a lot. Step II Clinical Skills is scored pass/fail and most people study minimally for it. Step III isn't really even worth mentioning here, since you take it during your residency.

So how should you prepare? Relax. You're an M1. Don't stress about it, and enjoy life while you still have one. It wouldn't hurt to buy a few Board Review books to glance through every once in a while during your first year, but definitely don't cancel your weekend plans for a 48 hour study session. The M2s have an annual book sale near the beginning of the year, where you can pick up a few cheap books and some helpful hints. If you really think you need to start now, get a copy of *First Aid for the Boards*—everyone gets it. As far as which books are best, it all depends on the amount of time you want to put into it. The NMS series is far too detailed in my opinion, and I seriously doubt you could finish all the books even if you started right now.

And what if you fail? Don't worry (yeah, right!). There is no limit on the number of times you can take boards. You don't get kicked out of med school for it. However, you must pass Step I before you enter your M4 year, and you must pass both Step II exams before you graduate. And if you fail either one more than 3 times, the Missouri Board of Healing Arts won't let you practice in Missouri. Make-up exams are offered year round for both Steps 1 and 2. There are plenty of study courses you can take if you are really having problems—you know, Kaplan and the like. Good Luck!!!

### Step 1

After taking Step 1 you'll realize that it's not really as scary as you thought it would be. Our medical school does an incredible job of preparing us for the type of questions that will be asked. My best advice is to check out the list of highly rated review books in **First Aid for Step 1**. For second year it's always good to review the normal physiology of something while you are learning the pathology. You really don't need a lot of extensive review material. One or two of the review books listed in *First Aid* is fine. I personally like the High Yield series for most things. The BRS books are better block companion books and are a little too long for quick board review, but good to have around if you need to re-learn something. Other students like the style of *Underground Clinical Vignettes* and the *Ridiculously Simple* series. Take a look through some of the books at the bookstore and decide which style you think will work for you. Most importantly don't try to review too in-depth. It is NOT necessary to review every lecture and objective you've had in the last two years. Concentrate on the “Key Facts” section of the *First Aid* book and you will be fine. When you start studying depends on your style and how well you would like to do. Three weeks of hard-core studying is sufficient. If you don't want to put in 8-12 hour days for three weeks then take a little longer. It is NOT necessary to defer a block to study for boards unless you have extenuating circumstances that keep you from going hard core. The best advice I can give you is to relax. Our entire curriculum is built around board preparation. Very few of our students fail the boards. A former lecturer once said, "Smart people who study will pass." You are all smart people, so study...you'll pass. Oh, and smart people who go to the book sale save money!

### Step 2

Step II needs to be taken sometime your fourth year to graduate. Your scores need to be back, and you need to pass it to get your diploma. Most of the information that you need to know is based on your third-year core clerkships. When to take it is entirely up to you. Some people take it early in their fourth year when the clerkships are still “fresh” and to get it over with, while other people procrastinate and take it in March. Just take it before you match, because once you match do you really want to study for this?

## **Closing**

With any luck you have read more than just what was written about bars. Hopefully, you will remember to look at this compendium when you have some questions or are starting to become anxious about exams. If, even after reading this guidebook and asking upperclassmen you still have questions, just relax as I'm sure you will figure things out. The hardest part about medical school is just getting into the flow of things. Once you get the hang of it, you will be fine.