

**Wednesday, March 25**  
**Preconference Workshop Sessions**

**Full Day Preconference Workshop | 9:00 am – 5:00 pm**

**1: ABC of Medical Student Education: Fundamentals for New Pediatric Educators**

*Amalia Guardiola, MD; Veronica Gonzalez, MD; Karen Webster; Jessica Tomaszewski, MD; Megan Rashid, MD; Jeremy Middleton, MD; Kristine Gibson, MD; Anne-Marie Kaulfers, MD*

Primary Topic: Pediatric Clerkship

Secondary Topic: Faculty and Resident Development

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** [Pediatric Medical Education](#), [Curriculum](#), [Assessment](#), [Feedback](#), [Wellness](#)

**Overview:**

Excellent clinical teachers, as well as newer faculty members, are often identified as candidates to assume the roles of clerkship, site, and sub-I directors. These ever-expanding roles require the educational leader to be knowledgeable about not only the clinical practice of pediatrics but also the topics of curriculum development and delivery, program evaluation, accreditation, resource management, scholarship, and the support of struggling learners.

This workshop has been developed to prepare newer, emerging, and experienced leaders to return home and engage in all facets of educational leadership. Members looking to reinvigorate their programs and advance their scholarship will also find content of interest. If you have questions about getting started, want to infuse new elements into a clerkship, need to revise and implement a curriculum or ponder advising learners or your own career development, this workshop is for you.

**Objectives:**

At the end of the workshop, participants should be able to:

1. Design and evaluate curriculum within their clinical educational program, including a DEI lens
2. Describe strategies to incorporate innovative instructional methodology and approaches into their educational environment
3. Discuss how to manage their institution's educational enterprise best and meet accreditation guidelines
4. Develop a plan for their own professional growth and scholarship
5. Promote a positive and inclusive learning environment within their educational program

**Methods:**

Facilitators will engage participants in an exploration of curriculum development using the Kern Model as a scaffolding for our discussions. Each step-in curriculum development will be introduced using innovative pedagogy with a variety of interactive techniques while simultaneously sharing best practices in teaching and assessment of learners, meeting accreditation standards and institutional requirements. The workshop will progress through the Kern model, incorporating gaps in instruction around health inequities/ DEI as our examples.

Strategies on how to address challenges that arise during the administration of pediatric curricula, including small group discussions addressing participants' identified topics, like recognizing unconscious bias, the learning environment, challenging learners, and others. The workshop will also discuss the professional development of educators, incorporating aspects of faculty/student wellness to facilitate the cultivation of educational leaders who can serve as change agents within their institutions and beyond. The overall structure of the workshop has been developed to introduce participants to key foundational concepts through the use of interactive teaching strategies throughout the workshop. We will also emphasize wellness and resilience in the workplace and how COMSEP can support all aspects of pediatric medical education.

**Half Day Preconference Workshops | 1:00 – 5:00 pm**

**2: Medical Education and Clerkship Administrator Certificate Workshop**

*Tiffany Swain, AA; Althea Scott, EdD, MS*

Primary Topic: Administration of the Pediatric Clerkship

Secondary Topic: Pediatric Clerkship

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** [Administrator](#), [Certificate](#), [Leadership](#), [Growth](#), [Communication](#)

**Overview:**

Many clerkship administrators believe their roles are "less than", because they are not faculty. The truth is, administrators are the ones holding up the structure of the clerkship more often than not. This workshop strives to teach administrators just how important they are to the clerkship and medical education by identifying their strengths and playing to them. By understanding one's own potential, it enhances their opportunity for growth and being a part of the bigger picture, a leader in their role.

**Objectives:**

1. Understand the importance of enhancing your career
2. Discover key leadership concepts
3. Explore your role as a leader in medical education

4. Identify core values and career objectives
5. Explore qualities, traits, skills, and preferences that can empower you to expand your individual growth
6. Discuss the significance of communication within a team and with the medical students
7. Explore what a quality/process improvement project is and identify both opportunities and barriers when working on the QI/PI project

**Methods:**

PowerPoint slides; Handouts; Flipchart; In-person teaching; Interactive worksheets; Team building; Breakout/Small groups for case scenarios

**3: Game On! A Complete Guide on Navigating Pediatric Career Advising**

*Erica Chung, MD; Erin Pete Devon, MD; Elisabeth Conser, MD; Jennifer Soep, MD; Abena Knight, MD; Maya Neeley, MD; Gwenevere McIntosh, MD, MPH; Rachel Thompson, MD; Lindsay Koressel, MD, MEd; Lauren Chan, MD; Kristen Sandgren, MD; Antoinette Spoto-Cannons, MD; Jennifer DeCoste, MD; Kanika Gupta, MD*

Primary Topic: Faculty and Resident Development

Secondary Topic: Post-Clerkship

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** [Career advising](#), [Pediatric residency application](#), [Post-clerkship](#)

**Overview:**

Many pediatric career advisors are thrust into the role of career advisor without onboarding or orientation to strategies for career advising. Career advisors often are not aware of the breadth of topics that students will need advice about, who is available to support them, national resources available for guidance, or how to best optimize pediatric advising at their institution. By the end of this workshop, participants will develop a timeline for pediatric career advising from the clerkship year to the NRMP Match. Participants will discuss multiple topics including: advising for the post-clerkship year, shaping professional identity and how it relates to the personal statement and ERAS application, advising applicants on strategies for letters of recommendation, assessing competitiveness of applicants and developing program lists, discussing interviewing strategies and post-interview communication, and supporting students in the SOAP. In addition, this workshop will explore the most recent data from the ERAS application for geographic preferences and signaling to help guide advising.

**Objectives:**

1. Elucidate who is part of the career advising team at your institution and how they support a student.
2. Develop a timeline for pediatric career advising during the clerkship and post-clerkship years of medical school that includes:
  - a. Building the post-clerkship schedule
  - b. Key NRMP application deadlines
3. Discuss updated strategies for advising pediatrics-bound students around key topics including:
  - a. Supporting student professional identity formation
  - b. Advising applicants on letter of recommendations
  - c. Advising for interview/post-interview communication
  - d. Guiding student in assessing program's DEI efforts
  - e. Preparing for SOAP
  - f. Supporting dual applicants and couples matching
4. Describe national resources available for advising all students applying into pediatrics, including resources that specifically support students from UIM/minoritized backgrounds.
5. Describe factors involved in competitiveness assessment of applicants with holistic review
6. Explore the most recent data on meaningful experiences, signaling, and geographic preferences to support advising students about the ERAS Application

**Methods:**

The workshop will use a combination of large group discussion sessions, small group pair-share and table discussions with large group report out, didactic reviews, small group case review and scenario discussions, and game-based activities to promote the acquisition of knowledge about pediatric career advising.

**Thursday, March 26**  
**Workshop Session #1 | 10:15am - 11:45 am**

**4: Values Based Career Planning: Reaching Your Highest Peak in Medical Education**

*Meghan Treitz, MD; Amy Grover, MD; Lesley Gardiner, MD, PhD; Emma Greenberg; Brendan King; Jean Petershak, MD; Megan Rashid, MD; Margie Rodgers; Sherilyn Smith, MD; Jennifer Soep, MD*

Primary Topic: Wellness

Secondary Topic: Supports Annual Meeting Theme

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** [Career planning](#), [professional development](#), [wellness](#)

**Overview:**

In medical education, career paths are often nonlinear and are shaped by evolving interests and institutional needs. Career planning enables you to take ownership of your professional journey. Values-based career planning involves aligning your professional path with your core beliefs and motivations. By grounding career decisions in what truly matters to you, you can cultivate a sense of purpose, increase long-term job satisfaction, and reduce the risk of burnout. This workshop, created by and for medical education faculty, administrators, and learners, focuses on designing a career that reflects your identity and aspirations, whether you are navigating transitions, seeking advancement, or mentoring others through career decisions. Come and learn with us as you climb the mountain of your career, whether you are just starting out, navigating your way through the messy middle, approaching the summit, or looking for new summits to explore!

**Objectives:**

1. Identify your most important values
2. Reflect on how values affect career trajectory
3. Identify a future decision point and collect tools and resources to create a values-based plan

**Methods:**

This workshop opens with an exploration of how personal values can serve as a foundation for meaningful career planning. After an interactive large group orientation, participants will engage in a values sort activity to identify their own unique core values, followed by a structured reflection with small group discussion to examine how these values have influenced individual career paths so far. In a large group discussion, participants from various career stages, including students, administrators, and faculty at early, mid, and senior levels, will share practical strategies for integrating personal values into career decisions. Through case-based conversations, they will offer insights into how values have influenced their professional journeys. Participants will then consider an upcoming career challenge or decision that lends itself to a values-based approach. A range of practical tools will be shared to help enable values-informed decision making. Participants will use individual worksheets and small group discussion to initiate a plan for next steps. At the conclusion of the session, participants will be provided with a "Choose Your Own Adventure" career trail map to help participants apply lessons learned for future career decisions and to advise others through a similar process. Participants will leave with practical tools and detailed resources to support additional steps in their values-based career planning journey.

**5: Ok Boomer Teach Me How to SLAY: Breaking Down Generational Barriers in Teaching and Learning**

*Preetha Krishnamoorthy, MDCM, FRCPC; Hosanna Au, MD, DipMEd; Gabrielle Weiler, MD; John Martin, MD; Tara Mullowney, MD; Natalie Sirizzotti, MD; Samantha Marin, MD; Louise Murray, MD; Gaby Yang, MD; Jennifer Lee Wiebe, MD; Erin Quigley, MD; Karen Forbes, MD; Karen Forbes, MD; Lauren Perlman, MDCM; Marc Zucker, MD; Anya McLaren-Barnett, MD*

Primary Topic: Pediatric Clerkship

Secondary Topic: Faculty and Resident Development

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** [Generational differences](#), [learning environment](#), [effective communication](#)

**Overview:**

At present, there are two predominant generations of medical learners, Millennials and Gen Z. There is a perception of differences in values and expectations of the clinical learning environment between both the educators and learners, and between the learners themselves. Many medical educators express that they have difficulty relating to today's learners (and vice versa). This workshop will explore these themes and reflect on our own perceptions, challenges and opportunities. The workshop will equip faculty and preceptors with tools to focus on navigating and embracing these generational differences that we encounter in our daily practices.

**Objectives:**

By the end of this workshop, participants will be able to:

1. Identify the characteristics of different generations of learners and the world events that have shaped them
2. Describe the generalizations, strengths, biases and truths of different generations of learners
3. Implement practical tools to engage and optimize in the teaching of different generations of learners

**Methods:**

This interactive workshop will allow participants to explore generational differences through a series of activities, including role plays and case discussion, in small and large groups. Facilitators include individuals from different generations (learners and faculty) to enhance cross-generational collaboration. An ice breaker activity will open the session. After a short plenary session, participants will role play in front of the large group with ensuing discussion. We will then apply insights to real-world dynamics. We will provide a scenario to demonstrate what generational assumptions are at play and strategies to improve mutual understanding and collaboration. We will wrap up and leave time for feedback and evaluation.

**6: Innovative Pediatrics Electives - Beyond the Bedside**

*Jake Deines, MD; Leslie Reilly, MD; Uchechi Oddiri, MD; Amy Gonzalez, MD; Katarina Wang, BS*

Primary Topic: Post-Clerkship

Secondary Topic: Supports Annual Meeting Theme

Target Audience: Early Career | Mid-Career | Late Career

Keywords: Electives, residency-readiness, innovation

**Overview:**

Our workshop addresses residency-readiness competencies that extend beyond standard clinical encounters. Innovative non-traditional electives can prepare students for real-world practice, while leveraging pediatrics-specific strengths—advocacy and health policy, environmental health, interprofessional care, procedural practice, violence and abuse assessment, inclusive leadership, and more. Engaging students in new and creative electives can also function as a compelling “front door” to the field, strengthening interest and recruitment into pediatric specialties. Responding to documented gaps, this workshop equips participants with a concise pitch to administrators on the value of non-traditional electives, a bank of elective ideas, practical guidance on scheduling formats (block vs longitudinal), and a toolkit to jump-start local implementation—plus approaches to mentor student leaders in the process.

**Objectives:**

At the end of this workshop, participants will:

1. Articulate the educational value of non-traditional pediatrics electives and craft a concise pitch statement highlighting benefits, expected outcomes, feasibility, and next steps.
2. Brainstorm pediatrics-focused non-traditional elective ideas.
3. Develop a general one-page elective proposal toolkit to jump start a non-traditional pediatrics elective.
4. Foster a peer community of educators committed to continued collaboration, resource-sharing, and follow up on elective development across institutions.

**Methods:**

We open with a concise 10-minute didactic to frame the need for non-traditional pediatrics electives, outline the workshop flow, and briefly review key educational literature. Our student co-facilitator will provide trainee perspectives. Participants will work in small groups to brainstorm elective ideas using a framework (title, target learners, and 2–3 learning goals) and report back to the full group.

Next, groups select at least one of the previously described elective ideas and build a one-page starter toolkit for each, that includes: working title, target learners, goals/objectives, proposed scheduling format (block vs longitudinal), expected student deliverables, and an initial assessment plan. Drafts are shared in a debrief for peer feedback, with facilitators coaching on feasibility and evaluation measures. We close with a large group wrap-up to highlight takeaways, address participant questions, and schedule a 3 to 5-month follow-up to share progress and lessons learned.

**7: Full Disclosure A.I. Helped Me Write This Title (and We Should Talk About That); A Practical Guide to the Ethical Use of A.I. in Scholarship**

*Yonesha Cole, MD; Seetal Mishra, MD; Gerald Miller, MD; Vallen Lee, MD, PhD; Joan Connell, MD; Kara Wong Ramsey, MD; Kanika Gupta, MD; Marieka Helou, MD, MPH; Esther K. Chung, MD, MPH; Brandon Alexander, DO; Lisa Cheng, MD*

Primary Topic: Faculty and Resident Development

Secondary Topic: Supports Annual Meeting Theme

Target Audience: Early Career | Mid-Career | Late Career

Keywords: Artificial Intelligence, Ethics, Research, Scholarship

**Overview:**

Artificial intelligence (AI) is a rapidly evolving technology that is transforming scholarly work, often at a pace that can feel overwhelming for educators. As trainees adopt these tools at an increasing rate, many faculty members worry about keeping up with their more AI-literate learners. Despite this knowledge gap, educators are increasingly expected to teach, supervise, and evaluate the responsible use of AI in academic scholarship. At the same time, the absence of universal policies or consensus adds uncertainty regarding how best to navigate the ethical gray areas that accompany the use of these technologies.

This interactive workshop will address these challenges by equipping participants with the knowledge and confidence to engage in responsible AI use in scholarly work. Participants will also gain practical strategies for advising learners to foster integrity, transparency, and ethical judgment when incorporating AI into their own research and writing.

**Objectives:**

1. Describe current policies and compare guidelines for use of AI in scholarly work.
2. Discuss ways in which AI can be used in scholarly work and examine potential pitfalls and ethical implications of using AI in these contexts.
3. Demonstrate and apply strategies to counsel medical learners in appropriate use and citation of AI in scholarly work.

**Methods:**

During this lively workshop, participants will engage as a large group to explore how institutions, journals, and professional organizations are shaping expectations for the use of AI in scholarly work. Through a combination of didactic sessions, collaborative discussions, live interactive polling, role-playing conversations, and real-time reviews of existing policies, participants will share insights, debate best practices, identify common pitfalls, and develop strategies for addressing ethical challenges in real-world scenarios. Attendees will also have the opportunity to practice counseling learners utilizing the information and tools gained during the session. Upon conclusion, participants will leave with a practical toolkit containing resources to help implement these principles within their own institutions.

**8: Peak Performance: Craft Your Brand and Elevator Pitch to Scale to the Top in Pediatric Interviews**

*Melissa Baranay, MD; Robyn Bockrath, MD; Alexandra Comfort, MD; Marieka Helou, MD, MPH; Robin English, MD; Lindsay Koressel, MD, MEd; Rebecca Tenney-Soeiro, MD; Chris Peltier, MD; Andrea Triplett, MD; Andrew Wai, MD; Joseph Gigante, MD; Ovini Rodrigo, MD; Alanna Higgins Joyce, MD, MPH, MS*

Primary Topic: Faculty and Resident Development

Secondary Topic: Supports Annual Meeting Theme

Target Audience: Early Career | Mid-Career

**Keywords:** Trainee, development, interview skills, brand, elevator pitch

**Overview:**

Have you ever stumbled to "describe yourself?" Do you struggle to clearly and confidently communicate your career goals? Does the idea of an interview send you into a spiral? If you answered yes to any of these questions, then this workshop is designed for you.

First impressions matter, and we have less than one minute to make an impression. Whether you are interviewing for pediatric residency, your first job, a new role within your institution, or a national position, the ability to clearly highlight your goals and accomplishments can help you stand out. Through this workshop, we will teach you how! During this session, facilitators will guide participants through a self-evaluation exercise to identify personal values and strengths. Through small group discussions, participants will learn how to relate these to their career goals and gain clarity on their professional brand. Building on this foundation, each participant will craft a 60-second elevator pitch and practice it with other workshop participants and facilitators in breakout groups. The session will conclude with simulated interview practice, allowing participants to apply their personal branding and elevator pitch to strengthen their interview skills.

Workshop participants will hear from and directly interact with facilitators from multiple institutions across the country representing various pediatric specialties. Their expertise includes program and departmental leadership, mentorship, research, scholarly dissemination, and career development.

**Objectives:**

1. Identify and appraise personal values and strengths through reflective practices to craft a professional brand
2. Define key elements of a successful elevator pitch and create a concise personal version
3. Demonstrate effective professional branding and delivery of a personal elevator pitch in pediatric interview role-play simulations

**Methods:**

This workshop is designed for adult learners. No section of the workshop will be longer than 20 minutes to maximize engagement and achieve learning objectives. We will use a variety of learning strategies including self-directed reflection, simulation, and problem-based learning as we focus on the internal motivators and past experiences of attendees as they build their personal brand and elevator pitch statements facilitated through worksheets. In addition to individualized work, we will also utilize audience polling and participation, pair-share, mock-interviews, and small group discussions to optimize engagement.

**9: We've got "TIME": Addressing Student Moral Distress Through Trauma-Informed Medical Education**

*Lexi Crawford, MD; Shaunte Anum-Addo, MD; Margarita Ramos, MD; Wilhelmina Bradford, Bachelors; Olivia Winant, Bachelors; Justin Zaslavsky, Bachelors; Jeremy Kern, MD*

Primary Topic: Supports Annual Meeting Theme

Secondary Topic: Wellness

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** Moral Distress, Trauma-Informed, Wellness

**Overview:**

Medical students frequently encounter situations in the clinical environment that conflict with their personal and professional values or exceed their perceived capacity to respond, leading to moral distress. This distress is often compounded by additional

identity-based or systemic stressors. When unrecognized or unaddressed moral distress can progress to moral injury and lead to disengagement, diminished empathy and impaired learning and professional identity formation. Despite its prevalence, faculty and administrators often feel ill-prepared to recognize or respond to students' moral distress, highlighting a critical gap in medical education.

This interactive workshop aims to equip medical educators and administrators with the knowledge and skills to recognize and respond to medical student moral distress through the lens of trauma-informed medical education (TIME). Participants will explore the impact of moral distress on learning and professional identity formation, apply validated screening tools to identify moral distress and develop strategies to integrate TIME frameworks into their own educational practices. Participants will leave with increased awareness, practical tools, and a shared commitment to fostering learning environments that support trainee well-being and resilience even in the face of challenging clinical experiences.

**Objectives:**

1. Describe the impact moral distress on learning, professional identity formation and clinical performance.
2. Utilize validated screening tools to identify students experiencing moral distress.
3. Apply trauma-informed medical educational (TIME) frameworks to mitigate moral distress in medical trainees.
4. Design actionable strategies to integrate TIME frameworks into one's educational environments.

**Methods:**

This interactive workshop engages participants through a variety of instructional methods designed to promote active learning and practical skill development. Methods include interactive polling, brief didactics, large and small group discussions, and concept mapping to build foundational knowledge. Participants will apply learning through guided case vignettes and a small group activity focused on revising cases using trauma-informed medical education (TIME) frameworks. Facilitated prompts support reflection, strategy development, and peer learning, ensuring attendees leave with actionable tools to address moral distress in their educational settings.

## **10: Learner Accommodations in Medical School: Opportunities to Thrive for Everyone!**

*Daniel Herchline, MD; Breann Butts, MD; Leslie Farrell, MD; Marguerite Costich, MD; Corinne Lehmann, MD*

Primary Topic: Pediatric Clerkship

Secondary Topic: Administration of the Pediatric Clerkship

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** Learner Accommodations, Learner Support, Administration, Technical Standards

**Overview:**

This workshop aims to build a strong foundation of knowledge and provide faculty and administrators with additional skills for supporting medical students with accommodations for optimal learning.

**Objectives:**

1. Discuss the current state of learner accommodations for medical students, including challenges and opportunities.
2. Apply key principles of learner accommodations to navigate a series of realistic cases.
3. Assemble a list of local and national resources that can be used to support learners with accommodations.

**Methods:**

This workshop will provide engaging activities tailored to adult learners. Participants will begin by completing a matching exercise that requires group collaboration to match acronyms/terms in the realm of learner accommodations with the correct definition. After a brief didactic to introduce the topic, participants will have the opportunity to work through a series of cases involving learner accommodations in small groups. Finally, workshop leaders will share resources that can help in navigating learner accommodations. A dedicated question and answer will be conducted at the end of the session.

## Thursday, March 26

### Workshop Session #2 | 1:30 pm - 3:00 pm

## **11: Check the Vitals – Early Support for Struggling Medical Learners**

*Preetha Krishnamoorthy, MDCM, FRCPC; Gabrielle Weiler, MD; John Martin, MD; Hosanna Au, MD DipMEd; Tara Mullowney, MD; Samantha Marin, MD; Natalie Sirizzotti, MD; Louise Murray, MD; Erin Quigley, MD; Gaby Yang, MD; Karen Forbes, MD; Marc Zucker, MD; Sarah McKnight, MD; Jennifer Lee Wiebe, MD; Lauren Perlman, MDCM*

Primary Topic: Pediatric Clerkship

Secondary Topic: Feedback

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** Struggling learner, learner in distress, support

**Overview:**

Medical educators frequently encounter learners who are struggling, yet many faculty lack a structured approach to early recognition and support. Addressing struggling learners early improves outcomes for both trainees and patients, while also

fostering faculty confidence in remediation practices. This workshop focuses on recognizing early signs of difficulty, analyzing underlying issues, and applying evidence-based strategies to provide effective support within pediatric education settings.

**Objectives:**

1. Recognize early signs of learners who may be in difficulty.
2. Describe a framework for analyzing the struggling learner.
3. Articulate the key steps in gathering relevant data.
4. Outline potential strategies and approaches to assist the struggling learner.

**Methods:**

This interactive workshop will engage participants through brief didactic segments, case-based discussions, and structured reflection. Participants will work in small groups to apply analytic frameworks to real-world cases of struggling learners, identify early warning signs, and design individualized action plans. Facilitators will guide large group debriefs and share practical strategies from multiple institutions. A psychologically safe, nonjudgmental approach will be emphasized throughout the session.

**12: IRB is NOT a Four-Letter Word: Demystifying the Process**

*Katherine Donowitz, MD; Alexandra Comfort, MD; Amal Khidir, MBBS; Esther K. Chung, MD, MPH; Jamie Fey, MD; Walter Dehory, MD; Andrew Wei, MD*

Primary Topic: Faculty and Resident Development

Secondary Topic: Clerkship Curriculum Research

Target Audience: Early Career | Mid-Career

**Keywords:** Research, Quality Improvement, faculty development

**Overview:**

Despite the central role of Institutional Review Boards (IRBs) in ensuring ethical and compliant research, many pediatric educators and clinician-investigators—particularly those early in their careers—lack formal training in navigating the IRB process. This gap can lead to confusion, delays, and missed opportunities for scholarship and quality improvement. The complexity of differentiating research from QI, understanding consent requirements, and managing multi-institutional studies often creates unnecessary barriers to project initiation and completion. Additionally, the fear of making mistakes or misclassifying projects can discourage educators from pursuing meaningful inquiry. This workshop addresses a critical need by providing clear, accessible guidance and practical tools to demystify the IRB process, empowering participants to confidently and ethically advance their scholarly work.

**Objectives:**

1. Define common IRB terminology and phrasing specific to human subjects research, consent, data management, vulnerable populations and describe “Single IRB” for multi-institutional projects and models for collaborative research.
2. Classify projects into appropriate categories for IRB review (i.e. QI vs research) and compare exempt, expedited, and full IRB review projects through case vignettes or participant projects.
3. Recognize common mistakes along the IRB submission process pathway, from drafting your project to hitting submit, and identify ways in which to avoid those mistakes.

**Methods:**

This interactive workshop is designed to demystify the Institutional Review Board (IRB) process for investigators across career stages, with a focus on early to mid-career researchers. Led by current and former IRB chairs, the session will offer practical tools and real-world examples to help participants effectively navigate IRB review—whether working within a single institution or across multiple sites. Through a combination of didactic content, case-based discussions, and hands-on small group activities, attendees will learn how to classify their projects, anticipate and avoid common pitfalls, and apply ethical principles to complex and ambiguous scenarios. Participants are encouraged to bring their own research or quality improvement projects for personalized feedback. Topics will include determining if a project requires IRB review, differentiating quality improvement (QI) from research, identifying and protecting vulnerable populations, understanding consent documentation, and addressing privacy in data management. Attendees will leave with a post-workshop toolkit including a glossary of key terms, dos and don’ts, and IRB planning checklists.

**13: Navigating Peaks and Valleys: Strategic Negotiation for Career Growth in Medical Education**

*Susan Nofziger, MD; Sherilyn Smith, MD; Andrew Galligan, MD; Joseph Gigante, MD; Nicole Johnson, MD*

Primary Topic: Faculty and Resident Development

Secondary Topic: Supports Annual Meeting Theme

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** Leadership, Communication, Empowerment

**Overview:**

Physicians frequently enter negotiation scenarios—whether related to contracts, roles, schedules, or resources—without formal training in negotiation strategy. Many feel underprepared or uncomfortable in these situations. Strong negotiation skills are critical for effective leadership and advocacy, yet they are not consistently taught. Instead, these skills are often developed informally and unevenly through trial-and-error or mentorship over time. This interactive workshop addresses the negotiation skills gap by providing a structured framework grounded in the principles from Getting to Yes. Through a mix of case scenarios and reflection on their own real-world challenges, participants will identify personal interests, work to recognize areas of mutual gain and

identify criteria that could be used to guide decision making. The session will also cover anticipating common obstacles and prepare a BATNA (Best Alternative to a Negotiated Agreement) to help provide a strategic alternative if you are unable to reach a mutual agreement. By the end of the workshop, attendees will leave with a practical, adaptable, negotiation framework to enhance their leadership effectiveness and advocate for themselves and their programs with greater confidence.

**Objectives:**

1. Identify the key elements of a successful negotiation
2. Apply the principles of Getting to Yes to real-world scenarios
3. Examine personal and systemic barriers to effective negotiations and strategies to overcome them
4. Develop a strategic approach using the Getting to Yes framework for a personal or professional negotiation

**Methods:**

This 90-minute interactive workshop combines brief didactics, case-based learning, personal reflection, and group discussion to both teach and practice the Getting to Yes negotiation framework. The workshop begins with a brief icebreaker activity called "Negotiation Bingo," where participants engage with one another to find colleagues who have experienced various types of negotiations from promotions to establishing curfew with your teenager. Participants are then introduced to the Getting to Yes negotiation format through a short presentation and apply this framework to small-group case discussions centered around different professional scenarios. Strategies for approaching these situations and possible areas for mutual gain are then reviewed in large group debriefs. Participants reflect next on personal and systemic barriers to the negotiation process and explore practical strategies to overcome them. The session culminates with a guided worksheet where participants apply the framework to a real-life negotiation scenario and develop a BATNA that is shared with their table. The workshop concludes with a brief evaluation and key takeaways.

## **14: Artificial Intelligence and the Pediatrics Match: Two Sides One Summit**

*Elisabeth Conser, MD; Michael Dell, MD; Olubukola Ojuola, MD; Jennifer DeCoste, MD; Kirstin Nankers, MD; Jessica James, MD; Maya Neeley, MD; Rachel Thompson, MD*

Primary Topic: Post-Clerkship

Secondary Topic: Innovative Uses of Technology

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** Artificial Intelligence, Residency Applications, UME-GME transition, Professionalism, Medical Student Advising

**Overview:**

Artificial intelligence (AI) is rapidly reshaping the residency application process. On the **applicant side**, students are increasingly using AI tools to draft personal statements, edit experiences, and prepare for interviews. On the **program side**, some faculty are using AI to generate letters of recommendation and institutions are beginning to use AI to efficiently review large numbers of applications, summarize materials, and assist in screening. AI use in residency applications is expanding, yet applicants, advisors, and programs lack clear guidance on its boundaries and best practices.

While these approaches can improve efficiency and consistency, they raise significant challenges. For applicants, questions of professionalism, authenticity, and equity emerge when AI-generated materials enter the application process. For programs, AI may reduce faculty workload and even minimize some forms of human bias, but it risks overlooking the nuanced qualities of a strong resident and may introduce machine learning bias from flawed datasets.

Pediatric educators need practical skills to critically evaluate both sides of AI use in the application process, advise learners effectively, and anticipate program-level challenges to ensure fair, holistic review.

**Objectives:**

By the end of this workshop, participants will be able to:

1. Explain how applicants and residency programs are currently using AI, including opportunities and limitations.
2. Evaluate the benefits and risks of AI for efficiency, fairness, and holistic review.
3. Identify how AI-generated materials affect perceptions of professionalism, authenticity, and equity.
4. Compare human versus machine biases in residency application review.
5. Develop concrete strategies for advising applicants and guiding programs in responsible AI use.

**Methods:**

The workshop uses active, skills-based learning to engage participants. After a brief interactive presentation on how AI works, participants will engage in small group case discussions examining applicant-side (personal statement, interview prep) and program-side (AI-assisted application screening) scenarios. A structured debate will allow groups to consider whether AI enhances fairness, taking both applicant and program perspectives. The session concludes with large-group synthesis and action planning, enabling participants to leave with practical strategies to apply at their institutions.

## **15: Keep it BRIEF: A Practical Debriefing Method for Busy Pediatric Preceptors**

*Veronica Gonzalez, MD; Amalia Guardiola, MD; Mohamed Zebda, DO; Mitra Misra, MD*

Primary Topic: Faculty and Resident Development

Secondary Topic: Pediatric Clerkship

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** Debriefing, Pediatric Clerkship, Feedback, Professional Identity Formation, Wellness

**Overview:**

Throughout training, learners experience patient encounters that span from difficult and emotional to successful and rewarding. Debriefing is an experiential learning process that involves bi-directional communication through a facilitated, reflective discussion. It supports the emotional well-being and professional identity formation of learners. While commonly applied to sentinel events, debriefing is equally valuable after successful encounters to reinforce positive behaviors. It can be integrated into everyday encounters, such as counseling families with vaccine hesitancy, safe sleep practices, antibiotic stewardship, and asthma follow-ups. Furthermore, debriefing enables preceptors to gather evidence for the AAMC Core Entrustable Professional Activities (EPAs), particularly EPA 9 (closed-loop communication) or EPA 11 (vaccine consent), thereby enhancing feedback and assessments. Barriers cited to debriefing include time constraints, a lack of formal training for preceptors, and concerns about the stigma associated with providing constructive feedback. However, tips to keep debriefs "brief" may help preceptors successfully incorporate them frequently. We aim to equip participants with a quick and structured debriefing tool, the "BRIEF" framework, designed for busy clinicians to conduct five-minute debriefs.

**Break the ice (30 seconds), Recount (1 minute), Identify (30 seconds), Explore (2 minutes), Formulate (1 minute)**

Adapted from established models, BRIEF prioritizes feasibility in non-emergent settings, such as in clinics and the newborn nursery. In this train-the-trainer workshop, participants will practice the framework, receive coaching, and develop an action plan to integrate BRIEF within their clinical settings, thereby fostering learner growth and emotional wellness while minimizing patient flow disruptions.

**Objectives:**

1. Identify how debriefing can be utilized in everyday clinical encounters.
2. Discuss common challenges to incorporating debriefing.
3. Implement the BRIEF framework in various case examples.
4. Create an action plan to teach and apply BRIEF with faculty preceptors, residents, and fellows at their home institutions.

**Methods:**

The workshop will begin with an icebreaker that acknowledges the challenges of debriefing in various time-pressured clinical settings. This will be followed by a didactic on why everyday debriefing matters and an overview of the BRIEF framework. Participants will then engage in role play with rotating triads (preceptor/learner/observer) and complete three timed cycles using role cards and a feedback checklist. A large group discussion will follow to share insights. Next, in small, facilitated groups, participants will map barriers, outline steps for routine use, and determine how to adapt BRIEF to their specific setting(s). Finally, they will develop a plan to disseminate BRIEF to faculty preceptors, residents, and fellows at their home institutions.

**16: Leveling the Climb: Supporting Students for the Pediatrics Shelf Exam**

*Autumn Hinds, MD; Lolita Alkureishi, MD; Sarah Korte, MD; Vydia Permashwar, MD; Lauren Cochran, MD, MPH; Abena Knight, MD; Charles Hannum, MD; Kanika Gupta, MD; Lisa Cheng, MD; Erica Lawson, MD; Randi Sperling, DO; Janet Schairer, MD; Amy Grover, MD; Beth Opstal, MD; Regina Macatangay, MD; Rajat Kaul, MD, MS ; Kathryn Hines, MD*

Primary Topic: Pediatric Clerkship

Secondary Topic: Assessment

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** Shelf preparation, exam resources, assessment

**Overview:**

Despite a recent shift toward competency based assessment, the NBME Pediatrics Shelf Exam continues to play a role in clerkship grading at most institutions. With Step 1 scores no longer available to differentiate students, there is an even greater emphasis placed on clerkship grades, heightening the stakes for shelf exam performance. Learners often face barriers to shelf exam success such as limited pre-clerkship pediatrics exposure, short rotation blocks, and inequities amplified by standardized testing. Further, while some schools provide free resources such as NBME practice exams or have access to learning specialists, others do not, creating variability in how students are supported.

From the faculty perspective, educators report uncertainty interpreting NBME subject exam data, limited strategies for embedding preparation into clerkships, and challenges balancing standardized exams with competency-based assessment. There is a clear need for practical, learner-centered strategies that provide equitable preparation and meaningful support for students.

This interactive workshop brings together three COMSEP collaboratives (Core Clerkship, Technology, and Assessment & Evaluation), the DEI Resource & Advisory Committee, and a trainee panel. Together, we explore how institutions can integrate proactive shelf preparation into the clerkship using equitable, high-yield resources and student-informed approaches. Participants will engage with peer-tested tools, data interpretation exercises, and collaborative strategies designed to level the climb for all learners.

**Objectives:**

1. Identify barriers and inequities associated with successful standardized exam performance in pediatrics.
2. Interpret NBME shelf and subject exam data to identify areas where learners struggle and use these insights to guide student support and curricular improvement.
3. Evaluate a range of shelf preparation strategies and learner-centered approaches.
4. Design institutional shelf preparation approaches that proactively support diverse learners.

**Methods:**

This workshop combines brief large group interactive sessions with active learning to help faculty interpret NBME data, recognize inequities, evaluate preparation resources, and design institutional strategies. After introductions, participants will review NBME reports, practice interpreting data to identify areas of student struggle, and consider how findings can inform support and curricular improvement. A DEI-focused “Identity Pie” activity will prompt reflection on inequities in exam performance and resource access.

A student panel (or recorded alternatives) will highlight preparation strategies, resource use, and exam-related stressors, allowing participants to evaluate learner-centered approaches. Faculty will also explore proactive strategies through a resource showcase featuring peer teachers, games, podcasts, and flashcards.

Finally, small groups will design institutional “game plans” using resource cards and guided prompts to proactively support diverse learners. Large-group debrief and resource-sharing will close the session.

**17: Reimagining Critical Conversations: Strategies for Interpersonal Conflict Management: A Train-the-Trainers Workshop to Equip Your Team For Managing Professional Conflict**

*Amy Fleming, MD, MEd; Heather Burrows, MD, PhD; Luke Finck, PhD; Jason Noah, PhD; Sharon Kileny, MD; W. Christopher Golden, MD; Meg Keeley, MD*

Primary Topic: Administration of the Pediatric Clerkship

Secondary Topic: Feedback

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** [Communication](#), [Critical Conversations](#), [administrative staff support](#)

**Overview:**

Administrative and professional staff are frequently on the front lines of conflict, representing their clerkship, office, or institution during interactions with students, faculty and staff. Institutions often focus on the ability of students and faculty to successfully manage conflict; however, administrative professionals tend to be left out of these training opportunities. This workshop is designed to provide all team members the opportunity to look at challenging situations they may have encountered (i.e. a testy email from a student or preparing for a conversation they know will be difficult) and provide them tools to successfully handle the “in the moment” follow up response. Administrative staff can experience resistance during exchanges, yet they receive little training on how to effectively manage these situations. This workshop provides training and resources for all team members, which will enable them to know when, where, and how to respond as well as report if needed. The workshop is designed for participant engagement.

**Objectives:**

The participant will be able to

1. Provide an overview of various methods used to deescalate difficult situations
2. Practice conflict management techniques using a case-based format and role play scenarios
3. Describe a toolkit of strategies, which they can implement during staff training at their own institutions

**Methods:**

This interactive workshop will employ multiple educational strategies to actively engage participants in diving deeply into the topic of the how to best handle difficult conversations. Techniques will include role play scenarios, think-pair-share, large group discussion, didactic, and small group work. Participants will apply techniques outlined in [Crucial Conversations](#), [State Your Path](#) chapter and will have the opportunity to describe their own experiences, and share approaches they have used. Using role plays, participants will identify and practice strategies in small group discussions and address common challenging advising scenarios. By the end of the workshop, participants will create a tool kit of strategies they can employ when faced with these difficult conversations or situations and can share these ideas with the staff at their home institutions. The workshop will provide those attending with a facilitator guide on how to conduct similar training sessions at their own institution.

**Friday, March 27**  
**Workshop Session #3 | 10:30 am - 12:00 pm****Administrator General Session**

**Overview:** Join us for an insightful and dynamic session designed for program coordinators and administrators navigating the ever-evolving landscape of medical student education. This is your chance to connect with colleagues from across the country, share experiences, and gain fresh ideas to enhance your program’s success. We’ll dive into practical strategies and key updates to help you navigate challenges, strengthen collaboration with faculty, and better support your learners. Don’t miss this opportunity to connect with peers, exchange ideas, and empower your professional journey!

**Please note that the Administrator General Session is during the workshop session #3 timeslot**

**18: Beyond the Numbers: Building Skill in Narrative Assessment through Gamified Faculty Development**

*Amy Grover, MD; Julia Aquino, MD; Elizabeth Black, MD; Lauren Cochran, MD, MPH; Emma Greenberg; Charles Hannum, MD; Kathryn Hines, MD; Margie Rodgers, MS; Stacey Rose, MD, MSEd; Theresa Scott, DO; Jennifer Soep, MD; Meghan Treitz, MD*

Primary Topic: Assessment

Secondary Topic: Faculty and Resident Development

Target Audience: Early Career | Mid-Career | Late Career

Keywords: [gamification](#), [narrative assessment](#), [faculty development](#)

**Overview:**

In an era when medical schools are re-evaluating the roles that NBME exams, Step exams and tiered grading play in student assessment, narrative comments remain a foundational component of the student educational portfolio. They are used to inform promotion decisions, prompt and document growth over time, and form a core component of MSPE letters. Despite their centrality to competency-based assessment, the challenge to support faculty in providing timely, behaviorally based, detailed narrative comments is ubiquitous. While most medical educators are familiar with the components of a well written narrative assessment, and can generate one themselves, translating this knowledge to the faculty responsible for the majority of narrative assessments can prove to be difficult.

**Objectives:**

1. Discuss common challenges encountered in utilizing medical student narrative assessment comments for learning, grading and MSPE comments/residency applications
2. Describe and solicit input on best practices in faculty development and program structure to facilitate high quality narrative assessment
3. Share non-punitive experiential faculty development exercises for improving narrative assessment via gamification

**Methods:**

This workshop aims to address major challenges in faculty development around narrative assessment, including concerns about timeliness, bias, credibility, and completeness.

After an introductory icebreaker, we will begin with a brief, evidence-based review of the salient issues in faculty development around narrative assessment, followed by an interactive large group opportunity to share unique perspectives around narrative assessment faculty development from across institutions. To help bring joy to an often dry topic, participants will then engage in a series of games designed to address common challenges, such as concerns about bias, a lack of useful formative feedback, and the use of AI in narrative assessment. Facilitators will highlight key learning points for each activity, bringing attention to faculty, student and administrative perspectives. Finally, participants will pair-share which elements of the workshop they will incorporate upon returning home. A resource list of helpful tools for faculty development and subsequent readings, as well as examples of the games used in the workshop, will be provided to support participants in applying the workshop content at their home institutions.

## **19: Frameworks for Advancing Health Equity in Education: From Bedside Teaching to Curriculum**

### **Development**

*Esther K. Chung, MD, MPH; Robyn Bockrath, MD, MEd; Nikita Nagpal, MD; Morgan Greenfield, MD; Jennifer Trainor, MD*

Primary Topic: Diversity, Equity, & Inclusion

Secondary Topic: Faculty and Resident Development

Target Audience: Early Career | Mid-Career | Late Career

Keywords: [health equity](#), [scholarship](#), [curriculum](#)

**Overview:**

Health equity is widely recognized as a core value in medical education; however, educators often lack practical tools to embed equity into everyday teaching and scholarship. This interactive workshop led by faculty from multiple institutions equips participants with actionable frameworks – including a new EQUIP-C (EQUity-Integrated Planning for Curriculum) framework, published Modified Glassick's criteria, and Health Equity Assessment tools – to integrate equity across clinical teaching, curricular design, and scholarly work.

**Objectives:**

1. Describe the importance of advancing health equity in medical education.
2. Identify opportunities to incorporate health equity into everyday teaching.
3. Apply frameworks and tools to integrate health equity into participants' current teaching, curricula, and scholarly work.

**Methods:**

Participants will engage in a dynamic “case marathon” using Kern’s Six Step approach to curriculum development and EQUIP-C to redesign teaching examples drawn from common pediatric health topics.

Through collaborative problem-solving, teams will identify equity gaps and propose modifications that include social determinants of health, learner engagement, and strategies that recognize and address varied learner backgrounds, lived experiences, and educational needs. To bridge theory and practice, the workshop

will utilize generative AI prompts tailored to health equity education. Participants will apply these tools to various educational scenarios, ranging from bedside teaching to curriculum development. This session will incorporate large- and small-group learning, interactive games, role-play, and guided reflection. By the end of the session, participants will have: (1) practiced using validated frameworks to critically evaluate and redesign teaching encounters; (2) applied equity principles to both curricular and bedside settings; and (3) developed a concrete plan to adapt these methods within their own institutions. Participants will leave with ready-to-use and sharable frameworks, case scenarios, AI prompt guides, and an implementation worksheet for future use.

## **20: “Don’t Touch that [Student’s] Dial”.... Engaging Quiet and Loud Learners**

*W. Christopher Golden, MD; Heather Burrows, MD, PhD; Sharon Kileny, MD; Jessica Fealy, MD; Meg Keeley, MD; Joseph Jackson, MD; Amy Fleming, MD, MHPE*

Primary Topic: Faculty and Resident Development

Secondary Topic: Pediatric Clerkship

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** learning style

### **Overview:**

Learners who are perceived as either quiet or loud may suffer in the context of clerkships and resident rotations. Quiet learners are challenged when their level of engagement and medical knowledge are measured based on verbal interactions. However, not all quiet learners are created equally; each requires a unique teaching strategy determined after appropriate assessment of their needs. Similarly, loud learners need support, too, as they may be seen as “gunners” or overly concerned with their own performance, which can lead to stigmatization and increased adversity in their learning environments. This interactive workshop will utilize multiple educational strategies to actively engage participants in diving deeply into the topic of the quiet and loud learner. Techniques will include role plays, think-pair-share, large group discussion, didactic, and small group work. Participants will transition through the stages of Kolb’s learning cycle; concrete experience, reflective observation, abstract conceptualization, and active experimentation. Participants will have the opportunity to describe experiences of working with learners at either end of the spectrum and share approaches they have used to successfully engage with these two groups. Structure will be provided for considering different categories of learners and how to best target teaching techniques to the specific learner. Using role plays, participants will identify and practice strategies in small group discussions and address common challenging learner scenarios. By the end of the workshop, participants will create a tool kit of strategies they can employ when engaging students or residents at any volume and can share these ideas with their faculty at their home institutions.

### **Objectives:**

1. Identify the reasons that learners may seem “quiet” or “loud”
2. Develop effective strategies for assessing and engaging both quiet and loud learners while maintaining an inclusive learning environment for all.
3. Create an action plan for implementing learned strategies upon return to home institution

### **Methods:**

Brief didactic, Large group discussion, small group discussion, pair share, reflections, report out, role play

## **21: Building Bridges: Enhancing Trainee Education while Caring for Children with Medical Complexity**

*Leslie Reilly, MD; Caroline Roth, MD; Natalia Kot, MD; Jessica Tomaszewski, MD; Catherine Soprano, MD; Toni Henry; Samuel Newcomb*

Primary Topic: Pediatric Clerkship

Secondary Topic: Post-Clerkship

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** complex care, cmc, education development

### **Overview:**

Despite the substantial percentage of Children with Medical Complexity (CMC) that learners are likely to encounter during their training, limited resources are available in relation to medical student education. Most resources are targeted specifically to residents or faculty. However, it has been shown that medical students can also benefit from education around CMC and their families especially when tied to direct patient and family interactions.

Our workshop seeks to expand our students' education by optimizing learning opportunities when caring for CMC. We plan to accomplish this goal through thoughtful discussion on rotation structures, faculty development, identification of opportunities and incorporation for teaching on patients with CMC, and application of COMSEP Curriculum Competencies and Objectives, including those covered within Common Chronic Illness and Disability, to enhance education provided when caring for this patient population.

### **Objectives:**

Following completion of the workshop, attendees will be able to:

1. Identify current and potential clinical environments where students interact with Children with Medical Complexity (CMC) in their institution.

2. Appraise clinical scenarios involving CMC to provide education to students on both bread-and-butter and medically complex pediatric topics
3. Create a plan to utilize care of CMC to fulfill COMSEP Curriculum Competencies and Objectives for their students

**Methods:**

This workshop uses a mixture of brief didactics with interactive components including a gallery walk, small group discussions, large group discussions, reflection, and a worksheet to explore opportunities to improve student education while caring for Children with Medical Complexity (CMC). Participants will have the opportunity to collaborate and apply content directly throughout the workshop and conclude the session with a take-home plan they can implement in their everyday clinical educator practice and/or medical education role.

Content of this workshop includes the following:

- COMSEP Survey results regarding CMC and trainees
- Practice worksheet with clinical scenarios
- COMSEP Curriculum Competencies and Objectives relevant to CMC

## **22: Beyond the Summit: Exploring Spirituality in Pediatric Medical Education**

*Lavjay Butani, MD; Michael Barone, MD, MPH; Bruce Morgenstern, MD*

Primary Topic: Faculty and Resident Development

Secondary Topic: Supports Annual Meeting Theme

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** *Spirituality, cultural humility, personal and professional development*

**Overview:**

Patients and their families often learn to cope with and understand their suffering through the spiritual dimension of their lives, especially in the context of chronic and serious health conditions. Yet there remains a gap in the teaching and practice of spiritual care, that is of even greater relevance in pediatrics, where the impact of suffering is most profound; fewer than 7% of medical schools report a required curriculum on spirituality and health. We propose that spiritual exploration is a core element of the practice of medicine, and one that must be incorporated into required curricula, after appropriate faculty development. When practiced and nurtured within ourselves spirituality and spiritual care can mitigate burnout and enhance our joy and dedication, so vital to model for trainees. Barriers to covering this topic include lack of knowledge among providers, fear of offending others, and a perception that spirituality is outside the domain of physicians' responsibilities, all factors that are amenable to change through evidence-based interventions. Our interactive and thought-provoking workshop will encourage participants to explore the meaning and practice of spirituality, delve into the evidence supporting the 'how and why' of teaching about the intersection of spirituality and health care, and develop a plan to incorporate teaching about the provision of spiritual care, in the right context, in the classroom and at the bedside, and in their faculty development efforts.

**Objectives:**

At the end of the session, participants should be able to

1. Demonstrate effective approaches to initiate conversations about spirituality in medicine and medical education;
2. Discuss the benefits and risks of exploring spirituality in the care of the child and family; and
3. Describe ways to address spirituality in the curriculum of medical education and medical practice in non-threatening/non-confrontational ways.

**Methods:**

This interactive workshop starts with an exploration of identity, values, faith and spirituality, in a safe space, guided by curiosity and respect for all experiences. Small and large group interactive activities, including role play, will allow participants to apply validated tools, aimed at exploring self and patients' spirituality, to different scenarios. Facilitated individual reflection, and small and large group discussions will focus on ways to promote spirituality in health care education.

## **23: Your Leadership Journey: Finding Your Summit and Enjoying the Views Along the Way**

*April Buchanan, MD; Gary Beck Dallaghan, PhD; Douglas Carlson, MD; Robin English, MD; Leslie Fall, MD*

Primary Topic: Faculty and Resident Development

Secondary Topic: Supports Annual Meeting Theme

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** *leadership, professional development, mindfulness*

**Overview:**

Despite various leadership roles available in pediatrics, medical education, and health systems, many pediatric educators lack clarity on how to navigate these opportunities in alignment with their personal values and career goals. There is a growing need for structured guidance on intentional career planning, mentorship, and resilience-building to support sustainable leadership development. Additionally, educators often face burnout and disconnection from the joy that initially drew them to medicine. This workshop addresses these gaps by helping participants explore diverse leadership pathways, reflect on their motivations, and develop strategies to cultivate both professional growth and personal fulfillment throughout their leadership journey.

**Objectives:**

1. **Identify diverse leadership pathways** within pediatrics, health system leadership, and medical education and explore how they align with personal and professional values.
2. **Reflect on individual motivations and goals** to cultivate a sustainable and fulfilling career.
3. **Develop strategies for intentional career planning**, including recognizing opportunities for growth, mentorship, and collaboration.
4. **Practice mindfulness and self-awareness techniques** to enhance resilience and enjoyment throughout the leadership journey.

**Methods:**

This workshop employs a dynamic blend of instructional strategies designed to engage participants in active learning, reflection, and skill-building. The workshop will begin with interactive presentations by pediatric leaders who represent roles in undergraduate and graduate medical education, QI and health systems, department leadership, and industry. Through experiential mindfulness exercises and small group discussions, attendees will explore diverse leadership pathways in pediatrics, medical education, health systems, and business/industry, while cultivating personal insight and professional resilience. Each activity is intentionally structured to align with COMSEP's strategic pillars, ensuring that participants not only gain practical tools for career planning and leadership growth but also take time to reflect, connect, and enjoy the journey along the way.

**24: Portal to Scholarship: Using MedEdPortal to Transform your Curricular Work**

*Rebekah Burns, MD; Jonathan Gold, MD; Emily Patula, MD; Alanna Higgins Joyce, MD*

Primary Topic: Faculty and Resident Development

Target Audience: Early Career | Mid-Career | Late Career

Keywords: [scholarship](#), [MedEdPORTAL](#), [curriculum development](#)

**Overview:**

Many educators spend a significant amount of time creating curricula and educational sessions for medical students, residents, and faculty. This workshop will help participants leverage the work they are already doing, disseminate their education innovations and develop scholarly output to aid in career advancement. It may be especially helpful for those on an academic track who wish to leverage their educational work into academic scholarship. Participants will do the following 1) Review current and past curricula they have created that may be suitable for *MedEdPORTAL* 2) Using the lens of Glassick's Criteria for Scholarship, identify strengths and gaps 3) Make a plan for next steps to prepare a submission for *MedEdPORTAL*.

**Objectives:**

By the end of this workshop participants will be able to:

1. Explain how *MedEdPORTAL* functions as an educational resource and platform for disseminating scholarship
2. Describe elements of a high-quality educational resource
3. Strategize to avoid common pitfalls in submissions
4. Plan a submission for *MedEdPORTAL*

**Methods:**

An interactive didactic session will orient learners to *MedEdPORTAL* as a platform to locate and publish curricula. We will review Glassick's criteria for scholarship and map these to the required components of submissions to build practical understanding of manuscript preparation. Facilitators will discuss common pitfalls based on our experiences as authors, reviewers, and Editors (Associate and Deputy) of *MedEdPORTAL*. Small group sessions with individual exercises and sharing supported by worksheets will be intermixed with large group discussions so that learners can develop and critique ideas for submission during the workshop. Between breakout sessions, participants will report back to the larger group to share ideas and questions.

**Saturday, March 28**  
**Workshop Session #4 | 8:45 am - 10:15 pm**

**25: Summit Strategies: Elevating Clinical Reasoning Assessment in Daily Pediatric Clerkship Teaching**

*Theresa Scott, DO; Kathryn Hines, MD; Elizabeth VanOpstal, MD; Amy Grover, MD; Lauren Cochran, MD, MPH; Jennifer Thompson, MD; Caroline Hourigan, MS4; Charles Hannum, MD; Stacey Rose, MD, MSEd*

Primary Topic: Assessment

Secondary Topic: Faculty and Resident Development

Target Audience: Early Career | Mid-Career | Late Career

Keywords: [Clinical reasoning](#), [assessment](#), [clinical teaching](#), [artificial intelligence](#), [faculty development](#)

**Overview:**

Teaching and assessing clinical reasoning (CR) is a challenge for pediatric educators, with additional complexities arising in the age of artificial intelligence (AI). CR skills, such as the ability to interpret patient data in real-time, remain critically important for the rising generation of physicians, yet clinical supervisors often struggle to assess trainees' CR. CR is a complex cognitive process that cannot be directly observed. Additionally, educators may over-rely on differential diagnosis as the focus for assessment, even though CR is used in almost every patient care interaction. During this workshop, participants will gain hands-on experience with a

variety of practical strategies to promote the assessment of CR within established clerkship routines, and will leave with faculty development materials to disseminate these skills at their home institutions.

**Objectives:**

1. Explain the key elements of clinical reasoning and common pitfalls for students
2. Identify clinical reasoning application and assessment opportunities beyond the differential diagnosis
3. Apply new techniques for probing student clinical reasoning in upcoming teaching encounters
4. Outline a plan for sharing clinical reasoning assessment strategies with clerkship supervisors at one's home institution

**Methods:**

This workshop will emphasize hands-on learning in small groups. After an ice breaker, a large-group interactive session will cover the key elements of CR, general principles to support CR assessment, and common CR pitfalls for students. In the first small-group activity, participants will use the Assessment of Reasoning Tool to analyze in real-time a student's oral case presentation about a newly-admitted patient. Group members will then work together, selecting strategies from a reference handout, to role play exploration and assessment of their student's CR. The second activity will focus on CR touch-points beyond the differential diagnosis: participants will review student notes as a starting point, choosing between a well child visit or re-evaluation of an inpatient with an established diagnosis. Participants will identify multiple elements of CR that could be discussed, including both probing questions for the student and articulating their own CR about the case. For the final activity, participants will use generative AI tools to create a differential diagnosis for a clinical scenario, and then develop questions to guide a learner in critically evaluating the AI output. Finally, we will present take-home materials for the large group, and have participants pair-share ideas for how they can a) implement at least one of these strategies in their own teaching practice, and b) identify an opportunity to disseminate these approaches with colleagues.

## **26: From Surviving to Flourishing: Building Positive Emotion Engagement Relationships Meaning and Accomplishment in the Clinical Learning Environment**

*Uchechi Oddiri, MD; Erin McMaster, MD; Latasha Bogues, MD; Shani Kamberi; Ben Lee, MD; Regina Macatangay, MD*

Primary Topic: Wellness

Secondary Topic: Faculty and Resident Development

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** well-being, flourishing, clinical learning environment, PERMA

**Overview:**

Medical students face an elevated risk of compromised well-being, with depression rates reported to be three times higher than those of their age-matched peers. Burnout and reduced flourishing have been linked to poorer patient care, higher rates of medical error, diminished professionalism, attrition from training programs, and lower patient satisfaction. Although many medical schools have implemented well-being initiatives, these efforts often focus primarily on the pre-clinical years. Once learners transition to the clinical learning environment (CLE), their well-being is influenced by additional factors, including resident and faculty well-being, institutional culture, CLE structure, and evaluative practices.

Flourishing, a concept grounded in positive psychology, offers a comprehensive perspective on well-being that extends beyond the absence of distress to encompass personal and professional fulfillment. In medical education, fostering flourishing has been associated with greater professional satisfaction, improved learning, and higher quality of patient care. The PERMA framework—comprising positive emotions, engagement, relationships, meaning, and accomplishment—provides a validated model for promoting flourishing. Evidence suggests that promoting PERMA elements reduces burnout and enhances well-being, while operationalizing PERMA within the CLE contributes to reduced emotional exhaustion, stronger professional identity formation, and enriched learning experiences.

**Objectives:**

1. Define flourishing and explain its relevance to medical student growth and well-being within the clinical learning environment.
2. Apply the PERMA framework to clinical workplace scenarios to promote medical students' flourishing.
3. Develop specific, feasible, and equity-minded strategies that integrate flourishing principles into the clinical learning environment to optimize student learning and well-being.

**Methods:**

In this interactive workshop, we will introduce the concept of flourishing and the PERMA framework within the CLE. After an opening icebreaker and introduction, facilitators will define flourishing, highlight its significance in medical education, and explore evidence-based PERMA-informed strategies that support both learners and educators. A student co-facilitator will provide students' perspectives on barriers to flourishing and PERMA strategies, highlighting what strategies are effective or ineffective. The first breakout session will use case-based, role-play scenarios (focused on either burnout, disengagement, or communication breakdown) with cultural considerations to practice applying PERMA interventions. Roles used in these scenarios will include all CLE stakeholders (i.e.: trainees, clinician educators, and educational leaders). The second breakout session will invite participants to reflect and plan by completing a PERMA Action Worksheet. Group debriefs will synthesize insights, and the workshop will conclude with key take-home points. Ultimately, participants will leave with practical, equity-minded strategies to foster flourishing that they can adapt and share within their own institutions.

## 27: Framing Feedback Conversations From the Lens of Growth Mindset

*Karen Forbes, MD, MEd, FRCPC; Brittany Lissinna, MD, FRCPC; Preetha Krishnamoorthy, MDCM, FRCPC*

Primary Topic: Feedback

Secondary Topic: Pediatric Clerkship

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** [feedback](#), [growth mindset](#), [assessment](#)

### Overview:

Medical learners train in a culture where there is discord between personal growth and assessment. Often, learners focus on performance-based assessment expectations and perfectionism, resulting in fear of failure or exposure of weaknesses. This may result in avoidance of feedback at the expense of personal growth. Similarly, learners may perceive written assessment that documents improvement as implying that they were inherently weaker to start, potentially impacting residency applications. Medical educators are challenged with providing constructive and authentic feedback to learners so as to overcome these threats to growth, thus enabling learners to view vulnerabilities as opportunities for improvement, with focus on developing skills for reflection and self-assessment. Framed from the lens of growth mindset, this workshop will provide clinical educators with tools and language for feedback conversations that enable them to implement learner-centric coaching to foster growth mindset in their learners.

### Objectives:

By the end of this workshop, participants will be able to:

1. Compare and contrast the characteristics of fixed versus growth mindset in the context of medical learners
2. Explain how mindset influences feedback conversations
3. Identify feedback language that reinforces fixed mindset or promotes growth mindset
4. Practice feedback conversations using a language that focuses on growth
5. Create feedback phrasing for written assessments that frames students' growth as a strength

### Methods:

This highly interactive workshop will allow participants to explore the concept of growth mindset and its application to feedback in medical education through a series of activities, including discussion around vignettes, video with reflection, and role plays, using both smaller and large groups. We will begin with an engaging ice-breaker activity related to feedback that will allow participants to gain comfort with colleagues as we further explore the topic of growth mindset. After a short plenary session, participants will divide into small groups to consider case vignettes that highlight the interplay of mindset and feedback. Worksheets with probing questions will allow participants to reflect on the cases in pairs, then returning to the large group to discuss their thoughts. Next, we will explore common pitfalls in feedback that threaten growth mindset. Role play scenarios will be presented, where participants will have a chance to analyze and apply learner-centric coaching and feedback. The final activity will be a brainstorm as a large group on creating written assessment language that frames growth as a strength for residency programs. We will wrap up and leave time for feedback and evaluation.

## 28: When PIGs Fly: Revitalizing & Sustaining Your Pediatric Interest Group

*Lolita Alkureishi, MD; Lavjay Butani, MD; Erin King, MD; Leslie Farrell, MD; Marc Zucker, MD; Jennifer Duma, MD; Sofía Ramírez, MBA; Holly Frey; Malissa Edwards, MPA; Tori Benson; Nicole Johnson, MD, FRCPC; Alp Koksal, BA; Katie O'Donnell, MD; Jeremy Middleton, MD; Lacey Burke, BS; Courtney Judd, MD, MPH; Bonnie Landon; Katherine Donowitz, MD*

Primary Topic: Pre-clerkship

Secondary Topic: Supports Annual Meeting Theme

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** [Pediatric Interest Group](#), [Strategic Planning](#), [Sustainability](#), [PIG](#)

### Overview:

The pediatric workforce continues to face shortages, with fewer medical students choosing pediatrics as a career. Pediatric Interest Groups (PIGs) often provide students with their earliest exposure to pediatrics, serving as gateways for mentorship, professional identity formation, and long-term career interest. Yet many PIGs struggle with sustainability due to leadership turnover, limited resources, and lack of strategic planning. Without strong structures, even thriving groups risk losing visibility and impact, narrowing an important pathway into pediatrics.

Educators need practical tools to build resilient and inclusive PIGs that can thrive across leadership transitions and resource challenges. This workshop addresses that gap by equipping participants with sustainable strategic planning strategies that can be applied to both new and established PIGs. Don't have a PIG yet? Fear not—this session will provide a roadmap for launching one, with one-on-one support available from workshop leaders to help participants develop practical resources and a plan to get started with confidence.

### Objectives:

1. Define the essential components of a sustainable strategic plan for a Pediatric Interest Group.

2. Recognize the collaborative roles of students, residents, faculty, and administrators in sustaining inclusive Pediatric Interest Groups.
3. Conduct a SWOT (Strengths, Weaknesses, Opportunities, Threats) analysis tailored to their PIG.
4. Adapt SWOT findings into an actionable & sustainable strategic plan for your PIG using SMART goals.

**Methods:**

Participants will engage in a highly interactive session blending brief didactics with experiential learning. The session will open with an icebreaker to assess the participants' experience with PIG. Facilitators will begin with an overview of strategic planning and why it matters for PIG sustainability. A panel of educators—including administrators, faculty, and trainees—will share real-world examples of successful approaches from their institutions. The panel discussion will open to questions and dialogue with participants.

Participants will then complete an individual SWOT analysis of their PIG using a customized worksheet, followed by small-group work to design a draft strategic plan supported by SMART (Specific, Measurable, Achievable, Relevant, and Time-bound) goals. Groups will share key insights in a large-group discussion, receiving constructive feedback from peers and panelists. To close, participants will receive a robust set of take-home resources, including SWOT and strategic plan templates, worksheets, and curated materials from prior workshops on starting a PIG, crafting mission statements, and compiling successful PIG activities from COMSEP members to spark creativity and sustain momentum at their home institutions.

**29: The Climb to Clarity: Making Sense of Theory and Theoretical Frameworks to Elevate Your Scholarship**

*Robyn Bockrath, MD; Deanna Chieco, MD, EdM; Terry Kind, MD, MPH; Nikita Nagpal, MD; Erin Pete Devon, MD; Jean Petershak, MD; Rebecca Tenney-Soeiro, MD; Jennifer Trainor, MD; Kim Tran Lopez, DO; Morgan Greenfield, MD*

Primary Topic: Faculty and Resident Development

Target Audience: Early Career | Mid-Career | Late Career

Keywords: theory, theoretical framework, conceptual framework, medical education research, health professions education research

**Overview:**

The development and dissemination of rigorous medical education scholarship is pivotal to the advancement of the field. Creating meaningful scholarship in this space requires a facile understanding of the theories and frameworks that shape and underpin medical education research. Yet understanding how to identify and apply these at times enigmatic concepts can be daunting and can create barriers for those interested in pursuing medical education scholarship. This workshop seeks to demystify these concepts and provide real world application of theory, theoretical frameworks, and conceptual frameworks to a variety of scholarship, including program evaluation, assessment, curriculum development, and qualitative research. By the end of the workshop, participants will be able to identify the differences between these concepts and adapt them to real life scholarly pursuits, enhancing the quality of their work for scholarship and publication.

**Objectives:**

1. Define theory, theoretical framework, and conceptual framework in the context of medical education research and scholarship.
2. Integrate learning theory into the design of educational curricula.
3. Apply an appropriate theoretical framework to guide a medical education question or project, drawing on a range of resources from traditional literature search methods to large language models like ChatGPT.

**Methods:**

This workshop will employ a variety of interactive instructional methods to engage participants in active learning and skill building around theoretical and conceptual frameworks. Large group didactics will be minimized and only used to provide foundational concepts to underpin the session.

The session begins with an icebreaker designed to create a psychologically safe space while also eliciting participant's current understanding of the educational content. Drawing on Vygotsky's sociocultural theory, instructional scaffolding will be employed to introduce the concept of learning theory in action using a relatable scene from The Sound of Music. Participants will then apply this practice to prepared examples of educational curricula. In this small group activity, gamification techniques will increase audience participation while consolidating understanding.

Finally, participants will practice applying theoretical frameworks in small groups, engaging in active experimentation with different resources, from traditional research search engines to large language models. This skill building will continue with a pair share exercise where they will apply this skill to their own project, translating learning into changes they may apply in their own academic practice. Lastly, a large group debrief will reinforce knowledge and encourage collaboration by allowing participants to learn from one another's perspectives on applying these concepts in their academic work.

**30: Mapping the Education Scholarship Trail: A Journey of Belonging Becoming and Professing Identity**

*Amy Creel, MD; Michael Dell, MD; Robin English, MD; Amanda Messer, MD; Jamie Sutherell, MD*

Primary Topic: Faculty and Resident Development

Target Audience: Early Career | Mid-Career | Late Career

Keywords: education scholarship, professional identity, belonging

**Overview:**

Medical education scholarship is essential to educational innovation and advancement. Scholarly activity not only advances the field but also provides personal fulfillment and opportunities for academic promotion.

This interactive workshop uses the framework of *Belonging, Becoming, and Professing* to guide participants to examine their identities as medical education scholars and to develop strategies to explore and elevate their scholarship identity.

**Objectives:**

By the end of this workshop, participants will be able to:

1. Identify people and organizations, local and national, that cultivate and reinforce their identity as an education scholar.
2. Apply practical frameworks to reframe routine teaching and leadership activities as scholarship.
3. Create an individualized action plan for ongoing scholarly growth.

**Methods:**

The foundation, *Belonging*, focuses on reflection and professional identity formation. Participants will explore their journeys as medical education scholars and identify the people and organizations that shape this identity.

In *Becoming*, participants will consider the skills, knowledge, and resources needed to create and elevate their education scholarship identity.

Finally, *Professing* emphasizes visibility and value of education scholars within academic medicine. In addition, participants will explore strategies for developing supportive communities of education scholars.

Participants will leave with a personalized action plan for embracing their scholarly identity, recognizing their contributions to academic medicine, and fostering a thriving community of pediatric medical education scholars.

### **31: TXT to Teach: Building a Text Messaging Curriculum for Modern Learners**

*Ruby Bartolome, DO; Barbara (Lorrie) Edwards, MD; Rachel Thompson, MD; Julia Aquino, MD*

Primary Topic: Innovative Uses of Technology

Secondary Topic: Faculty and Resident Development

Target Audience: Early Career | Mid-Career | Late Career

**Keywords:** [Microlearning](#), [Cognitive load](#), [Curriculum development](#)

**Overview:**

Clinical educators are challenged to deliver robust curricula that supplement bedside learning and are mindful of the competing demands on the clinical learner's time and attention, all while meeting the current generation where they are with technology. Developing strategies to address the burden of the cognitive load and tailoring those strategies to digital natives is critical to optimizing each individual's ability to learn in a clinical setting. One curricular strategy that can be used to mitigate cognitive load is microlearning, a learning model in which information is transferred in smaller and more manageable chunk of information. At our institution, we have implemented a novel text message based microlearning curriculum in our sub-internship that mitigates cognitive load by delivering key content in a convenient (and fun) format allowing students to pace their learning for novel content in the sub-internship. This curricular design can be utilized across multiple clinical settings and rotation structures. In this workshop, participants will explore cognitive load theory and microlearning by creating their own text message curriculum that addresses a curricular gap or revises a curriculum at their own institution. In small and large group discussion, facilitators and participants will brainstorm implementation strategies and troubleshoot anticipated barriers. Participants will leave with their own text message curricular outline and message templates and a tool kit to help implement a text message curriculum at their own institution.

**Objectives:**

1. Describe the cognitive learning framework, cognitive load theory, and microlearning model
2. Explore text messaging as a medium for curriculum delivery
3. Create a text message based lesson for a curriculum at your own institution
4. Discuss implementation strategies and pitfalls for microlearning curricula

**Methods:**

Brief didactics, Large group discussion, Small group work, Large group reflection, Pair Share, Expert panel Q&A