

NEW YORK STATE EDUCATION DEPARTMENT

Report of a visit to

The Medical University of the Americas
P.O. Box 701
Charlestown, Nevis West Indies,

The Administrative Offices
Gardner, Massachusetts
December 12, 2005

And

Peninsula Hospital Center
Far Rockaway, NY
January 13, 2006

Introduction

The objective of the site visit was to evaluate the preclinical component of the program of medical education at the Medical University of the Americas and the clinical component of the university's program of medical education that takes place in New York State. The major purpose of the visit to the campus in Charlestown, Nevis, West Indies, was to assess that part of the university's program of medical education, primarily the basic medical science that prepares students for clinical training. The purposes of the visits to Peninsula Hospital Center in Far Rockaway, NY, and the Administrative Office in Gardner, Massachusetts were to assess the clinical training offered to medical students, to review faculty and student records, and to meet with academic and administrative officers of the University regarding the structure for monitoring and supervising clinical training that takes place in New York State.

The Team

Ian Porter, M.D.

Medical Director
Albany Medical Center
Albany NY

John Morley, M.D.

New York State Department of Health
Medical Director
Albany, NY

Melvin Steinhart, M.D.

Practicing Psychiatrist
Delmar, NY

Thomas J. Monahan, M.A.

Executive Secretary
New York State Board for Medicine
Albany NY

Leo Sullivan, M.D.

Consultant in Neurology
Intervale, NH

Douglas P. Elkins, M.S.

Assistant Executive Secretary
New York State Board for Medicine
Albany, NY

Activities of the Team During the Evaluation

The team members reviewed individually all of the materials provided by the university prior to the visit. These included the Data Base Document, the appendices to it, student and faculty records and curricular materials, and various informational handouts and power point presentations distributed during the site visit. The team inspected academic and hospital facilities in Charlestown, Nevis, West Indies, affiliated hospital facilities in New York State, and administrative offices in Gardner, Massachusetts. The team members interviewed administrative officers, faculty members, support staff, and students in Nevis and in the New York State clinical affiliate. On the basis of these activities, the following observations related to appropriate sections of the Guidelines for the Evaluation of Medical Programs are presented with the respect to the program of medical education offered by the Medical University of the Americas..

Foreword

History of MUA

In 1997, Jean Harris, Minister of Health, Nevis and Dr. Cuthwin Lake, Chief Medical Officer of Nevis, visited several medical schools in the Caribbean on behalf of the Government of Nevis. The island government was interested in beginning a medical school and looked at several schools on neighboring islands for a model of operation. After visiting Saba University School of Medicine, contacts were made with Dr. David Fredrick, with a request to consider opening a school on Nevis based on the Saba University model of quality of education and multiple benefits to the local community.

During several visits over a one-year period, the Government of Nevis offered the Potworks Estate, a former sugar plantation in St. James Parish, as a site for establishment of the medical school. Collaboration with the local educational and health care communities resulted in the adoption of a four-year program leading to the Doctor of Medicine degree and a two semester pre-medical program. Construction of new buildings and renovation of existing building commenced in 1998, for a target opening date of September 2000. Simultaneously, a local builder began construction on a 24 room first semester dormitory and proposals were solicited locally for supply of food services to medical students on the campus.

Dr. Cuthwin Lake (M.D.), who was also the Government appointed Chief of the Hospital on Nevis, became the first Dean of Basic Sciences of Medical University of the Americas, supported by Dr. Dan Burns (M.D., Ph.D.) as Associate Dean. A Board of Directors was established with a representative from the Government of Nevis and a representative from the local medical community. An autonomous U. S. office of Medical University of the Americas with a management contract with Education Information Consultants in Gardner, Massachusetts, was established to administer admissions, financial aid and clerkship rotations. Dr. Sewell Dixon (M.D.) was appointed as the Dean of Clinical Medicine and developed a network of core rotations at several U.S. teaching hospitals. The medical school grew steadily in a stepwise manner with the dedication of the Lorraine Hanley Brown Medical Library in 2003. After Dr. Lake's retirement, Dr. Burns and others assumed leadership for the campus during a new Dean search resulting in the appointment of Dr. Ray Lash (M.D.). Dr. Sewell Dixon was appointed at Executive Dean and Dr. Joseph Chu (M.D), a highly experience medical educator, became Chief Executive Officer in 2005.

The Office of Clinical Medicine is located at the offices in Gardner, Massachusetts. During the clerkship development phase, there has been a clear attempt to centralize students and to develop larger capacity clinical teaching facilities and to minimize the number of times students move during their third and fourth year clerkships. At the present time, there is a center for 30 students in Louisiana and the University is expanding this concept in Oklahoma City and Chicago. Clinical chairs have been appointed to provide consistency across sites for each core clerkship. A system of student logs and core clerkship evaluation at the end of each rotation is completed online and provides an ongoing database to monitor student clerkship experiences. Each term, the Office of Clinical Medicine staff travel to the basic science campus to orient students completing their fifth semester to the clerkship experience. Each student has an individual interview as to preferences for clerkship experiences. The Office of Clinical Medicine also helps to prepare students for the residency matching process and is responsible for licensing and credential verification.

MUA has been involved in numerous activities with the Nevisian community. Students enrolled in physical diagnosis and introduction to clinical medicine are able to gain hands on experience under the supervision of local physician-preceptors at the Alexandra Hospital. The medical school has sponsored numerous health related educational events including blood pressure screening clinics, diabetes and cholesterol screening, and fundraising for the Nevis HIV/AIDS awareness program. Substantial donations of equipment and supplies have been made by MUA to Alexandra Hospital. MUA reports that it has recently become the host of the federation Special Olympics. The Leeward Islands Health Research Unit is located on the MUA campus and participates in health care research projects ranging from a HIV Case Management project to epidemiological research projects. MUA is the first Caribbean medical school to participate in the Caribbean Community and Common Market (CARICOM) organization and the Association of Caribbean Higher Education Administrators (ACHEA). Representatives from MUA attended this conference in Tobago during July 2005.

A new growth phase for the campus has resulted in the establishment of a second dormitory, the granting of an additional five acres of land by the Government of Nevis and has planned for a new 22,000 sq ft. building with classrooms, offices and a teaching clinic.

Goals and Objectives

The stated goals and objectives of the University can be found on the website and in the catalog and states:

“The university states that the Medical University of the Americas was established to provide quality educational opportunities for students from around the world. It states further that at MUA, education is seen as more than the process of taking courses in a prescribed curriculum. Rather, the Medical University recognizes that the process of education incorporates the opportunities for intellectual achievement, demonstrated behavior changes, sound decision making skills, and moral-ethical development. When these intellectual and personal qualities are brought together, the student matures into a professional who will represent the Medical University with distinction. In keeping with the institutional goals to provide a full range of educational opportunities for all students, the Department of Education for St. Christopher-Nevis and the Board of Trustees approved programs leading to a Doctor of Medicine (M.D.) degree, a Bachelor of Science (B.Sc.) degree, and a Pre-Medical curriculum. The medical curriculum incorporates standards of academic and clinical instruction that parallels those of LCME accredited teaching programs in the United States. Enrollment is open to all persons regardless of race, national origin, religion, sex, or age, who wish to devote the extensive time and effort necessary to practice medicine.”

Educational Objectives

- To acquire the scientific basis for the practice of medicine through a challenging basic science curriculum;
- To build a foundation for the practice of medicine that recognizes the bio-psycho-social nature of medical practice;
- To learn clinical problem solving skills and to develop sound, scientifically-based clinical judgment;
- To develop a moral and ethical basis for the practice of medicine;
- To foster an approach to medicine that uses evidence-based medicine and information systems as a basis for practice;
- To foster an atmosphere of scientific inquiry and research that will benefit the local population and region;
- To teach concepts of education, prevention and wellness to students;

- To assure that each student acquires solid clinical skills and a problem solving base that will allow smooth transition to clerkships and into residency training

The Administration

Chief Executive Officer

- Joseph Chu, MD, MPH

Executive Dean

- Sewell H. Dixon, MD

Associate Dean, Basic Sciences

- Ray E. Lash, MD

Associate Dean, Clinical Medicine

- Lucille Collins, PhD

Associate Dean, Admissions

- John Nekic, MD

Associate Dean, Academic Affairs

- Danny M. Burns, MD

Assistant Dean of Students

- Samir Anadkat, MBBS

Assistant Dean, Basic Sciences

- Lee H. Ellison, MD

Director of Student Counseling Services

- Jeanne F. Lash, PhD

Director of Operations

- Ron Allerton, PhD

Library

- Amy Mullin, MLS, Director
- Sonita Daniel, M.S., Assistant Director

University Legal Counsel

- Jeffrey E. Nisbett, Esq.

Administrative Appointments, Nevis Campus

- Sharon Doras-Lescott, University Administrator
- Gillian Vaughan, Administrative Assistant
- ShirleyWatts, Administrative Assistant

Registrar/Admissions

- Keri S. Sullivan, University Registrar
- Marijane Beaudet, Coordinator

Information Coordinator

- Elizabeth Mazanec,

Financial Aid Office

- David Minchenberg, CPA, Chief Financial Officer
- Theresa O’Dea, Finance Manager
- Cheryl Petit, Bursar

Clinical Staff

- Lucille Collins, PhD, Associate Dean
- Mary Oliva, Clinical Assistant I
- Melissa Bourque, Clinical Assistant II

Computer/Media Specialists

- Carlos Amaro, IT Specialist (Nevis Campus)
- Justin Kantor, IT Specialist (U.S. Office)

Admissions Committee

- John Nekic, MD, Associate Dean
- Lucille Collins, PhD
- Elizabeth Mazanec, MEd
- Robert C. McKean, MBA

Facilities Manager

- Francis Ouellet (U.S. Office)
- Mike Sadal Chaite Ram (Nevis Campus)

Board of Directors

- Elvin Bailey, MA, BSc
- Jesse Lewis, PhD
- John Nekic, MD
- Cardell Rawlins, MD
- KathrynWarr, CPA

Elvin Bailey, MA, BSc

- Ministry of Education
Government Road
Charlestown, Nevis
- M.A., Rural Social Studies, B.Sc.
- Permanent Secretary of Education

Cardell Rawlins, MD

- Alexandra Hospital
Government Road
Charlestown, Nevis
- Doctor of Medicine
- Physician

Jesse Lewis, PhD

- 3540 Wheeler Rd, Suite 415
Augusta, GA 30909
- Ph.D.
- Psychologist, Educator

Kathryn Warr, BS, CPA

- 940 Baker Street
Augusta, GA 30904
- CPA, B.S.
- Accountant

John Neki, BS, MD

- 725 Main Street
Leominster, MA 01453
- Doctor of Medicine, B.S.
- Associate Dean for Admissions, MUA

Owners/Trustees

David Fredrick, PhD

- 74 Edgell St., Gardner, MA 01440
- Ph.D.
- Administrator, Psychologist

Cuthwin Lake, MD

- Antigua, West Indies
- Doctor of Medicine
- Physician/Surgeon

The database also lists the hospital coordinators as members of the university's administration:

Hospital	Location	Coordinator
Cherry Hospital	Goldsboro, NC	M. K. Murthy, MD
Floyd Medical Center	Rome, GA	Kathy Keane
Harbor Hospital	Baltimore, MD	Barney Johnson, President
Jackson Park Hospital	Chicago, IL	Peter Friedell, MD
L.J.Chabert Med. Ctr.	Houma, LA	Thomas Ferguson, MD
Lincoln Medical and Mental Health Ctr.	Bronx, NY	Tranice Jackson, MD
Michael Reese Hospital	Chicago, IL	Steven Weinstein
Moses Cone Behavioral Health System	Greensboro, NC	James Manning, MD
Moses Cone Health System	Greensboro, NC	Bert Fields, MD
Northern Colorado Medical Center	Greeley, CO	Orest Dubyinsky, MD
Phoebe Putney Mem. Hosp.	Albany, GA	Jan Rodd
St. Anthony Hospital	Chicago, IL	Sheldon Slodki, MD
St. Anthony Hospital	Oklahoma City, OK	Kersey Winfree, MD
St. Vincent's Med. Ctr.	Bridgeport, CT	Catherine Apaloo, MD
Trident Medical Center	North Charleston, NC	Kelly M. Hedman
United Hospital Center	Clarksburg, WV	Aimie Vincent

The Department Chairs of each basic science department are also considered as members of the administration and are listed in the database as:

DEPARTMENT	CHAIRMAN OR DIRECTOR
Gross Anatomy	Samir Anadkat, MBBS, MSc
Histology	David Smith, PhD, MBBS
Embryology	Zubair Shaikh, MBBS
Physiology	Danny M. Burns, MD, PhD
Medical Psychology	Jeanne F. Lash, PhD
Medical & Legal Ethics	Jeanne F. Lash, PhD
Biochemistry	Abboud Ghalayini, PhD
Neurosciences	Michael Doherty, PhD
Genetics	Thomas J. Last, PhD
Microbiology	Patricia Swift, PhD
Epidemiology	James Gordon Avery, MB ChB
Pathology	Milan Hadzic, MD
Physical Diagnosis	Marybeth Ellison, MD
Pharmacology	Shahid Akbar, MD

The Department Chairs of each clinical department include:

Kersey L Winfree, MD (Internal Medicine)

- MD, University of Oklahoma School of Medicine
- BS, Oklahoma State University
- Chief Medical Officer, Sacred Sisters of Mercy Health Care of Oklahoma
- Director of Medical Education, St. Anthony Hospital, Oklahoma City, OK
- Associate Professor of Medicine, University of Oklahoma School of Medicine

Melissa V Lowe, MD (Pediatrics)

- MD, Medical University of South Carolina
- BS, University of South Carolina
- Senior Staff, Pediatrics, Moses Cone Health System, Greensboro, NC

Sewell H Dixon, MD (Surgery)

- MD, Emory University School of Medicine
- BA, Emory University
- President, The Dixon Group, Charleston, SC

Linda S Austin, MD (Psychiatry)

- MD, Duke University School of Medicine
- BS, Stanford University, Duke University
- Private Practice, Charleston, SC
- Clinical Professor of Psychiatry
Medical University of South Carolina

Brent Hemelt, MD (OB/Gyn)

- MD, Louisiana State University School of Medicine
- BS, Louisiana State University
- Chief of Obstetrics and Gynecology, Assistant Director of Residency Training
Chabert Medical Center, Houma, LA

The “Administrative” section of the Database submitted by the University lists the following faculty committees and their respective chairs:

COMMITTEE	CHAIRPERSON
Curriculum Committee	Danny M. Burns, MD, PhD
Discipline Committee	Shahid Akbar, MD
Executive Committee	Ray E. Lash, MD
Faculty Development Committee	Patricia Swift, PhD
Faculty Promotion and Retention	Sewell H. Dixon, MD
Institutional Review Board	James Gordon Avery, MB, ChB
Library Committee	Marcy Ouellette, MD
Student Promotions Committee	Thomas J. Last, PhD

Resources

The general physical plant for the university is reported as comprising the follows facilities:

BUILDING NAME	YR COMPLETED	COST	USABLE M ²	LOCATION	FUNCTION
Administration	2000	130,000	190	On campus	Administration
Main Classroom Building	2000	187,000	385	On campus	Classrooms and Offices
Cafeteria	2000	125,000	222	On campus	Food Services
Pre-Med/Med V Building	2000	95,000	98	On campus	Classrooms and Offices
Warehouse	2000	45,000	147	On campus	Storage
Laboratory Building	2001	275,000	315	On campus	Labs and Offices
Incinerator	2002	28,000	22	On campus	Cadaver Disposal
Medical Library	2002	462,000	624	On campus	Library & Offices/ Tutorial rooms
Workshop	2003	30,000	28	On campus	Maintenance
Recreational Facilities (pool, tennis courts, playground, basketball court)	2000	74,000	N/A	On campus	Recreation

The facilities dedicated to teaching include:

NAME	WHICH BUILDING	NUMBER OF SEATS	AUDIO-VISUAL FACILITIES		
			YES	OR	NO
Med - I	Main Classroom	80 - 90	Yes		
Med - II	Main Classroom	80 - 90	Yes		
Med - III	Main Classroom	50 - 60	Yes		
Med - IV	Main Classroom	50 - 60	Yes		
Med - V	Med – V Building	60	Yes		
Anatomy Lab	Lab Building	8-10 dissecting tables	No		
Microbiology Lab	Lab Building	36 - 40	No		
Histology Lab	Lab Building	50	Yes		

Student Laboratories

The following laboratories have been designated as teaching laboratories for medical students of the University:

- An anatomy dissecting room with 8-10 cadaver tables;
- A histology lab with 55 student seats and 55 microscopes;
- A microbiology lab with 36 student bench spaces;
- A pathology lab with 55 microscopes; and
- A physical diagnosis lab with 8 exam tables.

The University listed the following as the designated clinical teaching facilities:

Library

Hospital	State	Beds	Outpatient Visits/Yr	Emergency Room Visits/Yr	Clerkship Subjects	Residency Program?	Clinical Affiliation Agreement?
Chabert Med. Ctr.	LA	133	172,253	34,222	Cores	Alton Ochsner/LSU	Yes
Cherry	NC	662	N/A	N/A	Psychiatry	East Carolina Univ.	Yes
Floyd Medical Ctr.	GA	304	27,480	62,500	Cores	Emory Univ.	Yes
Harbor Hospital	MD	206	52,893	N/A	Cores	ACGME Residency	Yes
Jackson Park	IL	239	40,559	58,401	Cores	Rosalind Franklin	Yes
Lincoln Medical and Mental Health Ctr.	NY	342	532,645	N/A	Internal Medicine, Pediatrics, Surgery	Cornell Medical College	Yes
Michael Reese	NC	50	119,231	22,479	Cores	Univ. of Illinois	Yes
Moses Cone Behavioral. Health. Ctr.	NC	50	Included with Moses Cone Hlth. Ctr.	135,595	Psychiatry	Univ. of North Carolina	Yes
Moses Cone Health Ctr.	NC	635	422,592	135,595	OB/GYN, Pediatrics	Univ. of North Carolina	Yes
Northern Colorado Medical Ctr.	CO	276	312,386	N/A	Cores	ACGME Residency, Univ. Of Colorado	Yes
Phoebe Putney Mem. Hosp	GA	443	295,146	53,232	Cores	Medical College of Georgia	Yes
St. Anthony Hospital	IL	165	49,791	18,689	Cores	Cath. Hlth. Partners, U of Illinois	Yes
St. Anthony Hospital	OK	650	90,717	38,614	Cores	Univ. of Oklahoma, Oklahoma State Univ.	Yes
St. Vincent's Hospital	CT	397	99,000	46,000	Internal Medicine, Surgery	Univ. of Connecticut	Yes
Trident Medical Ctr.	SC	296	197,416	N/A	Internal Medicine	Univ. of SC College of Medicine	Yes
United Hospital Center	WV	318	350,000	42,000	Cores	West Virginia School of Med.	Yes

The head librarian, Amy Mullin, MLS, (Emporia State University, Emporia, KS) was appointed in 2005 and reports directly to the Associate Dean of Basic Sciences The library is open seven days/week 9:00 a.m. until 11:00 p.m.

There is 1 full-time professional librarian (Sonita Daniel, MS) 1 additional non-professional staff and 2 part-time staff in addition to Ms. Mullin.

The Lorraine Hanley Brown Medical Library hours are:

Day	Opening Time	Closing Time
Sunday	12:00 p.m.	11:00 p.m.
Monday	9:00 am	11:00 p.m.
Tuesday	9:00 a.m.	11:00 p.m.
Wednesday	9:00 a.m.	11:00 p.m.
Thursday	9:00 a.m.	11:00 p.m.
Friday	9:00 a.m.	7:00 p.m.
Saturday	12:00 p.m.	11:00 p.m.

The library's holdings comprise:

	# Volumes	# Volumes Added this Year	# Serial Titles	Inter-Library Loans?
Lorraine Hanley Brown Medical Library (MUA)	1025	720	278 Periodicals; hard copy and online full text	Yes*
Affiliated Hospital Libraries				
Chabert Medical Ctr.	887	143	113	Yes
Cherry Hospital	2,422	84	63	Yes, Docline
Harbor Hospital	2,522	0	150	Yes, Docline
Jackson Park Hospital	250	29	49	Yes, Docline
Lincoln Hospital and Mental Health Ctr.	7,010	220	298	Yes, Medline, Docline
Moses Cone Health Ctr.	6,145	200	330	Yes
Northern Colorado Medical Ctr.		140	120	Yes, Docline & OCLC
St. Anthony Hospital, Chicago, IL	350	20	12	Yes, Natl. Medical Library, Chicago, IL
St. Anthony Hospital, Oklahoma City, OK	5,682	200	2,384	Yes

*Pan American Health Organization Interlibrary Loan services, Washington, D.C.

*Ohio State University; Prospero Electronic Document Delivery System

*Boston University School of Medicine Interlibrary Loan System, Boston, MA

The physical facilities dedicated to students in the medical education program are:

Physical facility in Library	Square Meters	Seating Capacity
Reading areas	242	66
Stacks	74	
Offices	10	

Staff workspace	15	
Storage, off-site	20	
Conference rooms	0	
Audio Visual Rooms	0	
Study carrels	17	17
Other:	20	20
18 Computer Terminals		
2 TV/VCR combos		
Wireless internet is available throughout the library		

The library budget is reported as:

Acquisitions, expenditures	\$74,460
Salaries, wages, etc.	\$115,000
All other expenses	\$14,200
Total expenditures	\$203, 660

Faculty

	Full-Time					
Basic Science	Professor	Associate Professor	Assistant Professor	Instructor and other	Total Full-Time	Part-Time (Paid)
Anatomy		Drs. Anadkat and Ellison			2	
Biochemistry		Dr. Ghalayini			1	
Microbiology	Dr. Swift, Ph.D.	Dr. Alsadi			2	
Pathology	Drs. Hadzic and Hadzic,				2	
Pharmacology		Dr. Akbar			1	
Physiology	Dr. Burns				1	
Physical Diagnosis		Dr. Ellison			1	
Clinical Medicine	Dr. Lash	Dr. Ouellette			2	2
Histology	Dr. Smith				1	
Embryology			Dr. Shaikh		1	
Genetics			Dr. Last		1	
Neurosciences		Dr. Doherty			1	
Medical Psychology			Dr. Lash		1	
Medical Ethics		Dr. Mankoff			1	
Epidemiology		Dr. Avery			1	
Informatics & Evidence Based Medicine			Dr. Sobering		1	
Basic Science Totals					20	2

The university lists the full-time faculty members as:

Michael D Doherty, PhD, Associate Professor, Neurosciences
PhD, Neurology and Neuroscience, McGill University
MSc, Psychology, McGill University, Montreal, Canada
BA, Physiological Psychology, Concordia University

Andrew Sobering, PhD, Assistant Professor, Biochemistry
Post-Doctorate, University of Paris, France
PhD, Biochemistry, John Hopkins University
BSc, Chemistry; SUNY, New York

Shahid Alsadi, MD, PhD, Associate Professor, Pharmacology
Post-Doctorate; Infectious Pathology, University of Valencia, Spain
MD, Oligarch Muslim University, India
MBBS, Oligarch Muslim University, India
PhD, Pharmacology, University of the Pacific, California

Samir Aladdin, PhD, Associate Professor, Medical Microbiology
PhD Medical Microbiology; University of Valencia, Spain
Certificate: Immunology, University of Valencia, and Spain

Samir Anadkat, MBBS, Associate Professor, Anatomy/Embryology
MBBS, (Medicine), University of Baroda, India
MSc, Anatomy, University of Baroda, India

James G Avery, MB, ChB, Associate Professor, Epidemiology
Director of Leeward Islands Health Research Unit
MB, ChB, University of Sheffield Medical School
Residency, Public Health Medicine, England
Tropical Medicine, Liverpool School of Tropical Medicine

Danny M Burns, MD, PhD, Professor, Neuroscience/Physiology
MD, University of Arizona, College of Medicine
PhD, Anatomy/Pharmacology, University of Arizona
MS, Biology, Morehead State University

Joseph Chu, MD, MPH, Professor, Chief Executive Officer
MD, Georgetown University, Washington, D.C.
MPH, University of Washington, Seattle, Washington
BA, Kenyon College

Sewell H Dixon, MD, Associate Professor, Clinical Medicine
Residency; General, Thoracic, Cardiovascular Surgery, Duke University
MD, Emory University School of Medicine, Atlanta, GA
BA, Emory University

Marybeth Ellison, MD, Associate Professor, Physical Diagnosis
Residency; Pediatrics, University of Connecticut
MD, University of Connecticut School of Medicine
BA, Biology, Wesleyan University, Connecticut

Lee H Ellison, MD, Associate Professor, Anatomy / Clinical Medicine
Residency; Cardio-Thoracic Surgery, University of Michigan
MD, Boston University School of Medicine
BSc, College of William & Mary, Williamsburg, VA

Abboud Ghalayini, PhD, Associate Professor, Biochemistry
PhD, Biochemistry, University of Houston
MSc, Biochemistry, University of Houston,
BSc, Biology - Chemistry, American University of Beirut

Branka Hadzic, MD, PhD, Professor, General & Clinical Pathology
MD, University of Novi Sad, Novi Sad, Yugoslavia
PhD, Pathology, University of Novi Sad, Yugoslavia
MSc, Pathology, University of Novi Sad, Yugoslavia

Milan Hadzic, MD, PhD, Professor, Clinical Pathology
MD, University of Novi Sad, Novi Sad, Yugoslavia
PhD, Pathology, University of Novi Sad, Yugoslavia
MSc, Human Anatomy, University of Novi Sad, Yugoslavia

Jeanne Lash, PhD, Associate Professor, Medical Psychology
PhD, Human Ecology, Family Studies, Kansas State U.
MA, Counseling, Webster University, Kansas City, MO
BA, Psychology, Webster University, St. Louis, MO

Ray E Lash, MD, Professor, Clinical Medicine
Residency in Medicine, University of Kansas
MD, University of Kansas
BA, Biology, University of Kansas

Thomas J Last, PhD, Assistant Professor, Cell Biology/Genetics
Post-Doctorate; Research, Eunice Kennedy Shriver Center
PhD, Cell Biology, University of Massachusetts
BS, Biology, Rensselaer Polytechnic Institute, NY

Robert Manoff, PhD, Associate Professor, Ethics and Medical Psychology
Ph.D., Clinical Psychology, Georgia State University
M.A. Clinical Psychology, Georgia State University
BA. Psychology/English Linguistics, Wesleyan University, Middletown, CT

Judy Nisbett, MBBS, BSc, Associate Professor, Pre-Clinical Medicine
MBBS, University of the West Indies, Mona Campus, Jamaica, WI
BSc, Biology, University of the West Indies, Cavehill Campus, Barbados, WI

Marcy Ouellette, MD, Associate Clinical Professor, Physical Diagnosis/Clinical Medicine
MD, Michigan State University
MPH, Tropical Medicine, Tulane University
BSN, University of Michigan

Cardell Rawlins, MD, Associate Professor, ICM-Pre-Clinical
Residency; General Surgery, New York Hospital
MD, Mount Sinai School of Medicine
BSc, Biology, City College

Zubair Shaikh, MBBS, Assistant Professor, Anatomy/ Embryology
MBBS, Medical College, Pune, India
MSc, Sports Medicine, University of Oregon
Internship, Cantonment General Hospital, India

David Smith, PhD, Professor, Anatomy / Histology
PhD, Anatomy/Histology, Kansas State University
MSc, Embryology, Kansas State University
BA, Zoology, Southern Illinois University

Patricia G Swift, PhD, Professor, Microbiology/ Immunology
PhD, Experimental Pathology, V.C.U., Richmond, VA
MS, Microbiology, Medical College of Virginia
BS, Chemistry, Mary Washington College

The Campus

The Medical University campus is located on 10 acres of land provided by the Government of St. Christopher-Nevis. The campus is on the eastern side of Nevis, five miles from Newcastle airport and one mile from Nisbet Plantation Beach. Currently, the MUA campus consists of an administration-faculty building, a classroom building, a student cafeteria, and a multipurpose lab building with a gross anatomy lab, microbiology lab, histology-pathology microscope lab, physical diagnosis clinic and medical reference library. Recreational facilities on campus include a swimming pool, double tennis court, and basketball court. Ample space is provided for other outdoor recreation such as soccer and volleyball.

All classrooms are air-conditioned and contain a wide variety of teaching resources such as classroom monitors, slide and overhead projectors, microscopes with video capability, LCD projectors, and computers. The gross anatomy laboratory utilizes human cadavers. The histology and pathology laboratory supplies each student with a medical quality binocular microscope and prepared slides. Faculty has access to dual-binocular and trinocular microscopes to facilitate student learning.

The Medical University cafeteria is open to all students, faculty and staff from 7:00 AM to 4:00 PM. Services include breakfast, lunch, and snacks, with food prices subsidized by the Medical University.

In April 2002, the new two-story 624 m² Medical Library was completed. This new air-conditioned facility contains (as of November 2005) 24 computer terminals, 17 individual study carrels and monitors and video tape recorders for Kaplan review. In addition to printed journals and textbooks, students have access to 278 full-text medical journals through hard copies and OVID on-line. The Learning Resource Center (LRC) also contains printed Kaplan USMLE reference material, so that students can start preparing for their board exams throughout their basic science program.

Basic Science Curriculum

The Basic Science program at the Medical University of the Americas consists of five semesters of didactic, laboratory and pre-clinical education, providing the student with a knowledge base sufficient to function effectively in clinical medicine. The basic science curriculum described below may be completed in 20 months, if all coursework is taken consecutively.

The Medical University campus is located on 10 acres of land, overlooking the Caribbean that was provided by the Government of St. Christopher-Nevis. The campus is on the eastern side of Nevis, five miles from Newcastle airport and one mile from Nisbet Plantation Beach. Currently, the MUA campus consists of an administration-faculty building, a modern classroom building, student cafeteria, and a new large multipurpose lab building with a gross anatomy lab, microbiology lab, histology-pathology microscope lab, physical diagnosis clinic and a medical reference library. Recreational facilities on campus include a swimming pool, double tennis court, and basketball court.

All classrooms are air-conditioned and contain a wide variety of teaching resources such as classroom monitors, slide and overhead projectors, microscopes with video capability, LCD projectors, and computers. The gross anatomy laboratory utilizes human cadavers that have been especially prepared for medical dissection. The histology and pathology laboratory supplies each student with a medical quality binocular microscope and prepared slides. Faculty has access to dual-binocular and trinocular microscopes to facilitate student learning.

The Medical University cafeteria is open to all students, faculty and staff from 7:00

AM to 4:00 PM. Services include breakfast, lunch, and snacks, with food prices subsidized by the Medical University.

In April 2002, the new two-story 10,000 square foot Medical Library was completed. This new air-conditioned facility contains 24 computer terminals, individual study carrels with monitors and video tape recorders for Kaplan review. In addition to printed journals and textbooks, students have access to 120 full-text medical journals through OVID on-line. The Learning Resource Center (LRC) also contains printed Kaplan USMLE reference material, so that students can start preparing for their board exams throughout their basic science program.

Basic Science Curriculum

The Basic Science program at the Medical University of the Americas consists of five semesters of didactic, laboratory and pre-clinical education, providing the student with a knowledge base sufficient to function effectively in clinical medicine. The basic science curriculum described below may be completed in 20 months, if all coursework is taken consecutively.

	Course	Lecture Hrs	Lab Hrs	Total Hrs	Credit Hrs
1 st Semester	MED 111 Gross Anatomy*	112	110	222	14
	MED 112 Histology and Cell Biology**	100	50	150	10
	MED 113 Embryology	45		45	3
	MED 114 Informatics and Evidence-Based Medicine	30		30	1
	Total			447	28
2 nd Semester	MED 211 Biochemistry	150		150	10
	MED 212 Human Physiology	125	25	150	10
	MED 213 Medical Psychology	150		150	9
	MED 214 Medical & Legal Ethics	45		45	4
	Total			495	33
3 rd Semester	MED 311 Micro. & Immunology*	200	25	225	12
	MED 312 Neurosciences	115	35	150	9
	MED 313 Medical Genetics	80	10	90	5
	MED 314 Epidemiology & Prev Med.	60		60	4
	Total			525	30
4 th Semester	MED 411 Pharmacology	150		150	12
	MED 412 Pathology I	135	15	150	11
	MED 413 Physical Diagnosis	84	74	158	10
	Total			458	33
5 th Semester	MED 511 Pathology II	135	15	150	11
	MED 512 Medical Board Review	160		160	10
	MED 513 Intro To Clinical Medicine	110	40	150	10
	Total			460	31

* Includes lab fee

** Includes slide deposit

1st SEMESTER

MED 111 - Gross Anatomy

This is a lecture and laboratory course where students, working in small groups, perform regional dissection of cadavers and study the variety of imaging techniques such as x-rays, CT and MRI scans, which relate to clinical practice. Emphasis is on the identification of normal gross structures with lectures and demonstrations to illustrate clinically relevant normal and abnormal findings.

(112 hrs lecture, 110 hrs lab)

MED 112 - Histology and Cell Biology

This course explores the organization and operation of the body from a cellular and sub-cellular level. Using microscopes, prepared slides, and computer assisted modules, students examine tissues, cells and organelles. Lectures will illustrate the microstructures of major tissues and organs in relation to their function.

(100 hrs lecture; 50 hrs lab)

MED 113 - Embryology

Lectures describe the series of processes that take place as a single fertilized human ovum develops into diverse cells, tissues, and organs. Students learn the causes and implications of a variety of congenital abnormalities. Lectures are supplemented with models, videotapes, slides and computer graphics of morphogenesis.

(45 hrs lecture)

MED 114 – Informatics and Evidence-Based Medicine

Biomedical informatics is the interdisciplinary science that deals with biomedical information, its structure, acquisition and use. Basic informatics includes coding, storage and retrieval of data (for patient care or research), clinical decision making (individual patients or health policy), transmission and teaching of medical knowledge. Students will be presented with a structured approach for: a) asking a clinical question relevant to an individual patient (therapy, diagnosis/screening), b) using search engines/databases to identify appropriate published studies, critically appraising the articles retrieved and applying the result to the patient's problem and c) presenting their findings in the form of a term paper.

(30 hrs lecture)

2nd SEMESTER

MED 211 - Biochemistry

A course that teaches the students the molecular and chemical principles of life, such as those related to the structure and function of proteins and DNA, metabolism and its control, membrane transport, and cellular recognition. The medical relevance is emphasized through clinical correlation and group discussions of medically important topics.

(150 hrs lecture)

MED 212 - Human Physiology

This is a lecture and laboratory course which describes the normal function of cells and organ systems, establishing a foundation for understanding the altered physiologic states of specific disease entities and the entire human organism. Laboratory experiences reinforce the student's understanding of the cardiovascular, respiratory and endocrine systems.
(125 lecture, 25 hrs lab)

MED 213 - Medical Psychology

Through lectures, small group interactions, case presentations and seminars, students learn about common psychological problems and mental disorders they may encounter with patients. They learn principles relating to the diagnosis and treatment of psychiatric illnesses. Workshops and seminars are provided on such topics as human sexuality, communication skills, psychiatric interviewing, stress management, and death education.
(150 hrs lecture)

MED 214 - Medical and Legal Ethics

Through a combination of lectures and small group interactions, students are presented with a practical introduction to the current body of legal and ethical foundations involved in the practice of modern medicine. Students learn to address a number of controversial and ambiguous moral and ethical healthcare questions depicting real life issues taken from current literature and public records.
(45 hrs lecture)

3rd SEMESTER

MED 311 - Microbiology and Immunology

This is a lecture and laboratory course that provides the fundamental principles of microbiology, including the subdisciplines of immunology, virology, bacteriology, microbial genetics, mycology and parasitology. Students acquire an understanding of the physiological and pathogenic properties of microorganisms causing disease, immunologic responses contributing to health and disease, and the principals of the actions of antimicrobial agents.
(200 hrs lecture, 25 hrs lab)

MED 312 – Neuroscience

This is a comprehensive lecture and laboratory course that provides an integrated multidisciplinary study of the specific structure and functional relationships of the central and peripheral nervous systems. Student learning is enhanced through laboratory gross brain dissection, imaging techniques and discussion of clinical correlations.
(115 hrs lecture, 35 hrs lab)

MED 313 - Medical Genetics

A lecture course that provides the students with an understanding of the principles and concepts of inherited disorders. Beginning with a study of chromosomes and the disorders that result from their aberrations, the course also covers current diagnosis and treatment, the genetics of human populations, and ongoing discoveries and research in molecular biology.
(80 hrs lecture, 10 hrs lab)

MED 314 - Epidemiology & Preventative Medicine

This is a course that introduces the students to the essential concepts of biostatistics and epidemiology. Using the principles of disease distribution, students are able to utilize epidemiologic research to clinical practice. In addition to being able to evaluate current epidemiological issues, students learn the historical importance of how diseases are distributed in various populations and the impact this has on health issues in the 21st century.
(60 hrs lecture)

4th SEMESTER

MED 411 - Pharmacology

A study of the principles of pharmacology as well as major therapeutic drugs, drug interaction, drug absorption and elimination, drug distribution, dose-response relationships, toxicity and therapeutic efficacy.
(150 hrs lecture)

MED 412 - Pathology I

A lecture and laboratory course that introduces the student to the responses of cells, tissues and organs to major disease processes. Specific lecture areas include cell injury and cell death, inflammation, blood coagulation, vascular diseases, tumors, immune deficiency diseases, and diseases of infancy and childhood. Laboratory exercises use prepared microscopic slides and computer assisted modules.
(135 hrs lecture, 15 hrs lab)

MED 413 - Physical Diagnosis

In this course, students learn the skills of a systematic approach to acquiring important medical data through the patient's history and the physical examination. Medical communication skills, psychomotor examination techniques, and the accurate interpretation of data are important criteria. Students will develop their skills by the examination of real patients through the health clinics on Nevis and participation in the main hospital. Videotapes and faculty demonstrations also enhance learning.
(84 hrs lecture, 74 hrs lab)

5th SEMESTER

MED 511 - Pathology II

During this course, students build upon the knowledge base developed in general pathology. Through the use of microscopes, slides, and computer modules, students learn about pathophysiologic and biochemical abnormalities of disease processes. Case studies are used to enhance the relationship between the pathologic basis of diseases and clinical treatment protocols.
(135 hrs lecture, 15 hrs lab)

MED 512 - Medical Board Review

The Medical University of the Americas offers the Kaplan MedPass program as part of the medical board review course. Students are presented with the essential key elements in each subject area by experienced faculty, guest lectures, and problem based computer modules. In addition, students are given practice exams, previously used shelf boards, and structured curriculum review materials to enhance their test-taking skills.

(160 hrs lecture)

MED 513 - Introduction to Clinical Medicine

A lecture and skills practice course designed to help the student relate the knowledge learned in basic sciences to future clinical practice. Students study the clinical diagnosis and treatment of major systemic disease processes. Students are given supervised patient care assignments and attend hospital rounds and clinics. They are required to perform history and physical exams, write procedure notes and give oral presentations of patients and selected topics. Each student must present a complete discussion of an assigned topic using a poster presentation or lecture format. Students are given oral examinations in addition to written examination. Oral examinations are given on the same material covered in the written examination, five times throughout the course of the semester. These are divided among the faculty teaching the course and are rotated so that a professor examines each student over the course of the semester.
(110 hrs lecture, 40 hrs lab)

The university maintains a list of the required and recommended text for each course. This list is found in the Student Handbook and also on the University website. The Student Handbook also informs the students of multiple sources where texts may be purchased. The required and recommended texts in the basic sciences are:

BASIC SCIENCES TEXTBOOKS

(As of August 2005)

PLEASE NOTE: Below is a list of required and recommended references:

- The student may need only purchase the "required" textbooks. At their own discretion, they may opt to purchase the recommended references.
- In all cases, students are asked to purchase the latest edition of any required textbook, whether or not the upgraded change is reflected.
- All textbooks and medical school supplies may be ordered directly from the publishers, through the local medical school bookstore or through Amazon.com.

First Semester

Gross anatomy (Required)

- Moore, L. Keith, Clinically Oriented Anatomy, 4th Edition. Lippincott, Williams & Wilkins, 1999
- Eberhardt, K. Sauerland, Grants Dissector, 12th Edition. Lippincott, Williams & Wilkins.
- Netter, Frank H., Atlas of Human Anatomy. Ciba-Geigy

Recommended References

- Snell. R., Clinical Anatomy for Medical Students, Lippincott, 7th Edition. Williams & Wilkins
- Netter, Frank H., Atlas of Human Anatomy, Icon Learning Systems

Histology and cell biology (Required)

- Junqueira, L.C., Carneiro, Jose, Kelley, Robert O., Basic Histology, 10th Edition

- B. Young and J.W. Heath, Wheater's Functional Histology-a Text and Colour Atlas, 4th Edition. Churchill Livingstone.

Recommended References

- Eroschenko, Victor P., diFiore's Atlas of Histology with functional correlations, 9th Edition, Lippincott Williams & Wilkins.
- Berman, Irwin, Color Atlas of Basic Histology, Current Edition, McGraw Hill / Appleton & Lange.

Embryology (Required)

- Moore, K., & Persaud, T., The Developing Human Clinically Oriented Embryology, 7th Edition. W.B. Saunders Co., 1998

Second Semester

Biochemistry (Required)

- Champe, Pamela C., Harper, R.A. Biochemistry; Lippincott's Illustrated Reviews: Biochemistry. 3rd Edition. Lippincott, Williams & Wilkins, 1994.
- Pelley, John, Rapid Review: Biochemistry, Current Edition, Harcourt.

Recommended References

- Stryer, L., Biochemistry, 4th Edition. W. H. Freeman Publishers, 1995
- Devlin, T. M., Textbook of Biochemistry: With Clinical Correlations, 5th Edition. John Wiley & Sons, 1997.

Physiology (Required)

- Guyton, A.C. and Hall, J.E. Textbook of Medical Physiology, 10th Edition W.B. Saunders Co., 2000
- Costanzo, Linda, Physiology – Stars, Current Edition, W.B. Saunders

Recommended References

- Ganong, William F., Review of Medical Physiology, 19th Edition. Appleton & Lange
- Boron, W., and Boulpaep, E.L. Textbook of Medical Physiology, 1st Edition. W.B. Saunders Co., 2002.
- Berne, R.M. Physiology, 4th Edition, Mosby, 1998.

Medical Psychology (Required)

- Kaplan, Harold & Saddock, B., Synopsis of Psychiatry & Behavioral Sciences/Clinical Psychiatry, 8th Edition. Lippincott, Williams & Wilkins, 1998

Recommended Reference

- Faden, Barbara, Behavioral Science – Board Review Series. Lippincott, Williams & Wilkins, 1999

Medical Ethics (Required)

- Lo, Bernard, Resolving Ethical Dilemmas, 2nd Edition. Lippincott Williams & Wilkins, 2000

Recommended Reference

- Jonsen, Siegler & Winslade, Clinical Ethics: A Practical Approach to Ethical Decisions in Clinical Medicine, 5th Edition. McGraw-Hill, 2002.

Third Semester

Microbiology and immunology (Required)

- Nairn, Roderick & Helbert, Matthew. Immunology for Medical Students, Mosby International Ltd.
- Levinson, Warren and Jawetz, Medical Microbiology & Immunology Examination and Board Review (Lange Series). McGraw-Hill, 7th Edition,
- Murray, Kobayashi, Haller and Rosenthal, Medical Microbiology, 4th Edition. Mosby 2002

Recommended Reference

- Murray, Haller and Rosenthal, Medical Microbiology, 4th Edition. Mosby 2002.
- Brooks, Butel, and Morse, Jawetz Melnick & Adelberg's Medical Microbiology (Large Series), Current Edition, McGraw-Hill.

Neurology (Required)

- Snell, Richard. Clinical Neuroanatomy for Medical Students, 5th Edition, Little, Brown & Company, 1998.
- Fix, James D., High-Yield Neuroanatomy, Lippincott, Williams & Wilkins, 1999.

Recommended References

- Haines, Duane, Neuroanatomy: An Atlas of Structures, Sections and Systems, 5th Edition, Lippincott, Williams & Wilkins
- Goldberg, Stephen, Clinical Neuroanatomy Made Ridiculously Simple, Any Edition, MedMaster Series
- Garoutte, Bill, Survey of Functional Neuroanatomy, Any Edition, Mill Valley Medical Publishers
- Snell, Richard S., Clinical Neuroanatomy: A Review with Questions and Explanations, 2nd Edition. Lippencott, Williams & Wilkins, 1997.

Medical Genetics (Required)

- Hartl & Jones, Essential Genetics – A Genomic Perspective, Third Edition, Jones & Bartlett.
- Thompson & Thompson, Genetics in Medicine, 6th Edition. W.B. Saunders Co., 1991.

Recommended Reference

- Fristrom, James W., Principles of Genetics, 2nd Edition, W.H. Freeman & Co., 1995

- Emery, AEH, Mueller R.F., Emery's Elements of Medical Genetics, Churchill Livingstone, 10th Edition, 1998.

Epidemiology & Preventive Medicine (Required)

- Appleton & Lange's, Review of Epidemiology & Biostatistics for the USMLE, Appleton & Lange Company, 1994

Recommended Reference

- Greensberg, Raoumond S., Daniels, Stephen R., Flanders, W. Dana, Eley, John William, Boring, John R., Medical Epidemiology, The McGraw-Hill Company, 2001

Fourth Semester

Pharmacology (Required)

- Kalzung, Bertram, Basic & Clinical Pharmacology, 11th Edition, McGraw-Hill
- Green, Steven M., Tarascon Pocket Pharmacopoeia, 2nd Edition. Tarascon Press, 1999

Recommended References

- Oldham, Frances K., Essentials of Pharmacology, Current Edition, Lippincott, Williams & Wilkins.
- Brenner, George M. Pharmacology, Saunders Text and Review Series. W.B.Saunders Co
- Mycek, MJ. Harvey, R.A., Champe, P., Pharmacology (Lippincott's Illustrated Reviews) 2nd Edition, Millennium update. Lippincott, Williams, & Wilkins, 1997.
- Katzung, Bertram G., Basic & Clinical Pharmacology, 7th Edition. Appleton & Lange, 1997
- Katzung, Bertram G., Pharmacology: Examination & Board Review

Pathology I (Required)

- Robbins, S., Cotran, R., Kumar, V., Pathologic Basis of Disease, 6th Edition, W.B. Saunders Co, 1999
- Pathology Review, W.B. Saunders, 1998
- Goljan, Edward. Pathology. ISBN: 072-167-0237.

Recommended Reference

- Burikitt, George, Wheater's Basic Histopathology – A Color Atlas & Text, 3rd Edition, Churchill/Livingstone.
- Robbins, S., Cotran, R., Kumar, V., Pocket Companion to Robbin's Pathologic Basis of Disease, 6th Edition, W.B. Saunders Co, 1999

Physical Diagnosis (Required)

- Bickley, L., Hackelman, R., Bates, B., Bate's Guide to Physical Examination and History Taking, 7th Edition. Lippincott, Williams & Wilkins, 1998

Recommended Reference

- Tierney, Lawrence M., Current Medical Diagnosis & Treatment, 38th Edition .Appleton & Lange, October 1999.

Fifth Semester

Pathology (Required)

- Robbins, S., Cotran, R., Kumar, V., Pathologic Basis of Disease, 6th Edition, W.B. Saunders Co, 1999
- Goljan, Pathology – Stars, Current Edition, Harcourt.

Recommended Reference

- Robbins, S., Cotran, R., Kumar, V., Pocket Companion to Robbin’s Pathologic Basis of Disease, 6th Edition, W.B. Saunders Co, 1999.

Introduction to Clinical Medicine (Required)

- Tierney, McPhee, Papadakis. Current Medical Diagnosis and Treatment, 2003 Edition, McGraw-Hill
- Robbins, S., Cotran, R., Kumar, V., Pathologic Basis of Disease, 6th Edition. W.B. Saunders Co., 1999
- Elliott, Dane and Goldberg, Linn, The History and Physical Examination Casebook, Current Edition, Lippincott, Williams & Wilkins.

Recommended References

- Bennett, Claude, Cecil Textbook of Medicine, 21st Edition. W.B. Saunders or Fauci, Anthony, Harrison’s Principles of Internal Medicine, 14th Edition. McGraw-Hill, 1997
- Cunningham, Gary et al, Williams Obstetrics, 20th Edition. Appleton & Lange 1997.
- Schwartz, Principles of Surgery, 7th Edition. McGraw-Hill
- Behrman, Richard E., Nelson Textbook of Pediatrics, 16th Edition. W.B.Saunders Company, October 1999. ISBN: 0-7216-7767-3.

U.S.M.L.E./National Medical Board Review (Required)

- Barton, Thomas K. Appleton & Lange’s Review for the USMLE Step 1.(Current Edition). Appleton & Lange, Norwalk, CT
- Bhushan, V., et. al., 1995 First Aid for the USMLE Step 1: A Student-to-Student Guide. 8th Edition. Appleton & Lange, Norwalk, CT

Suggested Optional References

- Board Review Series (Behavioral Science; Biochemistry; Gross Anatomy; Cell Biology & Histology; Microbiology & Immunology; Neuroanatomy; Pathology; Pharmacology) Waverly, Inc., 428 East Preston Street, Baltimore, MD, 21202

Elective Courses

There are two types of elective courses offered: workshops (ELEW series) and short courses (ELEC series). Workshops meet a limited number of times and are generally focused on skills development (active and reflective learning methods, suturing and surgical knot tying, etc.). Short courses meet multiple times during the semester, typically for 1 hour at each session (journal clubs are an example of short courses). Availability of specific offerings changes from semester to semester. All electives are graded as Pass/Fail.

Examples of elective courses available:

ELEW 101 - Active and Reflective Learning Methods

The purpose of this elective workshop is to provide students with basic skills for study time scheduling and with basic skills for applying active study methods along with multiple cycles of review and self-assessment to learning in medical school courses/clerkships.

(2 credit)

ELEW 102 – Poisonous Plants, Fatal Foods and Murderous Medicines

This course was designed with two elements. The first is a classroom discussion on common poisonous plants that are often used around the house or in gardens, things children may eat, adults may handle or even foods that may be fatal in the wrong form. This will be followed two or three days later with a 2 hour hike up the mountainside through one of the older estates discussing traditional medicines, what they were used for and how they could either kill or cure, as well as seeing some of the fatal foods.

(1 credit)

ELEC 103 – Yoga for Stress Management

This enjoyable short course, for both beginners and those with some experience, leads students at a moderate pace through basic Hatha yoga postures, combined with body strengthening, alignment, balancing, relaxation and breathing techniques. It is a rewarding way to stay fit, remove stiffness and improve flexibility, while releasing stress and preventing fatigue. Students should return to their class and study schedules feeling invigorated, with renewed mental energy and without excessive perspiration.

(1 credit)

ELEC 101 – Complementary & Alternative Medicines

The purpose of this course is to introduce students to alternative medical systems being practiced in various parts of the world that are gaining acceptance in North America (including Ayurvedic medicine, Chinese and Kampo medicine, Greco-Arab, medicine, homeopathy and herbal therapies). Topics including brief history, concepts of health/disease states, treatment modalities, and common uses as adjunctive treatment and potential interactions with standard therapies will be explored in a lecture/discussion format.

(2 credits)

ELEC 102, 103 – Journal Club

Faculty and students analyze and discuss current journal articles typically relating to clinical questions/patient care (diagnosis/screening, therapy, harm and prognosis). Each week a

participant presents a journal article(s) of his/her choice and leads a discussion incorporating elements of evidence based medicine.
(2 credits)

Research

Students and faculty are encouraged to participate in research projects. The Leeward Islands Health Research Unit (L.I.H.R.U.) is housed at the MUA campus. Students are able to engage in projects that will benefit health care on Nevis and in the Caribbean region.

ELEC 104 – Research

Students are invited to participate in research projects at the discretion of the professor. The amount of credit and time will be determined on a case-by-case basis.

Clinical Medicine Program

Once students have successfully completed the Basic Science program, they are eligible to enter the Clinical Medicine portion of their M.D. program. The clinical medicine component is a joint program between the Medical University of the Americas and affiliated hospitals. In the clinical program, students spend 72 weeks rotating through the various medical subspecialties in selected teaching hospitals.

The 72-week Clinical Medicine program is divided into 42 weeks of "core" or required clinical hospital rotations and 30 weeks of "elective" rotations. The core, required rotations consist of Internal Medicine, Surgery, Pediatrics, Psychiatry and Obstetrics and Gynecology. Elective rotations may be in any of the various medical subspecialties, depending upon the student's future goals. Since a few states in the U.S. require a clinical rotation in Family Medicine as a prerequisite to licensure, it is highly recommended that all students complete an elective rotation of at least four weeks in Family Medicine. This is represented in the table below:

Clinical Medicine Curriculum

ROTATIONS	CLINICAL AREA	DURATON IN WEEKS
Required Core	Surgery	12
	Internal Medicine	12
	Pediatrics	6
	OB.GYN	6
	Psychiatry	6
Electives	Various Specialties	30

In summary, the duration and lecture hour requirements of the clinical components of the medical education program are:

CLINICAL INSTRUCTION INVOLVING PATIENTS	CLK HRS OF LECTURE	LOCATION OF INSTRUCTION	DURATION IN WEEKS
INTERNAL MEDICINE	80	Affiliated Hospital	12
NEUROLOGY		Affiliated Hospital	4-8
DERMATOLOGY		Affiliated Hospital	4-8
RADIOLOGY		Affiliated Hospital	4-8
FAMILY MEDICINE	50	Affiliated Hospital	4-8
COMMUNITY MEDICINE	20	Affiliated Hospital	4-8
PEDIATRICS	40	Affiliated Hospital	6
PSYCHIATRY	60	Affiliated Hospital	6
OBSTETRICS	30	Affiliated Hospital	6
GYNECOLOGY	20	Affiliated Hospital	6
PHYSICAL MEDICINE		Affiliated Hospital	4-8
REHABILITATION		Affiliated Hospital	4-8
GERIATRICS		Affiliated Hospital	4-8
GENERAL SURGERY	60	Affiliated Hospital	12
ANESTHESIOLOGY		Affiliated Hospital	4-8
OPHTHAMOLOGY		Affiliated Hospital	4-8
UROLOGY		Affiliated Hospital	4-8
PLASTIC SURGERY		Affiliated Hospital	4-8
NEUROSURGERY		Affiliated Hospital	4-8
ORTHOPEDIC SURGERY		Affiliated Hospital	4-8
EMERGENCY MEDICINE		Affiliated Hospital	4-8
PRECEPTORSHIP		Affiliated Hospital	
AMBULATORY MED.	20	Affiliated Hospital	4-8

- Internal Medicine** During this clinical rotation students learn to function as an integral part of an interdisciplinary ward team. Students are expected to obtain, record, and present accurate and concise histories, and perform physical examinations. Students will also become familiar with the pathophysiology, diagnosis, and treatment of common diseases that occur in adult patients.
- Surgery** Students begin by learning how to perform a complete physical examination, clinical history, and surgical management of a patient.

Under supervision, medical students learn a problem solving approach to surgery by studying patients, attending staff rounds and lectures with physicians, and participating in operations on patients.

- **Pediatrics** Medical students learn about the health problems of infants and children while working as part of a ward team, participating in patient care. Students learn to take histories, perform physical examinations, and manage the diagnosis and treatment of common illnesses in younger patients.
- **Ob/Gyn** Students gain experience by caring for women with a wide variety of gynecological problems, as well as normal and abnormal pregnancies. Students will attend lectures and seminars, participate in ward rounds and assist in newborn deliveries and surgical procedures.
- **Psychiatry** Students will work in both inpatient and outpatient psychiatric treatment centers to learn how to diagnose and treat patients with a variety of mental disorders. Working as part of a team, students will learn to identify and treat patients with such disorders as depression and affective disorders, schizophrenia, personality disorders, and organic mental illnesses. Students will also learn how to conduct a psychiatric history and perform a mental status examination.

- Electives**

Elective rotations are usually completed during the fourth year of medical school, to assist the student in identifying areas of special interest in medicine for future practice and graduate residency training. Although students may select elective rotations in any area, we recommend that students seriously consider rotations in family medicine, cardiology, neurology, emergency medicine, and any of the other medical or surgical subspecialty

Clinical education takes place at the following sites in the U.S.

Hospital	Address	# Weeks	# Students	Content area(s)
Chabert Medical Center	Houma, LA	6-12	30	Psychiatry, OB/GYN, Internal Medicine, Pediatrics, Surgery
Cherry Hospital	Goldsboro, NC	6	4	Psychiatry
Floyd Medical Center	Rome, GA	6-12	2	OB/GYN, Internal Medicine, Pediatrics, Surgery
Harbor Hospital	Baltimore, MD	12	2	Internal Medicine
Jackson Park Hospital	Chicago, IL	6-12	4	Psychiatry, OB/GYN, Internal Medicine, Pediatrics, Surgery
Michael Reese Hospital	Chicago, IL	6	2	OB/GYN, Internal Medicine
Moses Cone Health System	Greensboro, NC	6	2	OB/GYN, Pediatrics
Moses Cone Behavioral Health System	Greensboro, NC	6	2	Psychiatry
Northern Colorado Medical Center	Greeley, CO	6-12	3	OB/GYN, Internal Medicine, Pediatrics, Surgery
Phoebe Putney Memorial Hospital	Albany, GA	6-12	2	OB/GYN, Internal Medicine, Pediatrics, Surgery
St. Anthony Hospital	Chicago, IL	6-12	3	OB/GYN, Internal Medicine, Pediatrics, Surgery
St. Anthony Hospital	Oklahoma City, OK	6-12	6	Psychiatry, OB/GYN, Internal Medicine, Pediatrics, Surgery
St. Vincent's Medical Center	Bridgeport, CT	12	4-8	Internal Medicine, Surgery

Trident Medical Center	North Charleston, SC	6-12	3	Internal Medicine, Pediatrics
United Hospital Center	Clarksburg, WV	6-12	2	Psychiatry, OB/GYN

Requirements for Clinical Placement

Students must meet the following criteria in order to qualify for placement in the Clinical Medicine program:

- Students must have a minimum GPA of 2.0 in the basic science program.
- Receive a recommendation by the pre-clinical medicine faculty on Nevis.
- Submit an Application for Professional Liability Insurance.
- Submit a completed, current, Immunization Form.
- Participate in a Clinical Orientation Session on the MUA campus.
- Have a personal interview with the Office of Clinical Medicine staff.
- Sign a MUA clinical medicine contract.
- Complete a Clinical Preference Questionnaire.
- Submit a typed, one or two page, Curriculum Vitae.
- Submit a USMLE Release Form.

Additional Clinical Placement Guidelines

The Medical University of the Americas has developed affiliations with hospitals in several geographical locations throughout the United States. Although students may complete all their clinical rotations in the U.S., it is unlikely that students will be able to complete all their clinical rotations within one hospital or in one geographical location. Therefore, students are expected to be flexible when assigned to their hospital rotations. Whenever possible, special consideration for geographical preference will be given to married students and students with school age children.

1. All clinical rotation assignments are made by the Dean or Associate Dean of Clinical Medicine, taking into account such factors as:
 - The student's geographical preference.
 - Family considerations.
 - Timeliness in completing the program.

- Hospital criteria and availability.
- USMLE scores.

Overall needs of the medical school.

Students who wish to complete all their clinical rotations within the United States must remain flexible and expect some geographical mobility. Students are not permitted to contact hospitals independently to arrange their own clinical rotations. It is the responsibility of the MUA to establish hospital affiliations and make all clinical assignments. In some cases, students may request a specific hospital rotation or request that MUA contact a desired hospital in order to develop a new affiliation agreement. When scheduling elective rotations, contact the MUA clinical medicine office so they can provide proof of liability insurance and liaison between the medical school and hospital preceptors.

2. Students are expected to demonstrate the highest standards of conduct and professionalism in each rotation. 100% attendance is required in every rotation. Violation of hospital rules or a pattern of inappropriate or unprofessional behavior will result in immediate disciplinary review.
3. A passing grade of 70% is required in all clinical rotations. If a student achieves a GPA of less than 2.0 at any time during their course of study at MUA, the student will be placed on academic probation or involuntarily dismissed from the program.
4. Students must take the USMLE Step I within three months of completing the basic sciences on Nevis. Students may be assigned a clinical rotation immediately after passing the USMLE Step I. Students that fail Step I will be asked to take a leave of absence to review and retake the exam.

Cost of the program in medical education

The cost of the program is published in the student handbook and the catalog and is available to applicants and students. The published costs are:

The information listed below is the estimated cost of living, while attending Medical University of the Americas in Nevis, for the entire 20 months of the Basic Sciences program. Housing on Nevis (after the First Semester) can begin anywhere from \$400/month and up, depending on size, location, and accommodations. Many students elect to remain on Nevis during their breaks. Airline costs vary considerably depending upon advanced bookings and departures during peak times.

The Basic Sciences

First Year (Semesters 1-3)

Tuition & Fees	\$ 18,650.00
Books & Supplies	\$ 2,100.00
Health Insurance	\$ 450.00
Phone/Internet	\$ 1,950.00

Other	\$18,400.00
TOTAL	\$ 41,550.00

Please see chart below for individual semester breakdowns

Second Year (Semester 4-5)

Tuition & Fees	\$ 12,600.00
Books & Supplies	\$ 1,400.00
Health Insurance	\$ 300.00
Phone/Internet	\$ 1,300.00
Other	\$12,400.00
TOTAL	\$ 28,000.00

Clinical Medicine

Third Year (Semester 6-8)

Total Tuition	\$20,850.00
Books	\$ 3,000.00
Health Insurance	\$ 1,320.00
Other	\$26,250.00
TOTAL	\$51,420.00

Fourth Year (Semesters 9-10)

Total Tuition	\$13,900.00
Books	\$ 2,000.00
Health Insurance	\$ 880.00
Graduation fee	\$ 350.00
Other	\$18,500.00
TOTAL	\$35,630.00

In summary:

MEDICAL UNIVERSITY OF THE AMERICAS' COST OF EDUCATION (COE)										
SEMESTER	1ST	2ND	3RD	4TH	5TH	6TH	7TH	8TH	9TH	10TH
TUITION	\$5,950	\$5,950	\$5,950	\$5,950	\$5,950	\$6,950	\$6,950	\$6,950	\$6,950	\$6,950
FEES	\$600	\$50	\$150	\$200	\$500	\$0	\$0	\$0	\$0	\$350
BOOKS / SUPPLIES	\$700	\$700	\$700	\$700	\$700	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000
ROOM / BOARD	\$4,000	\$4,200	\$4,200	\$4,200	\$4,200	\$6,000	\$6,000	\$6,000	\$6,000	\$6,000
WATER	\$200	\$200	\$200	\$200	\$200	\$0	\$0	\$0	\$0	\$0
ELECTRIC	\$200	\$200	\$200	\$200	\$200	\$500	\$500	\$500	\$500	\$500
PHONE / INTERNET	\$650	\$650	\$650	\$650	\$650	\$650	\$650	\$650	\$650	\$650
HEALTH INS.	\$150	\$150	\$150	\$150	\$150	\$440	\$440	\$440	\$440	\$440
MISC.	\$1,600	\$1,600	\$1,600	\$1,600	\$1,600	\$1,600	\$1,600	\$1,600	\$2,600	\$1,600
TOTAL	\$14,050	\$13,700	\$13,800	\$13,850	\$14,150	\$17,140	\$17,140	\$17,140	\$18,140	\$17,490

Admission

The Medical University of the Americas encourages applications from students who are dedicated, enthusiastic, and well suited for the rigorous study of medicine. Prospective students must have a solid pre-medical undergraduate education with the appropriate science courses upon which medicine is based. Students are also expected to have a mature sense of values and sound goals for pursuing a career in medicine. Once enrolled at MUA, each student must be able to integrate all information received, demonstrate the ability to learn, analyze and synthesize data and perform in a reasonably independent manner. The Medical University accepts students from wide educational and geographic backgrounds, with the belief that such a diverse student body can only enrich the overall educational experience.

Admissions process

The Medical University of the Americas matriculates on a trimester system and admits a limited number of students for the January, May and September semesters. Students may apply for admission to the Medical University at any time throughout the year, but students that submit their applications well in advance will have a greater chance of admission to the semester of their choice. Within two weeks after the completed application has been received, the Registrar will schedule the applicant for a telephone conference call or personal interview. The Registrar cannot schedule an interview until all the admissions materials are received. The Admissions Committee will evaluate the candidate's potential for admission based upon several criteria, including:

- Intellectual and academic ability;
- Communication skills, both verbal and written;

- Goals for entering the medical field;
- Letters of recommendation;
- Knowledge of international medical education;
- Special talents, hobbies, interests, international travel;
- Personal qualities such as spontaneity, enthusiasm, motivation, and sound judgment; and
Willingness to work as a team member, function effectively under stress, and to display flexibility. Applicants are accepted based upon the presumption that all of their statements, both oral and written, are true and that all documents are authentic. If it is later discovered that false or inaccurate information was submitted, the medical school may nullify acceptance into the program or, if the student is registered, dismiss the student. Original transcript(s) sent directly from the current institution;
- Students applying for transfer must fulfill the same documentation requirements of a new student along with the following:
 - Original transcript(s) sent directly from the current institution
 - Verification that the student was a registered medical student; and coursework was taken while the student was “in residence”
 - A statement that the student has met all outstanding financial and academic obligations
 - Students who wish to transfer directly into the Clinical Medicine program will be required to:
 - Provide documentation that they have successfully passed the USMLE, Step I with a score of 200 or better; and
 - Schedule a personal interview with the U.S. administrative office

International applicants

The Admissions Committee actively seeks to enhance the international representation of its student body and therefore takes into account the variety of academic and scholastic differences that exist throughout other countries of the world. Students from all countries can be assured of equal consideration for admission to the medical school. The Admissions Committee will evaluate applicants from countries with similar U.S. educational standards. Each applicant, in general, should meet the educational requirements for admission to medical school in the country of origin. Students who have attended institutions outside the U.S. and Canada and whose transcripts are not in English must obtain an interpretation in U.S. equivalency from a translation service. Students who have attended a college or university outside the U.S. or Canada are required to obtain a course-by-course evaluation of their transcript through the World Education Services or from other accredited agencies that are members of the National Association of Credential Evaluation Services. English is the language of instruction at the Medical University of the Americas and it is important that applicants be prepared academically to pursue the curriculum and be able to communicate. Applicants whose principal language is not English are required to take the TOEFL (Test of English as a Foreign Language).

Student orientation

Attendance at the student orientation and registration is required for all new incoming, returning and transfer students. The orientation session is conducted on the day before the first day of class. During the orientation, students will officially register for classes, submit

documents required for temporary residence, tour the campus, meet the deans and faculty, and learn about medical school policies and procedures.

Deferment

Students requesting to defer their date of matriculation must submit a written request to the Admissions Committee. Requests will be considered on a case-by-case basis. Deferments will be granted only if space is available in the requested semester. Only one deferment will be approved; thereafter the student will be required to re-apply for admission.

Students

MUA does not offer advanced standing credit for courses taken in Doctor of Chiropractic, Physician Assistant, Podiatry, Doctor of Dentistry or other allied health professional programs other than coursework completed through an accredited MD institution.

Over the past five years, the enrollment and number of students in the program of medical education have increased at the University:

SCHOOL YEAR	TOTAL	1ST YEAR	2ND YEAR	3RD YEAR	4TH YEAR	Grads/others
2004 - 2005	472	157	103	119	93	35
2003 - 2004	380	131	86	89	74	15
2002 - 2003	306	128	84	51	43	22
2001 - 2002	240	108	71	37	24	20
2000 - 2001	88	87	N/A	N/A	1	1

The table below was submitted by MUA in the database prepared for the site visit and shows the following attrition rates:

Total Enrollment	Total Attrition	Percentage	Family Issues	Financial Issues	Medical Reasons	Transferred To Other Medical School	Poor Academics	Other
2004 - 2005	26	6%	2	3	3	12	4	2
Total: 472								
2003 - 2004	24	6%	3	3	2	6	6	4
Total: 380								
2002 - 2003	16	5%	1	3	2	4	3	3
Total: 306								
2001 - 2002	9	4%	2	2	1	3	0	1
Total: 240								
2000 - 2001	2	2%	N/A	N/A	N/A	N/A	N/A	2
Total: 88								

Upon successful completion of the required curriculum and upon receipt of the *Doctor of Medicine* degree, the Minister of Education for the Government of Saint Christopher and Nevis confirms that graduates of Medical University of the Americas are eligible to practice medicine in St. Christopher and Nevis, West Indies.

According to the database, the pass rate on Step 1 and Step 2 has increased or remained stable over the past five years as can be seen in the table below:

YEAR	STEP I	STEP II /CK	CSA or STEP II /CS
2002	79%	88%	94%
2003	78%	76%	100%
2004	85%	85%	100%
2005	88%	83%	100%

The Administrative Offices in Gardner Massachusetts

A team member visited the offices in Gardner, Massachusetts and met with the Chief Executive Officer, Director of Admissions, Associate Dean of Admissions, Registrar, Associate Dean for Clinical Affairs, Financial Aid Officer, Bursar, Chief Information Technology Officer, and other support and administrative staff concerning the admission of students, financial aid, the placement of students in core and elective rotations, the tracking of students in clinical rotations, recordkeeping for all current and former students, Information Technology, and alumni affairs.

The Gardner, Massachusetts facility has staff that provides adequate support and development to the areas of admissions, financial aid, tracking of students in clinical sites, and marketing of the medical education program.

The Clinical Program at Peninsula Hospital Center, Queens, NY

Representatives of the New York State Education Department visited Peninsula Hospital Center (PHC) on January 13, 2006. The visiting team found that PHC is a 272 bed facility with 219 beds currently in active use and the team noted that the hospital has a well-established record in Medical education with approved DO training programs in Family Practice, General Surgery, and Orthopedic Surgery. It currently has residents in each of these areas. It accepts students from both Osteopathic and Allopathic Med. Schools and has between 12 and 25 students at any time. Regarding the rotations at Peninsula, the team noted that:

- The hospital has 262 Beds - 34 Surgical; 10 Orthopedic;
- There are 34000 ER visits and 32000 Family Practice Clinic visits per year;
- There are 16 Rotating Internships and 16 Surgical Residents;
- There is a full-time DME and full-time Director of Surgery;
- The hospital has DO approved Residencies in Surgery, Pediatrics, Family Med. and Orthopedics;
- The hospital has approved training programs in Podiatry and Dentistry;
- Each student beginning a clinical rotation at Peninsula Hospital must complete a comprehensive orientation program that makes the student aware of hospital regulations and the goals and objectives of the rotation;
- Clearly stated student expectations are expected to be in place in place; and
- There is a library with 4 computers, online access, and are available 24 hrs/day to students. There is also a current collection of standard texts.

Student rotations are currently conducted in these areas for students from New York College of Osteopathic Medicine, Lake Erie College of Osteopathic Medicine, Ross University, Fatima Medical College, Saba University, Kasturba Medical College, Medical University of the Americas, and the University of New England. Student positions are usually filled on a space available basis as determined by the affiliation agreement. There is a ½ day orientation for all students. Additionally, schools provide a letter of good standing, a recent physical examination and up to date immunization record. The teaching program is organized around the in house DO residency programs. MUA hopes with NY approval to expand its student presence at PHC. The

program as currently offered at PHC seems to be of adequate quality and the plan is not to increase student positions but to accommodate Nevus within the present structure.

The team concluded that PHC has a well developed medical education program with demonstrated success in student and GME education. It has more than adequate resources and faculty to accomplish the terms of the affiliation agreement with the Medical University of the Americas.

Summary

Based on its observations and findings, the team concluded the program of medical education at the Medical University of the Americas is functioning effectively in preparing students to engage in clinical clerkships in New York State, and an adequate clinical training program has been established at Peninsula Hospital Center in Far Rockaway, NY. The strengths in the program noted by the team include but are not limited to:

- An enthusiastic, well prepared, and diverse faculty who support the program of medical education at the Medical University of the Americas;
- The university has student support services that offer the students adequate personal health care, an active student government association, access to the faculty, and a safe and secure learning environment;
- The university has comprehensive plans for a new on-campus building that will house recreational and dining facilities, faculty and administrative offices, and classrooms;
- Students are committed and enthusiastic about their training and show considerable respect for their faculty;
- The physical plant is well maintained, and meets the educational, recreational, and social needs of the current number of students;
- The on-island hospital is very supportive of the program and offers students the opportunity for hands-on clinical instruction early in the medical curriculum;
- The Student Government Association offers students a number of opportunities for service oriented activities within the Nevis community;
- The university has a cadre of deans and associate and assistance deans who enthusiastically support the program of medical education;
- The process for admission to AUC is clearly stated, available to all applicants, and closely followed by the administration;
- The basic science and clinical faculty is well prepared, motivated, stable, and comprises representatives from a number of disciplines and specialties;
- The supply of cadavers is adequate;
- Faculty members have opportunities for personal and professional development through financial support to attend meetings and other off island events; and
- There is an on-going faculty evaluation program in place that involves peer and student evaluations;

Areas that the team considers in need of improvement are:

- Development of clinical affiliations that would permit students to complete all, or nearly all of their core clinical rotations at a single affiliate or a consortium of related affiliates;
- An introduction into the curriculum of coursework in the critical approach to scientific/medical literature;
- Development of an on-campus faculty development program that is also open to clinical faculty. This should include the enhanced integration of the basic sciences component of the program;

- Development of a more effective system for monitoring clinical sites by clinical department chairs for the purpose of quality assurance;
- Develop guidelines for faculty promotion to be included in the faculty handbook;
- Continue curricular review and attempt to reduce student lecture hours/day;
- Promote the use of shelf exams in all courses;
- Continue to develop cooperative activities between MUA and the island's medical Community;
- Although the number of on-campus computers is adequate, each student should be assigned a school email address to enhance communications between students and the faculty and administration, and between the students themselves;
- Repair or purchase new microscopes; and
- Explore introducing evidence-based instruction in all BS courses;

Specific recommendations:

- An introduction into the curriculum of coursework in the critical approach to scientific/medical literature;
- Expand teaching resource materials especially in the development of DVDs and other audio-visual materials for basic science courses;
- Involve clinical chairs more actively in review and evaluation of clinical teaching sites;
- Develop an on-campus faculty development program also open to clinical faculty. This should include the enhanced integration of the basic sciences component of the program;
- Development of clinical affiliations that would permit students to complete all, or nearly all of their core clinical rotations at a single affiliate;
- Establish a plan to provide for the academic and professional growth of the full-time faculty;
- Students are supportive of the University, its goals, the facilities, the faculty, the curriculum, and the services available to them. However, there is a need for:
 - A director of financial aid as a full-time position on Nevis;
 - A comprehensive plan for improved communication between the students and the various areas of the administration such as financial aid, registration, and the clinical science area;
 - Improved communication for what to expect and what is needed for students to live and attend classes on Nevis;
 - Student lockers should be made available on the medical school campus to store books and other possessions, and
 - Internet access to information regarding available clinical rotations
- Through discussions with faculty and department chairs, the team finds the budget process as vague. Department chairs submit an annual budget request based on the previous years budget and the department's expenditures. However, there are no regular financial reports given to the chairs through the year. Regular status reports on departmental budgets should be given to the chair of each department.

- Place a MUA-supported Director of Medical Education (preferably a physician) at each site for the purposes of scheduling, and testing of the students; quality control; and rapport with the students, preceptors, executive dean, clinical chairs and basic science faculty and administration;
- Hold clinical chairs meetings in person twice yearly – once in Nevis to accelerate the integration between the clinical and basic science faculty – and in the US for individual development and examination of information derived from clinical site analysis. This in addition to established web and telephonic communications.
- Continue to develop cooperative activities between MUA and the island’s medical community.
- Continue curricular review and attempt to reduce student lecture hours/day; and
- Develop guidelines for faculty promotion.

The team requests that the university furnish the Department with a report by October 1, 2006 on any developments in the medical education program in the university concerning student recruitment, the enrollment, faculty/administration, facilities, curriculum, student services, or clinical education. The report should focus on the areas of concern noted above and the program of clinical education in New York State. An interim site visit may be considered at the time of submission of the report should conditions warrant as determined by the Department.