We noted that different first year residents were coming with different levels of baseline knowledge. Our pediatric clerkship has standardized cases, which go over the “bread and butter” pediatric illnesses and conditions (anemia, wheezing, hematuria/proteinuria, seizures, murmurs, fevers, fluids and electrolytes, abdominal pain, limp, and vaccines). This year, we started our didactic series with these cases. Residents of all levels had cases as homework, and then went through the cases with faculty in each specialty represented during protected didactic session. The residents all felt that they learned something, regardless of level. Starting with these base cases as the first introduction to pediatrics allowed for all residents to start with the same information. We noted that we had to spend less time at the beginning of each block of rotations going over these basic illnesses and could spend more time on other topics. It was innovative at our institution because we had never done case based conferences prior, and had never had a way to truly assess what baseline understanding residents had starting the year. It allowed us to not only start each first year off with a good head start, but also allowed our second and third years to solidify previous knowledge and share experience with the first years. It was different than our typical introduction lecture series because the responsibility was on the residents to look up the answers to the questions and truly delve into the conditions rather than just having information given to them.