

IN THIS ISSUE!

We are excited to showcase these articles that reflect the wide range of topics in the latest issue of the Canadian Medical Education Journal.

Scientific Reports

[Where is the lifestyle medicine in the Canadian undergraduate medical education curricula? A content analysis](#) by Vaz and co-authors examined which lifestyle medicine topics are included in Canadian medical school curricula. Their analysis highlights uneven coverage across schools, with nutrition, physical activity, and mental health commonly represented, while sleep and social connection remain less visible.

[Bespoke to the patient: a qualitative study on learning to manage multimorbidity in family medicine](#) by Kelly and co-authors explored how family medicine residents learn to care for patients with multiple chronic conditions. They found that residents developed a patient-centred, flexible approach and generalist skills through diverse clinical experiences.

[Assessment burden by design: exploring the variability in competence by design assessment forms](#) by Ismaeel and co-authors compared Entrustable Professional Activity assessment forms used in emergency medicine programs across Canada. The study identifies inconsistent form design and added rating scales that may increase assessment burden in Competence by Design.

Reviews, Theoretical Papers, and Meta-Analyses

[Measuring medical student wellbeing longitudinally: a psychometric systematic review of commonly used scales](#) by Li et al. found that many commonly used wellbeing scales lack medical-student-specific evidence, and that most existing studies focus only on internal consistency or construct validity, highlighting the need for more robust and diverse psychometric research.

You Should Try This!

Linkiewicz et al.'s article, [Addressing clinical encounter variability in family medicine clerkships](#), presents a practical approach to improving medical trainees' clinical reasoning and decision-making through selected clinical scenarios, key feature questions, and team-based learning to provide more consistent clinical experience.

[Using telesimulation to introduce a rural virtual support program to family medicine residents](#) by MacLeod and Scheuermeyer uses interactive video simulation to help rural family medicine residents prepare to manage critically ill patients, offering a cost- and time-efficient training model that may also support interest in rural practice.

[A learner-led conference to enhance interdisciplinary social accountability education in healthcare: participant perspectives on engagement and educational experience](#) by Chopra and co-authors described a student-led, interdisciplinary conference designed to teach social accountability in healthcare as a model for other institutions to equip students

with advocacy, collaboration, and community-focused skills.

Works-in-Progress

[How do academic institutions assess and demonstrate their social mission? A scoping review protocol](#) by Oubouchou et al. outlines a scoping review protocol that aims to identify and analyze literature on strategies, indicators, and outcomes used by health professions education programs to evaluate their social accountability mandate.

Commentary and Opinions

[Rethinking Social accountability in Health](#) is a French commentary by Farhat and Maherzi that argues social accountability in health education must evolve to respond to contemporary health, social, environmental, and technological challenges.

Conferences

This issue also features conference abstracts from the [10^e Forum international francophone de pédagogie des sciences de la santé](#).

Enjoy!