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Purpose: Race is related to health disparities, not to genetic predispositions, but race is often presented to medical students as a biological variable. At Sidney Kimmel Medical College, the curriculum has never been reviewed to analyze how race is presented to students. This Scholarly Inquiry project aims to analyze how the case-based learning (CBL) narratives presented to medical students perpetuate or challenge implicit biases in medicine, especially in regard to race. This paper will describe the methods of the project, which can serve as a model for other institutions to review their own curricula.

Methods: Thirty-nine CBL cases from the 2018-2019 SKMC curriculum are being coded using the iterative process of directed content analysis. One of the two coders is a white medical student who has seen all of the cases in the classroom setting, and the other is a black doctoral student and adjunct faculty member in the College of Population Health who has never seen the cases before. The cases were imported into the qualitative analysis program NVivo, and each coder conducted line-by-line open-coding of seven different cases. From those cases, the coders developed a code book which includes definitions and examples of each code. Updates were made to the code book as more cases were coded and new topics emerged, and discrepancies were

resolved by consensus. Using the final code book, all cases are now in the process of being double-coded (i.e. coded by each coder independently).

Results and Conclusions: The coders aim to complete double-coding by the end of January 2020. At that point, the kappa value will be calculated to assess inter-coder reliability and codes will be organized into themes to write a results section. Already, we have noted the value of having at least one "case-naïve" coder and coders of different racial backgrounds, as many nuances of the cases were overlooked by the non-minority coder.