

Mapping Information Literacy to the Medical Curriculum

Ella Hu, PhD, MLS¹, David Stewart, MLIS²

^{1,2} Assistant Professor, Medical Library, Department of Foundational Medical Studies, Oakland University William Beaumont School of Medicine

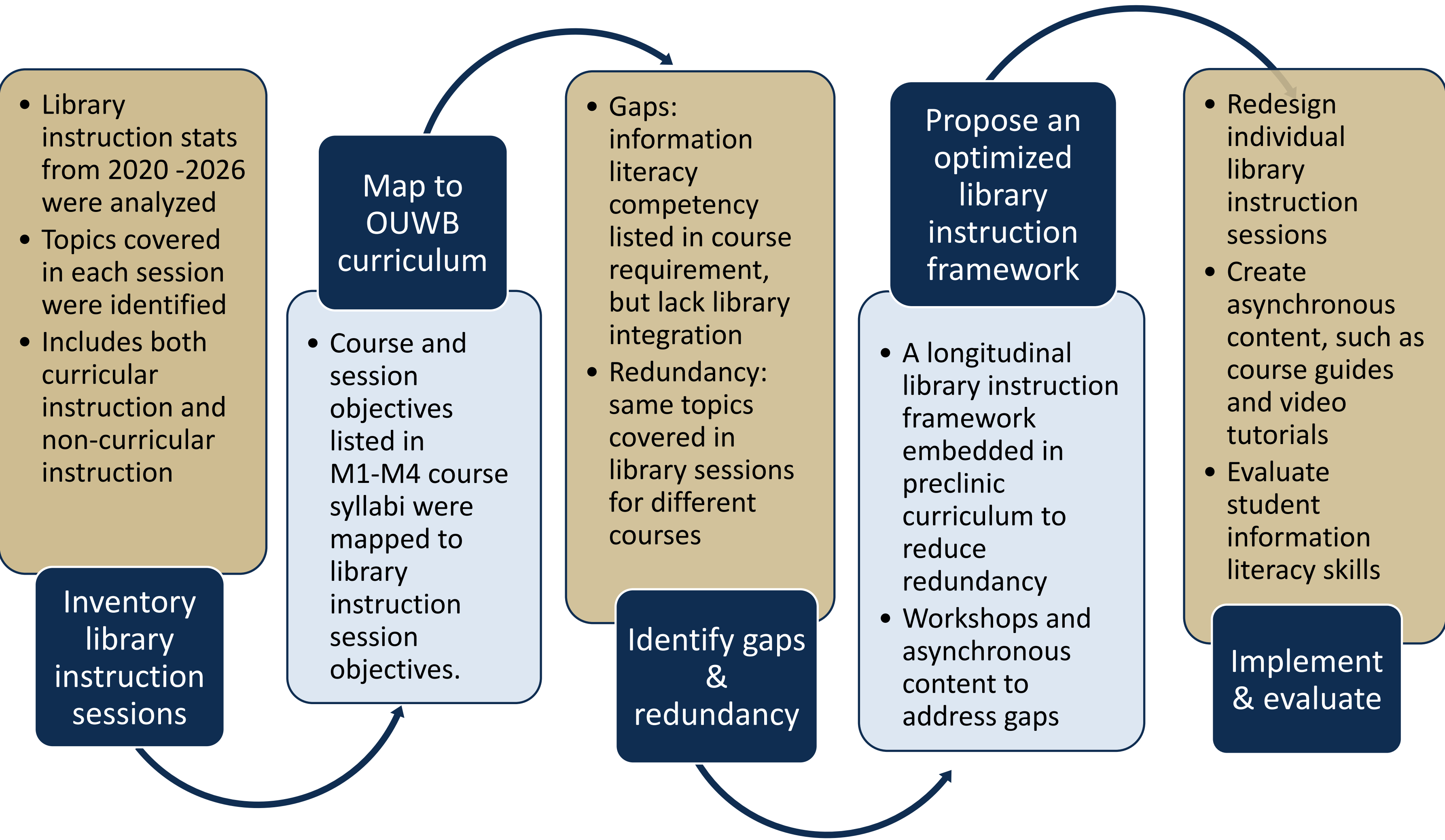
Introduction

Medical school accreditation by the Liaison Committee on Medical Education (LCME) requires library staff to be responsive to educational needs¹. Despite a move toward integrated learning, library instruction is often limited to single sessions early in the curriculum¹. Curriculum mapping addresses this by providing a systematic analysis of program courses to visualize teaching priorities and the student experience². This strategic tool enables librarians to shift from reactive service to proactive engagement, finding high-impact courses through syllabus analysis². Furthermore, aligning the ACRL Framework with medical education standards, such as AAMC Core EPAs and ACGME requirements, is essential for identifying instructional gaps and redundancies³. These mapping strategies ensure that critical information literacy skills are scaffolded throughout the curriculum, enhancing long-term student success.²

Aims and Objectives

- Identifies instructional redundancies.
- Addresses critical gaps in information literacy training.
- Transform isolated medical library workshops into a scaffolded, longitudinal thread integrated within the OUWB curriculum.

Approach/Process



Evaluation Plan

- Comparing the original framework against the revised, curriculum-aligned structure.
- Tracking usage statistics for asynchronous materials pre- and post-revision.
- Conducting student surveys to measure the impact on learning experiences and information literacy proficiency.

Expected Results

- An optimized, progressive learning experience that evolves with the students' medical training.
- Addressing information literacy gaps and library instruction repetition.
- Providing information literacy support at the point of need.

Discussion

Challenges:

- Course syllabi are variable and could change/evolve year to year, which can make it difficult to pinpoint how much research is required.
- Change of course directorship may impact embedded library instructions.

Future directions:

- Establish a core set of library instruction offerings according to AAMC Core EPAs and ACGME requirements.
- Create standalone ready-to-use asynchronous content, such as enhanced course guides, tutorials, short videos, for both course directors and students.
- Adapt and respond to teaching and learning needs proactively.

References

1. Nevius AM, Ettien A, Link AP, Sobel LY. Library instruction in medical education: a survey of current practices in the United States and Canada. *J Med Libr Assoc.* Jan 2018;106(1):98–107. doi:10.5195/jmla.2018.374
2. Herzberg M. From Syllabi to Strategy: Leveraging Curriculum Mapping for Instructional Outreach. *Journal of New Librarianship.* 12/09 2025;10:68–93. doi:10.33011/newlibs/19/8
3. Brennan EA, Ogawa RS, Thormodson K, von Isenburg M. Introducing a health information literacy competencies map: connecting the Association of American Medical Colleges Core Entrustable Professional Activities and Accreditation Council for Graduate Medical Education Common Program Requirements to the Association of College & Research Libraries Framework. *J Med Libr Assoc.* Jul 1 2020;108(3):420–427. doi:10.5195/jmla.2020.645