



## BCC 7175 Family Medicine Clerkship 2025-2026

### **Education Director**

**Joanne Saxour, MD**

Florida State University College of Medicine  
Regional Medical School Campus – Daytona Beach  
1200 W International Speedway Blvd  
Building 600, Suite 101  
Daytona Beach, FL 32114  
Phone: (386) 252-0601  
Email: [joanne.saxour@med.fsu.edu](mailto:joanne.saxour@med.fsu.edu)

<b>Campus</b>	<b>Clerkship Director</b>
Daytona	Wesley Driggers, MD, PhD
Fort Pierce	Nancy Baker, MD
Orlando	Melodie Mope, MD
Pensacola	Hillary Hultstrand, MD
Sarasota	Carlos Rodriguez, MD
Tallahassee	Julia Weeks, MD
<b>Rural Program Site</b>	<b>Clerkship Administrator</b>
Marianna	John D. Byrd, MD
Thomasville	Calvin Reams, MD

# Contents

Overview .....	3
Course Description .....	3
Orientation and Syllabus Review .....	3
Longitudinal Integrated Curriculum (LIC) .....	3
Scheduled Hours/On-Call .....	3
Required Assignments .....	3
Required Assignment 1: Personal Educational Goals .....	3
Required Assignment 2: Interprofessional Experience .....	4
Required Assignment 3: Systems Project .....	4
Required Assignment 4: Pharmacy Field Trip .....	5
Required Assignment 5: Aquifer Family Medicine 6 Cases .....	6
Patient Care .....	6
Ambulatory Care .....	6
Patient Log Requirements using the Encounter Tracking System (ETS) .....	6
Alternate Educational Experiences .....	9
Online Curriculum .....	9
Clerkship Director Meeting .....	9
Clerkship Examinations .....	9
Summative Examination .....	9
Optional Formative Self-Assessment .....	9
Learning Resources .....	9
Institutional Resources .....	9
Required Reading .....	9
Recommended Resources .....	10
Evaluation .....	10
Formative Evaluation .....	10
Summative Evaluation .....	10
Grading .....	10
Years 3 and 4 Grading Policy .....	10
Clerkship-Specific Grading Criteria .....	10
Course Objectives .....	11
Professionalism and Professional Identity Formation .....	12
College of Medicine Policies .....	13
Absence and Attendance Policy .....	13
Clinical Experience and Education Policy .....	13
Office of Student Counseling Services .....	14
Patient Log (ETS) Monitoring Policy .....	14
Student Mistreatment Policy .....	14
University Policies .....	14
University Attendance Policy .....	14
Academic Honor Policy .....	14
Americans With Disabilities Act .....	14
Academic Success .....	15
Syllabus Change Policy .....	16

# 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 AY2025-2026](#) 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

*Completion of all assignments with a satisfactory and timely submission is a clerkship requirement. If Student Academics is unavailable students will email their documents to their Clerkship and Education Director.*

## 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 **three (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 AY2025-2026](#) site Family Medicine page.

**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. LIC students are expected to discuss their preliminary plan by the end of the 4<sup>th</sup> week.** 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 the assignment to the "Project Documents" tab for the course in Student Academics by **5:00 PM on the LAST day of the clerkship.**

## 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 Goals evaluation rubric	Above expectations	Meets expectations	Below expectations	Feedback
Goals are 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 the assignment to the "Project Documents" tab for the course in Student Academics by **5:00 PM on the LAST day of the clerkship.**

#### **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 the Clerkship faculty and the 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 as 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 the assignment to the “Project Documents” tab for the course in Student Academics by **5:00 PM on the LAST day of the clerkship.**

#### **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.
- 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 and 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 6 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 six (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 **six (6)** Aquifer FM cases as an **Educational Activity in ETS** by selecting the appropriate Aquifer FM case in the drop-down menu.

### **Evaluation**

Student progress will be monitored by their Clerkship Director.

## **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.

Category	Min. Req.	Problems/Conditions	Location of Service	Min. Level of Participation
Abdominal or pelvic pain	1	Abdominal pain	Inpatient or Outpatient	Perform
		Pelvic pain	Inpatient or Outpatient	Perform
Abnormal vaginal bleeding	1	Abnormal menstrual bleeding	Inpatient or Outpatient	Perform
		Oligomenorrhea	Inpatient or Outpatient	Perform
		Postmenopausal or uterine bleeding	Inpatient or Outpatient	Perform

		Vaginal bleeding during pregnancy	Inpatient or Outpatient	Perform
Allergic condition (not drug allergy)	1	Allergic rhinitis	Inpatient or Outpatient	Perform
		Allergy	Inpatient or Outpatient	Perform
Anxiety disorder	1	Generalized anxiety disorder (GAD)	Inpatient or Outpatient	Perform
		Panic disorder	Inpatient or Outpatient	Perform
Arthritis	1	Gout	Inpatient or Outpatient	Perform
		Lupus	Inpatient or Outpatient	Perform
		Osteoarthritis	Inpatient or Outpatient	Perform
		Psoriatic arthritis	Inpatient or Outpatient	Perform
		Rheumatoid arthritis	Inpatient or Outpatient	Perform
Asthma	1	Asthma	Inpatient or Outpatient	Perform
Atherosclerotic disease	1	Cerebral vascular disease	Inpatient or Outpatient	Perform
		Coronary artery disease (CAD)	Inpatient or Outpatient	Perform
		Peripheral artery disease (PAD)	Inpatient or Outpatient	Perform
Cancer	1	Cancer, bladder	Inpatient or Outpatient	Perform
		Cancer, brain	Inpatient or Outpatient	Perform
		Cancer, breast	Inpatient or Outpatient	Perform
		Cancer, colon	Inpatient or Outpatient	Perform
		Cancer, colorectal	Inpatient or Outpatient	Perform
		Cancer, endometrial	Inpatient or Outpatient	Perform
		Cancer, esophageal	Inpatient or Outpatient	Perform
		Cancer, gastric	Inpatient or Outpatient	Perform
		Cancer, kidney	Inpatient or Outpatient	Perform
		Cancer, laryngeal	Inpatient or Outpatient	Perform
		Cancer, lung	Inpatient or Outpatient	Perform
		Cancer, other	Inpatient or Outpatient	Perform
		Cancer, ovarian	Inpatient or Outpatient	Perform
		Cancer, pancreatic	Inpatient or Outpatient	Perform
		Cancer, prostate	Inpatient or Outpatient	Perform
		Cancer, skin	Inpatient or Outpatient	Perform
		Cancer, testicular	Inpatient or Outpatient	Perform
		Cancer, thyroid	Inpatient or Outpatient	Perform
		Melanoma	Inpatient or Outpatient	Perform
Chronic back pain	1	Chronic back pain	Inpatient or Outpatient	Perform
Chronic kidney disease	1	Chronic kidney disease (CKD)	Inpatient or Outpatient	Perform
		Glomerulonephritis	Inpatient or Outpatient	Perform
		Renal insufficiency	Inpatient or Outpatient	Perform
COPD or emphysema	1	Chronic obstructive pulmonary disease (COPD)	Inpatient or Outpatient	Perform
		Emphysema	Inpatient or Outpatient	Perform
Dementia	1	Dementia, Alzheimer's	Inpatient or Outpatient	Perform
		Dementia, multi-infarct	Inpatient or Outpatient	Perform
		Dementia, other	Inpatient or Outpatient	Perform
		Parkinson's disease	Inpatient or Outpatient	Perform
Depression	1	Bipolar disorder	Inpatient or Outpatient	Perform
		Major depressive disorder	Inpatient or Outpatient	Perform
		Persistent depressive disorder (dysthymia)	Inpatient or Outpatient	Perform
Diabetes mellitus*	1	Diabetic ketoacidosis (DKA)*	Inpatient or Outpatient	Perform
		Type 1 diabetes mellitus*	Inpatient or Outpatient	Perform
		Type 2 diabetes mellitus*	Inpatient or Outpatient	Perform
Dizziness or vertigo	1	Dizziness	Inpatient or Outpatient	Perform
		Vertigo	Inpatient or Outpatient	Perform
Dyslipidemia or hyperlipidemia	1	Dyslipidemia	Inpatient or Outpatient	Perform
		Hyperlipidemia	Inpatient or Outpatient	Perform
Gastroesophageal reflux disease, gastritis or ulcer	1	Gastritis	Inpatient or Outpatient	Perform
		Gastroesophageal reflux disease (GERD)	Inpatient or Outpatient	Perform
		Peptic or gastric ulcer	Inpatient or Outpatient	Perform
Headache	1	Headache, migraine	Inpatient or Outpatient	Perform
		Headache, other	Inpatient or Outpatient	Perform
		Headache, tension	Inpatient or Outpatient	Perform
Heart failure	1	Heart failure	Inpatient or Outpatient	Perform
Hypertension*	1	Hypertension*	Inpatient or Outpatient	Perform
	1	Ankle sprain	Inpatient or Outpatient	Perform

Joint pain or injury (other than back pain)		Bursitis	Inpatient or Outpatient	Perform
		Overuse injury	Inpatient or Outpatient	Perform
		Tendonitis	Inpatient or Outpatient	Perform
Obesity*	1	Obesity*	Inpatient or Outpatient	Perform
Skin lesion (benign or malignant)	1	Actinic keratosis	Inpatient or Outpatient	Perform
		Skin lesion	Inpatient or Outpatient	Perform
Skin rash or infection	1	Psoriasis	Inpatient or Outpatient	Perform
		Rash	Inpatient or Outpatient	Perform
		Skin infection, bacterial	Inpatient or Outpatient	Perform
		Skin infection, fungal	Inpatient or Outpatient	Perform
		Skin infection, viral	Inpatient or Outpatient	Perform
Substance use disorder	1	Cannabis use	Inpatient or Outpatient	Perform
		Intravenous (IV) drug use	Inpatient or Outpatient	Perform
		Opioid misuse	Inpatient or Outpatient	Perform
		Substance abuse	Inpatient or Outpatient	Perform
Thyroid disorder	1	Hyperthyroidism	Inpatient or Outpatient	Perform
		Hypothyroidism	Inpatient or Outpatient	Perform
Tobacco use disorder*	1	Tobacco use, cigarettes or other inhaled*	Inpatient or Outpatient	Perform
		Tobacco use, smokeless*	Inpatient or Outpatient	Perform
Upper respiratory infection	1	Influenza	Inpatient or Outpatient	Perform
		Mononucleosis	Inpatient or Outpatient	Perform
		Sinusitis	Inpatient or Outpatient	Perform
		Strep pharyngitis	Inpatient or Outpatient	Perform
		Viral or upper respiratory infection	Inpatient or Outpatient	Perform
		Viral pharyngitis	Inpatient or Outpatient	Perform
Urinary tract infection	1	Cystitis	Inpatient or Outpatient	Perform
		Pyelonephritis	Inpatient or Outpatient	Perform
		Urinary tract infection (UTI)	Inpatient or Outpatient	Perform
Vaginal discharge	1	Bacterial vaginosis	Inpatient or Outpatient	Perform
		Cervicitis	Inpatient or Outpatient	Perform
		Vaginitis	Inpatient or Outpatient	Perform

Category	Min. Req.	Procedures/Screenings	Location of Service	Min. Level of Participation
Cervical cancer	1	Cervical cancer screening	Inpatient or Outpatient	Perform
Colorectal cancer *	1	Colorectal cancer screening*	Inpatient or Outpatient	Perform
Folic acid supplementation	1	Folic acid supplementation for women who are planning or are capable of pregnancy	Inpatient or Outpatient	Perform
High blood pressure	1	High blood pressure screening	Inpatient or Outpatient	Perform
HIV	1	HIV screening	Inpatient or Outpatient	Perform
Tobacco use	1	Tobacco cessation counseling	Inpatient or Outpatient	Perform
Abdominal aortic aneurysm	1	Abdominal aortic aneurysm screening	Inpatient or Outpatient	Perform
Unhealthy alcohol use*	1	Alcohol misuse or alcohol abuse screen or unhealthy alcohol use*	Inpatient or Outpatient	Perform
Prediabetes and Type 2 diabetes	1	Diabetes mellitus/blood glucose screening	Inpatient or Outpatient	Perform
Breast cancer*	1	Breast exam, screening*	Inpatient or Outpatient	Perform
Chlamydia/ gonorrhea	1	Chlamydia screening	Inpatient or Outpatient	Perform
		Gonorrhea screening	Inpatient or Outpatient	Perform
Depression* (adult or child, any type)	1	Depression screening*	Inpatient or Outpatient	Perform
		Depression screening tool, Beck*	Inpatient or Outpatient	Perform
		Depression screening tool, PHQ9*	Inpatient or Outpatient	Perform
		Depression screening tool, Zung*	Inpatient or Outpatient	Perform
Fall prevention	1	Fall risk screening	Inpatient or Outpatient	Perform
Healthy lifestyle	1	Healthy diet screening	Inpatient or Outpatient	Perform
		Healthy lifestyle recommendations	Inpatient or Outpatient	Perform
Hepatitis B/C	1	Hepatitis B screening	Inpatient or Outpatient	Perform
		Hepatitis C screening	Inpatient or Outpatient	Perform
Intimate partner violence, elder abuse of vulnerable adult	1	Domestic violence screening	Inpatient or Outpatient	Perform
		Elder abuse screening	Inpatient or Outpatient	Perform
Lung cancer	1	Lung cancer screening	Inpatient or Outpatient	Perform
Obesity (adult or child)	1	Obesity screening	Inpatient or Outpatient	Perform



Osteoporosis	1	Osteoporosis screening	Inpatient or Outpatient	Perform
Skin cancer counseling	1	Skin cancer counseling	Inpatient or Outpatient	Perform
		Skin cancer screening	Inpatient or Outpatient	Perform
Statin use	1	Hyperlipidemia/statin use screening	Inpatient or Outpatient	Perform
Adult immunization	1	Immunization screening - adult	Inpatient or Outpatient	Assist
Child immunization	1	Immunization screening - child	Inpatient or Outpatient	Assist

### ***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***

[OnlineMedEd](#) provides a free *Family Medicine Practice Exam* that includes in-depth answer explanations and links to the lessons/cases associated with the questions.

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

The **Family Medicine Lesson List** document is available on the [Canvas M.D. Clerkships AY2025-2026](#) site's Family Medicine page. It provides links to the OnlineMedEd lessons covering all required problems listed in the Patient Care section of this syllabus, as well as additional pertinent Family Medicine lessons and cases.

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 AY2025-2026](#) 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 (without permission) 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. 75<sup>th</sup> percentile or higher to be eligible for Honors consideration
    - b. 60<sup>th</sup> percentile or higher to be eligible for High Pass consideration
    - c. 10<sup>th</sup> 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
- 
1. Satisfactory documentation of **at least 100** inpatient or outpatient (location of service) encounters in ETS (pass/fail)
  2. Satisfactory documentation of **all required problems** at the indicated level of participation and location of service in ETS (pass/fail)
  3. Satisfactory documentation of **all required procedures** at the indicated level of participation and location of service in ETS (pass/fail)
  4. Satisfactory completion and timely submission/**upload** of required assignment #1 **three (3) clerkship educational goals** into Student Academics "Project Documents" (pass/fail)
  5. Satisfactory completion and timely submission/**upload** of required assignment #2 **interprofessional experience** into Student Academics "Project Documents" (pass/fail)
  6. Satisfactory completion and timely submission/**upload** of required assignment #3 **systems project** into Student

Academics “Project Documents” (pass/fail)

7. Satisfactory completion and documentation of required assignment #4 **pharmacy field trip** by recording as an Educational Activity in ETS (pass/fail)
8. Satisfactory completion and documentation of required assignment #5 **six (6) required Aquifer Family Medicine Cases** by recording each as an Educational Activity in ETS (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, 2, 4, 7
FM-2	Demonstrate the ability to organize, prioritize, and carry out a multi-purpose visit with multiple family members.	1, 4
FM-3	Demonstrate proficiency in gathering and documenting essential and accurate information in the ambulatory setting through history taking and physical exams.	1, 4
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, 2
FM-5	Develop and implement evaluation and management plans for chronic illnesses commonly seen in the ambulatory setting.	1, 2
FM-6	Develop and implement evidence-based plans for health promotion and maintenance for patients of any gender or age that demonstrate an understanding of social determinants of health and are individualized for patient preferences.	1, 3, 7
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, 5, 7
FM-8	Identify the unique or complementary knowledge, skills, and abilities of other professionals in the care of patients with chronic illness, multiple chronic illnesses, and multiple co-morbidities, and work collaboratively with them to maximize patient outcomes and satisfaction.	1, 4, 6

Component	Learning Objectives	Assessment
Ambulatory Medicine MAPS TO: FM-1, FM-2, FM-3, FM-4, FM-5, FM-6, FM-7, FM-8	<ol style="list-style-type: none"> <li>1. Perform complete history and exams on patients in the ambulatory setting</li> <li>2. Develop differential diagnoses on patients in the ambulatory setting</li> <li>3. Interpret diagnostic data on patients in the ambulatory setting</li> <li>4. Develop management plans for patients in the ambulatory setting</li> <li>5. Provide guideline-based preventive care to adults and children</li> <li>6. Demonstrate ability to document the history and physical exam, progress notes, orders</li> <li>7. Communicate appropriate information orally to other healthcare personnel concisely</li> </ol>	<ul style="list-style-type: none"> <li>• Faculty assessment of communication skills</li> <li>• Clerkship Director assessment</li> <li>• Faculty observation of student performing history and exam</li> </ul>
Required Patient Encounters  MAPS TO: FM-5	<ol style="list-style-type: none"> <li>1. Document at least 100 patient encounters in inpatient or outpatient location of service</li> <li>2. Document the following problems at the specified minimum number, location of service, 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</li> <li>3. Document the following procedures at the specified minimum number, location of service, 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</li> </ol>	<ul style="list-style-type: none"> <li>• Weekly review of patient logs in ETS</li> </ul>
Required Systems Project MAPS TO: FM-5, FM-6, FM-8	<ol style="list-style-type: none"> <li>1. Document one of two options highlighting the systems involved in the care of patients that impact access, financial burdens, adherence, and coordination of care, either (1) Referral Project or (2) Cost of Chronic Care Project.</li> </ol>	<ul style="list-style-type: none"> <li>• Clerkship Director assessment</li> </ul>
Aquifer Family Medicine Cases MAPS TO: FM-4, FM-5, FM-6	<ol style="list-style-type: none"> <li>1. Apply knowledge and reasoning to interactive virtual patient cases to demonstrate clinical reasoning skills</li> <li>2. Completion of 6 modules, 4 of which are specifically required</li> </ol>	<ul style="list-style-type: none"> <li>• Clerkship Director assessment</li> </ul>

Educational Goals MAPS TO: FM-3, FM-4, FM-5, FM-7	<ol style="list-style-type: none"> <li>1. At the beginning of the clerkship, define 3 educational goals and select benchmarks to assess progress</li> <li>2. Track their progress using their benchmarks and submit the final self-evaluation report at the end of the clerkship</li> </ol>	<ul style="list-style-type: none"> <li>• Review and feedback provided by Clerkship Director</li> </ul>
Interprofessional Experience MAPS TO: FM-1, FM-8	<ol style="list-style-type: none"> <li>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</li> </ol>	<ul style="list-style-type: none"> <li>• Clerkship Director assessment</li> </ul>
Pharmacy Field Trip MAPS TO: FM-6	<ol style="list-style-type: none"> <li>1. Demonstrate ability to compare the numerous formulations and options patients are confronted with in choosing an OTC product</li> </ol>	<ul style="list-style-type: none"> <li>• Clerkship Director assessment</li> </ul>
Weekly Clerkship Director meetings MAPS TO: FM-1, FM-4, FM-5, FM-6, FM-7	<ol style="list-style-type: none"> <li>1. Demonstrate oral presentation skills</li> <li>2. Demonstrate clinical reasoning skills</li> <li>3. Demonstrate time management skills through duty hours</li> <li>4. Understand the impact of cost and value in healthcare</li> <li>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</li> </ol>	<ul style="list-style-type: none"> <li>• Clerkship Director evaluation</li> <li>• Mid-rotation feedback summary</li> <li>• Review of work hours</li> </ul>
NBME Family Medicine Modular Subject Examination MAPS TO: FM-4, FM-5	<ol style="list-style-type: none"> <li>1. Demonstrate knowledge and clinical reasoning to analyze clinical scenarios and answer basic, clinical, behavioral, and social science questions about family medicine</li> </ol>	<ul style="list-style-type: none"> <li>• Minimum score of 10<sup>th</sup> percentile</li> </ul>

## Professionalism and Professional Identity Formation

Medical professionalism is a cornerstone of the practice of medicine, embodying the values, behaviors, and responsibilities that are essential to building and maintaining trust between physicians, patients, and society. As a medical student and future physician, understanding and demonstrating professionalism is vital to your personal development.

The expectation is for all students to demonstrate a commitment to personal and professional growth and to carry out professional responsibilities with integrity, adhere to ethical principles and codes of conduct, and respect differences in values, beliefs, and experiences in all interactions.

Professional identity formation involves integrating one's personal identity with the professional standards and expectations of the medical field. This ongoing process enables medical professionals to remain true to themselves while providing exceptional care to patients and becoming well-rounded physicians.

Across the 4-year curriculum you will be continuously evaluated according to these core attributes of Medical Professionalism:

- **Commitment to Professional Behavior and Ethical Practice**

*Adherence to ethical principles, such as beneficence, nonmaleficence, justice, and respect for autonomy.*

**Examples:** Maintaining confidentiality by avoiding discussing patient cases in public areas, even in CLC. Taking responsibility for personal lapses in Professionalism, and taking steps to address them, incorporating feedback.

- **Accountability**

*Medical professionals are accountable to their patients, peers, society, and the profession itself.*

**Examples:** Engaging responsibly with the FSUCOM curriculum, including demonstrating effort when preparing for required learning sessions or completing assignments. Arriving on time to required sessions, completing assignments by deadlines, and seeking feedback to improve your performance.

- **Honesty and Integrity**

*Acting with honesty, transparency, and moral courage, even in challenging situations.*

**Examples:** Acknowledging when you do not understand instead of pretending you do, seeking help when needed, crediting the contributions of others, and reporting lapses when appropriate.

- **Compassion and Respect for Others**

*Treating patients, colleagues, and team members with dignity, empathy, and cultural sensitivity.*

**Examples:** Actively listening during team discussions, valuing diverse perspectives, values and beliefs, being aware of bias in self and others, and avoiding disruptive behaviors like silencing your phone during classes and meetings.

- **Excellence, Self-discovery, and Personal Well-Being**

A commitment to lifelong learning and the pursuit of the highest standards in medical knowledge, clinical skills, and patient care.

**Examples:** Taking the initiative to go beyond required readings by exploring additional resources to deepen your understanding of challenging topics, applying metacognitive approaches to self-evaluate learning.

## **Why Professionalism Matters**

Professionalism fosters trust, ensures accountability, and enhances the quality of care delivered to patients. It also strengthens the medical profession's role in society.

Violations of professionalism may result in a report of concern for unprofessional behavior and could lead to referral to the Student Evaluation and Promotion Committee (SEPC). Serious breaches of professionalism may result in suspension, a failing grade for the clerkship/course, and/or referral to SEPC.

# **College of Medicine 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 getting the campus dean's approval. 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.

## ***Clinical Experience and Education Policy***

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 the number of weeks of the clerkship.
- Students must have at least one day out of every 7 completely free from clinical duties and required educational activities when averaged over the number of weeks of the clerkship.
- Clinical experience must not exceed 24 hours of continuously scheduled assignments, except up to 4 hours of additional time 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 ensure 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 section in the [FSU COM Student Handbook](#) and [report incidents of mistreatment](#) as soon as possible.

## **University Policies**

### ***University Attendance Policy***

Excused absences include documented illness, deaths in the family, and other documented crises, call to active military duty or jury duty, religious holy days, and official University activities. These absences will be accommodated in a way that does not arbitrarily penalize students who have a valid written excuse. Consideration will also be given to students whose dependent children experience serious illness.

### ***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 accommodation 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. Students with disabilities needing academic accommodation should: (1) register with and provide documentation to the Office of Accessibility Services; and (2) request a letter from the Office of Accessibility Services to be sent to the instructor indicating the need for accommodation and what type; and (3) meet (in person, via phone, email, skype, zoom, etc...) with each instructor to whom a letter of accommodation was sent to review approved accommodations. 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 the latest version of this statement and 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>

### ***Academic Success***

Your academic success is a top priority for Florida State University. University resources to help you succeed include tutoring centers, computer labs, counseling and health services, and services for designated groups, such as veterans and students with disabilities. The following information is not exhaustive, so please check with your advisor or the Department of Student Support and Transitions to learn more.

### ***Confidential campus resources:***

Various centers and programs are available to assist students with navigating stressors that might impact academic success. These include the following:

#### ***Victim Advocate Program***

University Center A, Rm. 4100  
(850) 644-7161  
Available 24/7/365  
Office Hours: M-F 8-5  
<https://dsst.fsu.edu/vap>

#### ***Counseling and Psychological Services (CAPS)***

Florida State University's Counseling and Psychological Services (CAPS) primary mission is to address psychological needs and personal concerns, which may interfere with students' academic progress, social development, and emotional well-being. The following in-person and virtual (tele-mental health) services are available to all enrolled students residing in the state of Florida:

1. Individual therapy
  2. Group therapy
  3. Crisis Intervention
  4. Psychoeducational and outreach programming
  5. After hours crisis-hotline
  6. Access to community providers for specialized treatment
- Call 850-644-TALK (8255) for more information on how to initiate services.

#### ***Counseling and Psychological Services***

250 Askew Student Life Center



942 Learning Way  
(850) 644-TALK (8255)  
Walk-in and Appointment Hours:  
M-F 8 am – 4 pm  
<https://counseling.fsu.edu/>

Services at UHS are available to all enrolled students residing in Florida:

The mission of University Health Services (UHS) is to promote and improve the overall health and well-being of FSU students. UHS provides a coordinated continuum of care through prevention, intervention, and treatment. Services include general medical care, priority care, gynecological services, physicals, allergy injection clinic, immunizations, diagnostic imaging, physical therapy, and a medical response unit. The Center for Health Advocacy and Wellness (CHAW) assists students in their academic success through individual, group, and population-based health and wellness initiatives. Topics include wellness, alcohol and other drugs, hazing prevention, nutrition and body image, sexual health, and power based personal violence prevention. For more information, go to [uhs.fsu.edu](https://uhs.fsu.edu).

University Health Services  
Health and Wellness Center  
960 Learning Way  
Tallahassee, FL 32306  
Hours: M-F, 8 am – 4 pm  
(850) 644-6230  
<https://uhs.fsu.edu/>

***Syllabus Change Policy***

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