Resolution S19-1. Investigating the effect that the United States Medical Licensing Examination (USMLE) Step 1 exam has on mental health of dual degree students in the continental United States.

Sponsor: Samantha Spellicy, Co-Vice Chair, Policy Committee, American Physician Scientists Association

WHEREAS, the Step 1 exam was originally designed as a binary exam for state licensure eligibility, recently it has become a crucial component of residency applications; and

WHEREAS, no correlation has been shown between USMLE scores and objective measures of clinical skills; and

WHEREAS, the Journal of the American Medical Association reports physician burnout (52.8%) and moderate to severe depression (14.3%) to be prevalent in medical students, but the relationship of these rates to Step 1 have yet to be examined; and

WHEREAS, dual degree students are at a great risk for burnout due to unique financial stress and academic pressure; and

WHEREAS, the financial burden of USMLE Step 1 examinations ($605 for registration, before study materials), may discriminately affect students of various socioeconomic backgrounds and their mental health; therefore be it

RESOLVED, That the American Physician Scientists Association further investigates the correlations between dual-degree student depression and burnout with USMLE Step 1 testing.

REFERENCES:
1. United States Medical Licensing Examination 2019 Bulletin Information, Federation of State Medical Boards of the United States Inc.

Resolution S19-2. Advocating for reformation in the utilization of the United States Medical Licensing Examination (USMLE) Step 1 exam

Sponsor: Samantha Spellicy, Co-Vice Chair, Policy Committee, American Physician Scientists Association

WHEREAS, USMLE Step 1 exam was designed as a binary exam for state licensure eligibility, rather than a determinant of residency success; and

WHEREAS, the USMLE Step 1 exam has become one of the most important criteria cited by residency directors for new resident selection; and

WHEREAS, no correlation exists between USMLE scores and objective measures of clinical skill; and

WHEREAS, there are a number of alternative factors that are equally, or more predictive, of residency performance such as performance during clinical rotations and faculty recommendations; and

WHEREAS, Step 1 exam scores have been shown to gradually increase over time in a phenomenon termed “Score creep”, this disproportionately affects dual-degree students at the time of residency selection due to depreciation of student score value over time; and

WHEREAS, the USMLE Step 1 exam has been implicated in further exacerbating student depression and burnout; therefore be it

RESOLVED, That the American Physician Scientists Association supports reforming USMLE Step 1, to have less of a detrimental impact on student wellbeing and reduce utilization in the residency match process.

REFERENCES:
1. United States Medical Licensing Examination 2019 Bulletin Information, Federation of State Medical Boards of the United States Inc.

Sponsor: Hanna Erickson, Co-Chair, Policy Committee, American Physician Scientists Association

WHEREAS, over half of female medical students have experienced sexual harassment; and

WHEREAS, the “strict hierarchical structure of the profession sometimes forces victims of harassment to choose between career advancement and personal safety”; and

WHEREAS, the American Medical Association defines harassment as being “verbal, physical, or visual” conduct that “denigrates or shows hostility or aversion toward an individual because of his or her race, color, religion, sex, sexual orientation, gender identity, national origin, age, disability, marital status, citizenship, or other protected group status” that creates “an intimidating, hostile, or offensive environment” or affects a member’s ability to participate in the organization’s proceedings; and

WHEREAS, the Code of Conduct for the AAP/ASCI/APSA Joint Meeting states “Our conference is dedicated to providing a harassment-free experience for everyone, regardless of gender identity and expression, age, sexual orientation, disability, physical appearance, body size, race, ethnicity, or religious preference”; and

WHEREAS, reporting of harassment at the AAP/ASCI/APSA Joint Meeting is limited to contacting “a member of conference staff at the registration desk immediately” or contacting APSA headquarters via email; therefore be it

RESOLVED, that the American Physician Scientists Association creates an anonymous system for reporting harassment at any APSA-sponsored event; and

RESOLVED, the APSA seeks partnerships with organizations such as Time’s Up Healthcare to address the issue of harassment and discrimination in healthcare and research.

REFERENCES:


**Spring 2020 Resolutions:**

**Resolution S20-1. Defining the Impact of Transitioning to Pass/Fail Step 1 on Current Dual-Degree Students.**

Sponsor: Abhimanyu Amarnani, Policy Committee Member, Elinor Mannon, Policy Committee Co-Chair, American Physician Scientists Association

WHEREAS, on February 12, 2020 FSMB, NBME, and USMLE announced that, “the USMLE program will change score reporting for Step 1 from a three-digit numeric score to reporting only a pass/fail outcome” as early as January 1, 2022\(^1\),

WHEREAS, the USMLE has “not yet determined how the policy change will impact score reports and transcripts”\(^2\),

WHEREAS, the lack of determination in Step 1 score reporting by the USMLE creates the possibility that current dual-degree students may not have their numeric scores converted to pass/fail outcomes if they apply for residency programs after January 1, 2022,

WHEREAS, uncertainty about current Step 1 numeric scores creates unnecessary stressors for students, especially for dual-degree students who have already completed Step 1 and are unclear about how score conversion will affect their future applications,

WHEREAS, the post-hoc conversion of numeric score outcomes to pass/fail outcomes on transcripts (i) may require an amendment to rules and policies governing Step 1 score reporting post-hoc\(^3\), (ii) possibly disrupt the training timeline of current students, especially dual-degree trainees, and (iii) may be undermining the stated goals of combined degree programs\(^4\),

WHEREAS, a timely decision on these uncertainties will allow individual students, dual-degree education leadership, and physician-scientist trainee program...
directors necessary time to establish plans to adjust for changes in scoring; therefore be it,

RESOLVED, APSA will lobby USMLE to make a transition announcement that is congruent with the following recommendations before matriculating medical students begin their education in the Fall of 2020:

(A) Recommend the USMLE define a decision whether or not to retroactively convert numeric Step 1 scores to pass/fail reporting on transcripts for students who completed Step 1 prior to the transition to pass/fail score reporting.

(B) Recommend that USMLE define a specific date when the conversion of Step 1 score reporting to pass/fail will occur, as opposed to no earlier than January 1, 2022.

REFERENCES:

Resolution S20-2. Expanding Access to APSA Interactive Sessions.

Sponsors: Abhimanyu Amarnani, Policy Committee Member, Elinor Mannon, Policy Committee Co-Chair, American Physician Scientists Association

WHEREAS, the American Physician Scientists Association (APSA) has invested significant time, effort, and resources in the development of “Interactive Session” content to inform dual-degree students, physician-scientist trainees, and others1,

WHEREAS, clinical podcasts (e.g. Core IM, The Curbsiders, Emergency Medicine Cases) and research focused podcasts (e.g. People Behind the Science, Shots of Science Vs, Working Scientist, Behind the Microscope) have become an increasingly popular method for students/trainees to digest career guidance. Particularly, scientific podcasts have grown exponentially in recent years2,
WHEREAS, there exists a wide breadth of material dedicated to guidance for physician-scientists prepared and disseminated through live APSA interactive sessions1,

WHEREAS, APSA interactive sessions are only accessible via the APSA website and therefore not as accessible to all current or aspiring physician-scientists as the clinical or research podcasts currently available,

WHEREAS, an APSA podcast platform could address APSA goals of providing guidance for trainees and dual-degree students through (i) preparing already recorded interactive sessions as podcasts, (ii) establishing distribution of these materials through Spotify, iTunes, and other platforms3, and (iii) developing standard operating procedures for APSA members to contribute additional content beyond our current interactive sessions platform; therefore be it

RESOLVED, that APSA establish an ad-hoc committee responsible for establishing standard operating procedures to:

(A) Prepare our current interactive sessions as recorded podcasts.
(B) Ensure future interactive sessions are released as podcasts on multiple platforms, including but not limited to iTunes, Google Play music, and Spotify.
(C) Establish methods for APSA members to develop future content for podcasts.

REFERENCES: