Family Medicine Clerkship
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Instructors

Education Director

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Clerkship Directors

<table>
<thead>
<tr>
<th>Campus</th>
<th>Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fort Pierce</td>
<td>Dr. Nancy Baker</td>
</tr>
<tr>
<td>Daytona</td>
<td>Dr. George Bernardo</td>
</tr>
<tr>
<td>Orlando</td>
<td>Dr. Douglas Meuser</td>
</tr>
<tr>
<td>Pensacola</td>
<td>Dr. Hillary Hultstrand</td>
</tr>
<tr>
<td>Sarasota</td>
<td>Dr. Nicole Bentze</td>
</tr>
<tr>
<td>Tallahassee</td>
<td>Dr. Julia Weeks</td>
</tr>
<tr>
<td>Thomasville</td>
<td>Dr. Calvin Reams (Administrator)</td>
</tr>
<tr>
<td>Marianna</td>
<td>Dr. Steven Spence (Administrator)</td>
</tr>
</tbody>
</table>
Course Overview

Description

The Family Medicine Clerkship is a structured community-based experience in Family Medicine. Students will be exposed primarily to ambulatory care during this Clerkship, and will provide clinical care to patients under the direct supervision of a practicing Family Physician designated as Clerkship Faculty. Students will have an opportunity to care for patients of all ages with a broad range of conditions commonly seen in the outpatient setting, with an emphasis on prevention and care of the patient in the context of family and community. Students will participate in the Clerkship in either a 6-week block or through the Longitudinal Integrated Curriculum.

Course Components

Assignment #1: Personal Educational Goals

The purpose of this assignment is to enhance the ability to recognize one’s own learning needs through self-assessment and develop a strategy to meet those learning goals.

Students will choose THREE educational goals specific to their own learning needs as a 3rd year medical student. These goals should be appropriate for the specific learning environment and can be achieved in a 6-week Clerkship. Student must share their personal goals with assigned Clinical Faculty and Clerkship Director during the first few days of the clerkship; this is due Saturday at the end of the first week. The student will create a strategy for self-improvement with appropriate resources and a plan that includes specific targets by which they can assess progress, and then track advancement of skill, knowledge or behavior throughout the rotation. Students are encouraged to seek and incorporate feedback from Clinical Faculty and Clerkship Director.

Evaluation of this assignment will be done by the Education Director and will be included in the final grade for the clerkship. Assignment will be included in the consideration of final grade for the Clerkship; students must submit an exemplary report to be considered for honors for the Clerkship. If educational goal is returned for revision, a student is no longer eligible for honors, and will be assigned an initial grade of “IR” until remediation has been completed. Specific instructions, grading rubric and examples of exemplary student work are available on Blackboard.

The evaluation of the assignment will be evaluated based on the following:

1. Was the goal specific and achievable?
2. Did the student develop a thoughtful strategy to address educational goal?
   a. Were there measurable targets?
   b. Were resources/references identified?
3. Was the student insightful in his/her reflection of the process?
4. Did the student identify what was learned and what was left to learn (or next step)?
Submission:

1. Submit a final summative report on self-identified goals, strategies and progress as an **MS-WORD document** to Blackboard **and to the Student Academics portal**. Other formats will not be evaluated and you risk not receiving credit for your project.

2. Assignment is **due at or before 5 p.m. on the last day of the Clerkship**.

3. If Blackboard is not available, send project via email to the Education Director. The student is still required to upload to Blackboard when the system is available, and assignments will not be accepted for credit until this has been accomplished. The version that is sent to the Education Director must be the same version that is submitted to Blackboard, and must be sent by 5 p.m. on the last day of the Clerkship.

**Assignment #2: Systems Project**

The purpose of this assignment is to highlight the systems of patient care and how they can impact access to care, financial burden, adherence and coordination of care. The student may choose one of two options for this project. Option #1 is the Referral Project, which is designed to demonstrate the inter-professional teamwork and collaboration between physicians in the care of the patient and to emphasize the potential for system errors when care is not delivered continuously. Option #2 is the Cost of Chronic Care Project, which is designed to highlight the financial impact to patients based on our management recommendations and to demonstrate the importance of evidence-based guidelines into the clinical care of patients as related to medical management of a chronic condition. Students are encouraged to involve Clerkship Faculty in the process, and to seek direction and feedback from Clerkship Director.

Evaluation of this assignment will be done by the Education Director and will be included in the final grade for the Clerkship. Assignment will be included in the consideration of final grade for the Clerkship; students must submit an exemplary project to be considered for honors for the Clerkship. If project is returned for revision, a student is no longer eligible for honors, and will be assigned an initial grade of “IR” until remediation has been completed. Specific instructions, grading rubric and examples of exemplary student work are available on Blackboard.

Submission of Systems Project:

1. Submit all components as **one MS-WORD document** to Blackboard **and to the Student Academics portal**. Other formats will not be evaluated and you risk not receiving credit for your project.

2. Assignment is **due at or before 5 p.m. on the last day of the Clerkship**.

3. If Blackboard is not available, send project via email to the Education Director. The student is still required to upload to Blackboard when the system is available, and assignments will not be accepted for credit until this has been accomplished. The version that is sent to the Education Director must be the same version that is submitted to Blackboard, and must be sent by 5 p.m. on the last day of the Clerkship.

**Option 1: Referral Project**

The student will learn more about the process of referring a patient to another healthcare provider and the consultation that ensues as a result of the referral process. The system for referral and consultation allows for
additional expertise but requires special attention to communication if the services are to benefit the patient. With the guidance of Clerkship Faculty, the student must identify a patient who will benefit from a referral to another physician for consultation regarding a medical condition. The student will participate in the initial evaluation, write a SOAP note, accompany the patient to the consultation and then write a 500-1000 word reflective essay about the experience. This should discuss the challenges associated with arranging the appointment, communication issues with the patient and between physicians. Include your own lessons-learned in the process of caring for this patient and his/her family. All identifying information must be redacted in compliance with HIPPA.

As a result of this activity, the student will 1) demonstrate an understanding of and respect for the role of the primary care physician in working with a consulting physician to benefit a patient; 2) demonstrate an understanding of and respect for the role of the consulting physician when collaborating in the care of a patient; 3) advocate for and assist a patient in coordinating care within a complex healthcare system; 4) describe how system flaws can contribute to medical errors.

Evaluation will be based on the following:

1. Demonstration of the ability to accurately document a patient’s initial evaluation through the SOAP Note that is worthy of inclusion in the patient’s medical record. Student will be evaluated on the following components: organization, inclusion of pertinent details, appropriate differential diagnosis and initial treatment plan that includes specific expectations for what the consultant will address (confirm suspected diagnosis, suggest alternative diagnosis, suggest plan of evaluation or treatment, perform specific procedure, temporarily manage particular problem, assume care of a particular problem).

2. Demonstrate insight through reflective writing regarding specific challenges faced by the patient and his/her family regarding the referral or care of the medical problem, communication issues, systems errors that could adversely affect patient care and lessons-learned by the student regarding the process of referral and consultation and continuity of care for the patient.

Option 2: Cost of Chronic Care Project

The student will learn more about patient costs for a chronic health conditions, including medications, disease monitoring and management, medical insurance and lost time from work or school. The student will explore how the cost of chronic care impacts a patient, evidence-based guidelines have been applied to management and system complexities (such as those with little to no medical insurance or access to care) may play a significant part in the choices a patient makes in prioritizing needs. Physician attention to the details can greatly contribute to “adherence” to chronic disease management plans. With the guidance of Clerkship Faculty, the student must identify a patient who will agree to a longer appointment to discuss the costs associated with their chronic conditions. The student will participate in the initial evaluation, write a SOAP note worthy of inclusion in the patient’s medical record, create a worksheet outlining one-time and recurring costs associated with medical care of chronic conditions and then write a 500-1000 word essay in which the student compares the patient’s management with evidence-based guidelines. The essay must also include a reflective component that includes patient’s challenges associated with arranging appointment, communication issues with the patient and between
providers as well as lessons-learned as a result of this assignment. All identifying information must be redacted in compliance with HIPPA.

As a result of this activity, the student will 1) demonstrate knowledge of the costs associated with healthcare delivery, with particular attention to healthcare providers, hospitals, home health agencies and medications; 2) demonstrate knowledge of how medical insurance can influence decisions regarding utilization of healthcare resources; 3) demonstrate knowledge of the additional costs associated with chronic illness such as lost time from work or school, cost of additional child or adult daycare and transportation; 4) advocate for the patient in coordinating cost-effective evidence-based medicine.

Evaluation will be based on the following:

1. Demonstration of the ability to accurately document a patient’s initial evaluation through the SOAP Note. Student will be evaluated on the following components: organization, inclusion of pertinent details, appropriate differential diagnosis and initial treatment plan.

2. Demonstration of the ability to accurately consider multiple components in calculating cost of medical care for a patient with one or more chronic conditions. Student will include information about cost for medications and comparison with generic equivalents, laboratory and other diagnostic testing, supplies for home-monitoring and improved functional ability, availability of employer-paid sick leave, additional costs for child care or adult day care due to appointments or hospitalization, team management such as diabetes education or physical therapy, physician visits, medical insurance and hospitalizations. Student will calculate annualized costs for care management and associated financial burdens.

3. Demonstration of insight through reflective writing regarding specific challenges faced by the patient and his/her family regarding financial burden for medical management, adherence or challenges with evidence-based guidelines and lessons-learned by the student regarding the cost of healthcare for the patient.

Pharmacy Field Trip

Students will participate in field trip to a local pharmacy during the Family Medicine Clerkship. As a result of this educational activity, the student will 1) recognize the frequent use of over-the-counter medications, supplements and other products by patients; 2) compare the numerous formulations and options patients are confronted with in choosing an OTC product; 3) apply knowledge gained to specific patient conditions.

Patient Care

Students will participate in ambulatory care during this clerkship, with an emphasis on prevention of illness and caring for the patient in the context of family and community. Students are encouraged to participate in the care of hospitalized patients and office-based procedures when possible. Management expectations include: a) gathering appropriate histories and performing the appropriate physical examinations; b) formulating preliminary diagnostic impressions including differential diagnosis; c) creating diagnostic and therapeutic care plans; d) performing appropriate health screenings; and, e) writing/documenting SOAP notes.
**Patient Log**

Students will record a minimum of 100 patient encounters during the 6-week Clerkship. Students are expected to have at least 80% of patient encounters at the “moderate” or “full” level of care. Students are expected to record all clinical conditions, procedures and healthcare screenings that were part of patient encounters. Students are required to record all clinical conditions and healthcare screenings listed in the table below. Patient encounter data will be collected through the E*Value system and must be complete by 5:00 p.m. on the last day of the Clerkship. **Failure to record required patient care** will make a student ineligible for consideration for honors for the clerkship, and may result in a grade of “IR” requiring additional time on the clerkship, or failure.

<table>
<thead>
<tr>
<th>Required Clinical Conditions (30)</th>
<th>Required Healthcare Screenings (20)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abdominal Pain</td>
<td>Abdominal Aortic Aneurysm</td>
</tr>
<tr>
<td>Abnormal Vaginal Bleeding</td>
<td>Alcohol Misuse</td>
</tr>
<tr>
<td>Allergic Condition (any type, not drug allergies)</td>
<td>Breast Cancer</td>
</tr>
<tr>
<td>Anxiety Disorder</td>
<td>Cervical Cancer</td>
</tr>
<tr>
<td>Arthritis (any type)</td>
<td>Colorectal Cancer</td>
</tr>
<tr>
<td>Asthma</td>
<td>Dental Caries Prevention</td>
</tr>
<tr>
<td>Atherosclerotic Disease (any type)</td>
<td>Depression</td>
</tr>
<tr>
<td>Cancer (any type)</td>
<td>Diabetes Mellitus</td>
</tr>
<tr>
<td>Chronic Kidney Disease</td>
<td>Fall Risk</td>
</tr>
<tr>
<td>Chronic Obstructive Pulmonary Disease</td>
<td>Folic Acid Supplementation</td>
</tr>
<tr>
<td>Dementia</td>
<td>Immunizations</td>
</tr>
<tr>
<td>Depression</td>
<td>Intimate Partner Violence</td>
</tr>
<tr>
<td>Diabetes Mellitus</td>
<td>High Blood Pressure</td>
</tr>
<tr>
<td>Dizziness</td>
<td>Lipid Disorders</td>
</tr>
<tr>
<td>Dyslipidemia</td>
<td>Lung Cancer</td>
</tr>
<tr>
<td>Gastroesophageal Reflux Disease</td>
<td>Obesity</td>
</tr>
<tr>
<td>Headache</td>
<td>Osteoporosis</td>
</tr>
<tr>
<td>Heart Failure</td>
<td>Sexually Transmitted Infection</td>
</tr>
<tr>
<td>Hypertension</td>
<td>Skin Cancer</td>
</tr>
<tr>
<td>Joint Pain or Injury (other than back pain)</td>
<td>Tobacco Use</td>
</tr>
<tr>
<td>Chronic Back Pain</td>
<td></td>
</tr>
<tr>
<td>Obesity</td>
<td></td>
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<tr>
<td>Skin Lesion (benign or malignant)</td>
<td></td>
</tr>
<tr>
<td>Skin Rash or Infection</td>
<td></td>
</tr>
<tr>
<td>Substance Use Disorder</td>
<td></td>
</tr>
<tr>
<td>Thyroid Disorder</td>
<td></td>
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<tr>
<td>Tobacco Use Disorder</td>
<td></td>
</tr>
<tr>
<td>Upper Respiratory Infection</td>
<td></td>
</tr>
<tr>
<td>Urinary Tract Infection</td>
<td></td>
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<tr>
<td>Vaginal Discharge</td>
<td></td>
</tr>
</tbody>
</table>

**fmCASES and Readings**

The required content for the clerkship is fmCASES, the Family Medicine Computer-Assisted Simulations for Educating Students. This is a virtual patient program and will be incorporated into the clerkship through required cases that encompass the Society of Teachers of Family Medicine national FM clerkship curriculum. This is primarily self-directed and will help build clinical problem-solving skills through independent study, although material and questions will sometimes provide a basis for a clinical discussion during weekly clerkship rounds.
There are 40 cases on a variety of topics, and each takes approximately 30-60 minutes to complete. Students in the Block Clerkship are required to complete all cases in the first 4 weeks of the clerkship (10 cases per week for 4 weeks) to allow for dedicated study time and test prep during the latter part of the clerkship. Students in the Longitudinal Clerkship are required to complete all cases during the first half of the academic year to allow for dedicated study time and test prep after the winter break. They can be accessed at the MedU website http://www.med-u.org/fmcases; each student will have access through FSU COM email account.

Students are also expected to locate and read pertinent journal articles and guidelines that assist in the evaluation and management of patients. Suggested readings are available on Blackboard.

Meetings and Educational Sessions

Students will participate in required weekly educational meetings conducted by the Clerkship Director. For students on away rotations, this will be arranged through videoconference or teleconference. These meetings will include feedback on oral patient presentations and clinical topic discussions, some of which will be based on fmCASES. Clerkship Directors will also provide review patient encounter log and progress on educational goals.

Orientation and end-of-clerkship debriefing are a part of the regularly-scheduled weekly meetings. A mid-clerkship formative evaluation will be completed by the Clerkship Director based on input from Clerkship Faculty.

Each student will be observed at least once by the Clerkship Director (or designate for away rotations) during the Clerkship during clinical care of patients. This purpose of this direct observation is to evaluate the data-gathering skills, clinical reasoning and oral presentations. Following observation of clinical care, the student will be provided with formative feedback. When concerns about student performances are noted by the Clerkship Director or Clerkship Faculty, additional student observations will be completed.

Evaluations

Students will complete a self-assessment of clinical and academic performance by the fifth week of the clerkship. An evaluation of student clinical performance will be completed by the Clerkship Faculty at the end of the clerkship. A final summative report will be completed by the Clerkship Director at the end of the clerkship. The Education Director will collate all grading components, including assignments and completion of fmCASES, to be considered in the final grade after the Clerkship is complete.

Exam

Students will take a web-based NBME examination in Family Medicine at the end of the clerkship. This will include the core 80-question exam with an additional module on chronic care. A practice exam is available through fmCASES (online format only).

Scheduled Hours

The Family Medicine Clerkship is six weeks in duration and will consist primarily of ambulatory care. There is no requirement for inpatient care, on-call shifts or long-term care, although students are encouraged to participate in
those clinical activities when available. Students will work at least 4 full days per week with assigned Clerkship Faculty, as one day per week is allotted for participation in Doctoring 3 and the Longitudinal Experience Clerkship.

Students will adhere to the ACGME rules regarding the workweek, which include working no more than 80 hours per week, no more than 24 hours continuously, except an additional 6 hours may be added to the 24 to perform wrap-up duties, and have at least one of every 7 days completely off from educational activities.

Similar to other required clerkships, **extended absences from the clerkship are not permitted.** Any absence from the clerkship must be pre-approved by the regional campus dean prior to the beginning of the clerkship. Even with an excused absence, the student will complete the scheduled work as outlined above. The Clerkship Director and Education Director must be notified of any absence in advance. Unapproved absences during the clerkship will result in a grade of “incomplete” until remediated, and may result in a grade of “fail” for the clerkship.
<table>
<thead>
<tr>
<th>Domain</th>
<th>Entrustable Professional Activity</th>
<th>Competency</th>
<th>Assessment</th>
</tr>
</thead>
</table>
| Patient Care            | EPA 1: Gather a history and perform a physical examination | Obtain accurate and complete information through the patient interview for a patient presenting with an acute medical condition or chronic medical condition. | • Direct observation by Clerkship Faculty  
• Summative evaluation at end of clerkship |
|                         | EPA 1: Gather a history and perform a physical examination | Perform a targeted physical examination when evaluating a patient presenting with an acute medical condition or chronic medical condition. | • Direct observation by Clerkship Faculty  
• Summative evaluation at end of clerkship |
|                         | EPA 2: Prioritize a differential diagnosis following a clinical encounter | Perform accurate clinical assessments that include appropriate differential diagnoses in the outpatient setting. | • Direct observation by Clerkship Faculty  
• Mid-clerkship feedback  
• Summative evaluation at end of clerkship |
|                         | EPA 1: Gather a history and perform a physical examination | Recognize pertinent normal and abnormal examination findings. | • Direct observation by Clerkship Faculty and Clerkship Director  
• Summative evaluation at end of clerkship |
|                         | EPA 3: Recommend and interpret common diagnostic and screening tests | Develop appropriate plans for diagnostic evaluation and treatment for patients with one or multiple problems, in the outpatient setting. | • Direct observation by Clerkship Faculty and Clerkship Director  
• Summative evaluation at end of clerkship |
|                         | EPA 13: Identify system failures and contribute to a culture of safety and improvement | Evaluate the health literacy by assessing patient’s comprehension of written material, verbal instructions and understanding of health information. | • Direct observation by Clerkship Faculty |
| Medical Knowledge       | EPA 13: Identify system failures and contribute to a culture of safety and improvement | Perform detailed review of patients’ medications that included indication, treatment targets interactions with other medications, contraindications and potential adverse events. | • Direct observation by Clerkship Faculty and discussion with Clerkship Director  
• Summative evaluation at end of clerkship |
### Interpersonal and Communication Skills

<table>
<thead>
<tr>
<th>Description</th>
<th>Evaluation Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>Describe the indications, risks and benefits of diagnostic testing and treatment options.</td>
<td>• Direct observation by Clerkship Faculty and discussion with Clerkship Director</td>
</tr>
<tr>
<td>Assess patient’s understanding of medical condition and address the most pressing educational needs of the patient and their families with regard to plan of care.</td>
<td>• Direct observation by Clerkship Faculty</td>
</tr>
<tr>
<td>• Summative evaluation at end of clerkship</td>
<td>• Systems Project</td>
</tr>
<tr>
<td>Demonstrate cultural competency in interactions with patients from diverse backgrounds and recognize own personal bias/prejudice when interacting with patients.</td>
<td>• Direct observation by Clerkship Faculty</td>
</tr>
<tr>
<td>Communicate diagnostic information and care plan to patients with empathy and sensitivity.</td>
<td>• Direct observation by Clerkship Faculty</td>
</tr>
<tr>
<td>Use motivational interviewing techniques to communicate the health consequences of an identified behavior with empathy and sensitivity, and then discuss intervention options to develop a plan of care.</td>
<td>• Direct observation by Clerkship Faculty or Clerkship Director</td>
</tr>
<tr>
<td>Respond with empathy and sensitivity to patients with challenging behaviors.</td>
<td>• Direct observation by Clerkship Faculty</td>
</tr>
<tr>
<td>Create appropriate documentation worthy of inclusion in the patient’s medical record for acute medical problem, chronic medical condition follow-up, preventive care, office procedure and a patient with multiple medical problems.</td>
<td>• Direct observation by Clerkship Faculty and Clerkship Director</td>
</tr>
<tr>
<td>EPA 6: Provide an oral presentation of a clinical encounter</td>
<td>• Direct observation by Clerkship Faculty and Clerkship Director</td>
</tr>
<tr>
<td>Communicate diagnostic information and clinical reasoning to healthcare team with suggested intervention and plan of care through effective oral presentation.</td>
<td>• Summative evaluation at end of clerkship.</td>
</tr>
</tbody>
</table>
| Professionalism | Identify personal learning needs and choose three goals for improvement during the clerkship, and then develop a strategy to address each personal educational goal that includes specific targets by which to measure progress. | • Educational goals assignment  
• Direct observation by Clerkship Faculty  
• Discussion with and observation by Clerkship Director  
• Mid-clerkship feedback |
|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                 | Demonstrate motivation to learn and ability to incorporate feedback into clinical performance.                                                                                                                                                                                                                                           | • Direct observation by Clerkship Faculty and Clerkship Director  
• Mid-clerkship feedback and communication with clerkship director |
| EPA 9: Collaborate as a member of an interprofessional team | Demonstrate respect for the contributions of all healthcare providers (physicians, nurse practitioners, physician assistants, nurses, social workers, other staff, etc.) involved in the care of a patient.                                                                                                                                               | • Direct observation by Clerkship Faculty and Clerkship Director  
• Summative evaluation at end of clerkship |
| Practice-Based Learning and Improvement | EPA 7: Form clinical questions and retrieve evidence to advance patient care | Access and apply clinical information from evidence-based electronic resources during a patient encounter.                                                                                                                                                                                                                      | • Direct observation by Clerkship Faculty and Clerkship Director  
• Summative evaluation at end of clerkship |
| EPA 7: Form clinical questions and retrieve evidence to advance patient care | Apply current recommendations for United States Preventive Services Task Force during patient encounters.                                                                                                                                                                                                                       | • Direct observation by Clerkship Faculty and Clerkship Director  
• Patient Log |
| Systems-Based Practice | EPA 13: Identify system failures and contribute to a culture of safety and improvement | Evaluate the care of a patient and impact on illness as it extends outside of the primary care physician’s office.                                                                                                                                                                                                 | • Systems Project  
• Discussions with Clerkship Faculty and Clerkship Director |
| EPA 9: Collaborate as a member of an interprofessional team | Work effectively with other healthcare providers, social workers, community agencies, nurses and other healthcare professionals.                                                                                                                                                                                                 | • Direct observation by Clerkship Faculty  
• Summative evaluation at end of clerkship |
Policies

**Americans with Disabilities Act**

Candidates for the M.D. degree must be able to fully and promptly perform the essential functions in each of the following categories: Observation, Communication, Motor, Intellectual, and Behavioral/Social. However, it is recognized that degrees of ability vary widely between individuals. Individuals are encouraged to discuss their disabilities with the College of Medicine’s Director of Student Counseling Services and the FSU Student Disability Resource Center to determine whether they might be eligible to receive accommodations needed in order to train and function effectively as a physician. The Florida State University College of Medicine is committed to enabling its students by any reasonable means or accommodations to complete the course of study leading to the medical degree.

*The Office of Student Counseling Services*
Medical Science Research Building G146
Phone: (850) 645-8256
Fax: (850) 645-9452

This syllabus and other class materials are available in alternative format upon request. For more information about services available to FSU students with disabilities, contact the:

*Student Disability Resource Center*
874 Traditions Way
108 Student Services Building
Florida State University
Tallahassee, FL 32306-4167
Voice: (850) 644-9566
TDD: (850) 644-8504
sdrc@admin.fsu.edu

**Academic Honor Code**

The Florida State University Academic Honor Policy outlines the University’s expectations for the integrity of students’ academic work, the procedures for resolving alleged violations of those expectations, and the rights and responsibilities of students and faculty members throughout the process. (Florida State University Academic Honor Policy)

**Attendance Policy**

The College of Medicine has detailed attendance policies as they relate to each cohort and events that conflict with course schedules See [FSUCOM Student Handbook](#) for details of attendance policy, notice of absences and remediation.

**Library Policy**

The [COM Maguire Medical Library](#) is primarily a digital library that is available 24/7 through secure Internet access. Library resources that support this course are available under “Subject Guides” found under Resources by Subject on the library website. In addition, many of the point-of-care resources are
available for full download to mobile data devices. Upon student request, items not found in the library collection may be borrowed through interlibrary loan.

Required Materials

Resource Needs

All of the physical resources necessary for this course are either in place or currently being recruited. Affiliation agreements with each of the participating hospitals and residency programs are in place, and new affiliations are occurring all the time. Student learning areas complete with computers, textbooks and internet access are available at each regional campus site and at the Rural Training Sites in Marianna and Immokalee. Taken together, these resources – people, equipment, materials, and services – are adequate to provide an excellent educational experience for students.

Required Readings

The required content for the clerkship is fmCASES – Family Medicine Computer-Assisted Simulations for Educating Students. This is a virtual patient program and will be incorporated into the clerkship through required cases that encompass the Society of Teachers of Family Medicine national FM Clerkship Curriculum. These cases are self-directed and will help build clinical problem-solving skills through independent study. They can be accessed at the MedU website: http://www.med-u.org/fmcases.

Students are also expected to locate and read pertinent journal articles and guidelines that assist in the evaluation and management of patients or their personal educational needs. Suggested readings associated with required content available on Blackboard.

Grading

The standardized clerkship policy can be found on the Office of Medical Education website.

Longitudinal Integrated Curriculum (LIC)

General information and policy regarding the Longitudinal Integrated Curriculum (LIC) in Marianna can be found on the syllabi page of the Office of Medical Education website. The Family Medicine Clerkship Blackboard site also has a content area with specific dates and deadlines for the Family Medicine clerkship that will be presented over the course of the entire year, with multiple evaluations and formative assessment periods.