

## WHAT IS THE RURAL TRACK?

One reason that Crestview physician/legislator Durell Peaden looked up Florida State University's president in the late 1990s to lobby for a four-year medical school here was that he saw far too few primary-care physicians in small Panhandle towns. So "rural" is built into the law that created this school. Family Medicine and Rural Health is one of its five departments.

"In addition," said Department Chair Daniel Van Durme, "we are required to have a rural training track. This wasn't just a good idea that somebody came up with. The Legislature that passed the bill said the school must have a program where the students can spend significant amounts of their training living and practicing in rural environments."

Knowing where Florida needs physicians is part of his job.

"Even though I'm a family doc by training and practice," Van Durme said, "I take a whole lot more pride when I can get somebody to be a general surgeon in rural Florida than putting one more family doc in the suburbs of Orlando."

The Rural Track Medical Education Program has two main sites:

- Marianna, west of Tallahassee. Clerkships in family medicine, pediatrics, internal medicine, general surgery and obstetrics-gynecology are offered at Jackson Hospital and a number of physician practices. The psychiatry clerkship is offered at Florida State Hospital in nearby Chattahoochee. Students spend their third year on the Rural Track and fourth year at one of the six regional campuses.

- Immokalee, northeast of Naples. In 2007, the College of Medicine entered into an agreement with Collier Health Services to provide medical education opportunities and health care for the rural and underserved population. Medical students can complete some rotations there.

Other rural opportunities exist. Many first-year students spend three weeks shadowing community physicians in rural settings during the summer clinical practicum; some students spend spring break serving rural areas; some regional campuses have rural sites; and many faculty members are involved in research and clinical care in rural communities.



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The College of Medicine graduated its first class in 2005 and has only 51 graduates in practice, so far. Even so, 12 of those – a whopping 24 percent – are practicing in rural areas.

“Especially in family medicine, if you really want to have a full scope of practice, you should be in a rural area,” said Maggie Blackburn, the college’s director of rural health, who lived in New York City before moving to a rural community to practice. “Because you are the one that people are going to come to first. So you get to see a lot more; you get to do a lot more.”

