



BCC 7175 Family Medicine Clerkship 2023-2024

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Overview

Course Description

Students will participate in this clerkship as either a 6-week block or through the Longitudinal Integrated Curriculum (LIC). The Family Medicine Clerkship is competency-based in family medicine, with an emphasis on the care of ambulatory patients. During this clerkship, students provide clinical care to patients under the direct supervision of a practicing community-based family physician designated as the Clerkship faculty. Students will 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.

Orientation and Syllabus Review

Students are required to read the syllabus located on the [Office of Medical Education](#) site to become familiar with expectations before beginning the clerkship. Students will also use the [Canvas M.D. Clerkships AY2023-2024](#) site Family Medicine Clerkship homepage to access course material. A site-specific orientation will occur at the assigned clinical site before the initiation of clinical activities. Students are responsible for communicating with Clerkship Faculty before the start date of the clerkship to coordinate meetings.

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.

Scheduled Hours/On-Call

The Family Medicine Clerkship consists primarily of ambulatory care. Students enrolled in the clerkship 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 Longitudinal Clerkship. **During off-cycle rotations during which Doctoring 3 is not scheduled, students will work five days per week with Clerkship faculty.** Students enrolled in the LIC will participate on the schedule provided by the Clerkship Administrator at the Marianna rural training site. 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. **Work hours must be documented in the [Encounter Tracking System \(ETS\)](#) daily.**

Required Assignments

Required Assignment 1: Personal Educational Goals

The purpose of this assignment is to enhance the student's ability to recognize their learning needs and develop strategies to meet those needs. Students will develop 1-3 educational goals specific to their current learning needs as third-year medical students which are appropriate for the learning environment, and able to be achieved in the allotted time. Students will create a strategy for self-improvement that includes appropriate evidence-based resources, with pre-selected benchmarks by which they will assess their progress. Using these benchmarks, students will track the advancement of clinical skill, knowledge, or behavior throughout the rotation. Examples of exemplary student performance are available on the [Canvas M.D. Clerkships AY2023-2024](#) site Family Medicine homepage.

Students are required to discuss a preliminary plan regarding their personal goals with their assigned Clinical Faculty and Clerkship Director no later than Saturday at the end of the first week of the clerkship, or by the end of the 4th week for LIC students. Students are encouraged to seek and incorporate feedback from their Clerkship Director before submitting a final report at the end of the clerkship.

Submission

- Upload assignment to the "Project Documents" tab for the course in Student Academics by **5:00 PM on the LAST day of the clerkship.** *Students are encouraged to send a copy of this report to the Education Director via email if the Student Academics site is unavailable.*

Evaluation

This assignment will be evaluated by the Education Director according to the evaluation rubric below. Completion of this assignment in a satisfactory fashion and timely submission is a clerkship requirement.

| Personal Educational Goal evaluation rubric | Above expectations | Meets expectations | Below expectations | Feedback |
|---|--------------------|--------------------|--------------------|----------|
| Goal is specific and achievable | | | | |
| Targets measurable | | | | |

| | | | | |
|----------------------|--|--|--|--|
| Resources identified | | | | |
| Lessons learned | | | | |
| Next steps | | | | |
| Overall evaluation | | | | |

Required Assignment 2: Interprofessional Experience

Students will write a paragraph (<500 words) describing an interaction with another health professional (e.g. PA, ARNP, pharmacist, social worker, therapist, etc.) that had a positive impact on a patient’s healthcare.

Submission

- Upload assignment to the “Project Documents” tab for the course in Student Academics by **5:00 PM on the LAST day of the clerkship**. *Students are encouraged to send a copy of this report to the Education Director via email if the Student Academics site is unavailable.*

Evaluation

This assignment will be evaluated by the Education Director. Completion of this assignment in a satisfactory fashion and timely submission is a clerkship requirement.

Required Assignment 3: Systems Project

The purpose of this assignment is to highlight the systems involved in the care of patients which impact access, financial burdens, adherence, and coordination of such care. Students are encouraged to seek and incorporate feedback from both Clerkship faculty and Clerkship Director before submitting the final assignment. There are **two options for this assignment**, and the student may choose the Referral Project or the Cost of Chronic Care Project. All identifying information in the SOAP note should be redacted to maintain HIPAA compliance.

Systems Project Option 1: Referral Project

The Referral Project is designed to explore the teamwork and collaboration between physicians and other healthcare professionals in the care of the patient, examine other factors that influence successful referral and consultation, and emphasize the potential for system errors when care is not delivered continuously. Through this assignment, the student will learn more about the process of referring a patient to another healthcare provider for consultation. The system for referral and consultation allows for additional expertise, and also requires special attention to communication if the outcome of services is to benefit the patient.

With the guidance of their Clerkship faculty, the student will:

1. Identify a patient who might benefit from referral to another physician for consultation regarding a specific medical or surgical condition.
2. Participate in the initial evaluation and write a SOAP note detailing the patient encounter that includes specific expectations for what the consultant will address (confirm a suspected diagnosis, suggest an alternative diagnosis, suggest a plan of evaluation or treatment, perform a specific procedure, temporarily manage a particular problem, assume care of a particular problem).
3. Accompany the patient during the consultation and observe the encounter from the perspective of the patient and/or family.
4. Write a 500 to 1000-word reflection essay about the experience, including the challenges associated with arranging the appointment, and communication issues with the patient and between physicians. Students will include their lessons learned in the process of caring for this patient and their family.

| Referral option evaluation rubric | | Above expectations | Meets expectations | Below expectations | Feedback |
|-----------------------------------|-------------------------|--------------------|--------------------|--------------------|----------|
| SOAP Note | Organization | | | | |
| | Pertinent details | | | | |
| | Differential diagnosis | | | | |
| | Treatment plan | | | | |
| | Question for consultant | | | | |
| | HIPAA compliant | | | | |
| Reflection | Patient challenges | | | | |
| | Communication issues | | | | |
| | Systems errors | | | | |
| | Lessons learned | | | | |

| | | | | |
|--------------------|--|--|--|--|
| Overall Evaluation | | | | |
|--------------------|--|--|--|--|

Systems Project Option 2: Cost of Chronic Care Project

The Cost of Chronic Care Project is designed to highlight the financial impact on patients of our management recommendations and to demonstrate the importance of evidence-based guidelines in the clinical care of patients related to the medical management of chronic conditions. Through this option, the student will learn more about patient costs for a chronic health condition – including, but not limited to, medications, disease monitoring, and management, medical insurance, and lost time from work/school. Physician attention to these details can improve adherence partnerships with patients in developing care plans for chronic conditions. As part of this assignment, the student will explore the financial impact of chronic disease on the patient, how evidence-based guidelines have been applied to management, and whether system complexities (such as those with little to no medical insurance or access to care) influence the choices a patient makes when prioritizing needs.

With the guidance of their Clerkship faculty, the student will:

1. Identify a patient who agrees to a longer appointment to discuss costs associated with their chronic conditions.
2. Participate in the initial evaluation and write a SOAP detailing that encounter, including a comprehensive problem list and management strategy.
3. Discuss the financial impact with the patient to create a worksheet outlining one-time and recurrent costs associated with the medical care of all chronic conditions.
4. Write a 500 to 1000-word essay comparing the patient’s management with evidence-based guidelines and include a reflective component stating the patient’s challenges associated with living with their chronic conditions.

| Cost of Chronic Care option evaluation rubric | | Above expectations | Meets expectations | Below expectations | Feedback |
|---|---------------------------|--------------------|--------------------|--------------------|----------|
| SOAP note | Organization | | | | |
| | Pertinent details | | | | |
| | Problem list | | | | |
| | Treatment plan | | | | |
| | Question for consultant | | | | |
| | HIPAA compliant | | | | |
| Cost worksheet | All conditions listed | | | | |
| | All cost items delineated | | | | |
| | Annualized cost | | | | |
| Reflection | Patient challenges | | | | |
| | Variations from EBM | | | | |
| | Lessons learned | | | | |
| Overall Evaluation | | | | | |

Submission

- Upload assignment to the “Project Documents” tab for the course in Student Academics by **5:00 PM on the LAST day of the clerkship**. *Students are encouraged to send a copy of this report to the Education Director via email if the Student Academics site is unavailable.*

Evaluation

This assignment will be evaluated by the Clerkship Director according to the evaluation rubrics stated above. Completion of this assignment in a satisfactory fashion and timely submission is a clerkship requirement.

Note: 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.

Required Assignment 4: Pharmacy Field-Trip

Students are required to participate in a field trip to a local pharmacy during the Family Medicine Clerkship. During this experience, the student will review over-the-counter medications, supplements, and other products a patient may choose to take. Students will compare numerous formulations and options available. With the Clerkship Director, students will apply this knowledge to specific patient conditions during a real or virtual pharmacy field trip.

Submission

- Document as an **Educational Activity in ETS** by selecting “[FM] Completion of Pharmacy Field Trip” in

the drop-down menu.

Required Assignment 5: Aquifer Family Medicine Online Cases

The required didactic content for the clerkship is available through [Aquifer Family Medicine](#), a case-based computer simulation system. This is primarily a self-directed program that will help build clinical problem-solving skills through independent study, although material and questions will often provide a basis for a clinical discussion during weekly clerkship rounds. Aquifer Family Medicine's interactive virtual patient cases deliver on the learning objectives of the Society of Teachers of Family Medicine's (STFM) clerkship curriculum. Each case takes approximately 60-90 minutes to complete. Optimal learning occurs when a student completes a case shortly after seeing a similar patient in the clinical setting. Students are required to complete **a total of six (6) cases, four (4) of which are specifically required**. The required cases include the female wellness exam (case 1), male wellness exam (case 2), type 2 diabetes mellitus (case 6), and hypertension (case 8). In addition, the students must complete an additional 2 cases of their choosing.

Students are encouraged to complete all 6 cases in the first 4 weeks to allow for dedicated study time and test preparation during the latter part of the clerkship. **Students in the LIC program** are encouraged to complete the required cases during the first half of the academic year to allow for dedicated study time and test preparation after the winter break.

Submission

- Document all 6 cases as an **Educational Activity in ETS** by selecting the appropriate items in the drop-down menu.

Evaluation

Student progress will be monitored by their Clerkship Director.

Required Assignment 6: Aquifer Family Medicine Calibrate Assessment

Before the end of the second week of the clerkship, students will take a 35-40 question assessment test. Aquifer will produce a report showing students' strengths and weaknesses: A Detailed Performance Report and a Summary Report. Students will then complete a templated Student Debrief Worksheet with the study plan that they will use for the remainder of the clerkship and send it, along with the Summary Report, to their Clerkship Director **BEFORE** the beginning of the 3rd week of the rotation. During the 3rd week of the clerkship, students will meet with the Clerkship Director for a coaching session (this might also coincide with the mid-clerkship evaluation). Using the coaching advice and study plan students will take another 35-40 question assessment before the end of the 5th week of the clerkship. Students have the option of meeting again for a coaching session before the end of the clerkship.

Patient Care

Ambulatory Care

Students will participate in ambulatory care during this clerkship, with an emphasis on the 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, those residing in skilled nursing facilities, home visits, and office-based procedures whenever possible. Management expectations include:

- Gathering appropriate histories and performing the appropriate physical examinations
- Formulating preliminary diagnostic impressions including differential diagnosis
- Creating diagnostic and therapeutic care plans
- Performing appropriate health screenings
- Documenting patient care through an electronic health record and/or written SOAP note

Patient Log Requirements using the Encounter Tracking System (ETS)

Students should enter patient encounter data into the [Encounter Tracking System \(ETS\)](#) daily. A **minimum of 100 patient encounters is required** during the Family Medicine Clerkship. Students will record all clinical problems and procedures that were part of patient encounters. The table below lists the required problems and procedures, including the location of service and the expected level of participation. All required problems must be at the **perform level of participation**. All required procedures must be at the **assist or perform level of participation as indicated**.

- Students who have difficulty seeing a patient within a problem or procedure category should notify their Clerkship Director with sufficient time to **enable remedial action**.

- The problems and/or procedures marked with an asterisk* must be completed in the clinical setting and require direct patient contact. The remaining conditions should be seen in the clinical setting but may be fulfilled by alternate educational activities as determined by the Education Director.

| Min. Req. | Problem/Condition | Location of Service | Min. Level of Participation | | |
|---|--|-------------------------|-----------------------------|--------|---------|
| | | | Observe | Assist | Perform |
| 1 | Abdominal pain or pelvic pain | Inpatient or Outpatient | | | x |
| 1 | Abnormal vaginal bleeding | Inpatient or Outpatient | | | x |
| 1 | Allergic condition (not drug allergy) | Inpatient or Outpatient | | | x |
| 1 | Anxiety disorder (generalized or panic disorder) | Inpatient or Outpatient | | | x |
| 1 | Arthritis | Inpatient or Outpatient | | | x |
| 1 | Asthma | Inpatient or Outpatient | | | x |
| 1 | Atherosclerotic disease | Inpatient or Outpatient | | | x |
| 1 | Cancer | Inpatient or Outpatient | | | x |
| 1 | Chronic back pain | Inpatient or Outpatient | | | x |
| 1 | Chronic kidney disease | Inpatient or Outpatient | | | x |
| 1 | Chronic obstructive pulmonary disease or emphysema | Inpatient or Outpatient | | | x |
| 1 | Dementia | Inpatient or Outpatient | | | x |
| 1 | Depression | Inpatient or Outpatient | | | x |
| 1 | Diabetes mellitus* | Inpatient or Outpatient | | | x |
| 1 | Dizziness or vertigo | Inpatient or Outpatient | | | x |
| 1 | Dyslipidemia or hyperlipidemia | Inpatient or Outpatient | | | x |
| 1 | Gastroesophageal reflux disease | Inpatient or Outpatient | | | x |
| 1 | Headache | Inpatient or Outpatient | | | x |
| 1 | Heart failure | Inpatient or Outpatient | | | x |
| 1 | Hypertension* | Inpatient or Outpatient | | | x |
| 1 | Joint pain or Injury (other than back pain) | Inpatient or Outpatient | | | x |
| 1 | Obesity* | Inpatient or Outpatient | | | x |
| 1 | Skin lesion | Inpatient or Outpatient | | | x |
| 1 | Skin rash or infection | Inpatient or Outpatient | | | x |
| 1 | Substance use disorder | Inpatient or Outpatient | | | x |
| 1 | Thyroid disorder | Inpatient or Outpatient | | | x |
| 1 | Tobacco use disorder* | Inpatient or Outpatient | | | x |
| 1 | Upper respiratory infection | Inpatient or Outpatient | | | x |
| 1 | Urinary tract infection | Inpatient or Outpatient | | | x |
| 1 | Vaginal discharge | Inpatient or Outpatient | | | x |
| Min. Req. | Procedures | | Min. Level of Participation | | |
| | | | Observe | Assist | Perform |
| United States Preventative Services Task Force (USPSTF) A Recommendations – screen for the following conditions | | | | | |
| 1 | Cervical cancer | | | | x |
| 1 | Colorectal cancer * | | | | x |
| 1 | Folic acid supplementation | | | | x |
| 1 | High blood pressure | | | | x |
| 1 | HIV | | | | x |
| 1 | Tobacco use | | | | x |
| United States Preventative Services Task Force (USPSTF) B Recommendations – screen for the following conditions | | | | | |
| 1 | Abdominal aortic aneurysm | | | | x |
| 1 | Unhealthy alcohol use* | | | | x |
| 1 | Prediabetes and Type 2 Diabetes | | | | x |
| 1 | Breast cancer* | | | | x |
| 1 | Chlamydia/gonorrhea | | | | x |
| 1 | Depression* | | | | x |
| 1 | Fall prevention | | | | x |
| 1 | Healthy lifestyle | | | | x |
| 1 | Hepatitis B/C | | | | x |

| | | | | |
|---|---|--|---|---|
| 1 | Intimate partner violence, elder abuse and abuse of vulnerable adults | | | X |
| 1 | Lung cancer | | | X |
| 1 | Obesity | | | X |
| 1 | Osteoporosis | | | X |
| 1 | Skin cancer counseling | | | X |
| 1 | Statin use | | | X |
| <i>Immunizations – screen for the immunization status</i> | | | | |
| 1 | Adults | | X | |
| 1 | Children | | X | |

Alternate Educational Experiences

For students unable to complete and record a required clinical encounter or other clerkship requirements due to circumstances beyond their control, the Education Director will determine an appropriate alternative educational experience. Additional clinical encounters are the preferred method to complete the requirements of this clerkship. Students may be exposed to the conditions or diseases secondarily through reading assignments, completion of Aquifer cases, or discussions with the Clerkship Director, and will record as instructed in the ETS, and only under the direction of the Education Director. The utilization of alternative educational activities is monitored by the curriculum committee regularly.

Online Curriculum

The required didactic content for the clerkship is available through [Aquifer Family Medicine](#), a case-based computer simulation system. Requirements are referenced in the assignments section of this syllabus.

Clerkship Director Meeting

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 **meet weekly** with the Clerkship Director throughout the clerkship; this may be via in-person meetings, zoom, telephone, or email. This meeting will include a discussion on clinical experiences, progress on documentation of patient encounters in ETS, and any challenges or concerns. A mid-clerkship evaluation will be completed by the Clerkship Director and will include feedback from the Clerkship Faculty and a review of the student work hours log. **Each student will be observed at least once during the clinical care of patients.** This will be done by the Clerkship Director (or designee for away rotations). The purpose of this direct observation is to evaluate data-gathering skills, clinical reasoning, management decisions, and oral presentations. Following observation of clinical care, the student will be provided with feedback.

Clerkship Examinations

Summative Examination

At the end of the clerkship, students will take the 100-question NBME Clinical Subject Examination for Family Medicine, with 1 additional module on chronic care conditions. LIC students will schedule the exam according to the LIC policies document.

Optional Formative Self-Assessment

The [NBME's Self-Assessment Services \(NSAS\)](#) Clinical Science Mastery Series offers a \$20 clerkship-specific exam preparation that includes in-depth answer explanations. Students may purchase an NSAS examination for any clerkship.

Learning Resources

Institutional Resources

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

Required Reading

There is no required text for this Clerkship, although additional readings may be assigned by their Clerkship faculty and Clerkship Director to augment student learning. Students will use the [Family Medicine Subject Guide](#) and are expected to locate and read pertinent journal articles and guidelines that assist in the evaluation and management

of patients.

Recommended Resources

Students are encouraged to join the [American Academy of Family Physicians \(AAFP\)](#) as a Student Member for additional resources, including pertinent journal articles and exam preparation materials. Student membership is FREE for all medical students. The [Society of Teachers of Family Medicine \(STFM\)](#) also has resources for medical students through their “Online Learning” pages.

Evaluation

Formative Evaluation

A mid-clerkship evaluation is completed by the Clerkship Director to provide feedback on student progress toward the achievement of clerkship objectives, competencies, assignments, and required encounters. A student workflow guide is available on the [Canvas M.D. Clerkships AY2023-2024](#) homepage.

Summative Evaluation

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 clerkship. 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.

Grading

Years 3 and 4 Grading Policy

The standardized Years 3 and 4 Grading Policy for clerkships and courses is located on the [Office of Medical Education](#) site. The final grade is assigned by the Education Director and is based on all aspects of the clerkship, including clinical performance, attitude, performance during weekly Clerkship Director meetings, and the results of the NBME Clinical Subject Exam. There are no grade quotas, and any student can earn a grade of honors.

Clerkship-Specific Grading Criteria

1. Any breach in professionalism renders a student ineligible for honors
 2. Any assignment submitted late or which requires remediation renders the student ineligible for honors and will result in the assignment of an initial grade of IR (Incomplete Remediation) until remediation has been completed
 3. Failure to document timely and accurate work hours renders a student ineligible for honors
 4. Clinical performance and content knowledge must be exemplary to be considered for honors or high pass
 5. End of clerkship NBME examination must be at the
 - a. 75th percentile or higher to be eligible for Honors consideration
 - b. 60th percentile or higher to be eligible for High Pass consideration
 - c. 10th percentile or higher to Pass
 6. Active participation in weekly Clerkship Director meetings (pass/fail)
 7. Satisfactory Clerkship Faculty and Clerkship Director evaluations documenting competency in all required domains
-
8. Satisfactory documentation of at least 100 inpatient or outpatient (location of service) encounters in ETS (pass/fail)
 9. Satisfactory documentation of all required problems and procedures in ETS (pass/fail)
 10. Satisfactory completion and timely submission of clerkship educational goal in Student Academics (pass/fail)
 11. Satisfactory completion and timely submission of interprofessional experience in Student Academics (pass/fail)
 12. Satisfactory completion and timely submission of systems project in Student Academics (pass/fail)
 13. Satisfactory completion and documentation of pharmacy field trip and record as an Educational Activity in ETS (pass/fail)
 14. Satisfactory completion and documentation of six (6) required Aquifer Family Medicine cases and record as an Educational Activity in ETS (pass/fail)
 15. Satisfactory completion and timely completion of both Aquifer Family Medicine Calibrate Assessments (early and late) and coaching meeting with Clerkship Director (pass/fail)

Course Objectives

The following tables outline clerkship objectives and assessment methods for each, and are intended to be used as a guide for student learning. Each clerkship objective is mapped to the [FSU COM Educational Program Objectives \(EPOs\)](#) and the [ACGME Core Entrustable Professional Activities \(EPAs\)](#).

| FAMILY MEDICINE CLERKSHIP COURSE OBJECTIVES | | EPO |
|---|--|---------------|
| FM-1 | Employ the fundamental principles of Family Medicine – the biopsychosocial model, comprehensive and contextual care, continuity and coordination of care) – in all patient interactions and clinical activities. | 1.3, 2.5 |
| FM-2 | Demonstrate the ability to organize, prioritize, and carry out a multi-purpose visit with multiple family members. | 1.3 |
| FM-3 | Demonstrate proficiency in gathering and documenting essential and accurate information in the ambulatory setting through history taking and physical exam. | 1.2, 4.5 |
| FM-4 | Formulate differential diagnoses and propose evaluation and management plans for common acute presentations in the ambulatory setting for patients of any age. | 1.4, 1.5, 1.6 |
| FM-5 | Develop and implement evaluation and management plans for chronic illnesses commonly seen in the ambulatory setting. | 1.5, 1.6 |
| FM-6 | Develop and implement evidence-based plans for health promotion and maintenance for patients of any gender or age and that demonstrate understanding of social determinants of health and are individualized for patient preferences. | 1.5, 2.4, 9.1 |
| FM-7 | Demonstrate communication skills appropriate to the setting: accurate and concise oral presentation to health care personnel; effective communication with patients of different ages, cultural backgrounds, and health literacy. | 4.1, 4.2, 5.1 |
| FM-8 | Identify the unique or complementary knowledge, skills and abilities of other professionals in the care of patients with chronic illness, multiple chronic illness, and multiple co-morbidities, and work collaboratively with them to maximize patient outcomes and satisfaction. | 1.6, 7.1, 7.2 |

| Component | Learning Objectives | Assessment |
|-----------------------------|--|---|
| Ambulatory Medicine | <ol style="list-style-type: none"> 1. Perform complete history and exams on patients in the ambulatory setting 2. Develop differential diagnoses on patients in the ambulatory setting 3. Interpret diagnostic data on patients in the ambulatory setting 4. Develop management plans on patients in the ambulatory setting 5. Provide guideline-based preventive care to adults and children 6. Demonstrate the ability to document history and physical exam, progress notes and orders 7. Communicate appropriate information orally to other health care personnel concisely | <ul style="list-style-type: none"> • Faculty assessment of communication skills • Clerkship Director assessment • Faculty observation of student performing history and exam |
| Required Patient Encounters | <ol style="list-style-type: none"> 1. Document at least 100 patient encounters in the inpatient or outpatient location of service 2. Document the following problems at the specified minimum number and level of participation: Abdominal pain or pelvic pain, Abnormal vaginal bleeding, Allergic condition (not drug allergy), Anxiety disorder (generalized or panic disorder), Arthritis, Asthma, Atherosclerotic disease, Cancer, Chronic back pain, Chronic kidney disease, Chronic obstructive pulmonary disease or emphysema, Dementia, Depression, Diabetes mellitus, Dizziness or vertigo, Dyslipidemia or hyperlipidemia, Gastroesophageal reflux disease, Headache, Heart failure, Hypertension, Joint pain or Injury (other than back pain), Obesity, Skin lesion, Skin rash or infection, Substance use disorder, Thyroid disorder, Tobacco use disorder, Upper respiratory infection, Urinary tract infection, Vaginal discharge, 3. Document the following procedures at the specified minimum number and level of participation: Abdominal aortic aneurysm, Unhealthy alcohol use, Prediabetes and Type 2 Diabetes, Breast cancer, chlamydia/ gonorrhea, Depression, Fall prevention, Healthy lifestyle, Hepatitis B/C, Cervical cancer, Colorectal cancer, Folic acid supplementation, High blood pressure, HIV, Tobacco use | <ul style="list-style-type: none"> • Weekly review of patient logs in ETS |
| Required Systems Project | <ol style="list-style-type: none"> 1. Document one of two options highlighting the systems involved in the care of patients which impact access, financial burdens, adherence and coordination of care, either (1) Referral Project or (2) Cost of Chronic Care Project. | <ul style="list-style-type: none"> • Clerkship Director assessment |

| | | |
|---|---|--|
| Aquifer Family Medicine Modules | <ol style="list-style-type: none"> 1. Apply knowledge and reasoning to interactive virtual patient cases to demonstrate clinical reasoning skills 2. Completion of 6 modules, 4 of which are specifically required | <ul style="list-style-type: none"> • Clerkship Director assessment |
| Aquifer Family Medicine Calibrate Early and Late Assessment | <ol style="list-style-type: none"> 1. Demonstrate knowledge and clinical reasoning to analyze clinical scenarios and answer basic, clinical, behavioral and social science questions pertaining to family medicine | <ul style="list-style-type: none"> • Review and feedback provided by Clerkship Director |
| Educational Goals | <ol style="list-style-type: none"> 2. At the beginning of the clerkship, define 1-3 educational goals and select benchmarks to assess progress 3. Track their progress using their benchmarks and submit final self-evaluation report at the end of the clerkship | <ul style="list-style-type: none"> • Review and feedback provided by Clerkship Director |
| Interprofessional Experience | <ol style="list-style-type: none"> 1. Document and reflect on an interaction with another health professional (e.g. PA, ARNP, pharmacist, social worker, therapist, etc.) that had a positive impact on a patient's healthcare | <ul style="list-style-type: none"> • Clerkship Director assessment |
| Pharmacy Field Trip | <ol style="list-style-type: none"> 1. Demonstrate ability to compare the numerous formulations and options patients are confronted with in choosing an OTC product | <ul style="list-style-type: none"> • Clerkship Director assessment |
| Weekly Clerkship Director meetings | <ol style="list-style-type: none"> 1. Demonstrate oral presentation skills 2. Demonstrate clinical reasoning skills 3. Demonstrate time management skills through duty hours 4. Understand the impact of cost and value in healthcare 5. Demonstrate the ability to use medical informatics at the point of care and the medical literature to make diagnostic and management decisions in family medicine | <ul style="list-style-type: none"> • Clerkship Director evaluation • Mid-rotation feedback summary • Review of work hours |
| NBME Internal Medicine Subject Examination | <ol style="list-style-type: none"> 1. Demonstrate knowledge and clinical reasoning to analyze clinical scenarios and answer basic, clinical, behavioral and social science questions pertaining to family medicine | <ul style="list-style-type: none"> • Minimum score of 10th percentile |

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 the [FSU COM Student Handbook](#) for details of the attendance policy, a notice of absences, and remediation. Students must use the [student absence request form located on Student Academics](#).

Extended absences from the clerkships are not permitted. Any absence from the clerkships must be **pre-approved by the Regional Campus Dean** before the beginning of the clerkship, using the student absence request form. The clerkship faculty, Clerkship Director, and Education Director must be notified of any absence in advance by the student, once approved by the campus dean. Under no circumstances should a student arrange with the clerkship faculty or elective faculty to be away from the rotation without first obtaining the approval of the campus dean. Any approved absence from a required clerkship may result in the student receiving a grade of "incomplete" and the student is expected to make up missed time and/or complete alternative/additional assignments before a final grade will be assigned. **Unapproved absences during the clerkship are considered unprofessional behavior, will result in a grade of "incomplete" until remediated, and may result in a grade of "fail" for the clerkship.** In the case of illness or other unavoidable absence, follow the same procedure outlined above, and notify everyone as soon as possible.

Academic Honor Policy

The Florida State University Academic Honor Policy outlines the University's expectations for the integrity of student's 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

Florida State University (FSU) values diversity and inclusion; we are committed to a climate of mutual respect and full

participation. Our goal is to create learning environments that are usable, equitable, inclusive, and welcoming. FSU is committed to providing reasonable accommodations for all persons with disabilities in a manner that is consistent with the academic standards of the course while empowering the student to meet the integral requirements of the course. To receive academic accommodations, a student: (1) must register with and provide documentation to the Office of Accessibility Services (OAS); (2) must provide a letter from OAS to the instructor indicating the need for accommodation and what type; and, (3) should communicate with the instructor, as needed, to discuss recommended accommodations. A request for a meeting may be initiated by the student or the instructor. Please note that instructors are not allowed to provide classroom accommodations to a student until appropriate verification from the Office of Accessibility Services has been provided. This syllabus and other class materials are available in an 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, Florida State University, Tallahassee, FL 32306-4167; (850) 644-9566 (voice); (850) 644-8504 (TDD), oas@fsu.edu, <https://dsst.fsu.edu/oas/>.

Clinical Experience and Education Policy (formerly Duty Hours or Work Hours)

The FSU COM uses the ACGME requirements regarding clinical experience and education as a guideline for our policy. Our goal is to provide a structure that supports patient safety and student education and facilitates personal-professional balance and well-being.

- Clinical experience and scheduled educational activities must be limited to no more than 80 hours per week when averaged over 4 weeks.
- Students must have at least one day out of every 7 completely free from clinical duties and required educational activities when averaged over 4 weeks.
- Clinical experience must not exceed 24 hours of continuously scheduled assignments, with the exception that up to 4 hours of additional time may be used for effective transitions of care or student education. No additional patient care responsibilities may be undertaken during these 4 hours. After 24 hours continuously on call, students must have at least 14 hours free of clinical work and scheduled educational activities.
- Students should have 8 hours off between scheduled clinical experience and education periods.

Documentation of time spent on clinical experience and education:

Students will use ETS to document by self-report their daily work hours on required clerkships and courses. Students must enter daily hours to include both clinical experience and required educational activities. Failure to report work hours is considered a breach of professionalism.

Students will report the following:

- Clinical experience, including documentation in the medical record
- Required educational meetings (i.e. Doctoring 3, clerkship meetings, meetings with clerkship faculty, 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.

Office of Student Counseling Services

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 the Office of Student Counseling Services and the FSU Office of Accessibility Services (OAS) to determine whether they might be eligible to receive the accommodations needed 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 a medical degree.

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 patients with the required conditions. The level of participation in the care of patients is determined by the student's involvement during the history, physical exam, assessment, and treatment plan. The complexity of these components will vary, but to choose 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 and will receive credit for documented participation at the required level or higher.

- **Observe** should be selected when the student observes a clinician conducting a 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.

Student Mistreatment Policy

“Mistreatment” arises when behavior shows disrespect for the dignity of others and unreasonably interferes with the learning process. It can take the form of physical punishment, sexual harassment, psychological cruelty, and discrimination based on race, religion, ethnicity, sex, age, or sexual orientation. If a student feels they are being mistreated, the student should report this concern to the Division of Student Affairs (Student Support Coordinator, Assistant or Associate Dean for Student Affairs, or the Regional Campus Dean). We treat all such reports as confidential and do not tolerate reprisals or retaliations of any kind. Please refer to the Student Mistreatment Policy in the [FSU COM Student Handbook](#) and [report incidents of mistreatment](#) as soon as possible.

Syllabus Change Policy

Except for changes that substantially affect the implementation of the evaluation (grading) statement, this syllabus is a guide for the course and is subject to change with advance notice.