

**BCC-7176** 

# Advanced Family Medicine Clerkship

2013-2014

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## **Instructors**

#### **Education Director**

**Dr. Suzanne Leonard Harrison** 

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## **Clerkship Directors**

Campus	Director
Fort Pierce	Dr. Nancy Baker
Daytona	Dr. George Bernardo
Orlando	Dr. Douglas Meuser
Pensacola	Dr. Dennis Mayeaux
Sarasota	Dr. Nicole Bentze
Tallahassee	Dr. Suzanne Harrison
Thomasville	Dr. Rudy Hehn (Administrator)
Marianna	Dr. Steven Spence ( Administrator )

#### **Course Overview**

## Description

The Advanced Family Medicine Clerkship ("the Clerkship") is a four-week structured "sub-internship" in family medicine. Students will be exposed to the full spectrum of family medicine through this clerkship, with an opportunity to provide medical care to all ages of patients in both the inpatient and outpatient setting. Students are expected to assume an expanded level of clinical responsibility for evaluation and management of patients with a broad range of conditions. Students will be exposed to a variety of procedures commonly performed by family physicians in the inpatient and outpatient settings. The Clerkship may occur at an affiliated family medicine residency program or an approved rural site.

## Residency Option

Students assigned to a residency program are supervised by residency faculty and resident physicians. This offers the student an opportunity to interact with residents during medical school and learn the dynamics of working as an integral part of a residency team. Students assigned to a residency will participate in morning rounds, noon conferences and other educational offerings.

#### Rural Option

Students assigned to a rural site are supervised by family physician faculty. Students will participate in daily inpatient and outpatient care. This option offers the opportunity to participate in continuity of patient care from one setting to another and to experience the expanded scope of services provided by the family physician in rural settings. Students will participate in conferences available in the setting and as directed by clinical faculty.

## **Course Components**

#### **Educational Goal**

Students will identify a personal educational goal at the beginning of the Clerkship and develop a strategy to address their learning need during the 4-week rotation. Students will share their personal goal with assigned faculty and Clerkship Director during the first few days of the clerkship, and then track their progress throughout the rotation. **Students will submit a final summative report on their self-identified educational goal and progress to Blackboard by 5 p.m. on the last day of the Clerkship.** Evaluation of this assignment will be included in the final grade for the clerkship. Specific instructions and examples of exemplary student work are available on Blackboard.

## **Project**

<u>Transitions Across the Continuum Project</u>: Students will choose one patient for this project for whom they are able to perform the admission, daily inpatient care and hospital discharge. The purpose of this project is to highlight the transition that occurs as a patient moves from the inpatient setting to home or another facility. This is work that every student performs during the care of several patients during the Clerkship, and involves important aspects of discharge planning and patient education. Through this project, the

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student will demonstrate ability to appropriately document the admission note and discharge summary, perform medication reconciliation, provide patient education that includes discharge instructions, and write a reflective paper discussing challenges encountered across the continuum of care for the patient. Students are encouraged to choose this patient early in the clerkship so they have adequate time for completion. **The project will be submitted to Blackboard by 5 p.m. on the last day of the Clerkship.** Evaluation of this project will be included in the final grade for the clerkship. Specific instructions and examples of exemplary student work are available on Blackboard.

#### Inpatient Care

Students will participate in the care of hospitalized patients during this clerkship, with an emphasis on diagnosis and management. Students are expected to assume an expanded level of clinical responsibility consistent with a 4<sup>th</sup> year medical student. Students will participate in all aspects of inpatient care, including hospital admission and discharge, patient education, preventive care and commonly performed inpatient procedures. Management expectations include: a) performing an admission history and physical examination; b) formulating an initial problem list, treatment plans, and writing admission orders; c) making daily rounds, monitoring the patient's progress, writing progress notes and ordering additional tests and/or treatments; and, d) performing the discharge assessment and paperwork.

#### **Ambulatory Care**

Students will participate in ambulatory care during this clerkship, with an emphasis on continuity of care for hospitalized patients seen in follow-up, newborn care, prenatal and postpartum care, and office procedures. Management expectations include: a) gathering an appropriate histories and performing the appropriate physical examinations; b) formulating preliminary diagnostic impressions; c) creating diagnostic and therapeutic plans; and, d) writing/documenting SOAP notes.

## Patient Log

Students will record a minimum of 30 patient encounters and 5 procedures in the inpatient setting. Students will record a minimum of 30 patient encounters and 5 procedures in the outpatient setting. Students will record the following types of encounters in the ambulatory setting: 1) Hospital follow-up; 2) Newborn care; 3) Well-child check; 4) prenatal visit; and 5) postpartum care. There are no specific conditions or diagnoses required in the hospital setting. Students are expected to record all significant patient encounters, regardless of diagnosis or setting. Patient encounter data will be collected through the E\*Value system.

Failure to record required patient care will make a student ineligible for consideration for honors for the clerkship, and may result in a grade of "IR" requiring additional time on the clerkship, or failure.

## Reading

There is not a required text for this clerkship. Students are expected to locate and read pertinent journal articles and guidelines that assist in the evaluation and management of patients.

## Meetings/Lectures

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Students will participate in morning rounds, noon conferences and other educational meetings when available. If not available, topics may be assigned by clinical faculty or clerkship director to augment the student's learning.

Students will meet or communicate with clerkship director weekly throughout the clerkship. This real or virtual meeting will include clinical experiences, progress on documentation of patient encounters, personal educational goal, project and challenges faced.

A mid-clerkship formative evaluation will be completed by the clinical faculty and clerkship director.

#### **Evaluations**

An evaluation of student clinical performance will be completed by the clinical faculty at the end of the clerkship. A final summative report will be completed by the clerkship director at the end of the clerkship.

#### Exam

Students will take a web-based NBME examination in Family Medicine at the end of the clerkship. This will include the core 80-question exam with additional modules on chronic care and musculoskeletal / sports-related injury conditions.

#### Scheduled Hours/Call

The Clerkship is four weeks in duration and will consist of inpatient care, ambulatory clinics, on-call shifts, lectures, conferences, self-identified reading, clerkship project and completion of educational goal. Students will work at least 5 full days per week and take assigned night and weekend call. Each student will spend a minimum of 20 days participating in patient care activities during the 4-week clerkship. On-call responsibilities are based on the clinical faculty or resident call schedule, but not more frequent than once every four days.

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

Similar to other required clerkships, extended absences from the clerkship are not permitted. Any absence from the clerkship must be pre-approved by the regional campus dean prior to the beginning of the clerkship. Even with an excused absence, the student will complete the scheduled work as outlined above. The Clerkship Director and Education Director must be notified of any absence in advance. Unapproved absences during the clerkship will result in a grade of "incomplete" until remediated, and may result in a grade of "fail" for the clerkship.

Specific schedules are determined at each site and will be communicated to the student during orientation or on the first day of the clerkship.

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## **Competencies and Assessment**

	Assessment
Demonstrate the ability to assess the patient's	Clerkship project
	Direct observation by clinical faculty
and incorporate that information into his/her care.	Summative evaluation at end of clerkship
Perform an organized hospital admission that includes appropriate data gathering (history and examination) and patient education.	Direct observation by clinical faculty
	Summative evaluation at end of clerkship
Perform accurate clinical assessments that include appropriate differential diagnoses in the inpatient and outpatient setting.	Direct observation by clinical faculty
	Mid-clerkship feedback
	Summative evaluation at end of clerkship
Recognize pertinent normal and abnormal	Direct observation by clinical faculty
examination findings.	Summative evaluation at end of clerkship
Develop appropriate plans for diagnostic	Direct observation by clinical faculty
evaluation in the inpatient and outpatient setting.	Summative evaluation at end of clerkship
Perform appropriate evidence-based healthcare screenings in the inpatient and outpatient setting.	Clerkship project
	Patient log
	Direct observation by clinical faculty
	Mid-clerkship feedback and communication with clerkship director
Evaluate the functional status of patients during	Clerkship project
	Direct observation by clinical faculty
safety measures at nome as mulcated.	Summative evaluation at end of clerkship
Perform accurate and clear oral presentations.	Direct observation by clinical faculty
	Summative evaluation at end of clerkship
Negotiate plan of care with patient using shared decision-making.	Direct observation by clinical faculty
Perform detailed review of patients' medications that included indication, treatment targets interactions with other medications, contraindications and potential adverse events.	Clerkship project
	Patient log
	Direct observation by clinical faculty
,	Summative evaluation at end of clerkship
uai Phèipha RèiDèipa IIdia Pilabha	erform appropriate plans for diagnostic valuation in the inpatient and outpatient setting.  erform appropriate evidence-based healthcare creenings in the inpatient and outpatient and outpatient setting.  erform appropriate plans for diagnostic valuation in the inpatient and outpatient setting.  erform appropriate evidence-based healthcare creenings in the inpatient and outpatient setting.  erform appropriate evidence-based healthcare creenings in the inpatient and outpatient setting.  erform appropriate evidence-based healthcare creenings in the inpatient and outpatient setting.  erform accurate and clear oral presentations.  egotiate plan of care with patient using shared ecision-making.  erform detailed review of patients' medications not included indication, treatment targets

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	Describe the indications, risks and benefits of procedures performed in the inpatient and outpatient settings.	Direct observation by clinical faculty.
	Demonstrate the integration of basic science knowledge into the clinical care of the patient.	Direct observation by clinical faculty
		Mid-clerkship feedback
		Summative evaluation at end of clerkship
	Demonstrate adequate knowledge base to provide appropriate evidence-based medical care	Direct observation by clinical faculty
		NBME examination
patient at the time of discharge, and then an analysis of potential improvements in the process.  Demonstrate the ability to address the unit	Evaluate the specific challenges and risks for a	Clerkship project
	patient at the time of discharge, and then provide an analysis of potential improvements in that process.	Direct observation by clinical faculty
	Demonstrate the ability to address the unique needs of patients with limited access to medical care.	Direct observation by clinical faculty
Interpersonal and Communication Skills	Demonstrate patient-centered interaction skills during patient encounters.	Direct observation by clinical faculty
		Mid-clerkship feedback
		Summative evaluation at end of clerkship
	Communicate diagnostic information and care plan to patients with empathy and sensitivity.	Direct observation by clinical faculty
		Summative evaluation at end of clerkship
	Demonstrate cultural competency in interactions with patients from diverse backgrounds.	Direct observation by clinical faculty
	Recognize and address personal bias/prejudice	Direct observation by clinical faculty
	when interacting with patients.	Written reflection/clerkship project
	Counsel and educate patients and their families.	Clerkship project
		Direct observation by clinical faculty
	Communicate diagnostic information and clinical	Direct observation by clinical faculty
	reasoning to healthcare team with suggested intervention and plan of care through effective oral presentation.	Summative evaluation at end of clerkship.
	Demonstrate the ability to document a comprehensive admission evaluation.	Clerkship project
		Direct observation by clinical faculty
	Demonstrate the ability to document a discharge summary.	Clerkship project
		Direct observation by clinical faculty
	Demonstrate the ability to document daily progress notes for the hospitalized patient.	Direct observation by clinical faculty

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	Evaluate the health literacy by assessing patient's comprehension of written material, verbal instructions and understanding of health	Clerkship project Direct observation by clinical faculty
	information.	
	Respond with empathy and sensitivity to patients with challenging behaviors.	Direct observation by clinical faculty
Professionalism	Identify personal learning needs and choose a	Educational goal assignment
	goal for improvement during the clerkship.	Direct observation by clinical faculty
		Mid-clerkship feedback and communication with clerkship director
	Develop a strategy to address a personal	Educational goal assignment
	educational goal that includes specific targets by which to measure progress.	Mid-clerkship feedback and communication with clerkship director and clinical faculty
	Demonstrate motivation to learn.	Direct observation by clinical faculty
		Mid-clerkship feedback and communication with clerkship director
	Record all required patient encounters and procedures in electronic log.	Patient log
	Demonstrate respect for the contributions of all	Direct observation by clinical faculty
	healthcare providers (physicians, nurse practitioners, physician assistants, nurses, social workers, other staff, etc.) involved in the care of a patient.	Summative evaluation at end of clerkship
Systems-Based Practice	Advocate for and assist patients in arranging	Clerkship project
follow-up care at the time of hospital discharge.  Work effectively with other healthcare providers, social workers, community agencies, nurses and other healthcare professionals.  Understand the importance of addressing psychosocial and cultural issues to improve patient adherence to a plan of care in an effort to decrease medical errors.	follow-up care at the time of hospital discharge.	Direct observation by clinical faculty
		Clerkship project
		Direct observation by clinical faculty
	other healthcare professionals.	Summative evaluation
		Clerkship project
	Direct observation by clinical faculty	
		Summative evaluation

#### **Policies**

#### Americans with Disabilities Act

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

The Office of Student Counseling Services
Medical Science Research Building
G146

Phone: (850) 645-8256 Fax: (850) 645-9452

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

Student Disability Resource Center 97 Woodward Avenue, South Florida State University Tallahassee, FL 32306-4167

Voice: (850) 644-9566 TDD: (850) 644-8504 sdrc@admin.fsu.edu

http://www.fsu.edu/~staffair/dean/StudentDisability

#### Academic Honor Code

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

## Attendance Policy

The College of Medicine has detailed attendance policies as they relate to each cohort and events that conflict with course schedules. See page 30 of <u>FSUCOM Student Handbook</u> for details of attendance policy, notice of absences and remediation.

## **Library Policy**

The <u>COM Maguire Medical Library</u> is primarily a digital library that is available 24/7 through secure Internet access. Library resources that support this course are available under "Course Pages" on the library website. In addition, many of the point-of-care resources are available for full download to mobile data devices. Upon student request, items not found in the library collection may be borrowed through interlibrary loan.

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## **Required Materials**

#### Resource needs

All of the physical resources necessary for this course are either in place or currently being recruited. Affiliation agreements with each of the participating hospitals and residency programs are in place, and new affiliations are occurring all the time. Rural sites are also being identified and recruited. Student learning areas complete with computers, textbooks and internet access are available at each regional campus site and at the Family Medicine Residency Programs.

Taken together, these resources—people, equipment, materials, services—are adequate to provide an excellent educational experience for students.

#### Required Readings

There is no required textbook for this clerkship. Reading of the medical literature and/or medical textbooks is strongly encouraged. What the student reads should be dictated by his/her personal education needs and the care needs of patients with whom the student is involved.

## **Grading**

Grading policies for all Clerkships are standardized and can be found in the **Academic Policies** section of the *FSUCOM Student Handbook* -page 39.

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