

## 11. EDUCATIONAL PORTFOLIO (if applicable)

### Educational Portfolio Template

#### 1. Educational Narrative.

**a. Personal description.** My philosophy toward clinical education is simple – you get what you give. I enjoy medical education because of the one-on-one interactions with students at all levels. I get both personal and job satisfaction from observing their progress over time. Students, residents, and fellows push me to learn and under the best circumstances, we teach each other. My goal is to engage learners and connect at their level of knowledge and then push them further by asking a clinical question that requires thought and interpretation. The type of learners I work with range from second year medical students who have limited foundational knowledge in liver diseases, to senior GI fellows who are becoming experts. The strategy I employ works at any level to keep learners interested and accountable for their decisions. This approach has been developed over time as a response to feedback from students and residents and is based on my experiences during rounds and while teaching in small groups. This method continues to be successful, as I am now more conscious of the learner, and I incorporate different techniques to include students and enhance participation in real time during bedside rounds. My didactic teaching has also changed over time - I focus more on broad concepts using details to emphasize teaching points rather than drowning students in details.

As I work with future clinicians and scientists, my goal is to impart upon them the skills and knowledge required to identify and approach clinical problems directly. I aspire to foster an appreciation for lifelong learning and the devotion required to keep pace with advances in medicine as a practicing physician.

Teaching and education has influenced my career in ways I could not have anticipated. My research focus is on a rare genetic disorder known as Alpha-1 Antitrypsin Deficiency (AATD). As a clinical researcher, I appreciate the challenges of working with rare conditions, but my experiences pale in comparison to the difficulties that patients with AATD encounter in their daily lives. Patients with rare conditions often do not have access to experts familiar with their disease locally. Many times their medical providers do not even possess a basic understanding of the disease. For this reason, it is imperative that we educate individuals with AATD so that they can advocate for themselves, educate their family members, and bring awareness to their medical providers. I am actively involved with the Alpha-1 Foundation, a national non-profit patient education, advocacy, and research organization ([www.alpha1.org](http://www.alpha1.org)). I deliver educational talks to patients and caregivers aimed at furthering their understanding of the liver and how their inherited condition may affect their health. My involvement with Alpha-1 has helped me to become a better communicator with patients and how to present data at an understandable and digestible level.

**b. Letter from an education supervisor.** *{removed for privacy}*

## **2. Instructional Activities and Evaluations.**

### **a. Teaching Activities and Evaluations.**

#### **i. Course Director**

None

#### **ii. Lectures within Courses**

**Course:** BMS6634, Gastroenterology and Hepatology

**Dates:** Fall 2015 and Fall 2013

**Lectures:**

Liver Disease: Acute Liver Failure, Cirrhosis, and Liver Transplantation Part 1, 2, 3  
Jaundice

Patient Presentation and Discussion

Case-Based Lab

My student evaluations were above the mean department evaluations for these lectures both years.

**Course:** Intro into Medicine 1, PAS 5010

**Dates:** Fall 2015, Fall 2013, Fall 2010, Fall 2009, and Fall 2008

**Lecture:**

Liver Disease: Pathophysiology, Clinical Manifestations, and Management of Cirrhosis and Hepatocellular Carcinoma

My first evaluations for this lecture were below the department mean so I adjusted my content and delivery. Subsequent evaluations were above the department mean.

#### **iii. Lectures in other forums**

##### ***Internal Medicine Resident Lectures – Noon Conference***

Liver Transplantation for the Internist	8/2011
Inherited, Autoimmune, and Metabolic Disease of the Liver	8/2012
Acute Hepatitis	8/2014
Non-Alcoholic Fatty Liver Disease	9/2015
Liver Board Review	2/2016

##### ***Gastroenterology Fellow Lectures – Curriculum Educational Conference***

Diagnosis and Evaluation of the PBC Patient – multiple years

Genetic and Metabolic Liver Diseases – multiple years	
Acute Liver Failure – multiple years	
NAFLD – multiple years	
General Endoscopy Lectures	
Normal esophagus and benign lesions	9/2013
Esophageal Varices – Endoscopic	1/2013
Benign and Malignant Stomach Lesions	3/2014

***UF Lectures***

Great Cases – UF Department of Medicine Grand Rounds	3/2016
Alcoholic Hepatitis – UF GI Grand Rounds	3/2014
Cirrhosis: Current Challenges and Future Directions	
UF DOM Grand Rounds	2/2013
Fatty Liver and PCOS for the OB/GYN Practitioner	
UF OB/GYN Grand Rounds	11/2012
Acute Liver Failure	
UF Anesthesia Department, Critical Care Grand Rounds	3/2012

***UF Annual Update in Liver and Gastrointestinal Diseases (CME Meeting)***

Hepatitis B: Making Sense of the Guidelines	7/2009
New Therapies for Advanced Liver Disease	7/2010
New Findings and Therapeutics in Liver Disease	7/2011
Advances in Clinical Management of Liver Disease	7/2012
Cirrhosis: Current Challenges and Future Directions	7/2013
Fatty Liver: Long Term Follow up	7/2015
Update in New Hepatology Interventions	7/2016

***Florida Gastroenterologic Society Annual Meeting (CME)***

Hepatitis C Treatment: Current and Future Therapies	9/2012
Therapeutic Advances in Liver Disease: Latest and Greatest	9/2012

***ACG/FGS Spring Symposium (CME)***

HBV: Update and Treatment Guidelines	3/2016
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***Patient and Community Education for Alpha-1***

Liver Disease: Alpha 101	
Washington DC	6/2013
Miami, FL	6/2016
Basic Nutrition for Liver Affected Alphas, Washington DC	6/2013

These educational lectures were given at a National Conference for individuals affected with Alpha-1 Antitrypsin Deficiency (AATD) with the purpose of improving basic medical knowledge for newly diagnosed patients and caregivers about their condition.

Alpha-1 Liver Disease in Adults and Children	
Orlando, FL	12/2007

Atlanta, GA	4/2010
Myrtle Beach, SC	11/2010
Gainesville, FL	2/2013
San Antonio, TX	3/2013
Jacksonville, FL	8/2014
Orlando, FL	10/2014
Venice, FL	11/2014
Orlando, FL	11/2015

This educational lecture covers the fundamentals of AATD and how the liver may be affected. Similar to above, the purpose is to improve the basic medical knowledge for newly diagnosed patients and their caregivers. However, it also is updated regularly with the latest research findings as the target audience also includes patients with a higher level of understanding of AATD. I have given this talk to patient support groups in Florida and as part of the Alpha-1 Foundation Education Day series put on across the country

iv. **Small group and seminar sessions led**

*Evidence Based Medicine, BMS6823, Spring 2013, Spring 2012, Spring 2011*

This small group compliments a didactic course in EBM for second year medical students where principals learned in class are applied to medical literature. My student evaluations were above the faculty mean for each year.

*Essentials of Patient Care 4, BMS6834, Spring 2013, Spring 2012*

This course is for second year medical students to learn how to take a medical history, perform a physical exam, identify normal and abnormal findings, and formulate a plan of care verbally and in writing before entering clinical rotations. Each group had four students, and we met multiple times during spring semester. My student evaluations were above department mean each semester.

*Interdisciplinary Family Health, BMS6829, Spring 2012, Fall 2011, Spring 2011, Fall 2010.*

This course covered the entire academic year and consisted of a small group of professional students from multiple disciplines who met five times over the course of each semester to learn communication skills and how to work within a multidisciplinary group for patient care. My student evaluations were below the department mean the first year. Changes I implemented did not result in improvement in evaluations. My self-assessment was that my skills for co-facilitating with another provider and managing a diverse group of students improved.

v. **Clinical teaching of professional students**

Third year medical students rotate on the inpatient gastroenterology and liver service for four weeks as part of internal medicine rotation (MDC7200, BCC7110). Each student presents patients daily on rounds and does a weekly liver topic presentation for the group, facilitated by me. During my 6-8 weeks of clinical service each year, I have on average 4-5 third year students. The majority of my evaluations by students are at or above the department mean for faculty.

For the last four years, two first year medical students rotate with GI as part of a one week preceptorship each fall and spring. I am in charge of coordinating the student assignments to preceptors as well as an active participant. I have each student spend a day with me in endoscopy and in clinic as part of this rotation. No individual evaluation data is available, but the rotation is always selected by students. I was provided feedback and evaluation data from students for their clinical experience, and have made some adjustments to the preceptorship based on these comments.

Over the last year, I had a nurse practitioner student for the fall and spring semesters each week in my outpatient Liver clinic as part of their clinical training. Each student evaluated patients independently and presented their findings to me.

vi. **Clinical teaching of residents or fellows.**

Internal Medicine residents rotate on the inpatient gastroenterology and liver service as part of the internal medicine training program. In this clinical setting, I supervise the care provided by one resident and two interns as the attending physician. I make daily bedside rounds with the team and twice weekly supervise topics presented by students and residents related to patient care. I have residents and students join me in the endoscopy suite when I am performing procedures on their patients to enhance the educational experience. My time as the assigned inpatient attending occurs in a two-week block and has averaged out to be a total 6-8 weeks per academic year. Also, I typically have two residents per academic year who rotate through my outpatient liver clinic for one month each as part of their internal medicine elective sub-specialty training. This clinical teaching occurs once a week for one month at a time.

Gastroenterology fellows rotate through the liver consult service each month. In this clinical setting, I supervise the inpatient consultative liver care provided by the GI fellows to the medical and surgical services at UF Health. We work particularly closely with the inpatient surgical liver transplant team. My time in this role has averaged out to 6-8 weeks per academic year, typically with one first year GI fellow each block. In addition, for 8 months per academic year, there is a GI fellow assigned to the outpatient liver clinic rotation. In this setting, I see 3-5 clinic patients with a GI

fellow per weekly session and get to interact with all of the upper level GI fellows over the course of the academic year. GI fellow's teaching evaluations of me have shown improvement over time. My earliest faculty evaluations were below average. I made an effort to develop a more interactive and engaging teaching style, and I have remained above the faculty average each year after.

Liver transplant fellows are GI subspecialty trainees who complete an additional year of training in liver disease and transplantation. Our program does not have this type of trainee each academic year. We have had three of these trainees in the course of my time as GI faculty at UF. As a faculty member, I worked closely with each of these fellows in the clinics and on the inpatient consult services.

**b. Learner outcomes.**

- a. In my four years as GI Fellowship Program Director, average scores for the senior fellows have been above the national average on the in-service training exam each spring.
- b. Pass rates on the ABIM Gastroenterology Sub-Specialty Board Certification for the last five years have been 100% (national average for first time takers is 92%).
- c. XX was a UF medical student whom I met when he was a first year student in IFH course (BMS689). Our paths crossed again in his second year in EBM (BMS683), when we discussed several GI and liver papers. His interest in Gastroenterology was starting then. He rotated with me on the MGI Liver service (MDC7200), and matched in internal medicine with the intent to become a gastroenterologist. He successfully matched this year in a GI training program.

**3. Educational Scholarship.**

- a. **Grants.** None
- b. **Peer-reviewed education-related publications.** None
- c. **Books and Book Chapters.** None
- d. **Other publications.** None
- e. **Educational Presentations.** None
- f. **Educational materials.**
  - Revised the educational curriculum for the GI fellows.
  - Developed a new format for Journal Club for Fellows and Faculty
  - Developed a fourth year medical student elective in hepatology.
  - Developed a fourth year medical student elective in gastroenterology
- g. **Peer review activities related to educational scholarship.** None

**4. Educational Leadership/Recognition**

- a. **Major educational Responsibilities.**

- Gastroenterology Fellowship Training Program Director 4/13-present
- Assistant Gastroenterology Fellowship Training Program Director 4/11-4/13
- Assistant Liver Transplant Fellowship Training Program Director 7/2011-6/2015
- GI Divisional Educational Director 7/2015-present

**b. Awards and Recognition.**

- i. Department - none
  - ii. College - Recognition for excellence in Teaching
    - a. UF College of Medicine Exemplary Teacher Award 2014-2015
    - b. UF College of Medicine Exemplary Teacher Award 2013-2014
    - c. UF College of Medicine Exemplary Teacher Award 2012-2013
  - iii. University - none
  - iv. Academic or Professional Society - none
- c. Membership or leadership in institutional educational committees, task forces or panels, etc.**
- UF GI Fellowship Clinical Competency Committee, Chair
  - UF GI Fellowship Program Evaluation Committee, Chair
  - UF Liver Transplant Program Evaluation Committee, member

**d. Membership or leadership in extra-mural (regional and national) educational committees, task forces or panels, etc.**

- Alpha-1 Foundation Educational Materials Working Group, member

This group is responsible for creating and updating educational materials provided by the Alpha-1 Foundation (national non-profit organization) to patients.

**5. Mentorship.**

**a. Faculty**

- Participated in Peer Evaluation for (Pathology)
- Participated in Peer Evaluation for Dr. N(GI)
- Participated in Peer Teaching Evaluation for Dr.M (Pathology)

**b. Residents and GI fellows**

1. XX, an internal medicine resident I worked with on a research project and mentored. We published together, and she successfully matched in a GI Fellowship program at Mayo Clinic, Rochester. She has since completed that training and is now on GI faculty at Stanford. Her area of interest is hepatology.
2. XXX was the first Liver Pilot Fellow at UF (2014-2015). She is now on faculty within our division.
3. (GI Fellow) – IBD Fellowship Boston University 2015; GI Faculty at UC San Diego 2016-present

4. (GI Fellow) – Advanced Endoscopy Training at UF 2015-2016; Faculty at Mercer University
5. (GI Fellow) – Advanced Endoscopy Training, St. Lukes 2014-2015; in practice in Florida
6. (GI Fellow) – Advanced Endoscopy Training NYU 2014-2015; GI Faculty at UF Gastroenterology Division 2015-present
7. MD – (GI Fellow) Advanced Endoscopy Training 2014-2015 Harbor-UCLA; in practice in California
8. (GI Fellow) – Faculty Advisor 2009-2010; currently GI Faculty at Penn State
9. (GI Fellow) – Faculty Advisor 2010-2013; currently in practice in Maryland

c. **Students**

- XX is an MD-PhD candidate at UF who has completed his pre-clinical training. I have worked with him closely for the last three years on a research project in Alpha-1 on the clinical aspects of liver disease. He presented a poster at the COM research day this year as well as at the ATS Meeting on the results of our work.