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Education Research and Human Subject Protection: Crossing the IRB Quagmire and IRB 101

Two editorials offer guidance for authors on Institutional Review Board approval and human subject protection.

Commentaries

The Roots of Discontent: Understanding the Pressures of Psychiatric Emergency Training

In a commentary on McIlwrick et al (p. 26–30), Schlozman and Beresin further illuminate the challenges of emergency training for psychiatric residents. (p. 10–11)

Practice-Based Learning and Improvement Curricula: A Critical Opportunity to Educate Future Physicians and Leaders

Varkey's commentary on Tomolo et al (p. 49–58) emphasizes practice-based improvement as an important learning experience for physicians and future health system leaders. (p. 12–13)

Short Communications

Changing the Formula of Residents' Work Hours in Internal Medicine: Moving From "Years in Training" to "Hours in Training"

Mansi proposes an approach focusing on overall hours of training to reduce the pressures and potential negative effects of the duty-hour limits in internal medicine. (p. 14–16)

Two Perspectives on the Educational and Administrative Roles of the Pediatric Chief Resident

Dabrow et al report that the chief resident role is primarily administrative and may become more fulfilling if the balance is shifted toward teaching and clinical responsibilities. (p. 17–20)

A Preliminary Report on Resident Emergency Psychiatry Training From a Survey of Psychiatry Chief Residents

Bennett and colleagues find one-third of the nation's psychiatry programs do not meet the Accreditation Council for Graduate Medical Education (ACGME) review committee standard for emergency psychiatry training and recommend educating the residents about the standards and enhancing faculty supervision. (p. 21–25)

Original Research

Resident Training in the Psychiatric Emergency Service: Duty Hours Tell Only Part of the Story

A qualitative study of psychiatric emergency training by McIlwrick et al highlights the importance of a supportive and healthy team dynamic in allowing residents to deal with stressful workplace factors. (p. 26–30)

Key Elements of Clinical Physician Leadership at an Academic Medical Center

Dine and colleagues highlight essential elements of leadership in clinicians and comment that understanding these behaviors can start the process of more formal and effective leadership education for resident physicians. (p. 31–36)

Residents' Self-Perceived Errors in Transitions of Care in the Emergency Department

The Smith et al study of resident-perceived errors shows emergency medicine residents can identify errors related to transitions of care and describe the nature of the error and its effect on patient care. (p. 37–40)

Development and Preliminary Evaluation of a Practice-Based Learning and Improvement Tool for Assessing Resident Competence and Guiding Curriculum Development

Lawrence and colleagues' work to develop and evaluate a practice-based learning and improvement tool explored the validity of the tool, providing information about learner progress and curriculum quality. (p. 41–48)

Pilot Study Evaluating a Practice-Based Learning and Improvement Curriculum Focusing on the Development of System-Level Quality Improvement Skills

Tomolo and colleagues' test of a practice-based learning and improvement (PBLI) curriculum found that gains in application skills lag behind knowledge gains, suggesting a need to integrate PBLI training in clinical education throughout the program. (p. 49–58)

Numerical Versus Pass/Fail Scoring on the USMLE: What Do Medical Students and Residents Want and Why?
An analysis of numeric versus pass/fail scoring of the US Medical Licensing Exam by Lewis et al highlights the importance of the secondary use of the exam in residency selection and in learners' assessment and improvement of their medical knowledge. (p. 59–66)

Feasibility of an Internet-Based Global Ranking Instrument
Mudumbai and colleagues show that an Internet-based rating tool using a global ranking can be used efficiently to identify poorly performing residents for further evaluation and remediation. (p. 67–74)

Practical Articles

A Multidisciplinary Approach for Teaching Systems-Based Practice to Internal Medicine Residents
Nabors and colleagues find that a multidisciplinary approach for teaching systems-based practice improves resident education practice and suggests areas for further enhancements. (p. 75–80)

Pediatric Intensive Care Simulation Course: A New Paradigm in Teaching
Tofil et al find simulation-based training in the pediatric intensive care unit improves residents' comfort level with managing cardiac arrests/codes but has no effect on their actual performance or perceived abilities. (p. 81–87)

A Multirater Instrument for the Assessment of Simulated Pediatric Crises
Calhoun and colleagues report on a multirater tool for simulation training in pediatric crises. Problematic areas include the assessment of professionalism and self-overappraisal by some residents. (p. 88–94)

Initial Experiences in Embedding Core Competency Education in Entry-Level Surgery Residents Through a Nonclinical Rotation
Kahol et al describe a systems-based practice rotation for surgical residents as an engaging way to teach residents the value of different elements of the health care system. (p. 95–99)

Morbidity and Mortality Conference in Obstetrics and Gynecology: A Tool for Addressing the 6 Core Competencies
Bevis et al report that obstetrics-gynecology resident participation in morbidity and mortality conferences addresses the 6 competencies through engagement and directed analysis of diverse cases. (p. 100–103)

The Surgical Learning and Instructional Portfolio: What Residents at a Single Institution Are Learning
Webb and colleagues report differences in the learning patterns of junior and senior surgical residents, with senior residents focusing predominantly on the management of complications. (p. 104–108)

On Teaching and Learning

Confessions of a Superhero Junkie
A new section expands the range of *JGME* to include commentaries on thoughts, values, and perceptions from learners, teachers, and others present in the educational setting. (p. 109–110)

ACGME News and Views

The Impact of ACGME Work-Hour Reforms on the Operative Experience of Fellows in Surgical Subspecialty Programs
An ACGME analysis by Simien and colleagues finds that the 2003 duty-hour reforms did not have a negative effect on the operative experience of surgical subspecialty fellows and may have slightly benefited some specialties. (p. 111–117)