Process and Experience of Creating a Student-Run Step 1 Guidance Program

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e developed the Albert Einstein College of Medicine USMLE (United States Medical Licensing Examination) Step 1 Guidance Program in the fall of 2010. The objectives of the program were twofold: to provide reliable, unbiased advice on Step 1 preparation, and to reduce student anxiety surrounding the examination. The program aimed to fill a void for the students by focusing on the process of preparing for the test. It was not intended to teach Step 1 content, but instead to help students study effectively and efficiently. In our opinion, the most significant service medical students required was assistance in developing a personalized program of study for this examination.

This program was conceived, implemented, and continually reviewed by students. It is our hope that this bottom-up approach, created by and for medical students, can be easily adapted by other medical institutions and implemented in medical education beyond Step 1 preparation. Faculty and administrators provided necessary resources, and their help was crucial to the success and longevity of the program. This commentary outlines the process and experience of creating this program, which is now in its second year and well established within the Einstein community.

DEVELOPMENT

After completing the USMLE Step 1, we concluded that the most important and daunting aspect of the process was determining how to prepare for this examination. With no shortage of Step 1 study materials and commercial courses (Tompkins, 2011) available, each touting itself as the best and most comprehensive, we were often at a loss when deciding which resources to use. We wanted our guidance program to enable the free flow of reliable information from senior to junior medical students as they began to prepare for the examination. Previously at Einstein, two mandatory classwide meetings, one of which included a student panel, had been held to discuss Step 1. While we had found these meetings helpful, we felt that two meetings alone were not sufficient.

Additionally, the flow of Step 1 information was not ideal. Generally, a small handful of third-year medical students (MS3s) disseminated information to a few second-year students (MS2s), and then this knowledge spread laterally among the remaining MS2s. This structure was flawed in two critical ways. First, the information was "one size fits all" and could not be adapted to specific student concerns. And second, the information was coming from an

extremely small group of students, which meant it might not adequately reflect varied points of view. These inadequacies in the student-to-student distribution of information were the primary motivation for the creation of the Step 1 Guidance Program.

Another goal of the program was to reduce student anxiety. As the sole standardized indicator of medical knowledge, often used as a screening tool by residency programs, the results of the USMLE Step 1 are considered one of the most important aspects of a residency application. Of those polled in the 2010 National Resident Matching Program Director Survey, 73% cited the applicant's Step 1 examination score as a factor in interview selection. This represents the largest percentage of all interview selection criteria (National Resident Matching Program, 2010). Medical students, therefore, have a great deal of anxiety about this exam, and such anxiety has been shown to affect performance negatively (Ramirez & Beilock, 2011; Beilock, 2008). Our Step 1 Guidance Program strove to reduce stress not only by providing useful information regarding study resources and methods, but by serving as an outlet for concerns and by providing support when needed. Since peers are often more approachable than supervisors, we believe that a student-run organization is the ideal format to address effectively the pressures and stresses induced by the Step 1 exam.

In order to ascertain the knowledge and experience of a significant sample size, we distributed a survey to Einstein students who had taken the USMLE Step 1 in 2010. Seventy students completed the survey, which focused on student opinions of various study methods and study resources. Its purpose was to assess students' perspectives on the best study resources. We then interviewed 10 Einstein test takers in person to gain more insight. Equipped with this information, we sought to develop a guidance program for those students preparing for the Step 1 examination in 2011.

We developed a four-pronged approach: an online blog with survey results and relevant articles; large-group presentations to advertise our services; personalized email support; and individual meetings. The online blog (http://blog.myalbert.einstein.yu.edu/step1s2s/) is a website created to introduce the guidance program and provide a range of basic tutorials on how to study for the examination. Articles include a student guide to the basics of Step 1, instructions for creating a study schedule for Step 1, and study resources based on the 2010 student survey results.

In the beginning of the academic year, we conducted an hour-long presentation for the MS2 students in order to introduce our program, its purpose, and the services it provided. Email correspondence was available for specific questions from students who preferred to remain anonymous among their peers. Individual meetings were aimed primarily at helping students create a personalized study schedule. To facilitate easy access to the group, we held open office hours near the area where most students studied. This allowed them to see us quickly and easily when questions arose. We found, however, that students often came to these sessions for reassurance rather than to have specific questions answered.

Faculty support was sought early on in the development of this program. We presented the concept of the Step 1 Guidance Program to the deans of students, who both fully supported our project. Gaining the support of the school administration added authority to our program. Moreover, we worked closely with the staffers at the office of academic support and counseling, who referred many struggling or nervous students to our program. The success and stability of the Step 1 Guidance Program are largely attributable to the assistance and guidance we received from the Einstein administration and faculty.

REFLECTIONS

We believe that our four different services effectively and efficiently provided information about the Step 1 exam, as well as appropriate study methodologies. Most students started with the large-access media—the blog and group session—and then followed up on more-specific concerns via email or during our office hours to obtain customized help. This allowed for the maximal distribution of advice and information.

In "Money for Nothing?" Tompkins (2011) correctly identifies a frightening trend in Step 1 preparation: the rise of for-profit preparatory services. To date there have been several studies revealing no benefit from these commercial courses, including Kaplan live courses, Falcon review courses, and Doctors in Training (DIT) (Werner & Bull, 2003; Scott et al., 1980; Lewis & Kuske, 1978). Despite the findings presented in this literature, commercial courses are thriving. Some of this may be explained by the marketing approach implemented by these for-profit companies. One particular company visited the Einstein campus and gave a lecture advertising its "foolproof" Step 1 preparation system in early October. The timing of this visit was crucial, as it was prior to most students having obtained adequate knowledge of all the available resources. While Einstein does not endorse or invite specific vendors to the campus, the commercial company granted one student a free course in return for organizing and setting up a meeting. As a result, a corollary goal of the program was to inform students of the advantages and disadvantages of commercial company services, prior to the arrival of those services on campus.

CONCLUSION

To hone the program for future students, we sent a detailed survey to the 2011 exam takers with the goal of objectively determining which methods of preparation correlated with higher Step 1 scores. The data gathered from this research project will influence future Step 1 preparation advice and improve the guidance program. Two new students were selected to continue the program for the coming year. It is our hope that this program will continue to evolve and be of great use to future Einstein students.

Our experience has shown that medical school curricula can be significantly augmented regarding USMLE Step 1 preparation through student-led initiatives. The "near-peer approach" of this guidance program was beneficial to us and to the many students involved. Unforeseen benefits, such as protecting our students from being taken advantage of by the commercial USMLE preparation industry, have also arisen from our project. We strongly encourage medical students at other institutions to create similar programs for the benefit of their peers.

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Conflict of Interest Disclosure

The authors have completed and submitted the ICMJE Form for Disclosure of Potential Conflicts of Interest. No conflicts were noted.

Author Contributions

The authors had equal roles in the writing of the manuscript.

Editorial Note

Dr. Sharon Silbiger passed away on September 6, 2012.

Beilock, S. L. (2008). Math performance in stressful situations. Current Directions in Psychological Science, 17(5), 339–343.
 Lewis, L. A., & Kuske, T. T. (1978). Commercial national board review programs: A

case study at the Medical College of Georgia. Journal of the American Medical Association, 240(8), 754–755.

National Resident Matching Program, Data Release and Research Committee. (2010). Results of the 2010 NRMP program director survey. Retrieved from http://www.nrmp.org/data/programresultsbyspecialty2010v3.pdf on November 21, 2011.

Ramirez, G., & Beilock, S. L. (2011). Writing about testing worries boosts exam performance in the classroom. Science, 331(6014), 211–213.

Scott, L. K., Scott, C. W., Palmisano, P. A., Cunningham, R. D., Cannon, N. J., & Brown, S. (1980). The effects of commercial coaching for the NBME part I examination. *Journal of Medical Education*, 55(9), 733–742.

Tompkins, J. (2011). Money for nothing? The problem of the board-exam coaching industry. New England Journal of Medicine, 365(2), 104–105.

Werner, L. S., & Bull, B. S. (2003). The effect of three commercial coaching courses

on Step One USMLE performance. Medical Education, 37(6), 527-531.