Welcome

Step Prep:

Going Beyond UWorld!

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TTUHSC - Preston Smith Library
Lubbock, Texas 79430

Link and Download

Today's power point:

Step Prep: Going Beyond UWorld!

under Orientations and Presentations

http://www.ttuhsc.edu/libraries/schools/som.aspx

Some Learning Goals for P3

Demonstrate skills in:

- self-assessment of personal learning needs
- independent identification, analysis and synthesis of relevant information for purposes of lifelong learning

USMLE Easy is a tool you can use to help you do this

- Practice evidence-based medicine

First Consult is an EBM tool you can use to answer questions you may have or for additional learning needs

Self-Assessment of Learning Needs

Research Articles About Step 1

I will be highlighting the data in a moment

Due to time constraints, please look at them later

How to access: Full-text is available through PubMed

Go to PubMed through the libraries home page:
TTUHSC.edu/libraries

Enter the PMID: 27500163

Click the article title, click the link to the full-text

Data from Bonasso

Bonasso P, Lucke-Wold B 3rd, Reed Z, Bozek J, Cottrell S. *Investigating the Impact of Preparation Strategies on USMLE Step 1 Performance*. MedEdPublish. 2015;4(1). pii: 5. **PubMed PMID: 27500163**; PubMed Central PMCID: PMC4975378.

- *Interactive study options*, (such as the USMLE World Question Bank) offer the best choice to improve USMLE Step 1 scores

- Timing of when the exam was taken was not associated with significant differences in scores

Data from Kumar

Kumar AD, Shah MK, Maley JH, Evron J, Gyftopoulos A, Miller C. *Preparing to take the USMLE Step 1: a survey on medical students' self-reported study habits.* Postgraduate Medical Journal. 2015 May;91(1075):257-61. doi: 10.1136/postgradmedj-2014-133081.
PubMed PMID: 25910497.

- 475 3rd year medical students at Tulane 2009-2011 who had taken the exam in the last 3 months; 256 responses
- studying 8-11 hours per day yielded higher scores versus study fewer hours
- studying more than 11 hours per day did not significantly yield higher scores (mean 10.6 hours)

Data from Kumar continued

- The mean Step 1 score was higher in those who reported spending less than or = to 20 days versus those who spent *more* than 40 days
- Similarly, the mean Step 1 score was higher in those who spent 21-40 days compared to those who spent more than 40 days
- There was no significant difference in score for those who reported spending less than 20 days compared with those who spent 21-40 days

Data from Kumar continued

- the greater the number of practice questions the higher the Step 1 scores
- ***But,*** a greater portion of ***total*** study time on practice questions did ***not*** have significantly higher scores
- Study offers two explanations for this apparent contradiction

Data from Kumar continued

1) practice questions take considerable concentration thus fatigue may limit the amount of questions attempted per day

2) it has been shown that students who use review books or class notes score higher on USMLE Step 1.[8]

Therefore, if there is a benefit from doing a maximal amount of practice questions, this benefit may be offset by ***not*** spending precious study time on other resources, i.e. review books or class notes

Data from Li

Li ST, Paterniti DA, Co JP, West DC. *Successful self-directed lifelong learning in medicine: a conceptual model derived from qualitative analysis of a national survey of pediatric residents.*
Academic Medicine. 2010 Jul;85(7):1229-36.
doi: 10.1097/ACM.0b013e3181e1931c. **PubMed PMID: 20592521**.

Have a learning plan!

Strategies for effective self-directed learning:

- dedicating time to study
- creating accountability
- Get help with goal generation
  through mentorship *or*
  from external assessments vs self-assessments

Li created a strategy of goals and plans:

ISMART

Important:
To choose goals relevant to the learner
To prioritize achievement of learning goals

Specific:
To break broader goals into incremental steps
To plan how to accomplish incremental steps

Measurable:
To set a measurable outcome

Data from Li continued

Accountable:

To use a reminder and tracking system
To build in external accountability
To establish internal accountability

Realistic:

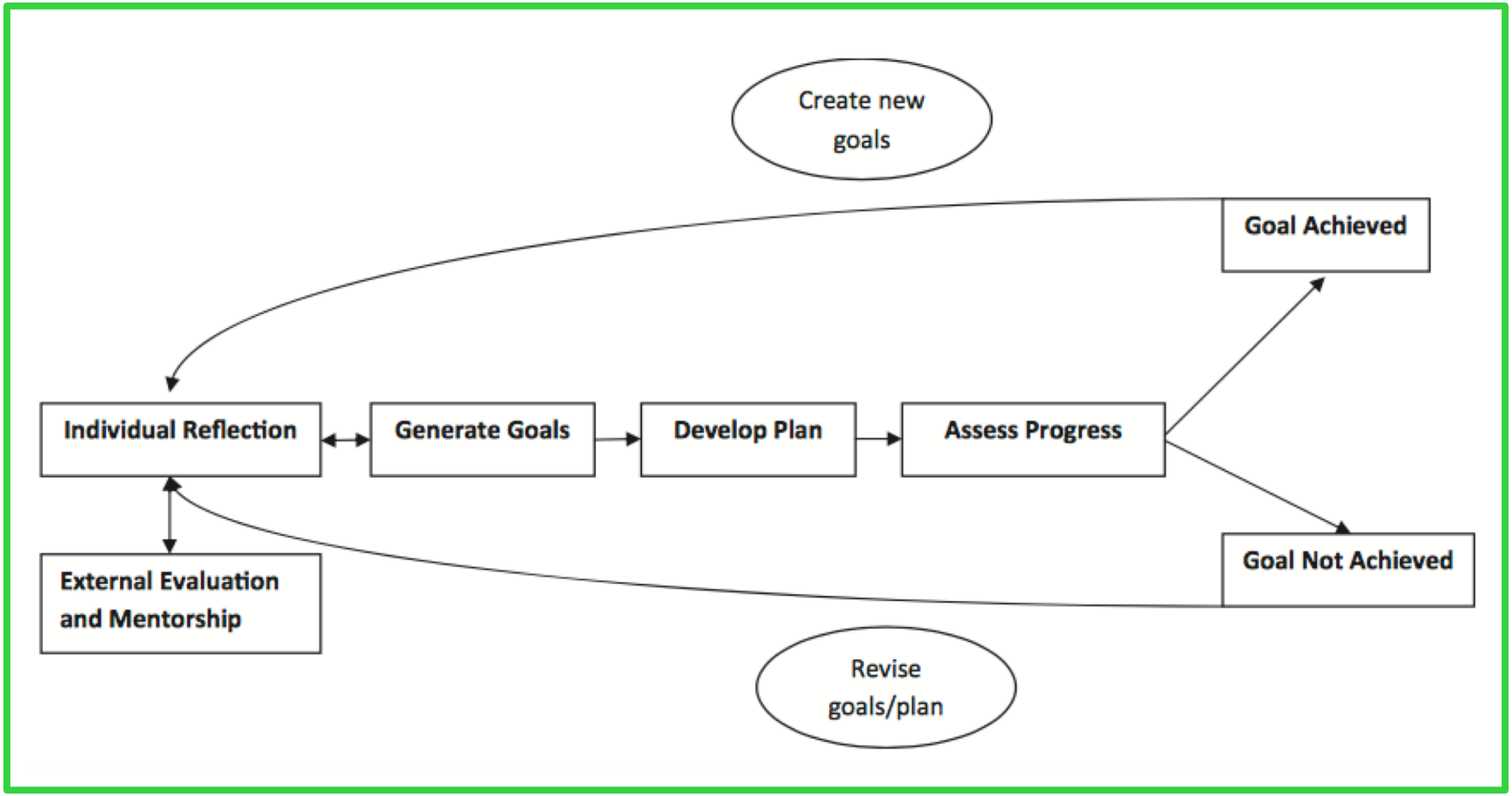
To create achievable goals
To seek out and use available opportunities
To self-adjust

Timeline:

To develop timeline for achieving goals
To incorporate goals into daily routine

USMLE Easy has a built-in learning plan!

Data from Li continued



Li, S. T., Paterniti, D. A., & West, D. C. (2010). Successful self-directed lifelong learning in medicine: a conceptual model derived from qualitative analysis of a national survey of pediatric residents. *Academic Medicine*, *85*(7), 1229-36. doi:10.1097/ACM.Ob013e3181e1931c

What questions do you have?

USMLE Easy

Thousands of practice questions

Practice Report

Adaptive learning technology based on your individual learning needs

Personal Dashboard

Institutional Sign In | Individual Sign In

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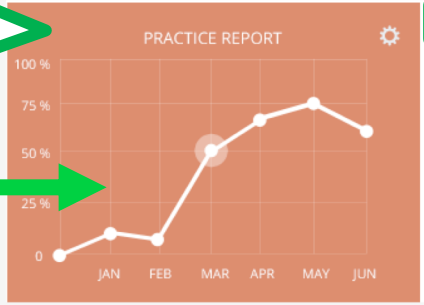
Features

Sign up for a sneak peek

USMLE Easy is appropriate for U.S. and Canadian medical students and International medical graduates (IMGs). Individual and institutional subscriptions are available.



COMPREHENSIVE PRACTICE

Prep for the USMLE with personalized practice using thousands of questions covering all the disciplines and organ systems from the USMLE Step 1, Step 2 CK, and Step 3.

ADAPTIVE PREP

USMLE Easy uses adaptive learning technology to personalize your test prep experience based on your individual needs. This ensures you spend more time on the concepts you still need to review, and less on the material you've already mastered.

DASHBOARD

Your personalized dashboard displays your latest activities and scores so that you can constantly track your progress, and easily resume your studying exactly where you left off.

Schedule studies

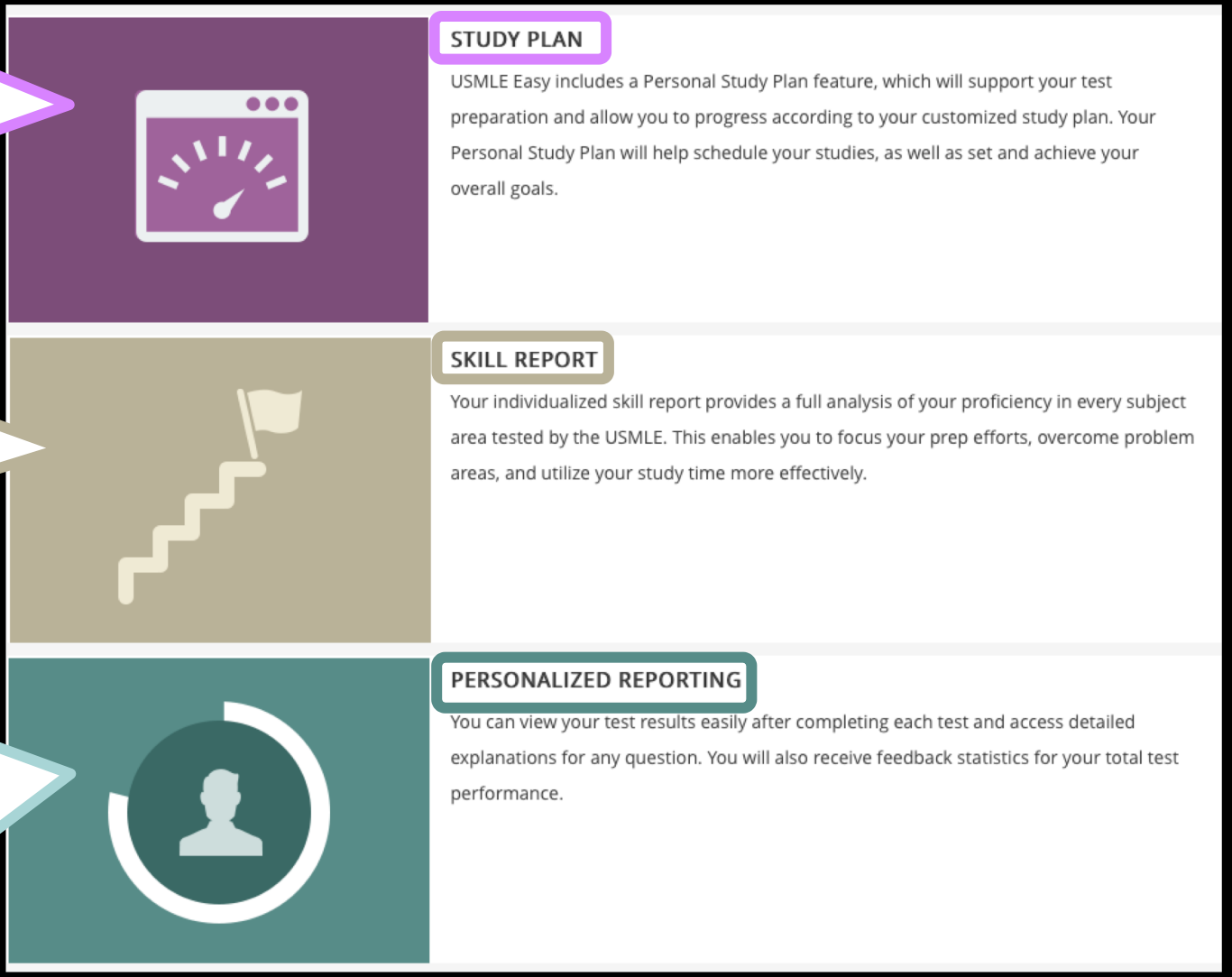
Set and achieve goals

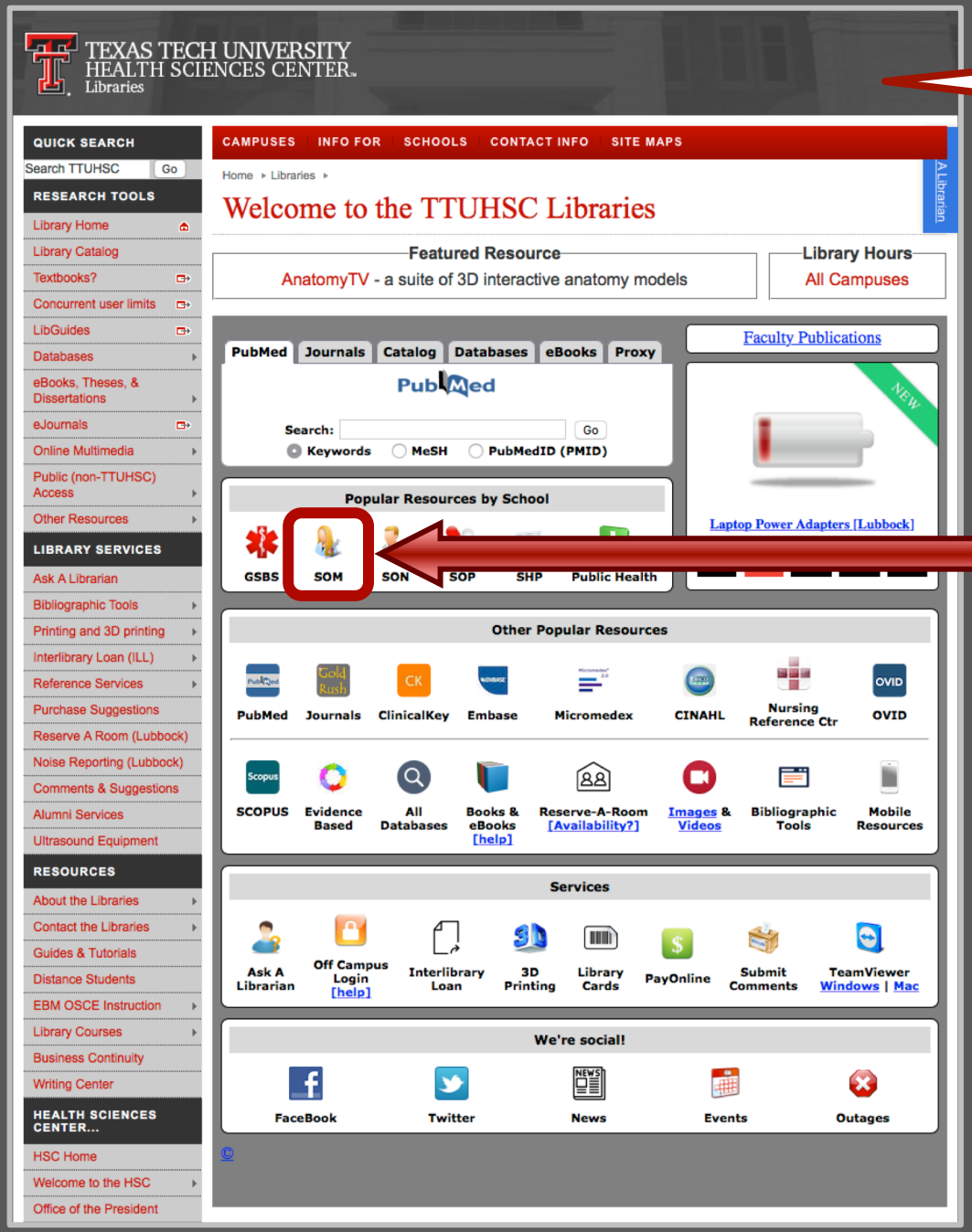
Proficiency analysis in every subject area

View test results

Detailed explanations for any question

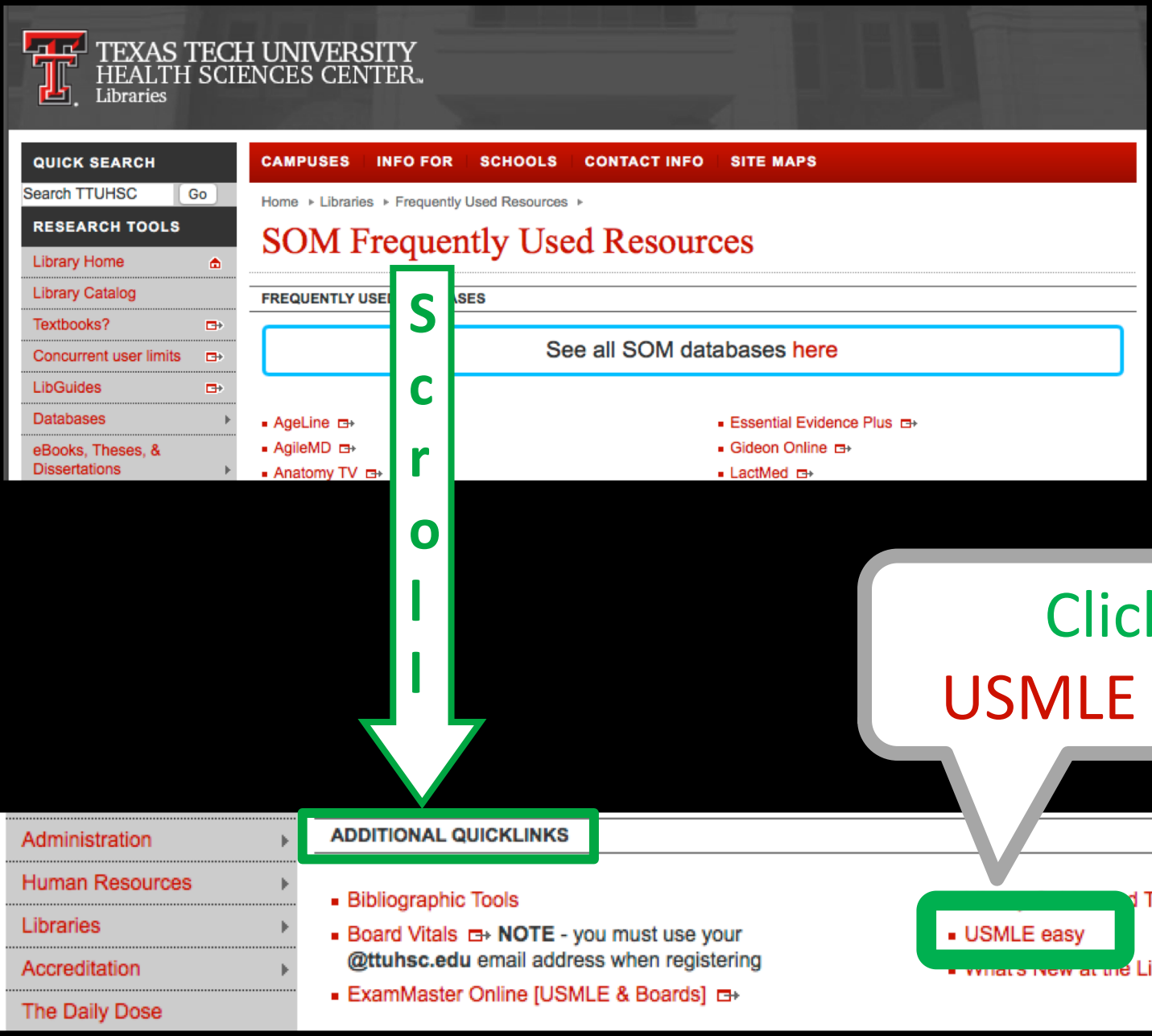
Feedback stats





www.ttuhsc.edu/libraries

Click SoM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SOM Frequently Used Resources
See all SOM databases here
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AgileMD
Anatomy TV
Essential Evidence Plus
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Ask A Librarian

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Subject(s): Medicine -- Examination Questions | Licensure, Medical -- United States | Clinical M

Questions

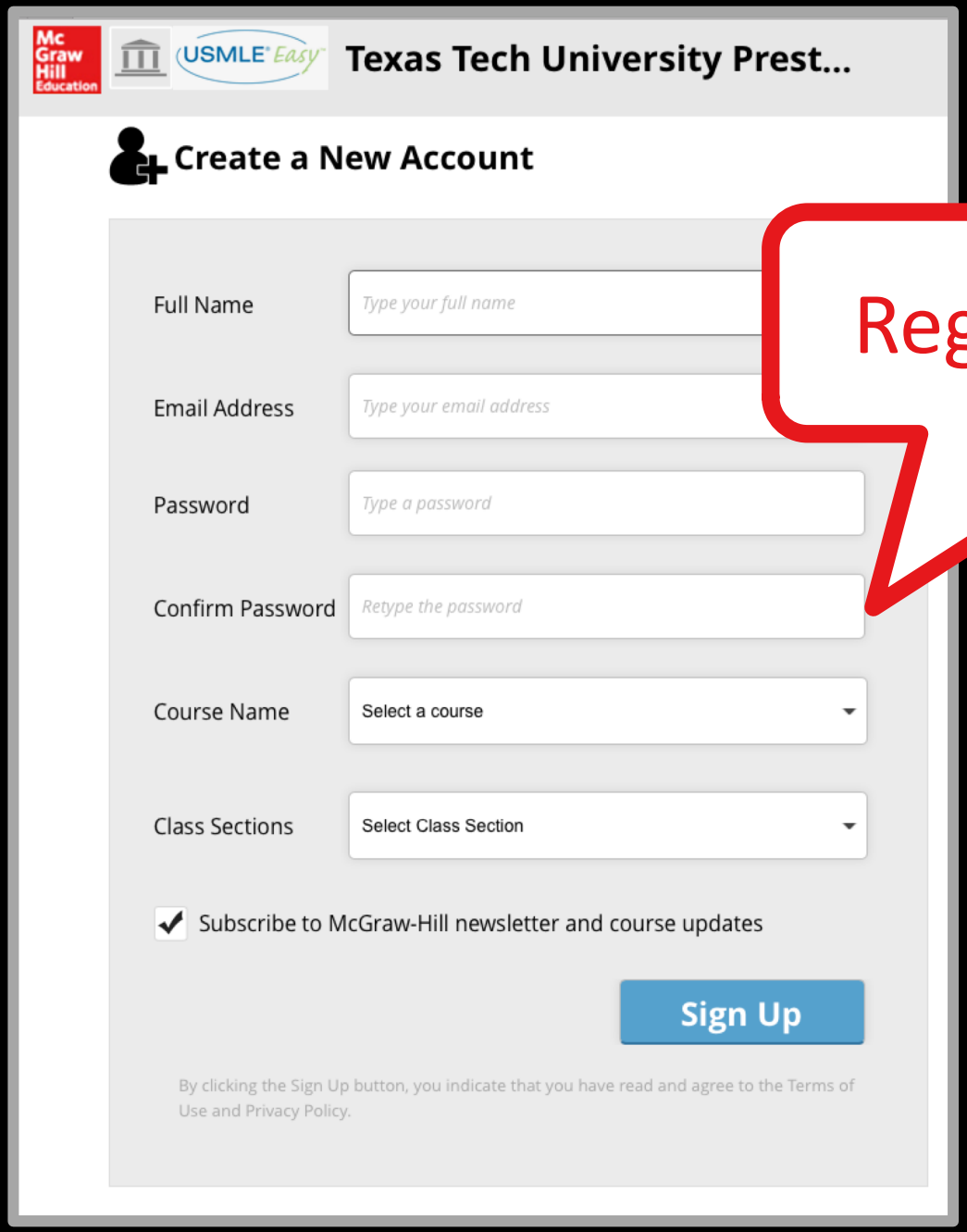
Click and Register

Online resources: Registration required. New account registration required as of 1/15/15. Available online as an eResource.

questions to study, practice, and simulate the test-taking experience for Step 1 and Step 3. USMLEasy provides customizable web-based practice tests covering all disciplines and organ systems that tell you everything you need to know to study effectively and returns detailed results with targeted remediation based on test results - links to free selected readings from AccessMedicine's Lange Library - providing the knowledge you need to master your most challenging subjects. Users build a robust performance profile that allows you to track your results performance by topic and your test scores over time.

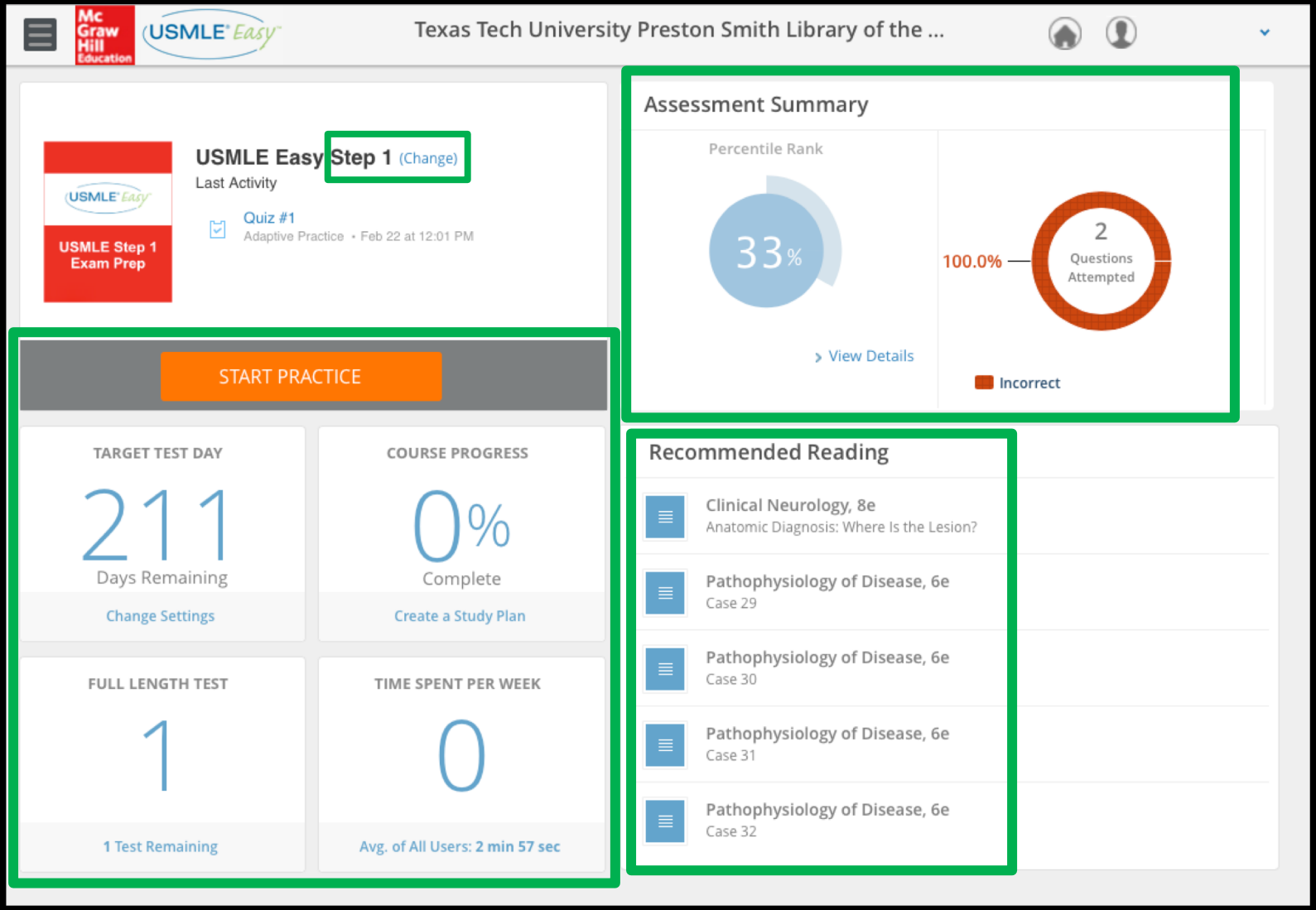
Holdings (0) | Title notes | Comments (0)

No physical items for this record



Register for Account

Dashboard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USMLE Step 1 Exam Prep
USMLE Easy Step 1 (Change)
Last Activity
Quiz #1
Adaptive Practice • Feb 22 at 12:01 PM
START PRACTICE
TARGET TEST DAY
211
Days Remaining
Change Settings
COURSE PROGRESS
0%
Complete
Create a Study Plan
FULL LENGTH TEST
1
1 Test Remaining
TIME SPENT PER WEEK
0
Avg. of All Users: 2 min 57 sec
Assessment Summary
Percentile Rank
33%
View Details
100.0%
2
Questions Attempted
Incorrect
Recommended Reading
Clinical Neurology, 8e
Anatomic Diagnosis: Where Is the Lesion?
Pathophysiology of Disease, 6e
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Case 31
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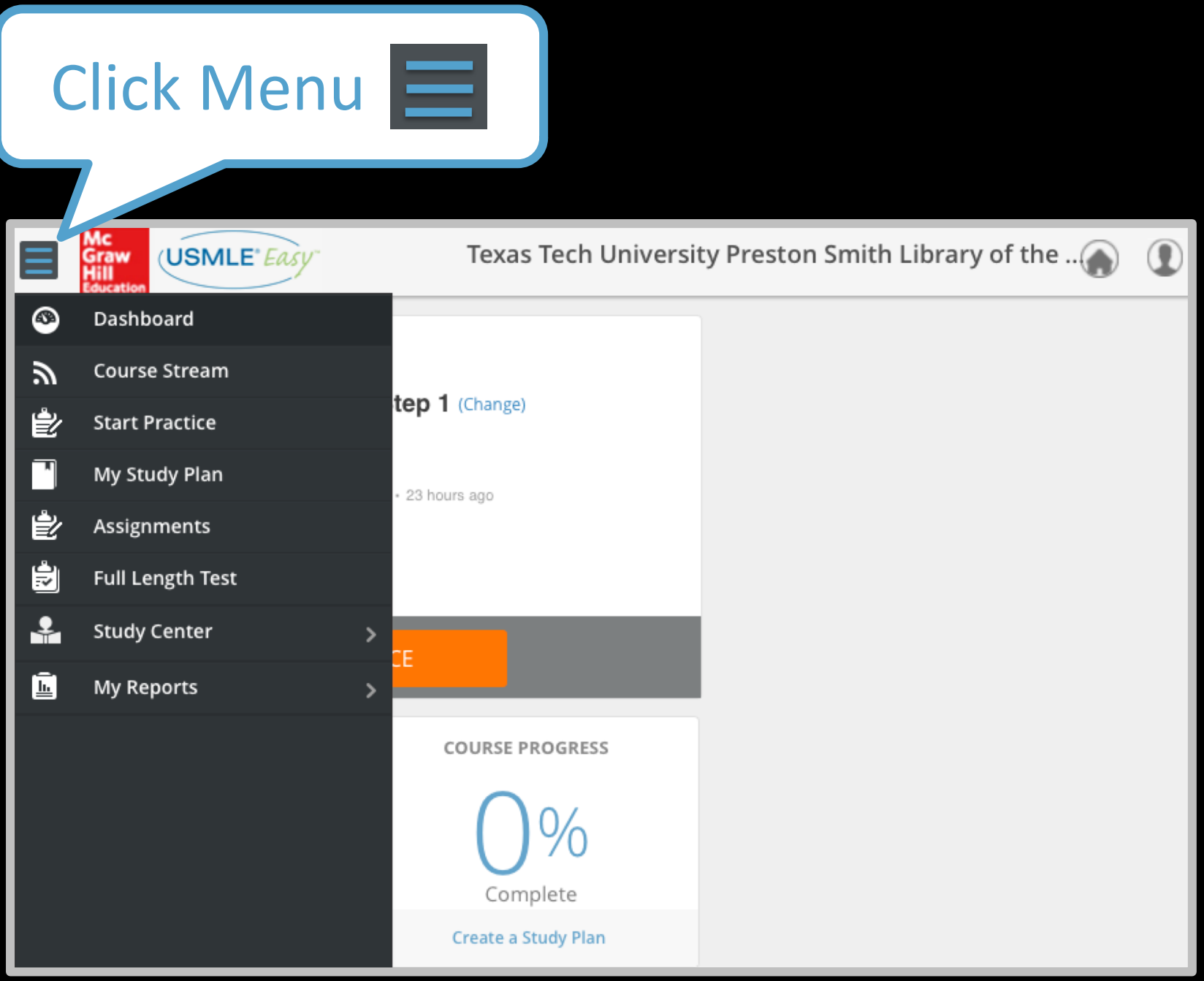
Case 32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Dashboard
Course Stream
Start Practice
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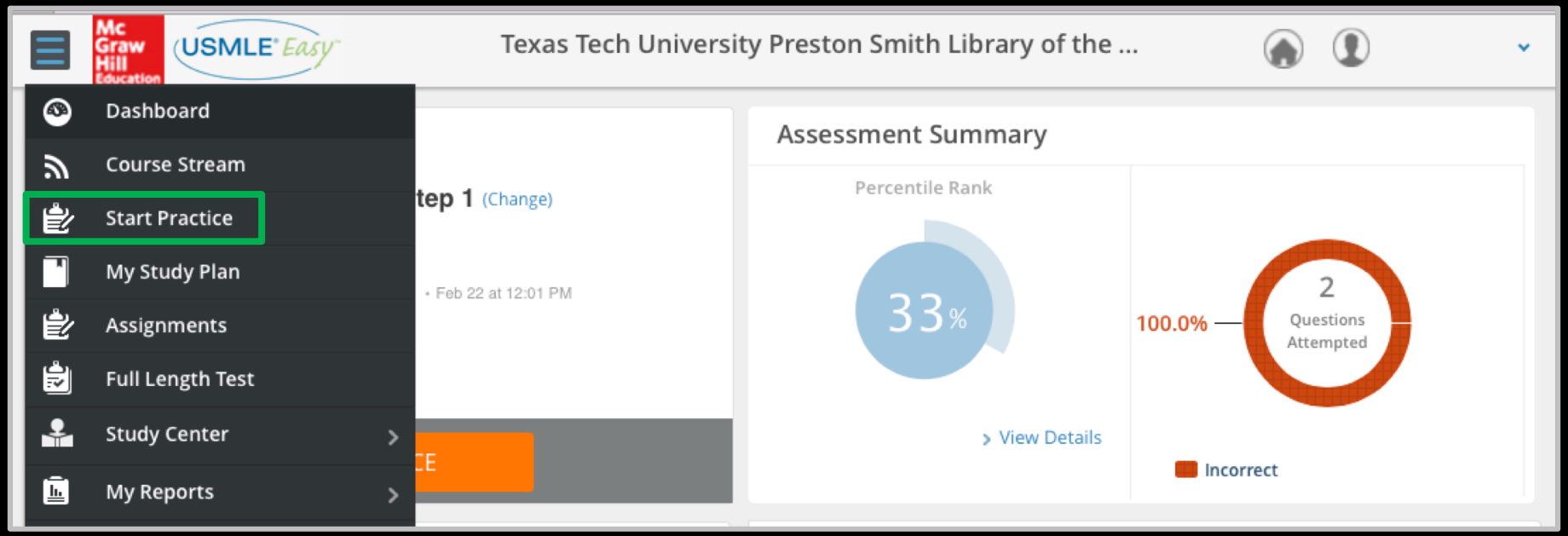
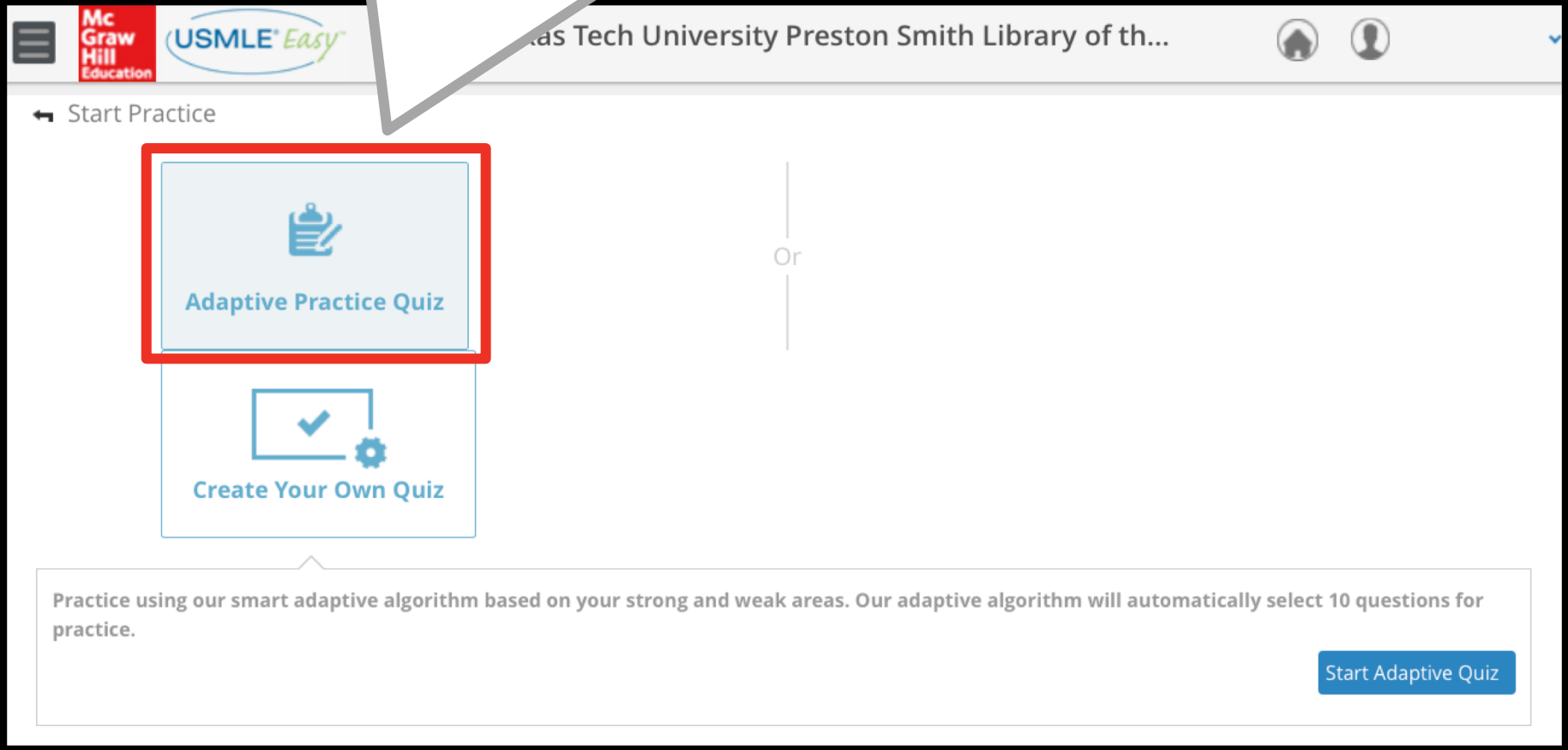
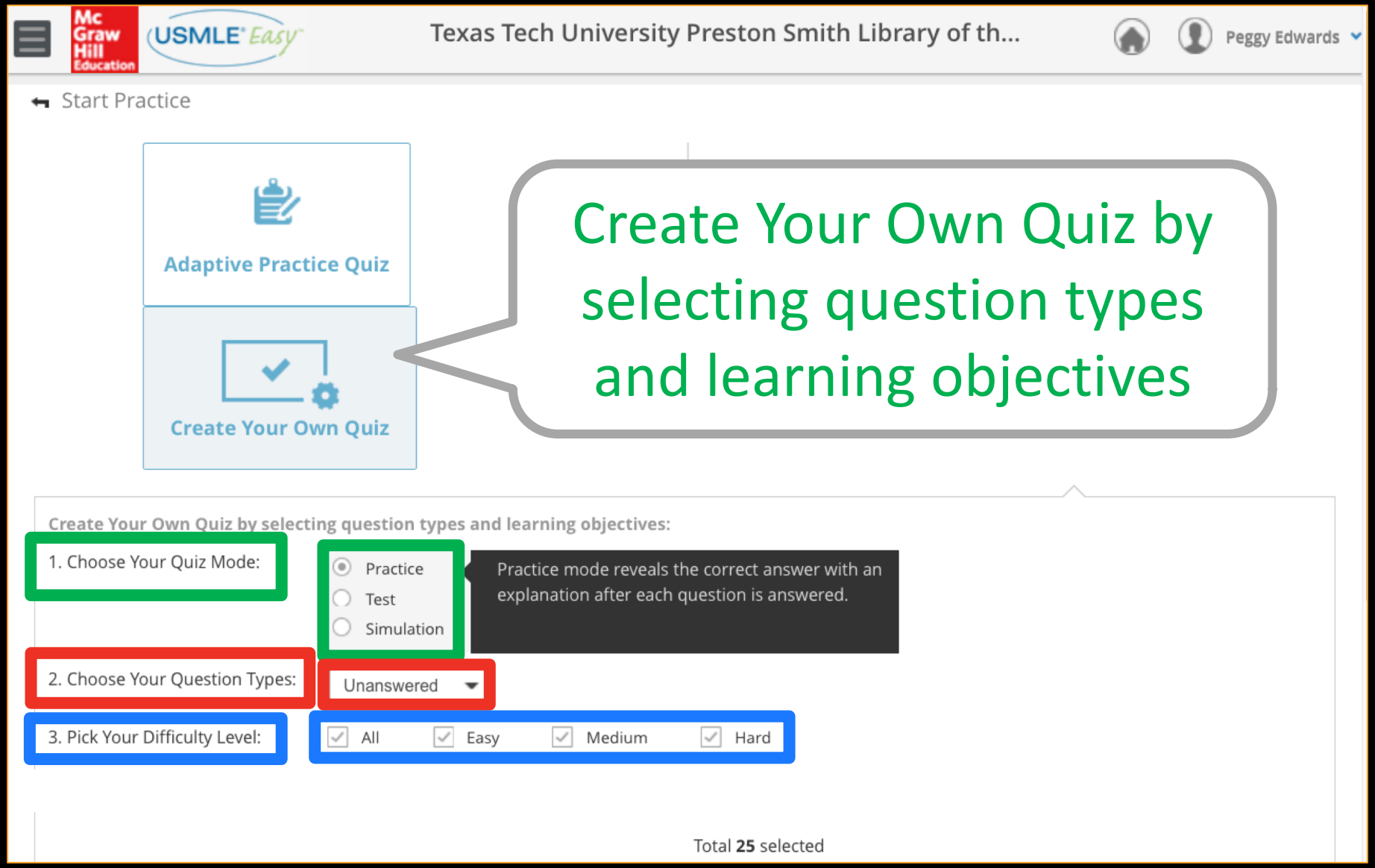


The Adaptive Quiz uses an algorithm, based on your strong and weak areas, to select 10 practice questions.

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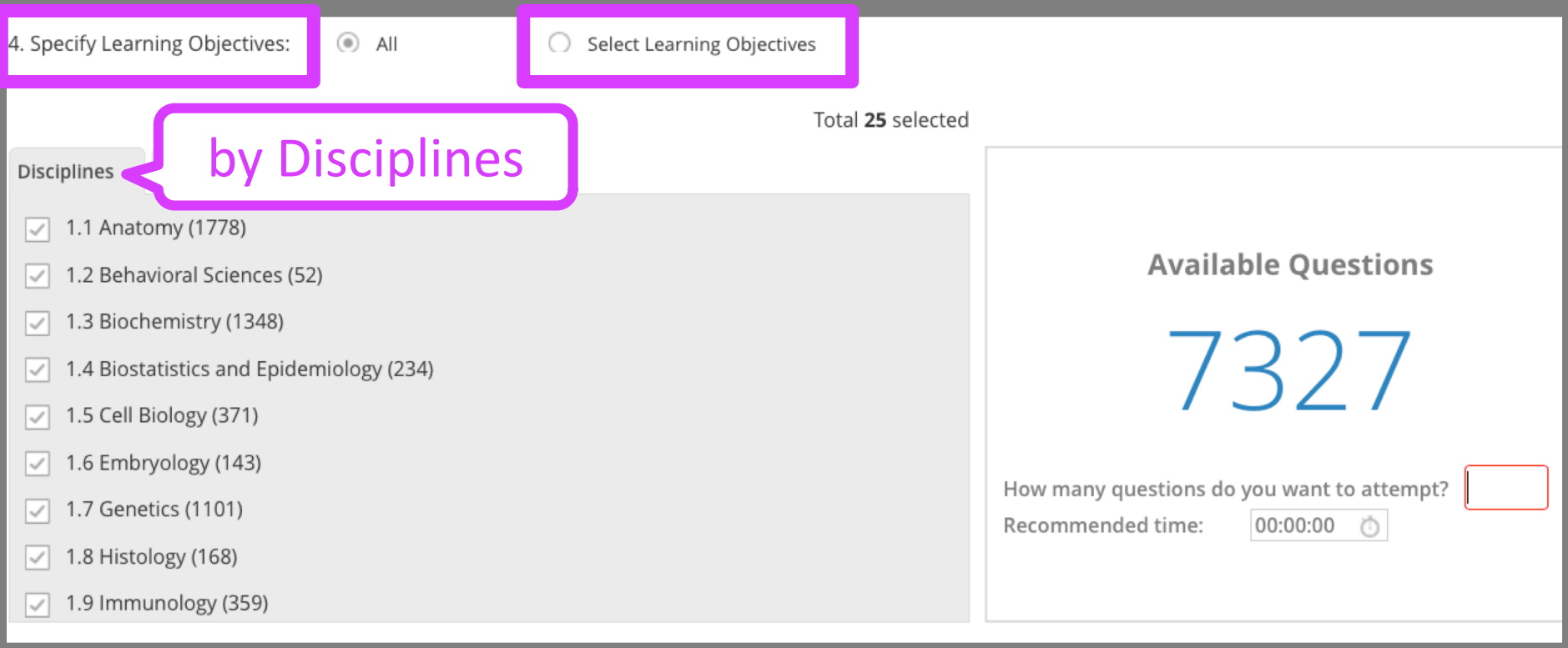
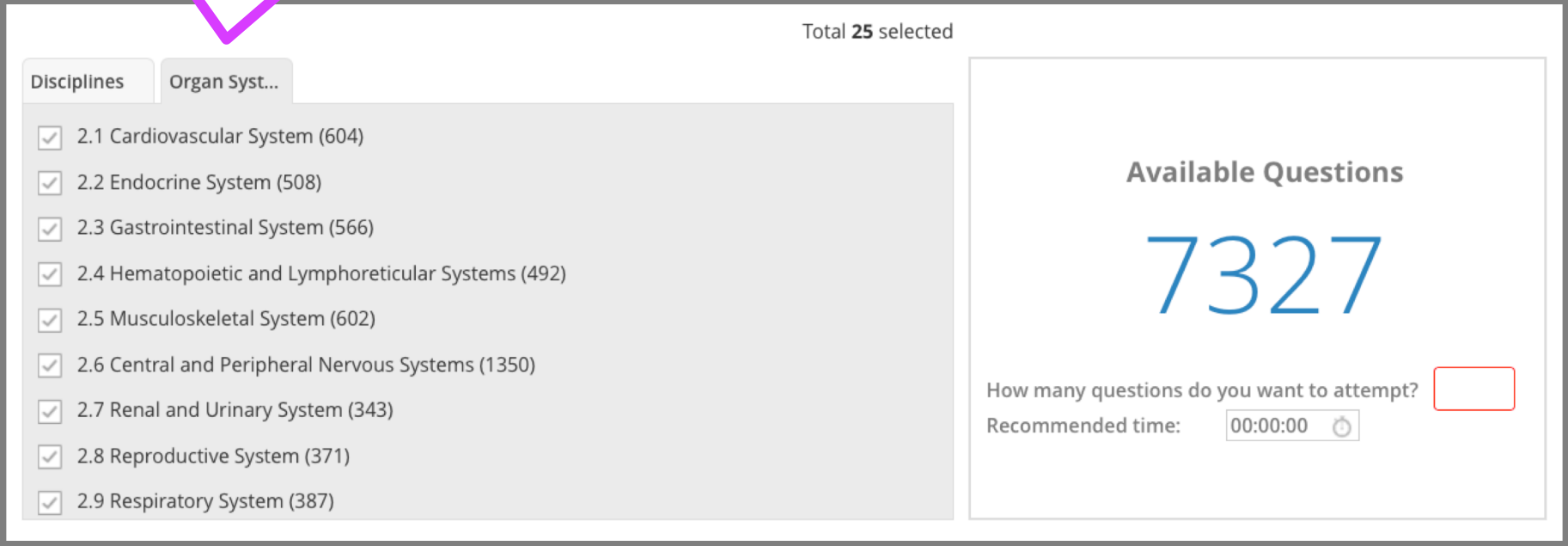
Start Practice
Adaptive Practice Quiz
Create Your Own Quiz
Create Your Own Quiz by selecting question types and learning objectives
Create Your Own Quiz by selecting question types and learning objectives:
1. Choose Your Quiz Mode:
Practice
Test
Simulation
Practice mode reveals the correct answer with an explanation after each question is answered.
2. Choose Your Question Types:
Unanswered
3. Pick Your Difficulty Level:
All
Easy
Medium
Hard
Total 25 selected


4. Specify Learning Objectives:
All
Select Learning Objectives
Total 25 selected
by Disciplines
Disciplines
1.1 Anatomy (1778)
1.2 Behavioral Sciences (52)
1.3 Biochemistry (1348)
1.4 Biostatistics and Epidemiology (234)
1.5 Cell Biology (371)
1.6 Embryology (143)
1.7 Genetics (1101)
1.8 Histology (168)
1.9 Immunology (359)
Available Questions
7327
How many questions do you want to attempt?
Recommended time:
00:00:00

by Organ System



Question

Quiz

Quiz #2

Time Spent 00:01:06

Q 2.1: Which of the following processes places the developing heart in the presumptive thoracic region cranial to the septum transversum?

A. Gastrulation
B. Lateral folding
C. Cranial folding
D. Neurulation
E. Fusion of the endocardial heart tubes

Mark for Review

Submit Answer

Performance

Overall Time Spent 00:01:06

Performance in Last 10 Qs

About this Question

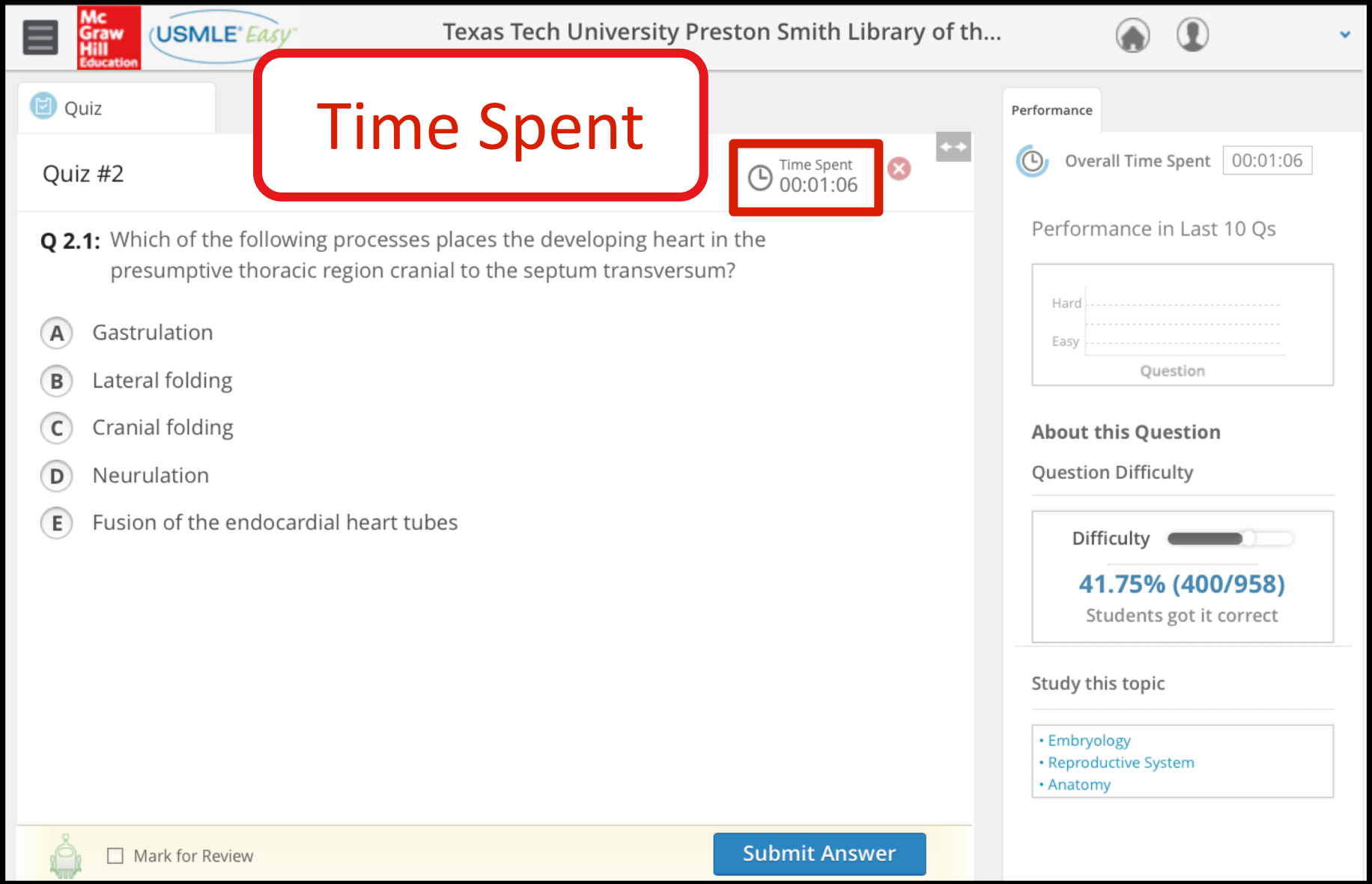
Question Difficulty

Difficulty

41.75% (400/958)
Students got it correct

Study this topic

- Embryology
- Reproductive System
- Anatomy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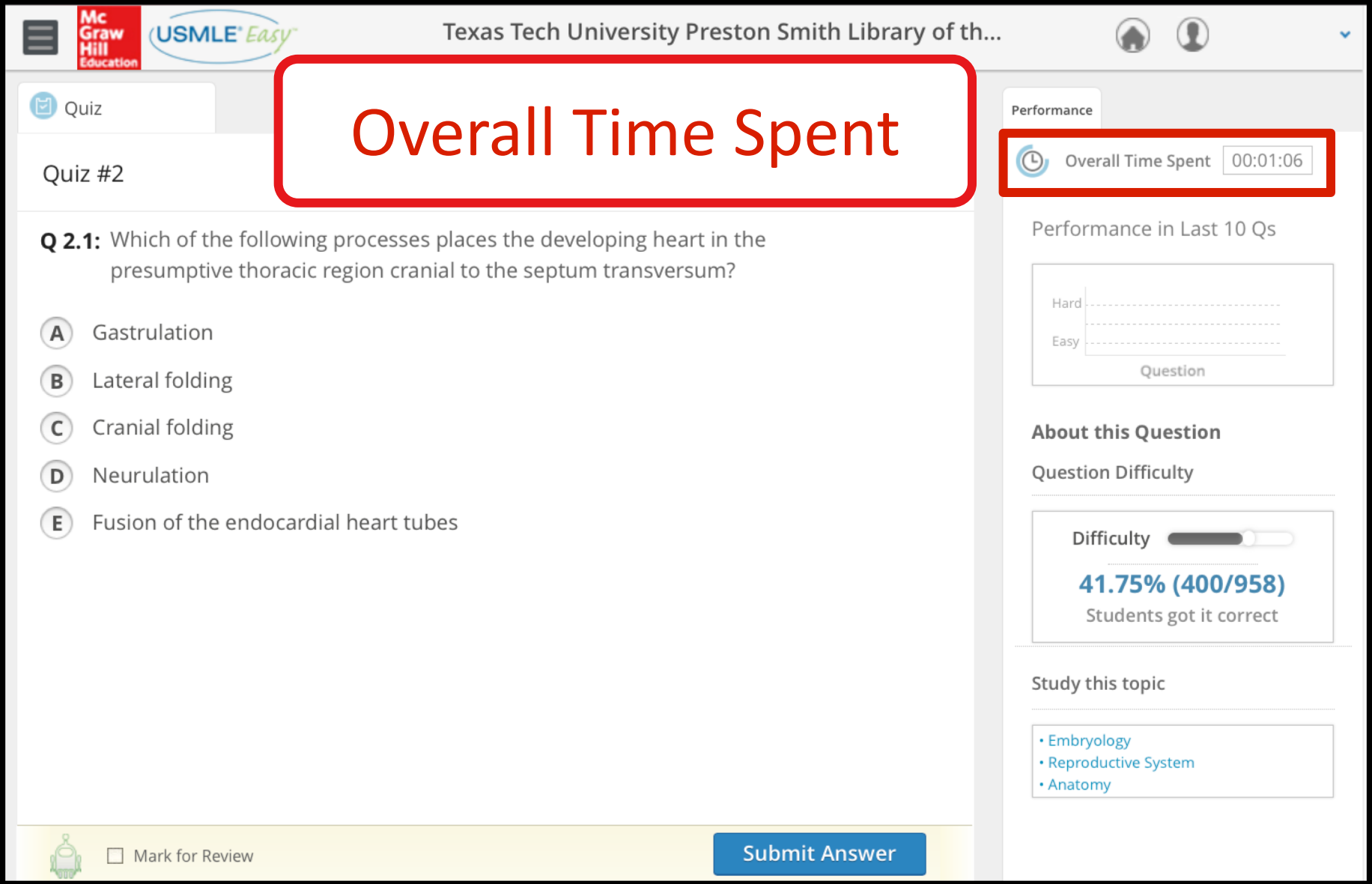
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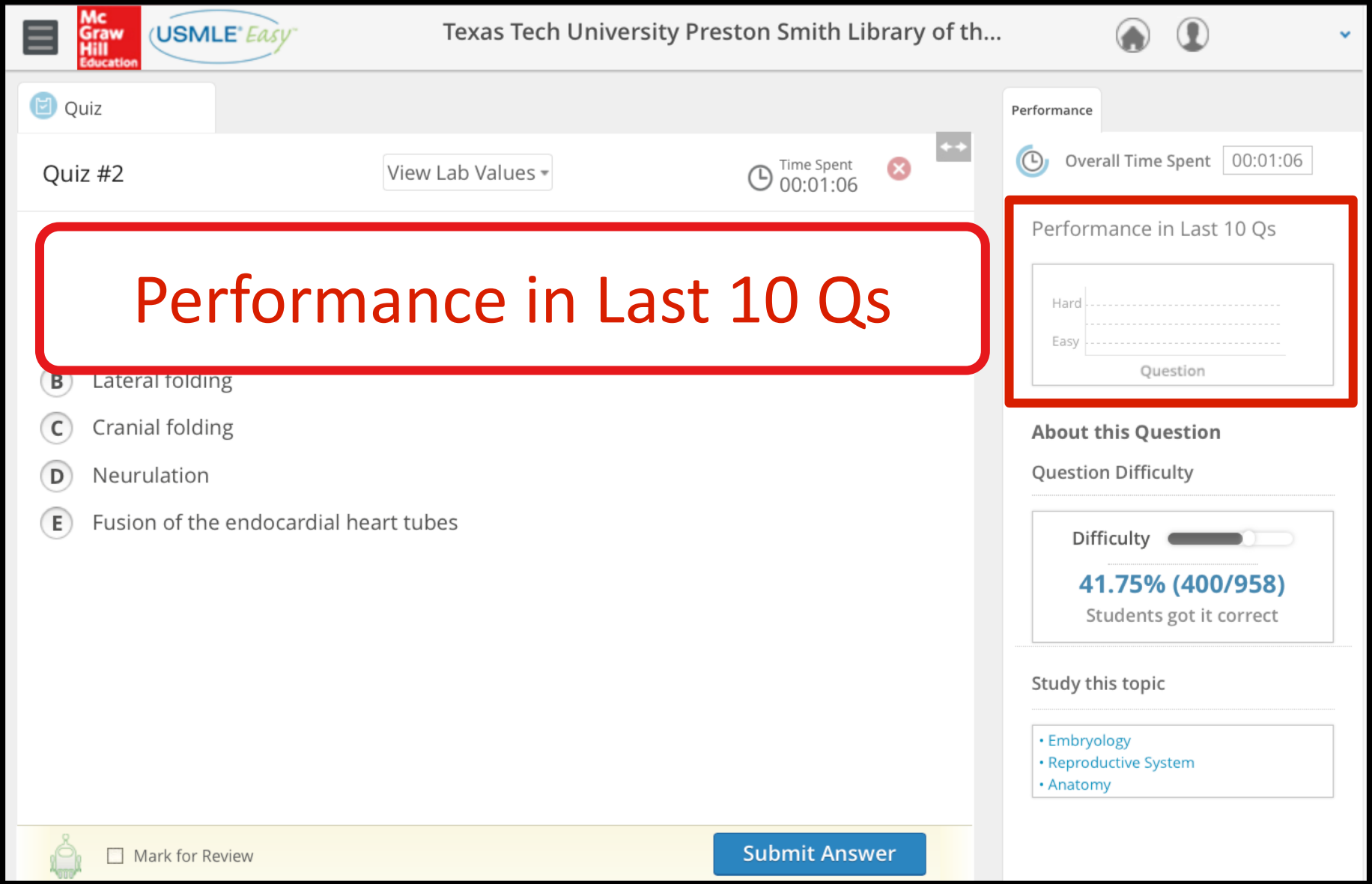
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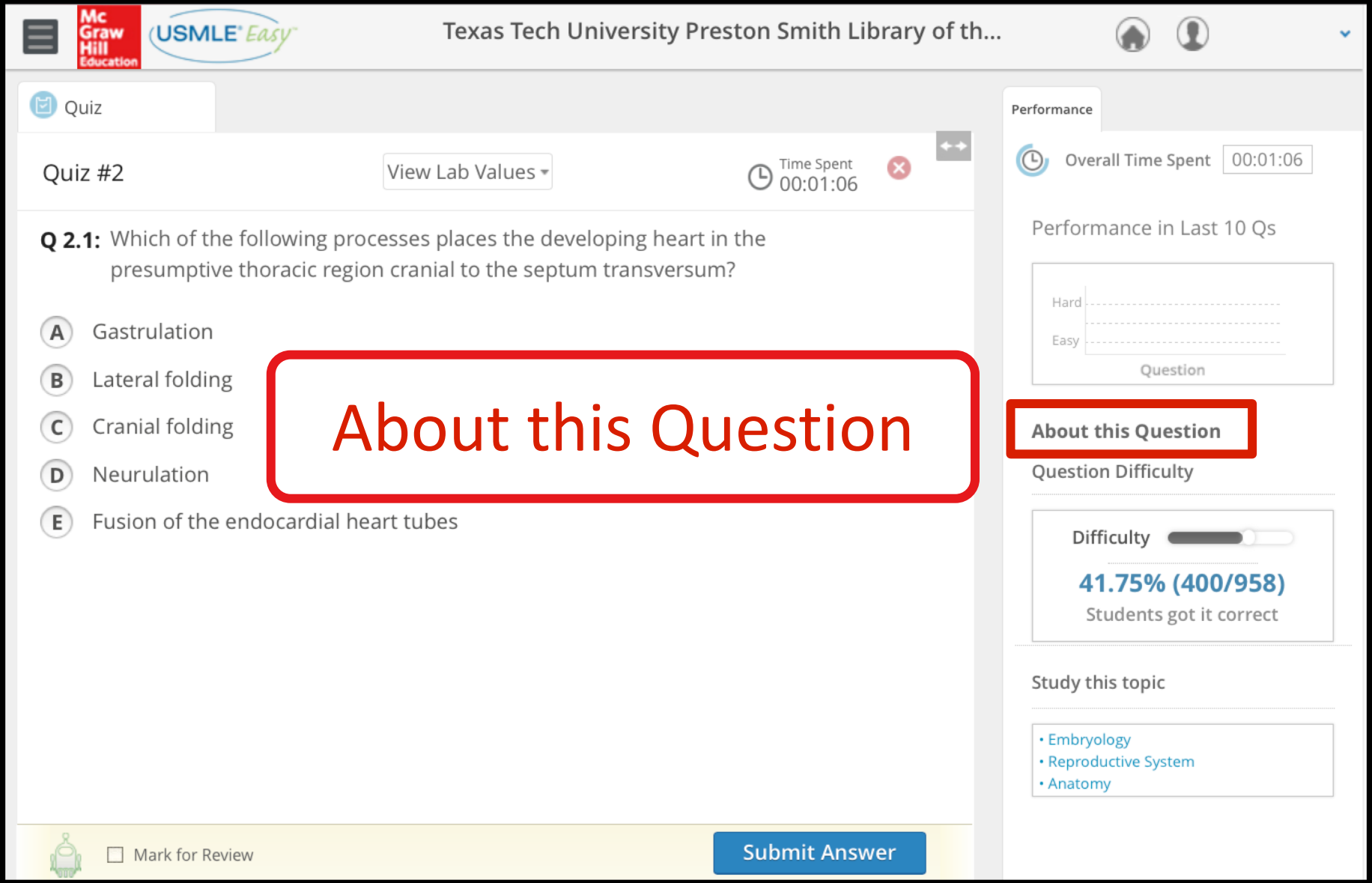
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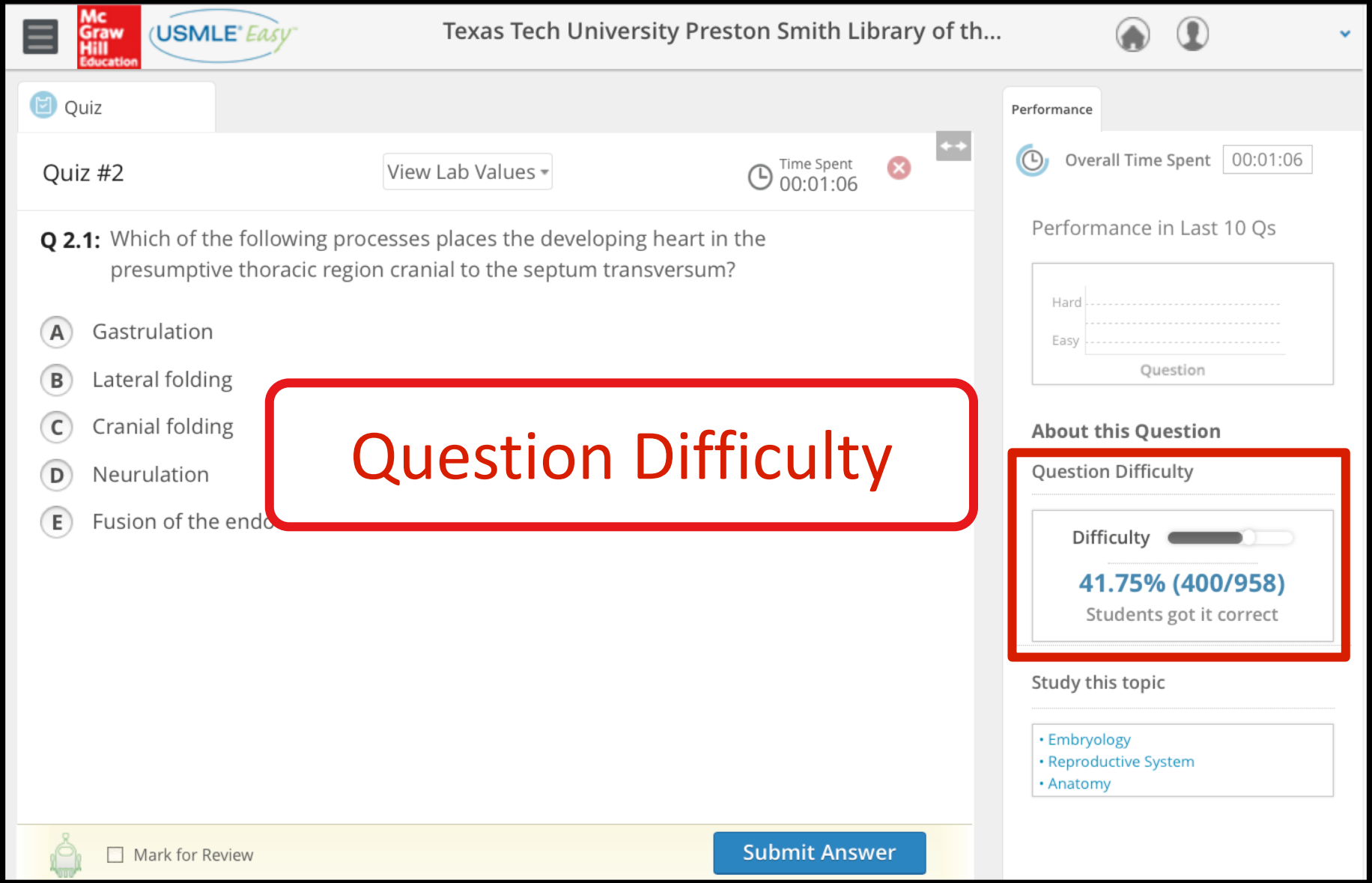
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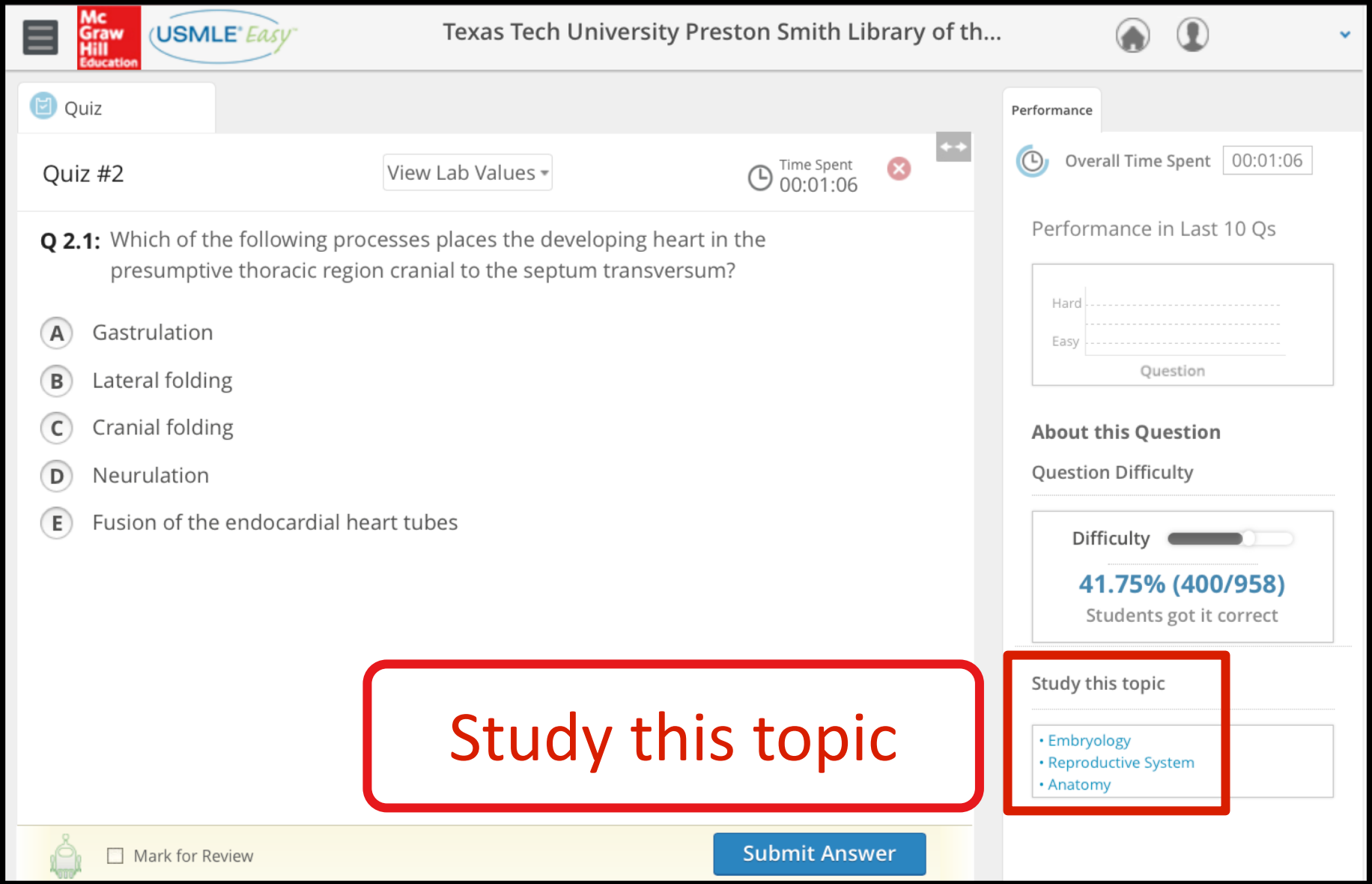
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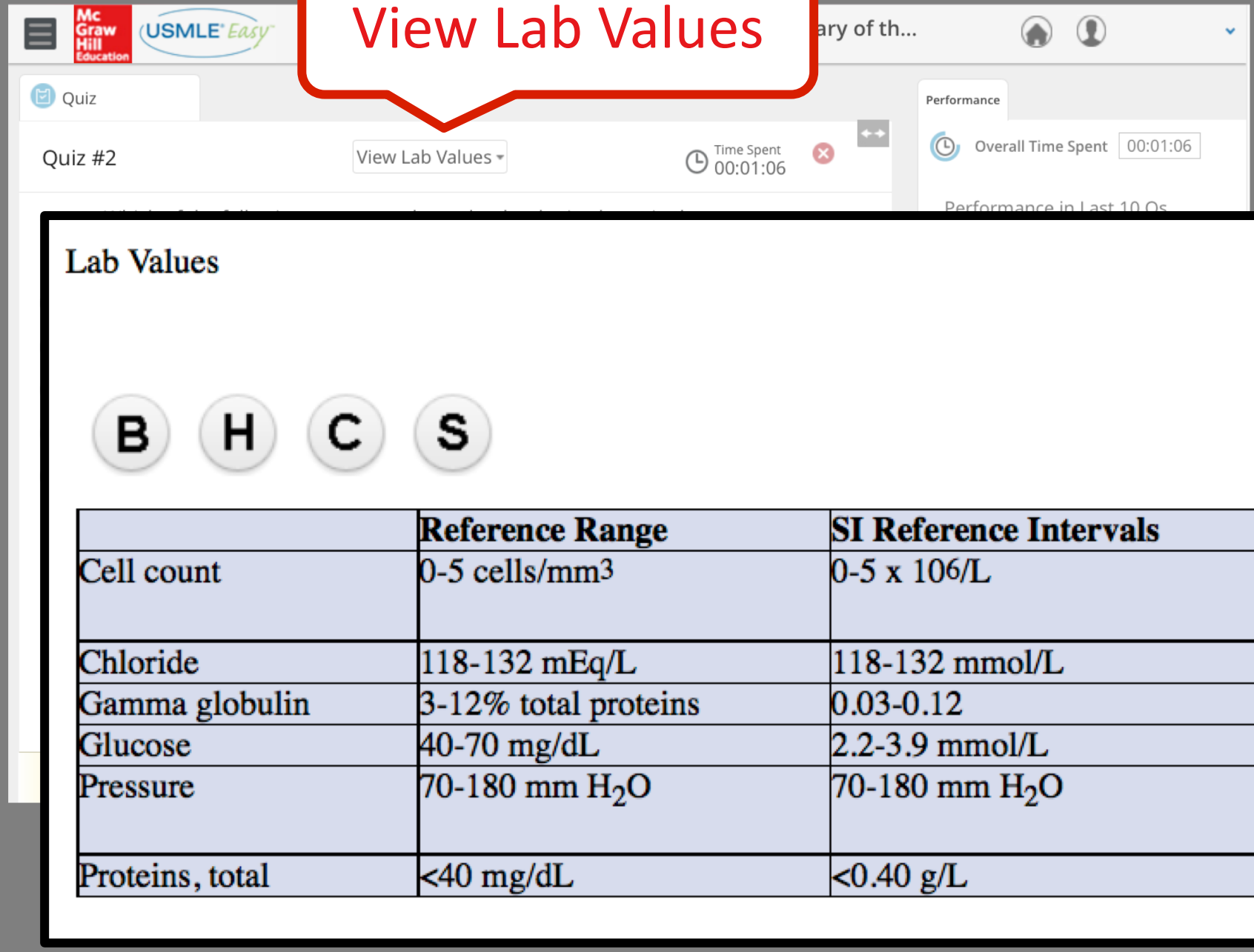
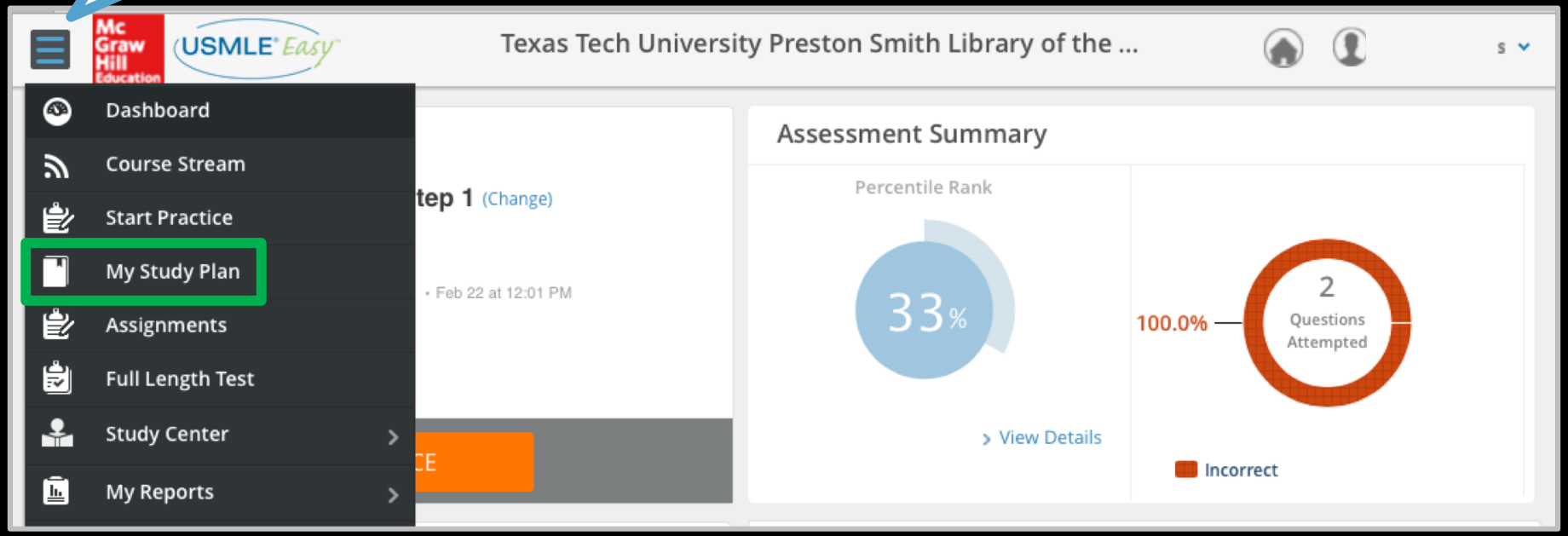


	Reference Range	SI Reference Intervals
Cell count	0-5 cells/mm^3	0-5 x 106/L
Chloride	118-132 mEq/L	118-132 mmol/L
Gamma globulin	3-12% total proteins	0.03-0.12
Glucose	40-70 mg/dL	2.2-3.9 mmol/L
Pressure	70-180 mm H_2O	70-180 mm H_2O
Proteins, total	<40 mg/dL	<0.40 g/L

Click Menu

My Study Plan

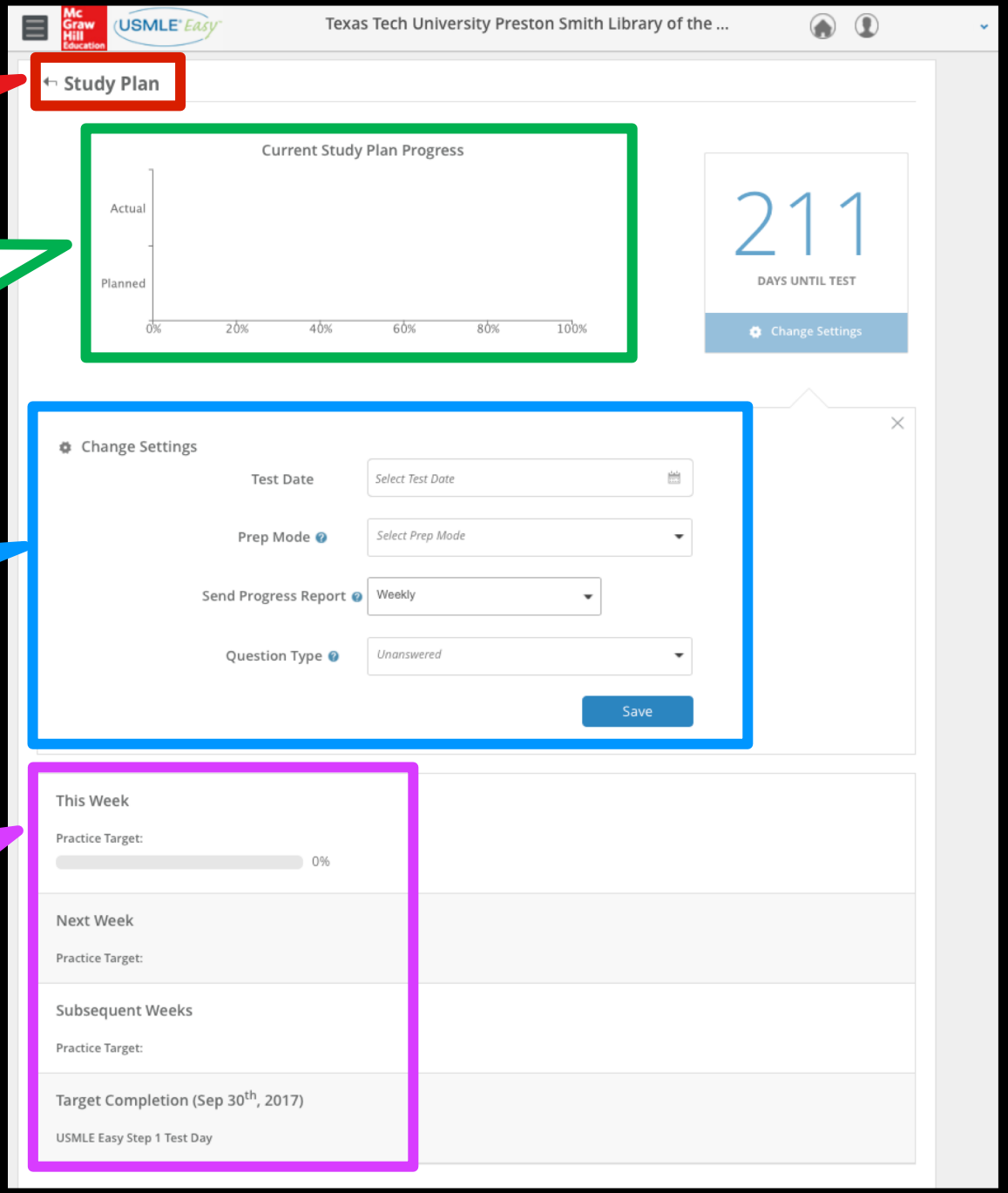


Study Plan

Current Plan Progress

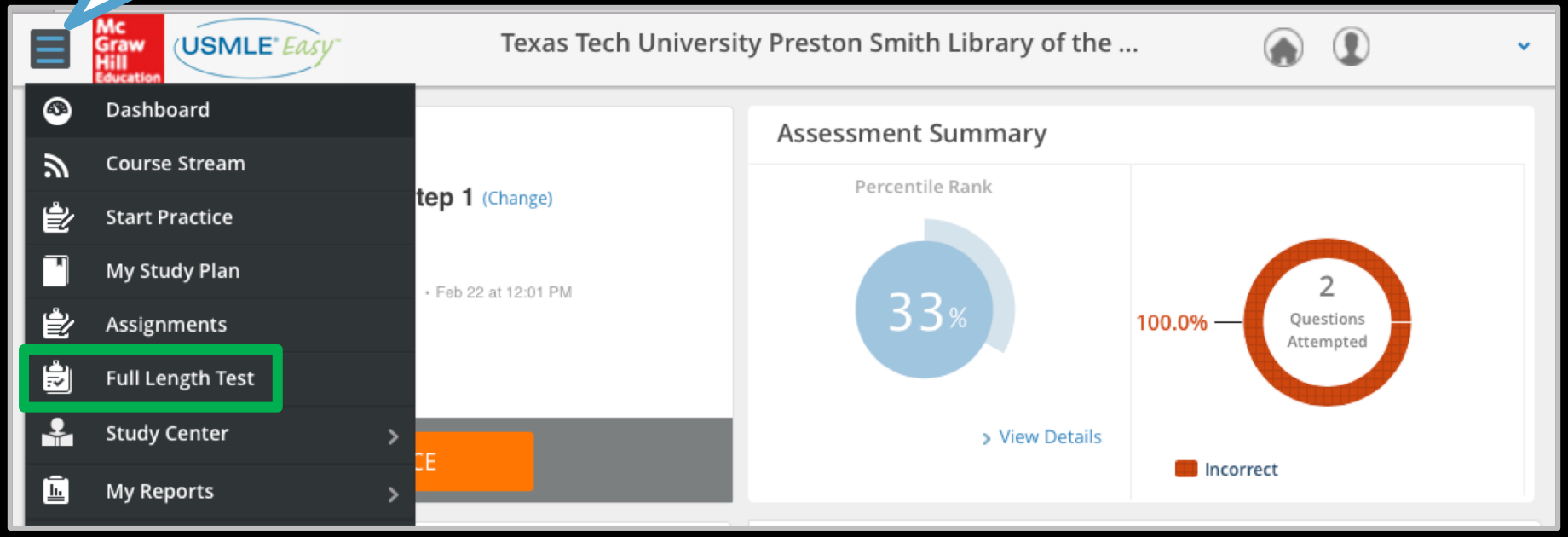
Settings

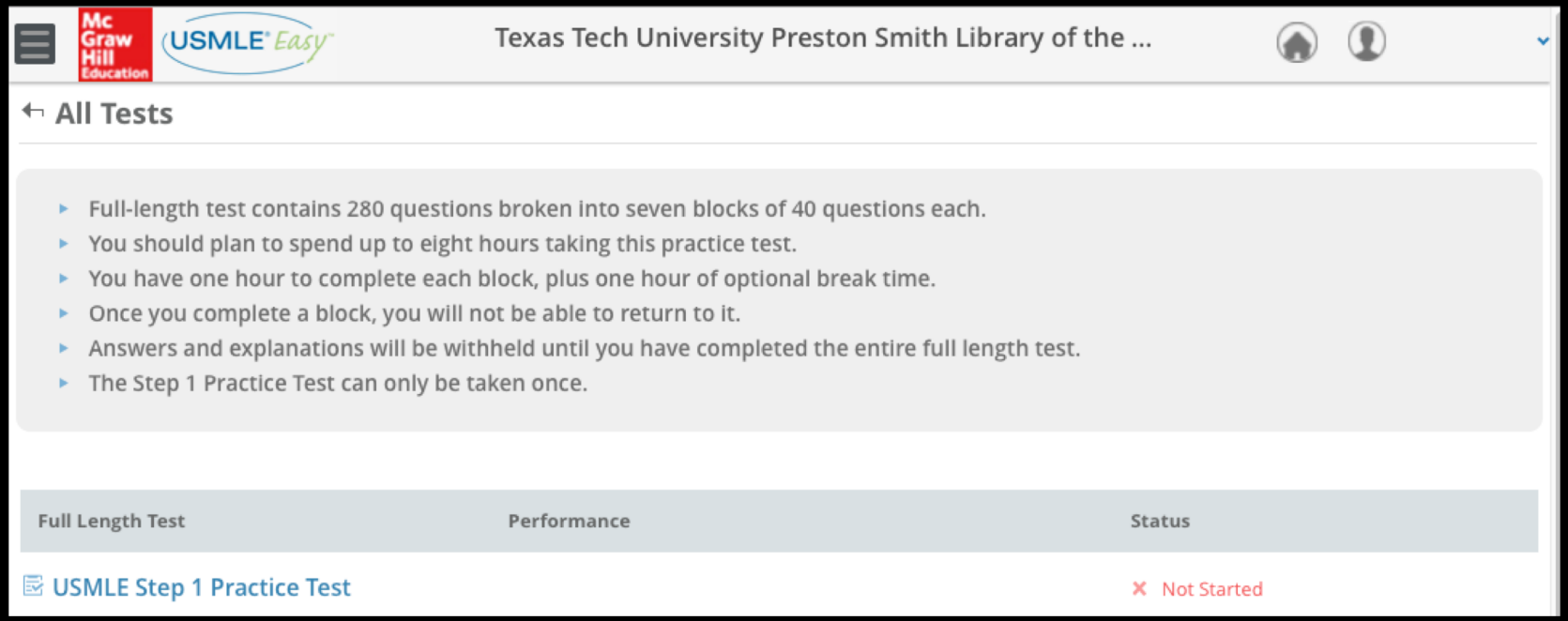
Practice Target Progress



Click Menu

Full Length Test





*Full-length test

280 questions 7 blocks 40 questions each

*Spend 8 hours on test

1 hour per block 1 hour optional break time

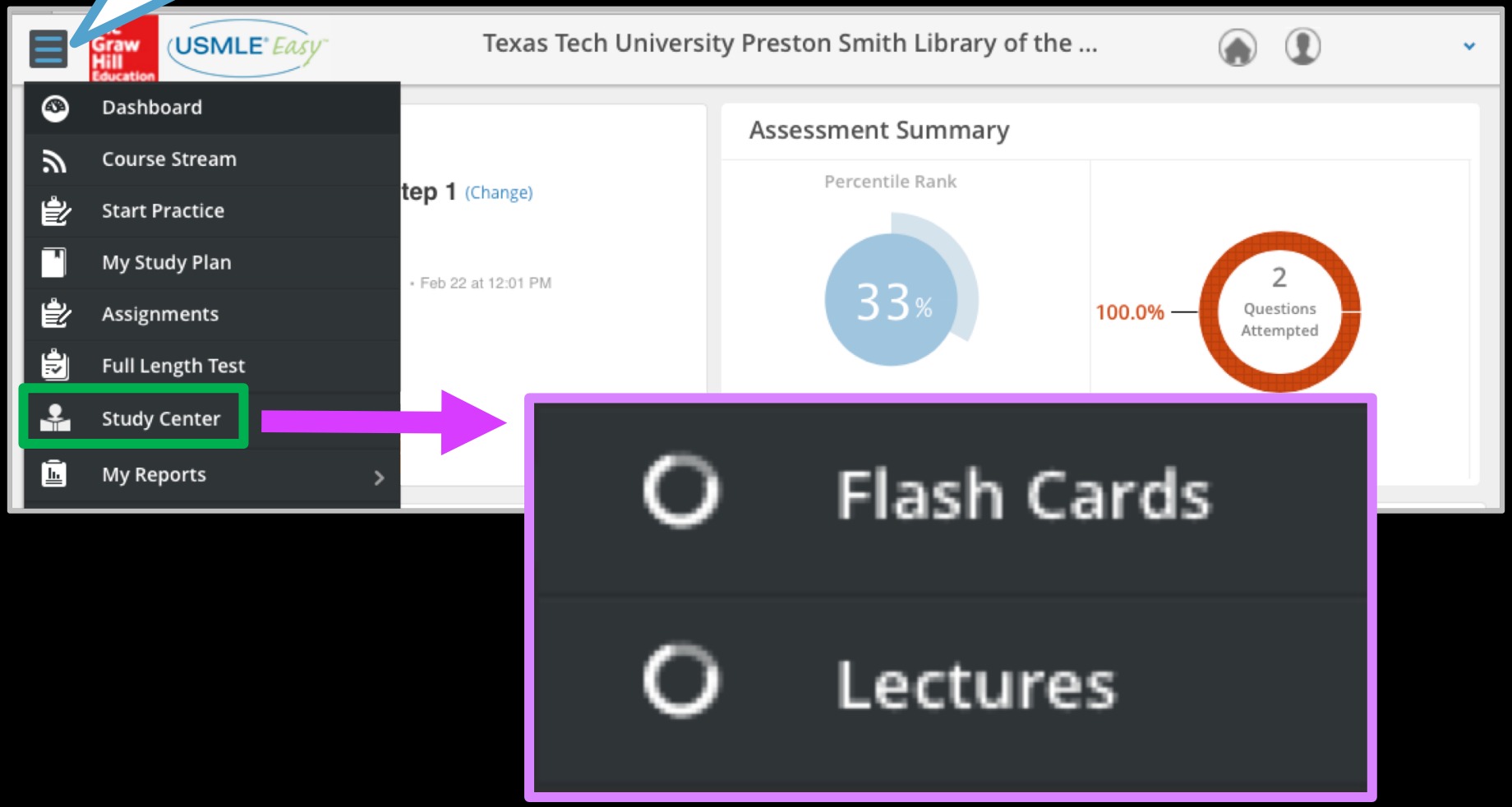
*Cannot return to a completed block

*Answers & explanations available only ***after*** entire test completed

*Step 1 Practice can only be taken once

Click Menu

Study Center



Flash Cards

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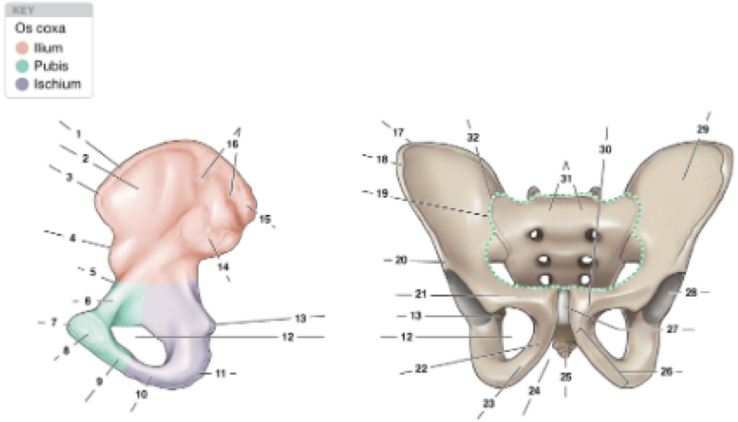
Abdomen, Pelvis, & Perineum 21 | Head 20 | Upper Limb 16 | Thorax 7 | Lower Limb 23 | Neck 7 | Back 6



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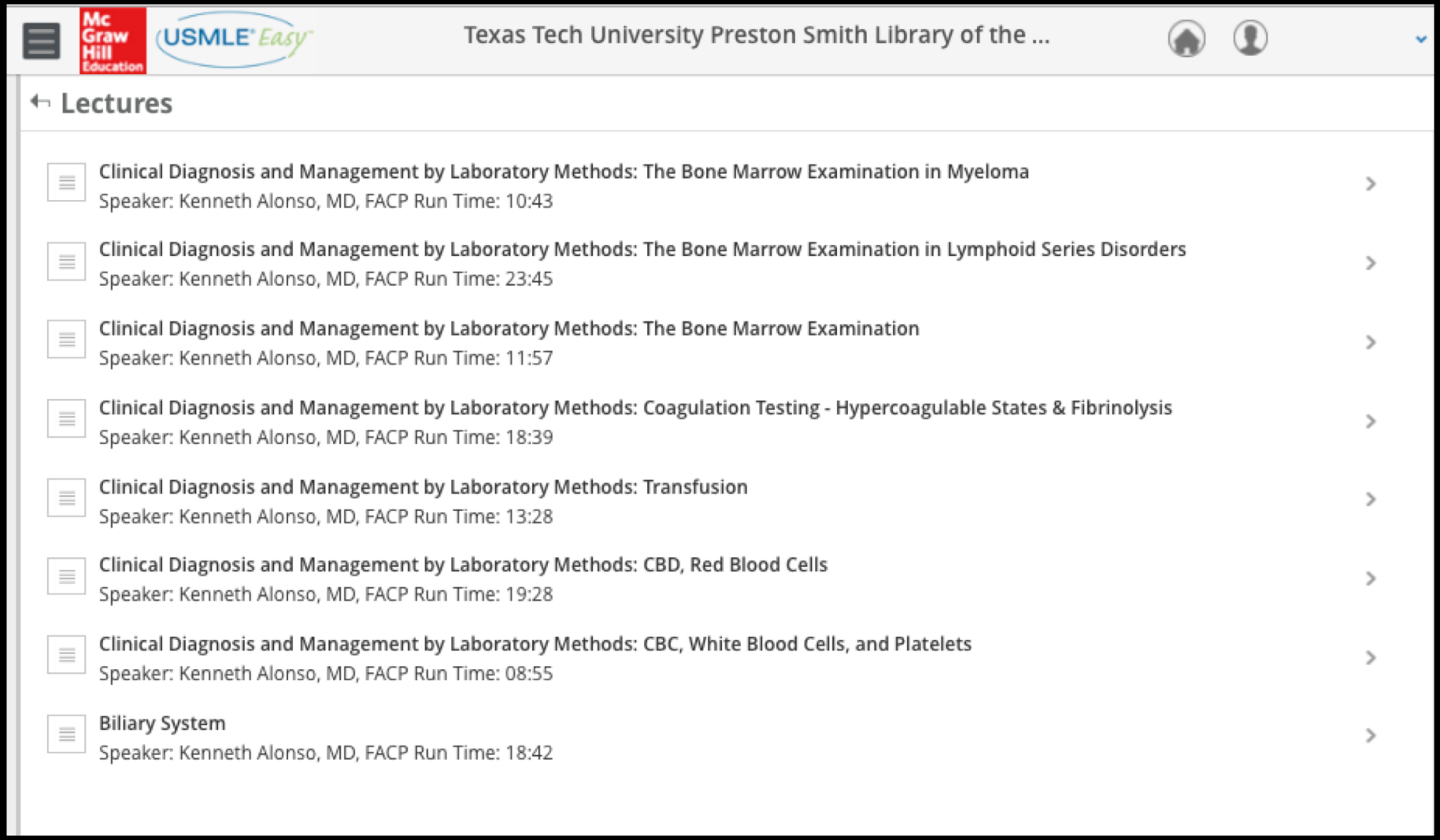
Abdomen, Pelvis, & Perineum

- A. Medial view of the os coxa. B. Anterior view of ...
- Fascial layers of the anterior abdominal wall
- Step dissection of the anterior abdominal wall ...
- Neurovascular structures of the anterior abdomin...
- Schematic of the inguinal canal, spermatic cord, an...
- A. Parts of the stomach and duodenum. B. Anteri...
- Anterior view of the foregut with the body an...
- A. Arterial supply to the foregut supplied princip...

Lectures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Lectures
Clinical Diagnosis and Management by Laboratory Methods: The Bone Marrow Examination in Myeloma
Speaker: Kenneth Alonso, MD, FACP Run Time: 10:43
Clinical Diagnosis and Management by Laboratory Methods: The Bone Marrow Examination in Lymphoid Series Disorders
Speaker: Kenneth Alonso, MD, FACP Run Time: 23:45
Clinical Diagnosis and Management by Laboratory Methods: The Bone Marrow Examination
Speaker: Kenneth Alonso, MD, FACP Run Time: 11:57
Clinical Diagnosis and Management by Laboratory Methods: Coagulation Testing - Hypercoagulable States & Fibrinolysis
Speaker: Kenneth Alonso, MD, FACP Run Time: 18:39
Clinical Diagnosis and Management by Laboratory Methods: Transfusion
Speaker: Kenneth Alonso, MD, FACP Run Time: 13:28
Clinical Diagnosis and Management by Laboratory Methods: CBD, Red Blood Cells
Speaker: Kenneth Alonso, MD, FACP Run Time: 19:28
Clinical Diagnosis and Management by Laboratory Methods: CBC, White Blood Cells, and Platelets
Speaker: Kenneth Alonso, MD, FACP Run Time: 08:55
Biliary System
Speaker: Kenneth Alonso, MD, FACP Run Time: 18:42

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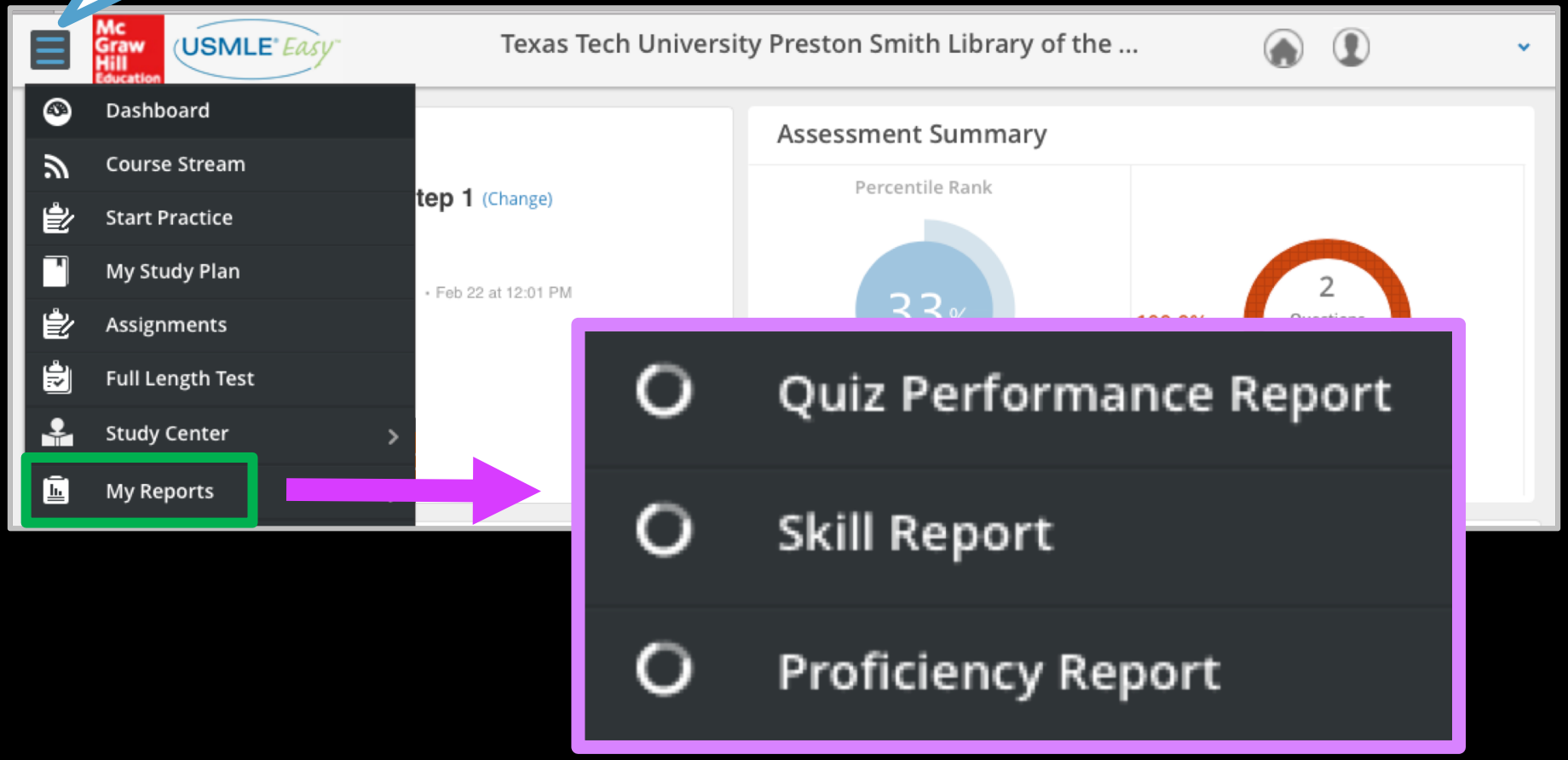
My Reports



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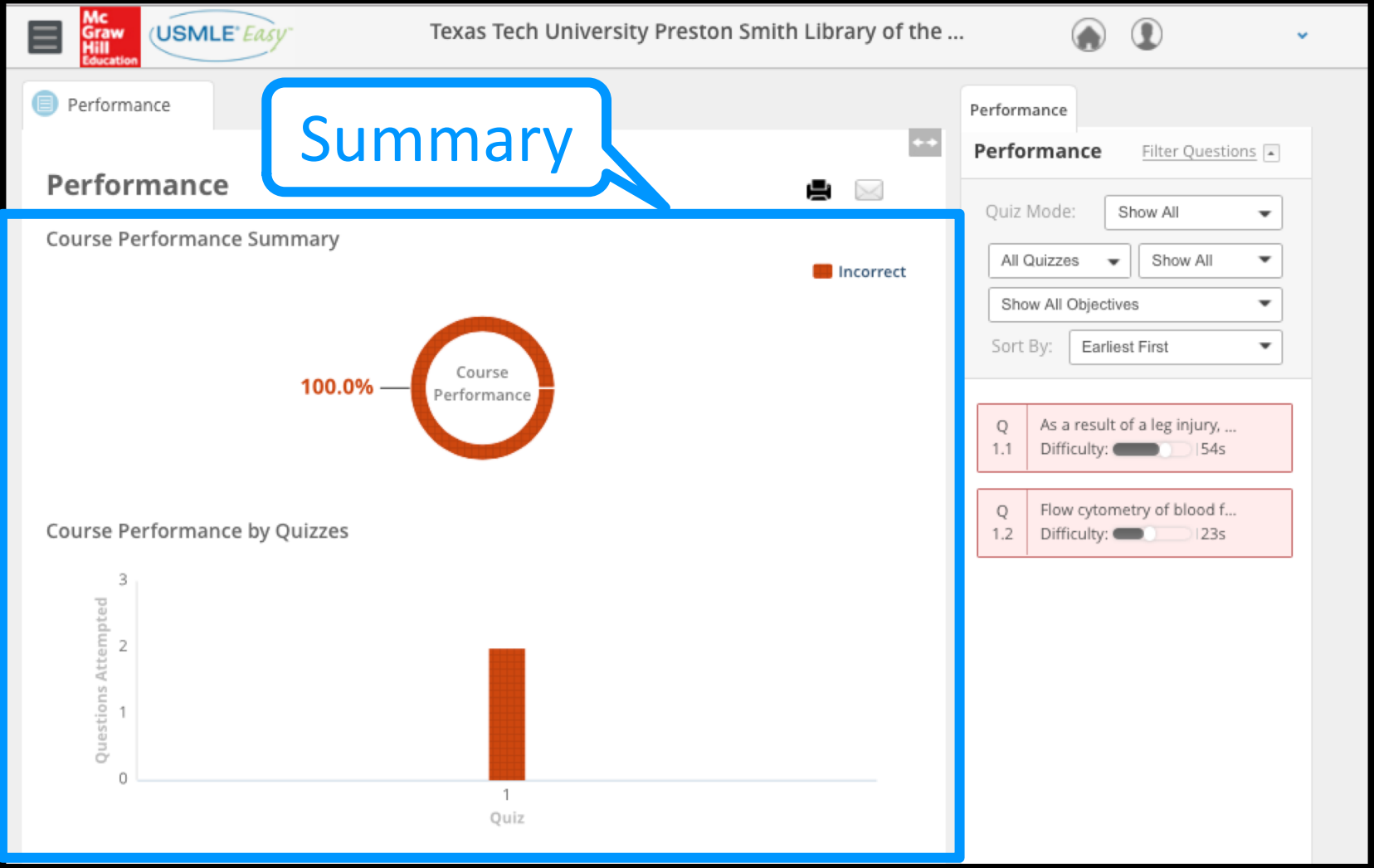
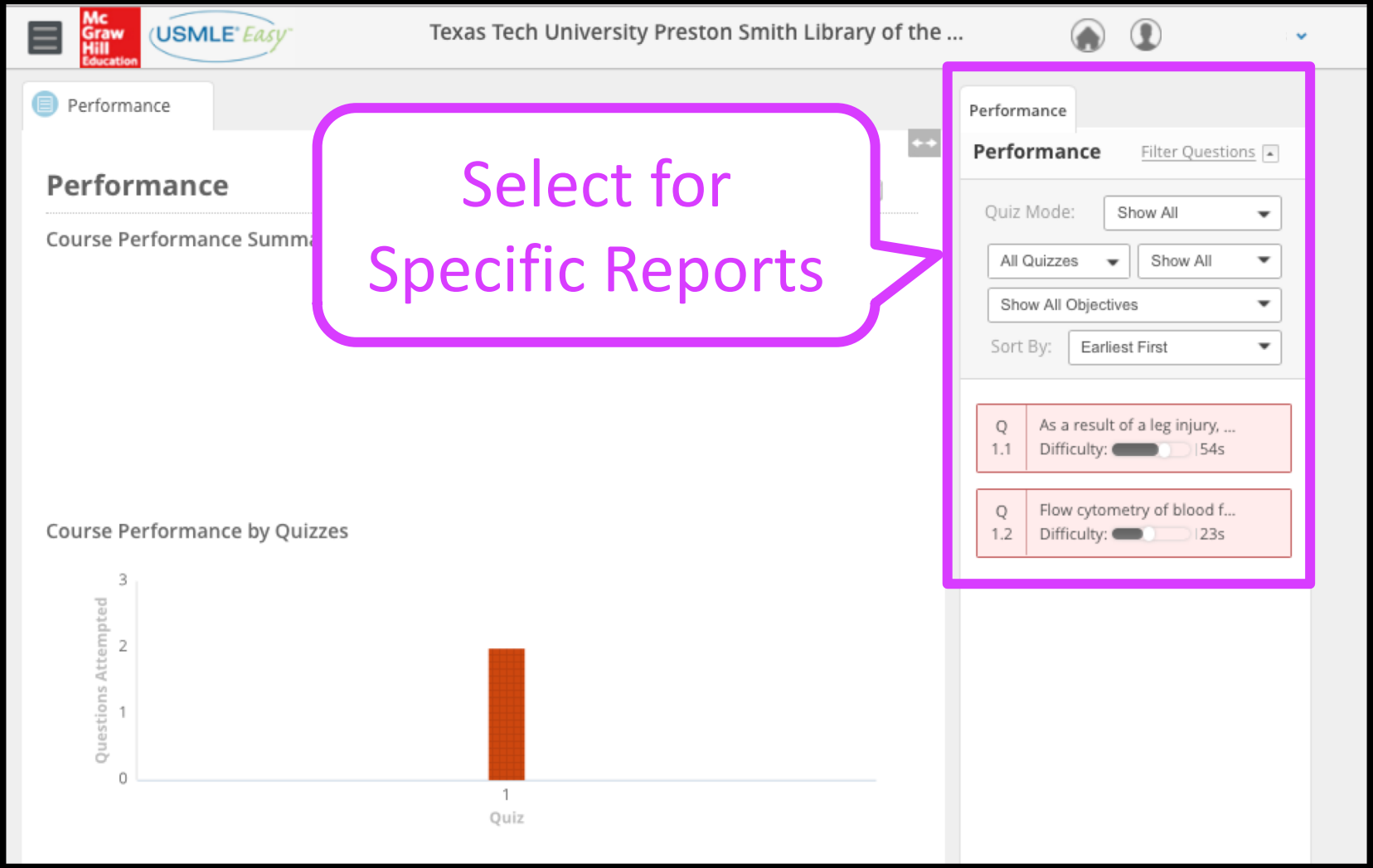
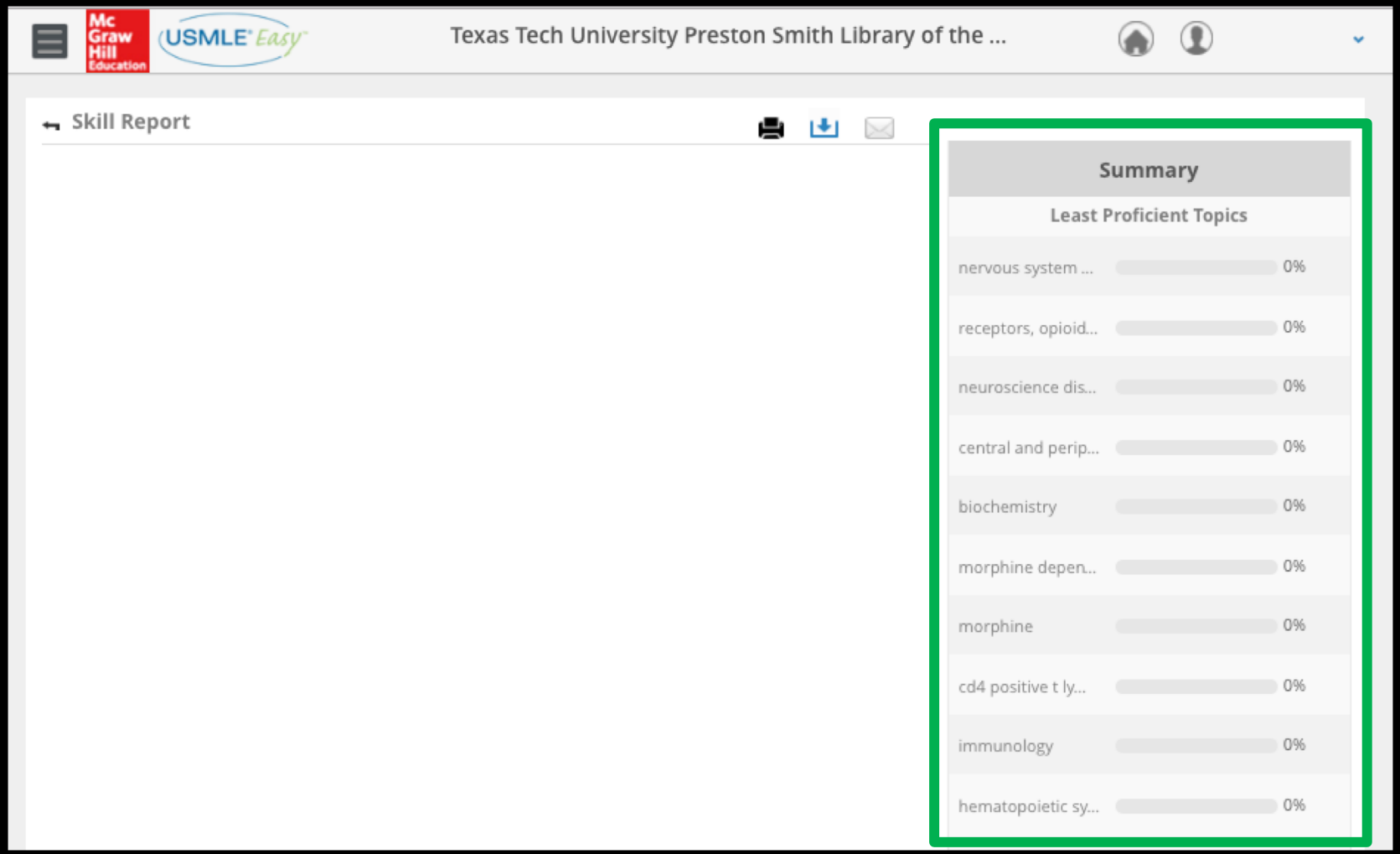


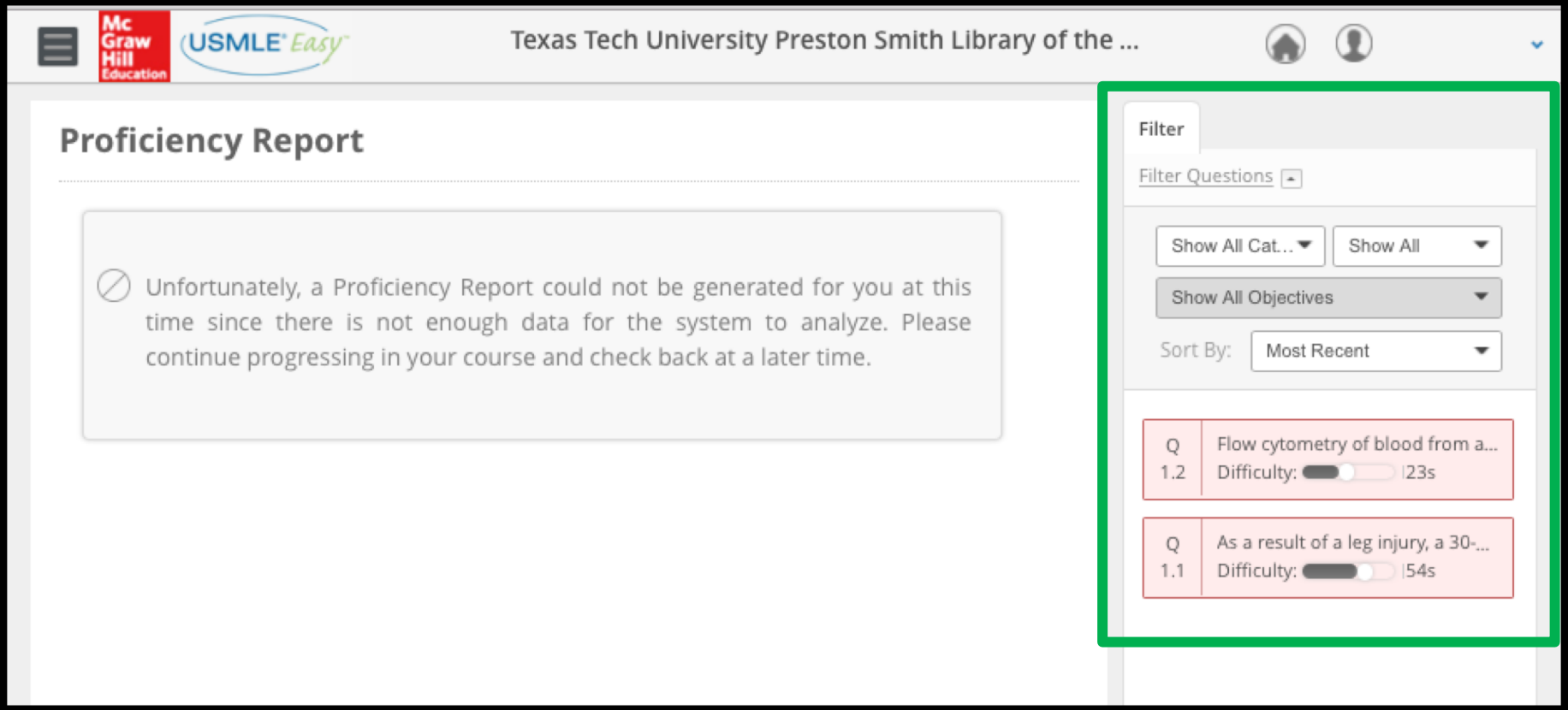
Quiz Performance Reports



Skill Report



Proficiency Report



Take some time to explore *USMLE Easy!*

Note:

We will go over First Consult after the exploration time period!

What questions do you have?

Evidence-Based Medicine

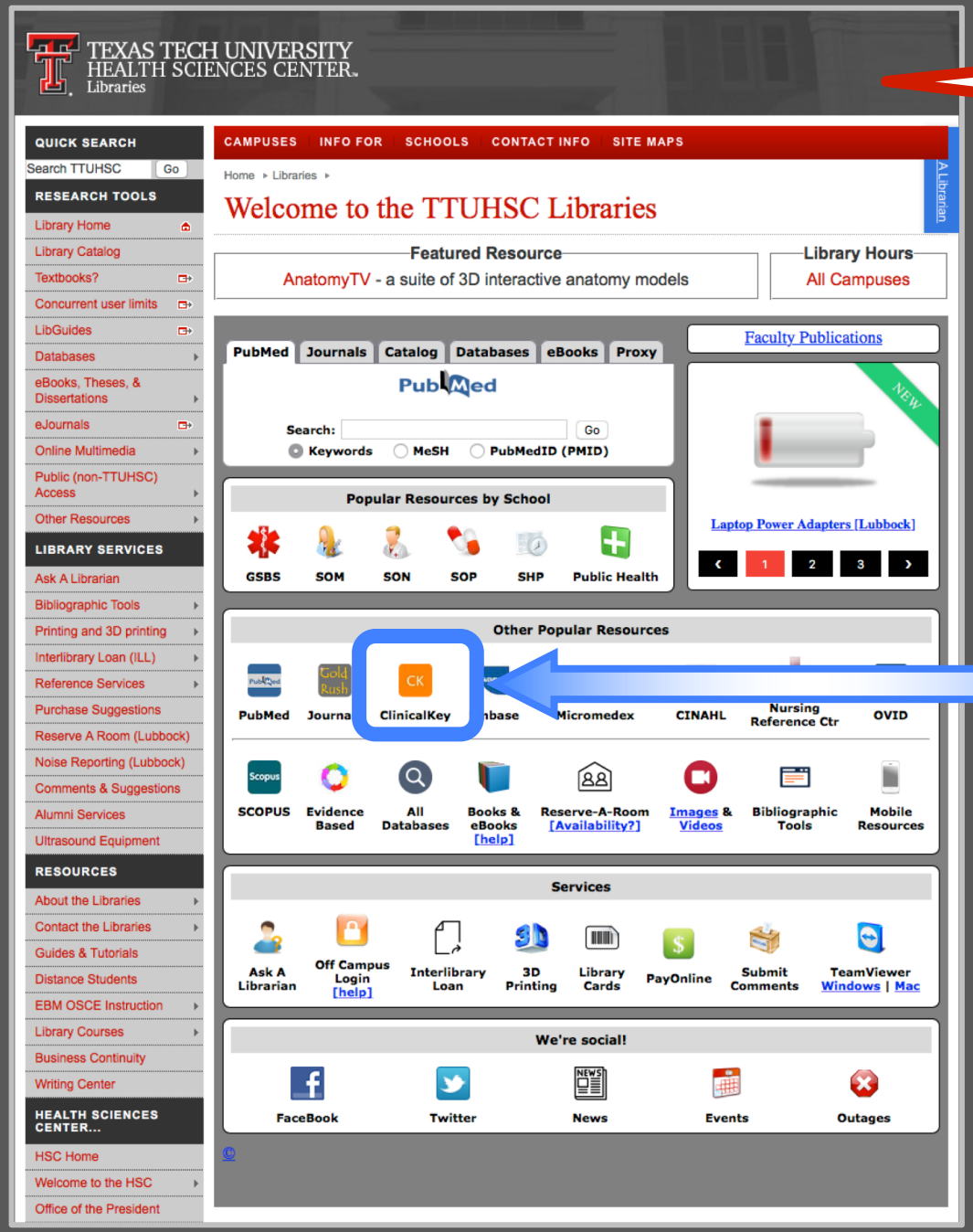
Clinical Key

* content from books, journals, and videos

First Consult

*point of care decision support tool within Clinical Key

* main source of information is from the evidence based organization: *The Cochrane Collaboration* where possible



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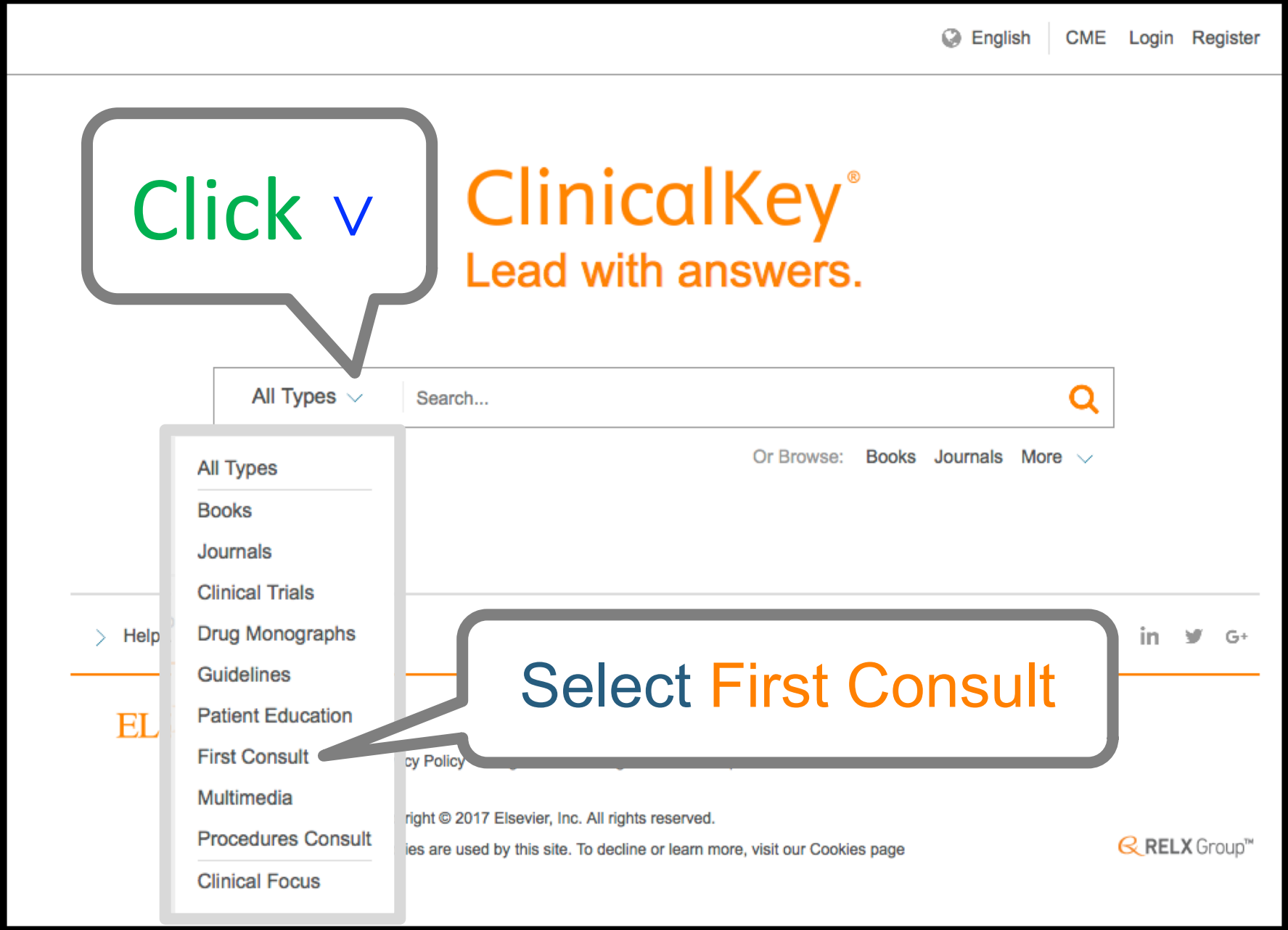
ClinicalKey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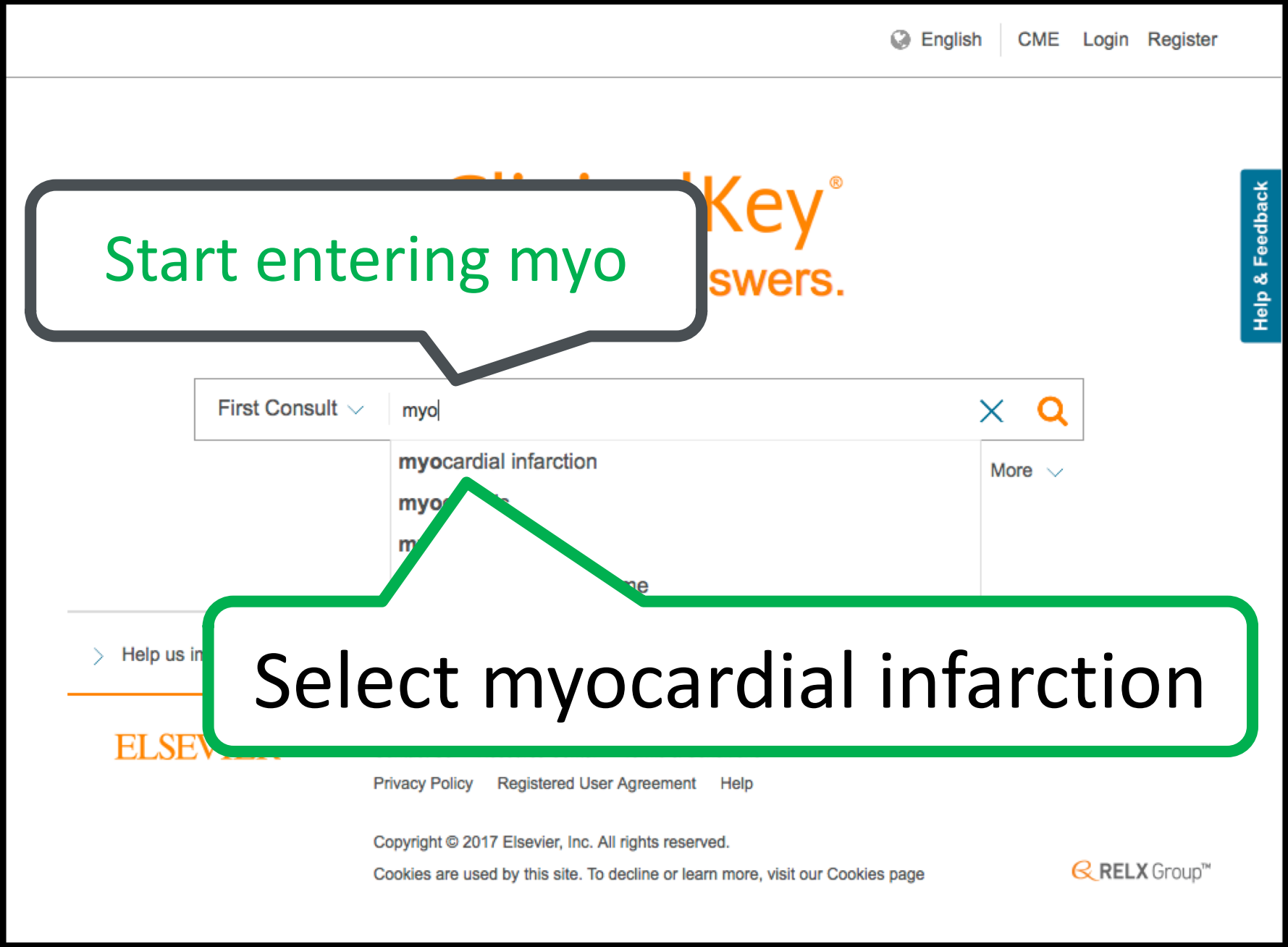
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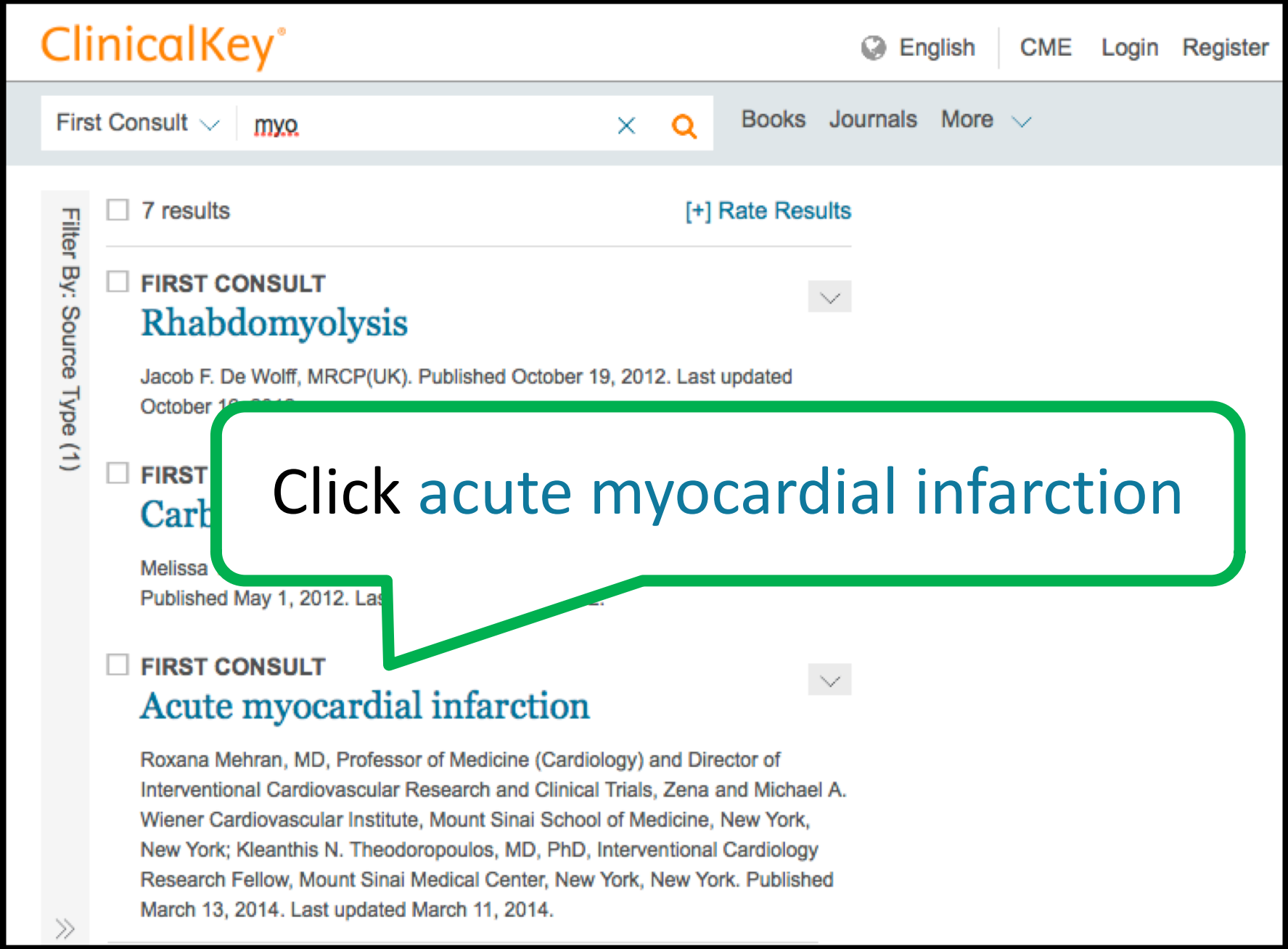
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Jacob F. De Wolff, MRCP(UK). Published October 19, 2012. Last updated
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Acute myocardial infarction
Roxana Mehran, MD, Professor of Medicine (Cardiology) and Director of Interventional Cardiovascular Research and Clinical Trials, Zena and Michael A. Wiener Cardiovascular Institute, Mount Sinai School of Medicine, New York, New York; Kleanthis N. Theodoropoulos, MD, PhD, Interventional Cardiology Research Fellow, Mount Sinai Medical Center, New York, New York. Published March 13, 2014. Last updated March 11, 2014.
Click acute myocardial infarction

Key points
Background
Description
Epidemiology
Causes and risk factors
Associated disorders
Screening
Primary prevention
Summary approach
Population at risk
Preventive measures
Lifestyle modifications
Evidence
References
Control of comorbid diseases or risk equivalents
Evidence
References
Diagnosis
Summary approach
Clinical presentation
Diagnostic testing
Electrocardiography

FIRST CONSULT

Acute myocardial infarction

Revised: March 11, 2014

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Key points

- The estimated annual incidence of acute myocardial infarction (AMI), including both ST-segment elevation myocardial infarction (STEMI) and non–ST-segment elevation myocardial infarction (NSTEMI), in the U.S. is 600,000 new and 320,000 recurrent attacks. In 2004, AMI resulted in 695,000 hospital stays and $31 billion in hospital charges
- Patients with AMI usually present with sudden or gradual onset of discomfort in the anterior chest, which also may be described as heaviness, pressure, or gas
- Some patients, particularly women, patients with diabetes, and elderly patients, may have atypical symptoms, such as nausea or worsening glucose control, whereas others may have no symptoms ('silent myocardial infarction'). A high level of suspicion is required in these patient groups
- The diagnosis of AMI is established on the basis of a high clinical suspicion based on the history and physical examination findings in addition to changes in cardiac biomarkers (creatinine kinase–MB [CK-MB], troponins, and myoglobin) and electrocardiographic findings. Imaging techniques, such as two-dimensional echocardiography, also are useful in demonstrating myocardial dysfunction
- Treatment focuses on limiting the injury to cardiac tissue. Reperfusion therapy using thrombolytic agents or percutaneous coronary intervention (PCI) should be initiated as early as possible. Oxygen, nitrates, analgesics, aspirin, platelet $P2Y_{12}$ receptor blockers, antithrombotics, β-blockers, and angiotensin-converting enzyme (ACE) inhibitors are the cornerstone medications in the initial treatm
- Comp
failure
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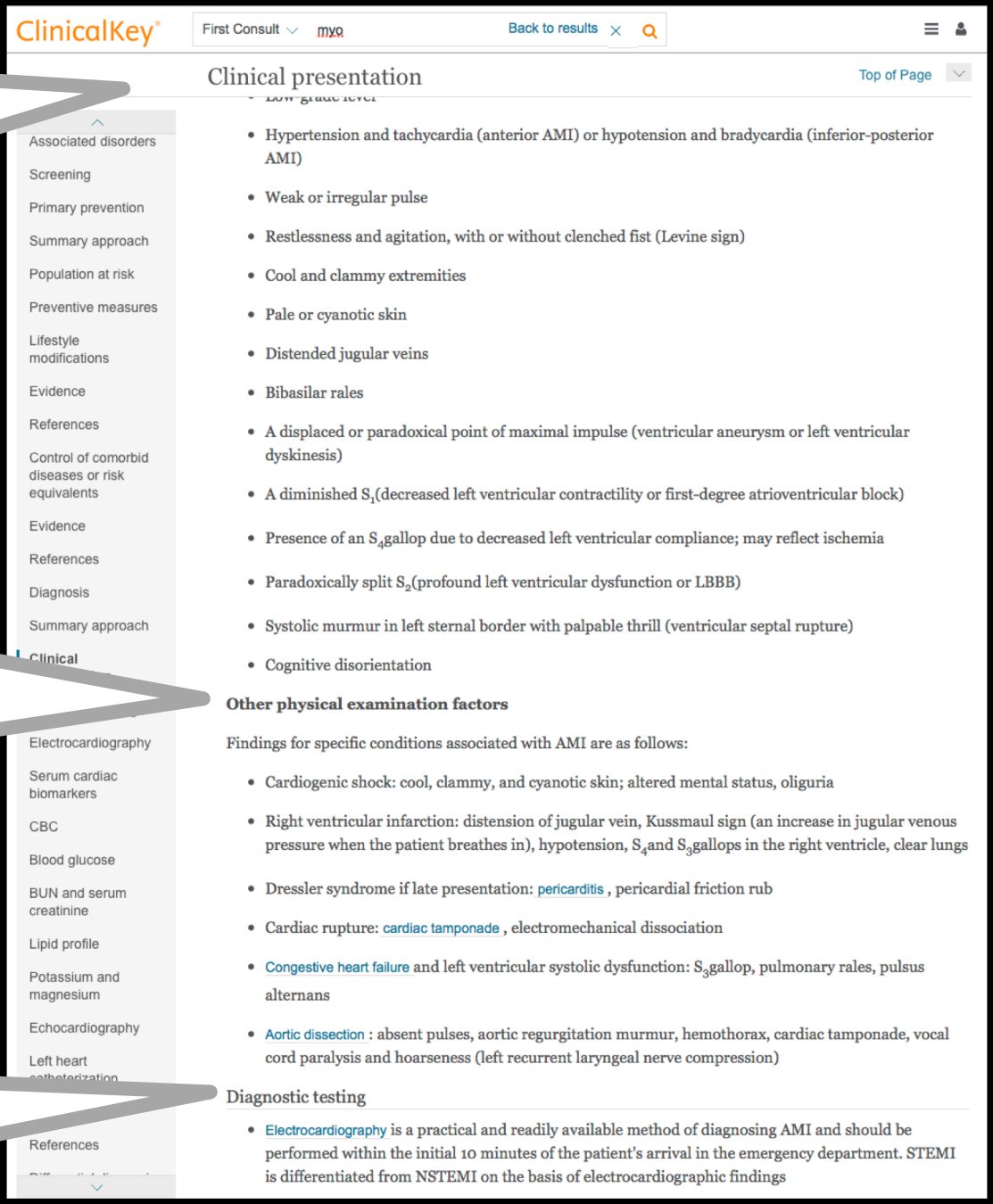
cessation, weight management, and physical activity. Maintenance medication also is prescribed, as determined by patient needs

Click Clinical presentation

Clinical presentation

Other physical exam factors

Diagnostic testing



What questions do you have?

Life Long Learning

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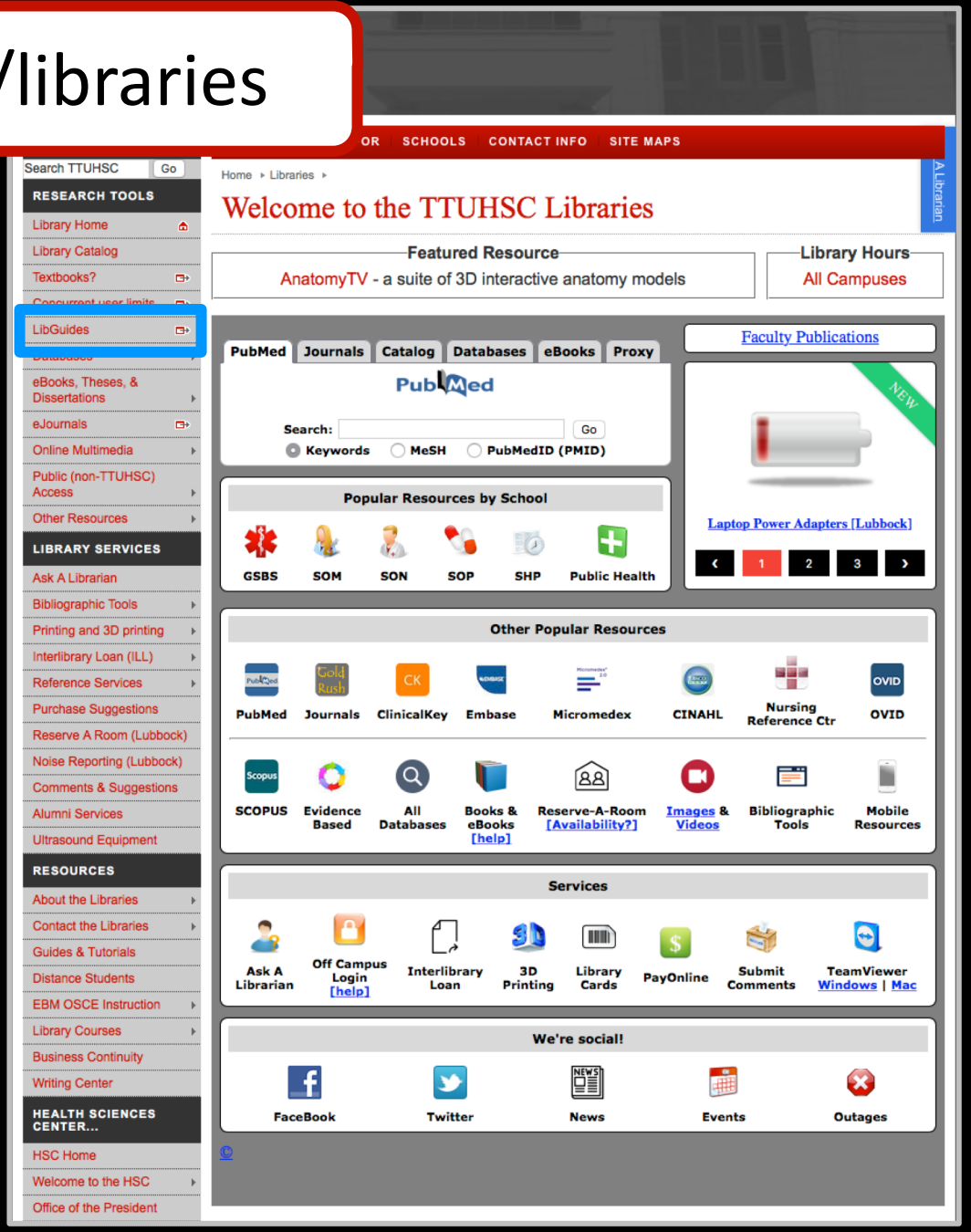

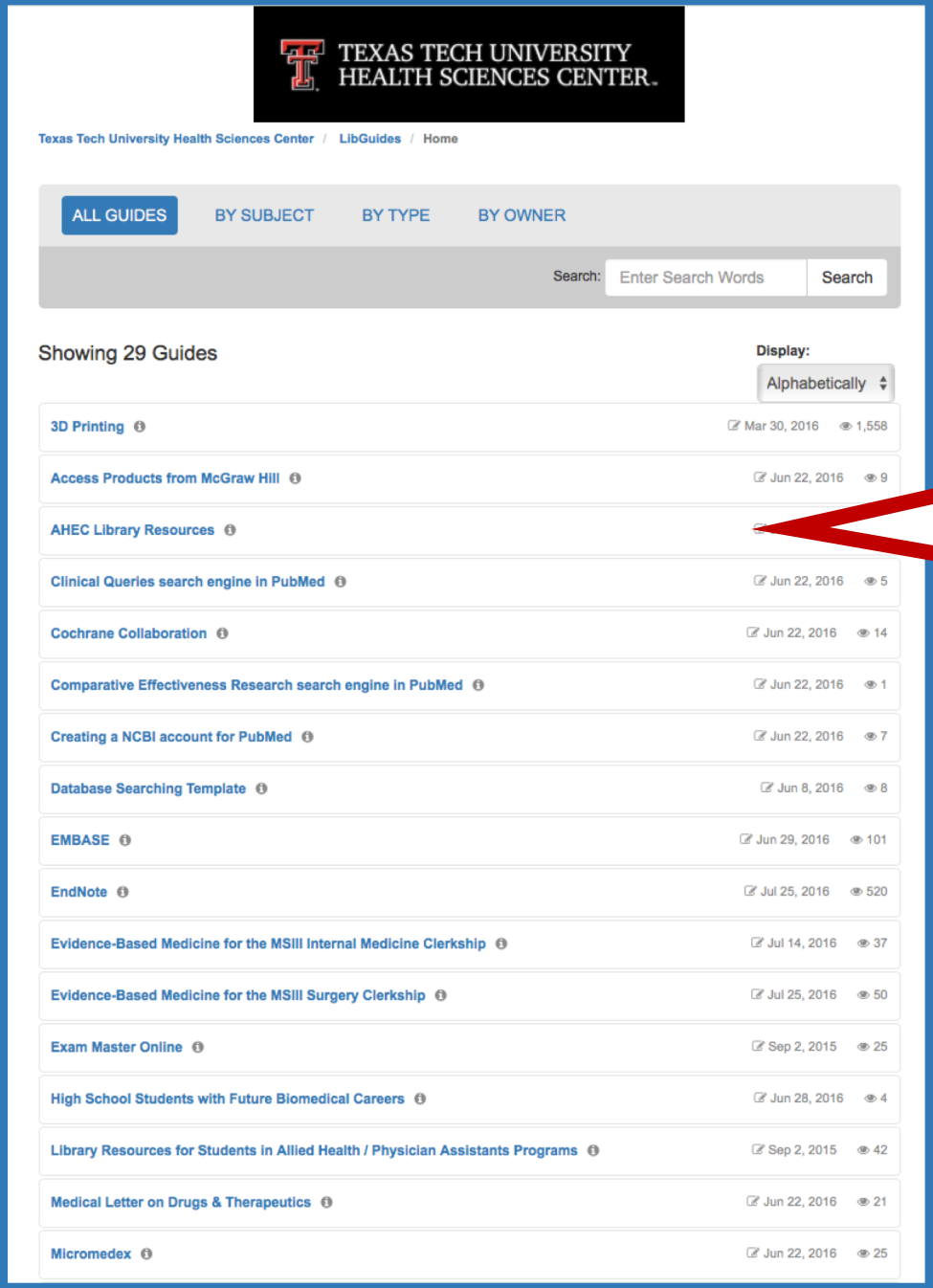
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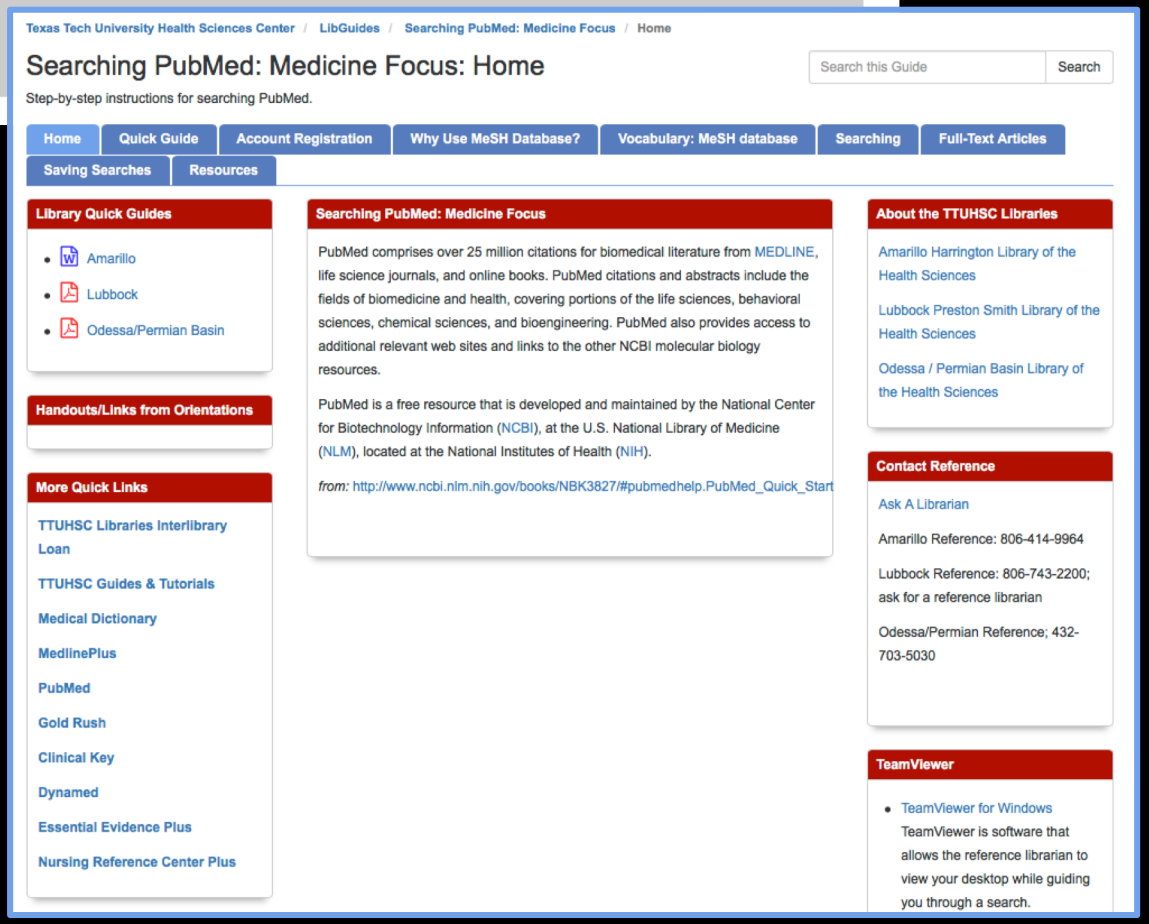
Searching PubMed: Medicine Focus



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Searching PubMed: Medicine Focus: Home

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Step-by-step instructions for searching PubMed.

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Searching PubMed: Medicine Focus

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Odessa / Permian Basin Library of the Health Sciences

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Ask A Librarian

Amarillo Reference: 806-414-9964

Lubbock Reference: 806-743-2200; ask for a reference librarian

Odessa/Permian Reference; 432-703-5030

TeamViewer

- TeamViewer for Windows
  TeamViewer is software that allows the reference librarian to view your desktop while guiding you through a search.

What questions do you have?

Please…

fill out the evaluation at

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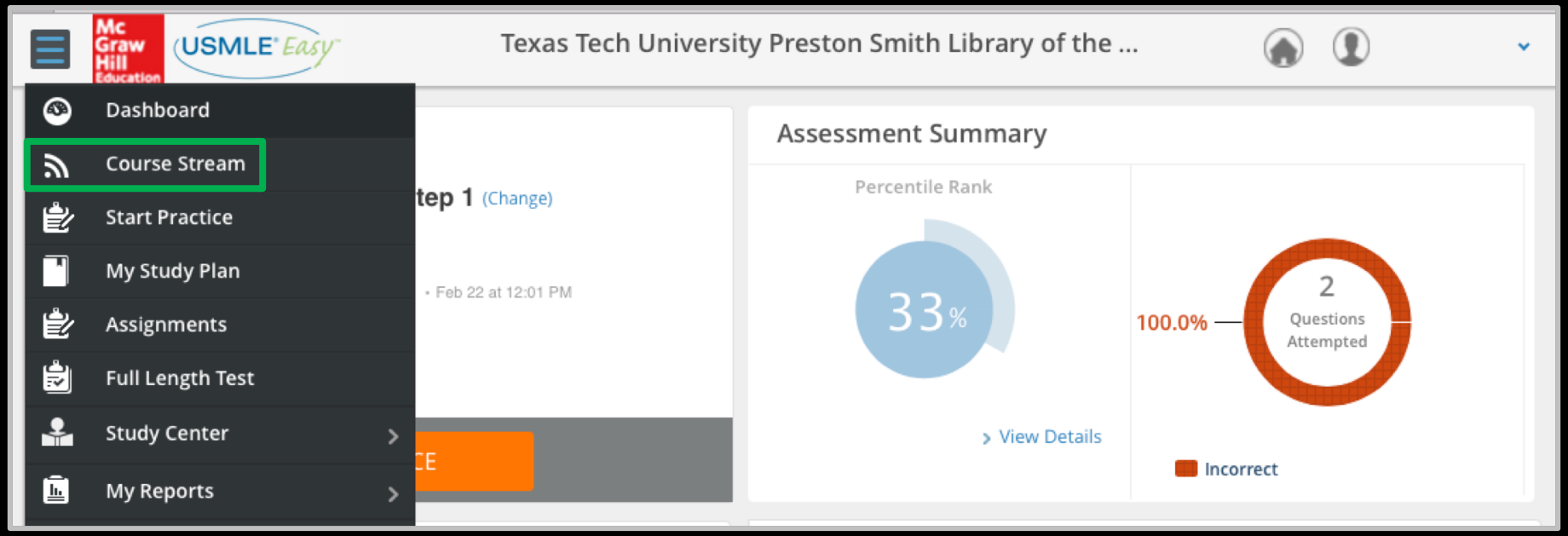
Thank-you…

we appreciate your feedback!

The End

Course Stream



Option to become a student reviewer to test new and upcoming on McGraw-Hill products.

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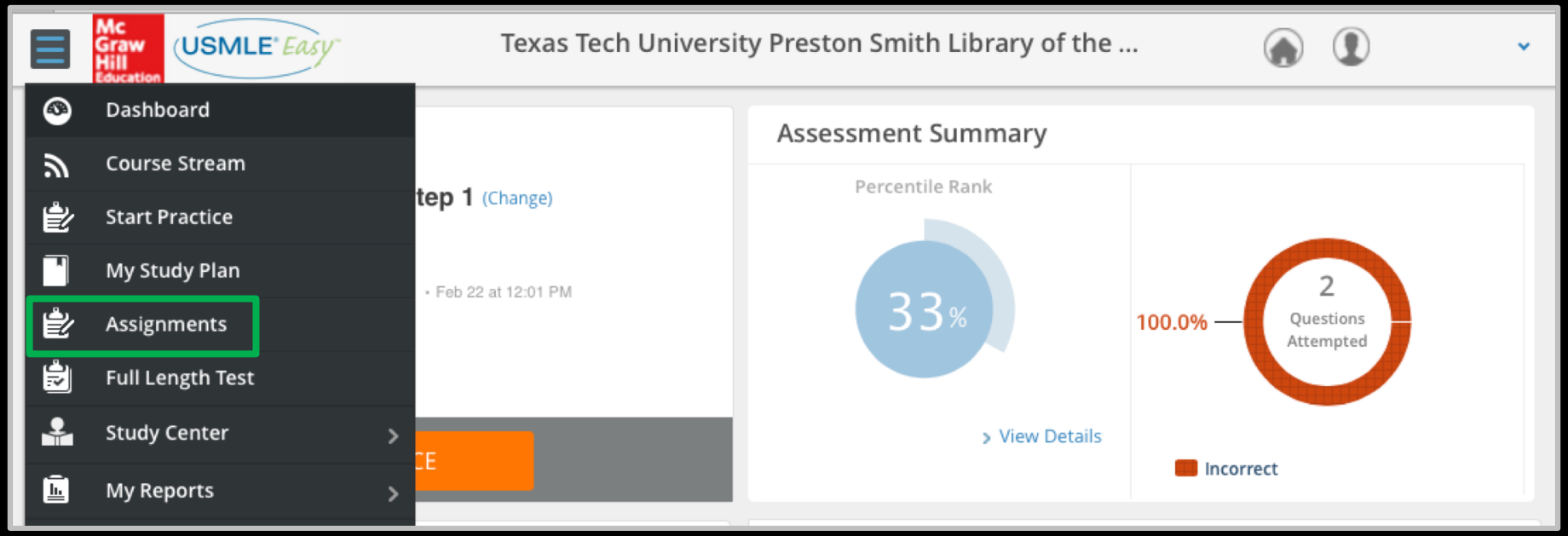

Assignments made by an instructor.