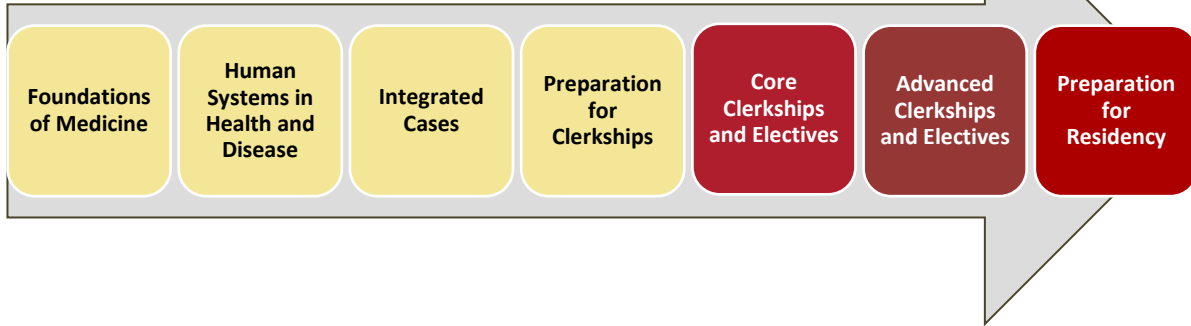


MEDICINE



BCC 7176

FAMILY MEDICINE

SUBINTERNSHIP CLERKSHIP

Florida State University
College of Medicine
Last Updated: 4/13/17-dl

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Instructors

Education Director

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Clerkship Directors

Campus	Director
Fort Pierce	Dr. Nancy Baker
Daytona	Dr. George Bernardo
Orlando	Dr. Douglas Meuser
Pensacola	Dr. Hillary Hultstrand
Sarasota	Dr. Nicole Bentze
Tallahassee	Dr. Julia Weeks
Thomasville	Dr. Calvin Reams (Administrator)
Marianna	Dr. Steven Spence (Administrator)

Course Overview

Description

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

Students will be assigned to the inpatient family medicine service of a residency program or hospital-based rural site. Where appropriate, students may also participate in ambulatory encounters that provide additional exposure to the full scope of family medicine and augment their learning. Students are expected to participate in morning report, noon conferences and other available educational offerings.

Orientation

Students are required to review both the syllabus and the orientation video prior to the first day of the sub-internship. The video is available on Blackboard and on the FSU College of Medicine webpage for course syllabi. Please follow this link to view "Orientation to the Family Medicine Sub-Internship." Students will also have a live or virtual orientation meeting with their regional Campus Clerkship Director.

Course Components

Assignment: Personal Educational Goal

The purpose of this assignment is to enhance the student's ability to recognize their own learning needs and develop a strategy to meet those needs.

Students will choose one personal educational goal specific to their own current learning needs, appropriate for the specific learning environment and one that can be achieved in a 4-week Sub-Internship. Students must discuss a preliminary plan regarding their personal goal with assigned Clinical Faculty and Clerkship Director by the end **of the first week** of the Clerkship. This will be submitted to the clerkship director via email for feedback. The student will create a strategy for self-improvement that includes appropriate evidence-based e resources, with pre-selected specific targets by which they will assess their own progress. Using these targets, the student will track advancement of skill, knowledge or behavior throughout the rotation. Students are encouraged to seek and incorporate feedback from both Clinical Faculty and Clerkship Director prior to submitting the final report.

At the end of the block, the final written report in **MS-WORD** document format will be submitted to the Student Academics site via Secure Apps. The **final report is due by 5 p.m. on the last day of the Sub-Internship**. Students are encouraged to send a copy of this report to the Education Director via email in the event that the electronic system is down or otherwise unavailable.

Evaluation of this assignment will be done by the Education Director at the conclusion of the sub-internship. The quality of the completed assignment will impact the student's final grade for the Clerkship. Students must submit an **exemplary report** to be **considered for "honors"** for the Sub-Internship. If remediation is required, the student is no longer eligible for "honors", and will be assigned an initial grade of "IR" until remediation has been completed.

Evaluation of this assignment will be based on the following:

1. Was the goal specific and achievable?
2. Did the student develop a thoughtful strategy to address educational goal?
 - a. Were there measurable targets?
 - b. Were appropriate evidence-based resources/references identified?
3. Did the student clearly identify next steps in the learning process?
4. Was the student insightful in their reflection on the process?
5. Did the student identify next steps (what was left to learn)?

Evaluation Rubric for Personal Educational Goal

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

Inpatient Care

The focus of the Family Medicine Sub-Internship is active participation in the care of hospitalized patients, with an emphasis on diagnosis and daily management for the entire 4-week rotation. Students are expected to assume an expanded level of clinical responsibility consistent with a 4th year medical student on a sub-internship. Students will participate in all aspects of inpatient care, including hospital admission, daily care, discharge, patient education, preventive care and commonly performed inpatient procedures. Management expectations include: a) performing admission history and physical examinations; b) formulating initial problem lists, 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. Students are expected to carry a load of at least 2 patients at all times; if that is not possible, students should assist residents and attending physicians with their work load, potentially assuming care of a patient they did not admit.

Ambulatory Care

Students may participate in ambulatory care during this clerkship if it augments their learning and emphasizes the full scope of practice possible for a Family Physician, although there is no specific requirement for numbers or types of encounters. Students should focus on hospital follow-up of patients they cared for during the inpatient portion of the sub-internship, further developing their understanding of the transitions of care. Other areas of emphasis should expand the scope of care and may include women's health, pediatrics and procedures.

Patient Log

Students will record a minimum of **40 patient encounters in the inpatient** setting, with at least 80% of encounters at the full level of participation in patient care. Students will record the following types of encounters in the inpatient setting: 1) Admission History & Physical; 2) Hospital Discharge; and 3) Evaluation in Emergency Department. Students do not have a pre-determined set of conditions or procedures required for this clerkship, but are encouraged to record all encounters and procedures for a comprehensive log of the experience.

Patient encounter data will be collected through the E*Value system. Failure to record the minimum number of patient encounters may result in a grade of "fail," or at a minimum, eliminate the possibility of receiving an "honors" grade.

Reading

Students are expected to locate and read pertinent journal articles and guidelines that assist in the evaluation and management of patients. *fmCASES* is available as a resource for students in the Sub-Internship, and has excellent links to other resources pertinent to the cases. There is no required text for this sub-internship, although additional readings may be assigned by faculty, clerkship director or residents to augment student learning.

Meetings/Lectures

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

Students are required to **communicate weekly with clerkship director** throughout the sub-internship; this may be via in-person meetings, email or telephone. This real or virtual meeting will include discussion on clinical experiences, progress on documentation of patient encounters, personal educational goal and any challenges or concerns. A mid-clerkship formative evaluation will be completed by the clerkship director with feedback provided by the student and clinical faculty.

Evaluations

An evaluation of student clinical performance will be completed by the assigned Clerkship Faculty at the end of the sub-internship. A final summative report will be completed by the Clerkship Director at the end of the clerkship. The Education Director will review all components of sub-internship and include an assessment of each in the final grade summary.

Exam

Students will take a web-based NBME examination in Family Medicine at the end of the sub-internship. This will include the core 80-question exam with additional modules on chronic care and musculoskeletal conditions. A practice exam based on curriculum in *fmCASES* can be arranged through the Clerkship Director at the student's Regional Campus

Scheduled Hours/Call

The Sub-Internship is four weeks in duration and will consist of inpatient care, on-call shifts, lectures, conferences, self-identified reading and personal 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 sub-internship. On-call responsibilities are based on the clinical faculty or resident call schedule, but will not be more frequent than once every four days. Specific schedules are determined at each site and will be communicated to the student during on-site orientation or on the first day of the clerkship.

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 sub-internship are not permitted. Any absence from the sub-internship 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.

Competencies

Domain	Competency	Assessment	EPA
Patient Care	Demonstrate the ability to assess the patient's unique circumstances and experience of illness, and incorporate into the patient's care.	Direct observation by clinical faculty	EPA 1: Gather a history and perform a physical examination EPA 2: Prioritize a differential diagnosis following a clinical encounter EPA 3: Recommend and interpret common diagnostic and screening tests Multiple EPAs make reference to shared decision making.
	Demonstrate the ability to elicit an accurate and thorough medical history.	Formative and summative assessment by clinical faculty	
	Conduct accurate and thorough physical examination.		
	Recognize normal and abnormal findings on physical exam.		
	Perform accurate clinical assessments that include appropriate differential diagnoses in the inpatient setting.		
	Develop appropriate plans for diagnostic evaluation.		
Demonstrate the ability to utilize shared decision-making in negotiating a plan of care.			
Domain	Competency	Assessment	EPA
Medical Knowledge	Perform detailed medication review that includes indication, treatment targets, interactions, contraindications and potential adverse events.	Direct observation by clinical faculty	EPA 13: Identify system failures and contribute to a culture of safety and improvement.
	Develop clinical questions and identify the evidence-based resources needed to provide excellent patient care.	Formative and summative assessment by clinical faculty NBME exam	EPA 7: Form clinical questions and retrieve evidence to advance patient care
	Describe basic bio-behavioral and clinical science principles used to analyze and solve problems related to the diagnosis, treatment and prevention of disease.		
	Demonstrate the effective use of pharmacotherapeutic agents and other therapeutic modalities.		
Domain	Competency	Assessment	EPA
Practiced-Based Learning and Improvement	Recognize and demonstrate the ability to address the unique needs of patients from underserved environments	Direct observation by clinical faculty	EPA 1: Gather a history and perform a physical examination
	Apply the principles and methods of Evidence-Based Medicine to acquire, appraise, and assimilate new clinical information to improve patient care.	Formative and summative assessment by clinical faculty	EPA 7: Form clinical questions and retrieve evidence to advance patient care
Domain	Competency	Assessment	EPA
Interpersonal and Communication Skills	Demonstrate respect, empathy, compassion, responsiveness and concern regardless of the patient's problems, personal characteristics.	Direct observation by clinical faculty	EPA 1: Gather a history and perform a physical examination EPA 6: Provide an oral presentation of a clinical encounter EPA 5: Document a clinical encounter in the patient record EPA 1: Gather a history and perform a physical examination
	Communicate diagnostic information and reasoning, intervention options, and a suggested plan of care with truthfulness, sensitivity and empathy.	Formative and summative assessment by clinical faculty	
	Demonstrate effective oral communication skills with colleagues and other health professionals.		
	Demonstrate effective written communication with colleagues and other health professionals, including comprehensive admission evaluation, progress notes in a hospitalized patient and discharge summary.		
	Evaluate health literacy by assessing patient's comprehension of verbal & written health information, and assist patients in obtaining and understanding health information.		
	Demonstrate culturally and linguistically appropriate interviewing skills with patients from diverse backgrounds		
Domain	Competency	Assessment	EPA
Professionalism	Formulate and use strategies to support life-long learning to remain current with advances in medical knowledge and practice.	Direct observation by clinical faculty	EPA 7: Form clinical questions and retrieve evidence to advance patient care
	Demonstrate respect for the contributions of medical colleagues, other health care professionals, agencies, and families, to the health of the individual and the health of the community.	Formative and summative assessment by clinical faculty	EPA 9: Collaborate as a member of an interprofessional team
	Recognize one's personal abilities and limitations, knowing when to request assistance.		EPA 9: Collaborate as a member of an interprofessional team
	Display professionalism, high ethical standards, and integrity in relationships in all aspects of medical practice, especially with respect to confidentiality, informed consent, and justice.		EPA 13: Identify system failures and contribute to a culture of safety and improvement
Domain	Competency	Assessment	EPA
Systems-Based Practice	Demonstrate basic knowledge of the health care delivery system in the community including healthcare providers, hospitals, facilities, home health and community agencies.	Direct observation by clinical faculty	EPA 13: Identify system failures and contribute to a culture of safety and improvement
	Demonstrate the ability to work effectively as a member of a health care team.	Formative and summative assessment by clinical faculty	EPA 9: Collaborate as a member of an interprofessional team
	Demonstrate respect for the roles of other healthcare providers and of the need to collaborate with others in caring for individual patients and communities.		

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](#)

874 Traditions Way

108 Student Services Building

Florida State University

Tallahassee, FL 32306-4167

Voice: (850) 644-9566

TDD: (850) 644-8504

sdrc@admin.fsu.edu

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. 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/Academics/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 [FSUCOM Student Handbook](#) for details of attendance policy, notice of absences and remediation.

Library Policy

The [COM Charlotte Edwards Maguire Medical Library](#) is primarily a digital library that is available 24/7 through secure Internet access. Library resources that support this course are available under "Subject Guides" under the *Resources by subject* from the main menu 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.

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 their own personal education needs and the care needs of patients with whom the student is involved.

Grading

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