



BCC 7176
Family Medicine Sub-Internship
2020-2021

Education Director

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Overview

Course Description

The Family Medicine Sub-Internship is a four-week competency-based clerkship in family medicine, through which the students are expected to actively participate in care of hospitalized patients. Students will be exposed to the full spectrum of care provided by family physicians with an opportunity to provide inpatient care to patients of all ages and a broad range of conditions. Students are expected to assume an expanded level of clinical responsibility for evaluation and management, consistent with an acting intern. Students will participate as a member of inter-professional teams and will work effectively in that capacity to facilitate the optimal care of patients in the hospital setting. Students will be exposed to, and have the opportunity to participate in, a variety of procedures commonly performed by family physicians.

Students will be assigned to the inpatient family medicine service of a residency program and will participate in the care of hospitalized patients with complex medical needs. Where appropriate, students may also participate in ambulatory encounters that provide additional exposure to the full scope of family medicine and augment their learning, although ambulatory encounters are not required. Students are expected to participate in morning report, noon conferences and other available educational offerings.

Orientation and Syllabus Review

Students **MUST** view the current orientation video on Canvas **PRIOR** to the beginning of the clerkship. A site-specific orientation will occur at the assigned clinical site prior to initiation of clinical activities. Students are responsible for communicating with clerkship faculty prior to the start date of the clerkship to coordinate their meetings.

Scheduled Hours/On-Call

The sub-internship is four weeks in duration and will consist of inpatient care, and on-call shifts. Students will work **6 full days per week** and take assigned night and weekend call at least once weekly. For the purpose of this sub-internship, night and weekend call refers to **overnight call**.

Each student will spend a minimum of 21 days participating in patient care activities during the 4-week sub-internship. On-call responsibilities are based on the clinical faculty or resident call schedule but will not be more frequent than once every four days. Specific schedules are determined at each site and will be communicated to the student during on-site orientation or on the first day of the clerkship.

Required Assignments

Required Assignment 1: Personal Educational Goal & Reflection

The purpose of this assignment is to enhance the student's ability to recognize their own learning needs and develop a strategy to meet those needs. Students will choose one personal educational goal specific to their current learning needs, appropriate for the specific learning environment and one that can be achieved in a 4-week sub-internship.

- **Submission:** Students must discuss a preliminary plan regarding their personal goal with assigned Clinical Faculty and Clerkship Director by the end of the first week of the Clerkship. Students will submit their **Personal Educational Goal** to their Clerkship Director via email for feedback.

The student will create a strategy for self-improvement that includes appropriate evidence-based resources, with pre-selected specific targets by which they will assess their own progress. Using these targets, the student will track advancement of skill, knowledge or behavior throughout the sub-internship. Students are encouraged to seek and incorporate feedback from both Clinical Faculty and their Clerkship Director prior to submitting their final report.

- **Submission:** Students will submit their **Personal Education Goal Reflection** as a Microsoft Word document to be uploaded into Student Academics **by 5 p.m. on Friday of the LAST week of the sub-internship**. *Students are encouraged to send a copy of this report to the Education Director via email in the event that the electronic system is down or otherwise unavailable.*
- **Evaluation** of this assignment will be completed by the Education Director. Completion of this assignment in a satisfactory fashion and timely submission is a clerkship requirement. If remediation is required or the assignment is submitted after the deadline, the student is no longer eligible to be considered for an "honors" grade. If remediation is required, an initial grade of "IR" will be assigned until remediation has been completed.

Evaluation Rubric for Personal Educational Goal:

Goal	Component	Expectations			Feedback
		Does Not Meet	Meets	Exceeds	
	Specific and achievable				
	Targets measurable				
	Resources identified				
	Lessons learned				
	Next steps				
	Insight				
Overall evaluation					

Required Assignment 2: Interprofessional Activities

Interprofessional relationships and working as an integral member of a team are important physician activities that enhance patient safety and improve the quality of care. Students should function collaboratively on health care teams that include health professionals from other disciplines as they provide coordinated services to patients, enhancing their own expertise by deepening their understanding and engaging the unique and diverse knowledge and skills offered by other professionals. Students will do this as part of the healthcare team, when acting as or requesting a consultation.

- **Submission:** Students must attend and document their participation in at **LEAST TWO** interdisciplinary or case management conferences in the Encounter Tracking System (ETS) using the “Educational Activity” tab.
- **Evaluation** of this requirement will be done by the Clerkship Director.

Required Assignment 3: Transitions Across the Continuum Project

The Transitions Across the Continuum (TAC) project highlights the importance of proper management of a patient transition at the time of discharge from the hospital or transfer to another healthcare facility, including interprofessional collaboration that must occur for a successful discharge. This assignment is based on a patient the student cares for during the required Sub-Internship but is graded as a component of the Residency Preparation Boot Camp. *Eligible patients are those admitted, followed throughout hospitalization and discharged/transferred by the student.* Occasional exceptions are made for those students who are unable to complete the assignment during their required Sub-Internship; *projects completed outside of FMSI or IMSI require advance permission.*

- **Submission:** Complete project instructions are located on the Family Medicine Sub-Internship Canvas page.
- **Evaluation:** Residency Preparation Boot Camp course directors or their designee will complete evaluation of this assignment. If the assignment is returned for revision, the student will be assigned an incomplete until remediation has been completed. A passing performance is required for successful completion of the Residency Preparation Boot Camp.

Transitions Across the Continuum Project Evaluation Rubric		Does Not Meet Expectations	Meets Expectations	Exceeds Expectations	Feedback
Admission note	Organization				
	Pertinent details				
	Differential diagnosis				
	Treatment plan				
Discharge summary OR Transfer summary	Organization				
	Pertinent details				
	Follow up plan				
HIPAA	Evidence of hand-off				
Medication Reconciliation at Discharge	HIPAA compliant				
	Medication interactions				
	Potential errors				
	Safety concerns				
Discharge documents	Adherence challenges				
	Hospital summary				
	Patient education				
Reflection	Health literacy				
	Challenges				
	Lessons learned				
	Importance of care team at discharge				
Overall evaluation	Systems insight				

Patient Care

Inpatient Care

Students are expected to assume an expanded level of clinical responsibility consistent with a fourth-year medical student on a sub- internship and carry a **minimum load of at least 3 patients at all times**. If that is not possible, students will assist residents and attending physicians with their workload potentially assuming care of patients they did not admit. Students will participate in all aspects of inpatient care, including hospital admission, daily care, discharge, patient education, preventive care and commonly performed inpatient procedures. Management expectations include:

1. Perform admission, history and physical examinations;
2. Formulate initial problem lists, treatment plans, and write admission orders;
3. Make daily rounds, monitor the patient's progress, write progress notes and order additional tests and/or treatments; and
4. Complete the discharge assessment and paperwork.

Patient Log Requirements using the Encounter Tracking System (ETS)

Students should enter patient encounter data into the Encounters Tracking System (ETS) on a *daily* basis. Students are required to see a **minimum of 55 patient encounters** in the inpatient setting. Students will record a hospital admission and hospital discharge as a visit type in the inpatient setting. The table below lists the **required** visit types and problems for the sub-internship.

Minimum Required	Visit Type				
1	Hospital Admission				
1	Hospital Discharge				
Minimum Required	Problem/Condition	Location of Service	Level of Participation		
			Observe	Assist	Perform
1	Dehydration	Inpatient Hospital			x
1	Sepsis	Inpatient Hospital			x
1	Chest Pain (non-cardiac)	Inpatient Hospital			x
1	Chronic heart failure exacerbation	Inpatient Hospital			x
1	Pneumonia (any type)	Inpatient Hospital			x
1	COPD exacerbation	Inpatient Hospital			x
1	DKA/Hyperglycemia	Inpatient Hospital			x
1	Abdominal Pain	Inpatient Hospital			x
1	GI Bleeding (upper or lower)	Inpatient Hospital			x
1	Unstable Angina	Inpatient Hospital			x
1	Syncope	Inpatient Hospital			x
1	Cellulitis	Inpatient Hospital			x
1	TIA/CVA	Inpatient Hospital			x
1	Mental Status Changes	Inpatient Hospital			x

There are several conditions that provide an excellent learning experience but are not always possible during a 4-week sub-internship. Whenever possible, students should participate in the care of patients with the following conditions (not required) in the care of pregnant women or children:

- Routine Labor and Delivery
- Hypertensive disorders of pregnancy
- Gestational Diabetes Mellitus
- R/O Sepsis, pediatric patient
- Gastroenteritis in a child
- Newborn care

Patient Log (ETS) Monitoring Policy

Encounter data are monitored by the Clerkship Directors to assure that students are meeting clerkship requirements. If it becomes apparent that students are not encountering the required patient conditions, efforts will be made to specifically select the needed patients for you to see. If these opportunities for specific patient encounters do not occur, the student will be exposed to the conditions/diseases secondarily through reading assignments, completion of Aquifer

Cases, or discussions with the Clerkship Director.

Level of participation in patient care is determined by the student involvement during the history, physical exam, assessment and treatment plan. The complexity of these components will vary, but for the purposes of choosing a level of participation, three categories have been created, *all of which include supervision of the medical student*. The student will select the level of participation that most closely describes their involvement in the patient encounter.

- **Observe** should be selected when the student observes a clinician conducting the patient encounter.
- **Assist** should be selected when the student assists a clinician in conducting the patient encounter.
- **Perform** should be selected when the student leads or conducts the patient encounter.

Alternate Educational Experiences

Should the student be unable to complete and record a required clinical encounter or other clerkship requirement due to circumstances beyond their control, the education director will determine an appropriate alternative educational experience. The student will record as instructed in ETS. Utilization of alternative educational activities is monitored by the curriculum committee on a regular basis.

Online Curriculum

Aquifer Online Cases

[Aquifer Family Medicine](#) is available as a resource for students in the sub-internship and has excellent links to other resources pertinent to the cases. A practice exam based on curriculum in Aquifer Family Medicine can be arranged through the Clerkship Director at the student's regional campus.

Course Meetings and Lectures

Students will participate in morning rounds, noon conferences and other educational meetings when available. Students may be asked to present to residents at one of the educational meetings, and specific topics may be assigned.

Students are required to **communicate weekly with Clerkship Director** throughout the sub-internship; this may be via in-person meetings, email or telephone. This real or virtual meeting will include discussion on clinical experiences, progress on documentation of patient encounters, personal educational goal and any challenges or concerns. Mid-clerkship Evaluation will be completed by the Clerkship Director and will include feedback from the Clerkship Faculty. Review of student workhours will be part of the weekly meetings with the Clerkship Director and the mid-clerkship evaluation.

End of Clerkship Exam

On the last day of the clerkship, students will take the NBME Clinical Subject Examination for Family Medicine, with 2 additional modules on chronic care and musculoskeletal conditions. There are NBME self-assessment tools available by request to your Student Support Coordinator. See the Canvas M.D. Clerkships AY 2020-2021 site for student voucher availability policy.

Learning Resources

Institutional Resources

The [Maguire Medical Library](#) offers 24/7 remote access to online resources that support the **core clerkships**. They include [Mobile Resources](#), [Point of Care](#), and [Subject Guides](#).

Required Reading

Students will need to locate and read pertinent journal articles and guidelines that assist in the evaluation and management of patients. There is no required text for this sub-internship, although additional readings may be assigned by faculty, clerkship director or residents to augment student learning.

Evaluation

Clerkship Specific Grading

The standardized clerkship policy can be found on the [Office of Medical Education website](#).

1. If any remediation is required, the student is no longer eligible for honors, and will be assigned an initial grade of IR (Incomplete Remediation) until remediation has been completed
2. **Any breach in professionalism renders a student ineligible for honors**
3. Document at least 55 inpatient encounters (pass/fail)
4. Document at least one hospital admission and one hospital discharge visit type (pass/fail)
5. Record all required problems (pass/fail)
6. Satisfactory and timely performance on personal educational goal (pass/fail)
7. Satisfactory completion and documentation of two interprofessional activities (pass/fail)
8. Clinical performance must be exemplary to be considered for honors
9. NBME must be at 75th percentile or higher to be eligible for honors consideration and must be at the 10th percentile to pass the clerkship

Evaluation

1. *Formative*. A mid-clerkship evaluation is completed at the mid-point of the Clerkship by the Clerkship Director and will provide feedback to the student on progress in the clerkship. This will include progress toward achievement of clerkship objectives, competencies, assignments and required encounters. See the Canvas M.D. Clerkships AY 2020-2021 site for student user workflow guide.
2. *Summative*. An evaluation of student clinical performance will be completed by the assigned Clerkship Faculty at the end of the clerkship, as well as by the resident the student worked with during the sub-internship. A final summative report will be completed by the Clerkship Director at the end of the clerkship. The Education Director will review all components of the clerkship and include an assessment of each in the final grade summary.

Grade Assignment

The final grade is assigned by the Education Director and is based on all aspects of the clerkship, including clinical performance, attitude and performance during the weekly meetings with the Clerkship Director, and the results of the NBME Clinical Subject Exam. There are no grade quotas, and it is possible for any student to earn the grade of honors.

Course Objectives

The following table outlines the clerkship objectives and assessment method for each, intended to be used as a guide for student learning. Each clerkship objective is mapped to the [FSU COM Educational Program Objectives \(EPOs\)](#) and [ACGME Core Entrustable Professional Activities \(EPAs\)](#). To view the complete table and for an overview of the curricular map for the clerkship years at the Florida State University College of Medicine, please visit the syllabi page of the [Office of Medical Education](#) website.

Clerkship Objectives	Assessment						
	End of Clerkship Exam	Faculty Observation	Clerkship Director Observation	Oral Presentation	Patient Documentation	Assignments	Online Module
Family Medicine Sub-Internship							
Demonstrate respect, empathy, compassion, responsiveness and concern regardless of the patient's problems, personal characteristics.		x			x		
Conduct accurate and thorough physical examination.		x					
Develop appropriate plans for diagnostic evaluation.		x			x		
Demonstrate the ability to assess the patient's unique circumstances and experience of illness and incorporate into the patient's care.		x		x			
Demonstrate the ability to elicit an accurate and thorough medical history.		x			x		
Recognize normal and abnormal findings on physical exam.	x	x					
Evaluate health literacy by assessing patient's comprehension of verbal & written health information and assist patients in obtaining and understanding health information.		x			x		
Perform accurate clinical assessments that include appropriate differential diagnoses in the inpatient setting.		x		x	x		

Perform detailed medication review that includes indication, treatment targets, interactions, contraindications and potential adverse events.	x	x					
Describe basic bio-behavioral and clinical science principles used to analyze and solve problems related to the diagnosis, treatment and prevention of disease.	x	x				x	
Develop clinical questions and identify the evidence-based resources needed to provide excellent patient care.	x	x			x		
Demonstrate the effective use of pharmacotherapeutic agents and other therapeutic modalities.	x	x				x	
Apply the principles and methods of Evidence-Based Medicine to acquire, appraise, and assimilate new clinical information to improve patient care.		x				x	
Formulate and use strategies to support life-long learning to remain current with advances in medical knowledge and practice.		x	x			x	
Communicate diagnostic information and reasoning, intervention options, and a suggested plan of care with truthfulness, sensitivity and empathy.		x		x			
Demonstrate culturally and linguistically appropriate interviewing skills with patients from diverse backgrounds.		x		x			
Demonstrate effective oral communication skills with colleagues and other health professionals.		x		x	x		
Demonstrate effective written communication with colleagues and other health professionals, including comprehensive admission evaluation, progress notes in a hospitalized patient and discharge summary.		x			x		
Display professionalism, high ethical standards, and integrity in relationships in all aspects of medical practice, especially with respect to confidentiality, informed consent, and justice.		x					
Demonstrate respect for the contributions of medical colleagues, other health care professionals, agencies, and families, to the health of the individual and the health of the community.		x			x		
Demonstrate the ability to utilize shared decision-making in negotiating a plan of care.		x					
Recognize one's personal abilities and limitations, knowing when to request assistance.		x					
Recognize and demonstrate the ability to address the unique needs of patients from underserved environments.		x					
Demonstrate the ability to work effectively as a member of the health care team and interdisciplinary teams		x				x	

Policies

Absence and 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. Students must use the [absence request form](#) that is located on Student Academics.

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, using the [student absence request form](#). Even with an excused absence, the student will complete the scheduled work as outlined.

The Clerkship Faculty, Clerkship Director and Education Director must be notified of any absence in advance by the student. In the case of illness or other unavoidable absence, follow the same procedure outlined above, and notify everyone as soon as possible. **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.**

Academic Honor Policy

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. Students are responsible for reading the Academic Honor Policy and for living up to their pledge to "...be honest and truthful and...[to] strive for personal and institutional integrity at Florida State University." (Florida State University Academic Honor Policy, found at <http://fda.fsu.edu/academic-resources/academic-integrity-and-grievances/academic-honor-policy>.)

Americans with Disabilities Act

Students with disabilities needing academic accommodation should: (1) register with and provide documentation to the Office of Accessibility Services; and (2) bring a letter to the instructor indicating the need for accommodation and what type. Please note that instructors are not allowed to provide classroom accommodation to a student until appropriate

verification from the Office of Accessibility Services has been provided. 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:

Office of Accessibility Services
874 Traditions Way
108 Student Services Building
Tallahassee, FL 32306-4167
(850) 644-9566 (voice)
(850) 644-8504 (TDD)
Email: oas@fsu.edu
<https://dsst.fsu.edu/oas>

College of Medicine Student Disability Resources

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.

Student Mistreatment Policy

If you feel you are being mistreated, please refer to the Student Mistreatment Policy in the [FSUCOM Student Handbook](#) and report the incident as soon as possible.

Student Work Hours Policy

The FSU College of Medicine adheres to the ACGME requirements regarding clinical work and education. This includes working no more than 80 hours per week and no more than 24 hours continuously, except an additional 4 hours may be added to the 24 to perform activities related to patient safety, such as transitions of care or education. Additional patient care responsibilities must not be assigned during this time. Students will have at least one out of every 7 days off, completely free from clinical and educational duties, when averaged over 4 weeks.

Documentation of work hours: Students will use ETS to document by self-report their daily work hours. Students must enter daily work hours that includes both clinical experience and educational activities. Failure to report work hours is considered a breach of professionalism.

- Clinical care, including documentation in medical record
- Required educational meetings (i.e. Doctoring 3, clerkship meetings, educational meetings at residency programs)

Hours that should not be included in self-reported work hours include reading about patient conditions and procedures, self-directed study for clerkships/courses, work completed for assignments, learning modules and assigned reading. Failure to log student workhours will be considered a breach of professionalism.