



The Florida State University
College of Medicine

Family Medicine Sub-Internship Clerkship

BCC-7176

2014-2015

Table of Contents

Instructors.....	3
Education Director	3
Clerkship Directors	3
Course Overview.....	4
Description	4
Residency Option	4
Rural Option.....	4
Course Components	4
Assignment #1: Personal Educational Goal	4
Assignment #2: Transitions Across the Continuum Project	5
Inpatient Care	6
Ambulatory Care.....	7
Patient Log.....	7
Reading.....	7
Meetings/Lectures	7
Evaluations	7
Exam.....	8
Scheduled Hours/Call	8
Competencies and Assessment	9
Policies	11
Americans with Disabilities Act	11
Academic Honor Code.....	11
Attendance Policy	11
Library Policy	11
Required Materials	12
Resource Needs	12
Required Readings	12
Grading.....	12

Instructors

Education Director

Dr. Suzanne Leonard Harrison

Office:

Suite 3210-A

Department of Family Medicine and Rural Health

College of Medicine

Florida State University

1115 West Call Street | Tallahassee, FL 32306-4300

Phone: 850-644-7029

Email: suzanne.harrison@med.fsu.edu

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. Julia Weeks
Thomasville	Dr. Rudy Hehn (Administrator)
Marianna	Dr. Steven Spence (Administrator)

Course Overview

Description

The Family Medicine Sub-Internship Clerkship (“the Clerkship”) is a four-week structured clerkship 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 both 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

Assignment #1: Personal Educational Goal

The purpose of this assignment is to enhance the ability to recognize one’s own learning needs through self-assessment and develop a strategy to meet those learning goals.

Students will choose ONE educational goal specific to their own learning needs as a 4th year medical student. This goal should be appropriate for the specific learning environment and one that can be achieved in a 4-week Clerkship. Student must **share their personal goal with assigned Clinical Faculty and Clerkship Director during the first few days of the clerkship; this is due no later than Saturday at the end of the first week.** The student will create a strategy for self-improvement with appropriate resources and a plan that includes specific targets by which they can assess progress, and then track advancement of skill, knowledge or behavior throughout the rotation. Students are encouraged to seek and incorporate feedback from Clinical Faculty and Clerkship Director.

Evaluation of this assignment will be done by the Education Director and will be included in the final grade for the clerkship. Assignment will be included in the consideration of final grade for the Clerkship; students must submit an exemplary report to be considered for honors for the Clerkship. If educational goal is returned for revision, a student is no longer eligible for honors, and will be assigned an initial grade of “IR” until remediation has been completed.

Evaluation of assignment will be evaluated 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 resources/references identified?
3. Was the student insightful in his/her reflection of the process?
4. Did the student identify what was learned and what was left to learn (or next step)?

Submission:

1. **Submit a final summative report on self-identified goal, strategy and progress as a WORD document to Blackboard.** Other formats will not be evaluated and you risk not receiving credit for your project.
2. Assignment is **due at or before 5 p.m. on the last day of the Clerkship.**
3. If Blackboard is not available, send project via email to the Education Director. The student is still required to upload to Blackboard when the system is available, and assignments will not be accepted for credit until this has been accomplished. The version that is sent to the Education Director must be the same version that is submitted to Blackboard, and must be sent by 5 p.m. on the last day of the Clerkship.

Specific instructions, grading rubric and examples of exemplary student work are available on Blackboard.

Assignment #2: Transitions Across the Continuum Project

The purpose of this assignment is to highlight the importance of transition at the time of patient discharge to home or another facility from the hospital. This project also emphasizes the importance of patient education and assessing health literacy during the discharge process. Because this transition requires a full understanding of the patient's health and life, the project requires the student to admit a patient and follow him/her through the hospitalization and discharge. Students are encouraged to involve Clerkship Faculty in the process, and to seek direction and feedback from Clerkship Director.

As a result of this activity, the student will

1. Advocate for quality patient care and assist patients in dealing with system complexities.
2. Work effectively with other members of the health care team to provide a smooth transition for the patient at the time of hospital discharge.
3. Demonstrate the importance of addressing psychosocial and cultural issues to improve patient adherence to a plan of care in an effort to decrease medical errors.
4. Counsel and educate patients and their families.
5. Demonstrate the ability to conduct and document a comprehensive admission evaluation.
6. Demonstrate the ability to perform a thorough review of medications and recognize potential contraindications, interactions and omissions.
7. Demonstrate the ability to review a patient's hospitalization and document an appropriate discharge summary (or transfer summary if the patient is going to another facility).
8. Recognize challenges specific for the patient in the transition home or to another facility after hospitalization, especially any unexpected issues that surfaced during the course of hospital stay.

Required components of this project:

1. Admission note: This should be worthy of inclusion in the patient's medical record and must be authored by you.
2. Medication Reconciliation: Perform prior to discharge and include a discussion of contraindications, potential adverse reactions, omissions and your personal concerns for this patient's safety or other issues at the time of discharge. Ideally this will be done several times during the patient's stay, but only the discharge review needs to be included with project.
3. Discharge Summary: This should be worthy of inclusion in the patient's medical record and must be authored by you.
4. Patient Education: Create a discharge review form for the patient that includes details of hospitalization, upcoming appointments, medications, and patient education. Be mindful of

patient's literacy level and health literacy in creating documentation. Share this with your patient and his/her family prior to discharge (with the permission of your clinical faculty).

5. Reflective Essay: This should discuss the challenges associated with the patient's care and his/her transition to home or another facility following discharge. Include your own lessons learned in the process of caring for this patient and his/her family. Essay should be between 500-1000 words.
6. Make sure all identifying information is redacted in compliance with HIPPA. You may use initials or a fictitious name for your patient.

Evaluation of this assignment will be done by the Education Director and will be included in the final grade for the clerkship. Assignment will be included in the consideration of final grade for the Clerkship; students must submit an exemplary project to be considered for honors for the Clerkship. If project is returned for revision, a student is no longer eligible for honors, and will be assigned an initial grade of "IR" until remediation has been completed.

Submission:

4. **Submit all components as one WORD document to Blackboard.** Other formats will not be evaluated and you risk not receiving credit for your project.
5. Assignment is **due at or before 5 p.m. on the last day of the Clerkship.** Early submission is encouraged.
6. If Blackboard is not available, send project via email to the Education Director. The student is still required to upload to Blackboard when the system is available, and assignments will not be accepted for credit until this has been accomplished. The version that is sent to the Education Director must be the same version that is submitted to Blackboard, and must be sent by 5 p.m. on the last day of the Clerkship.

Evaluation will be based on the following:

1. Demonstration of the ability to accurately document a patient's initial evaluation at the time of admission through the "admission H & P" or Admission Note. Student will be evaluated on the following components: organization, inclusion of pertinent details, appropriate differential diagnosis and initial treatment plan.
2. Demonstration of the ability to accurately and concisely document a patient's hospital stay through the Discharge Summary or Transfer Summary. Student will be evaluated on the following components: organization, inclusion of pertinent details, follow-up care plan including, inclusion of advanced directive or designation of health care surrogate. Accurate assessment of medication interactions and errors that could produce adverse events. Student should consider OTC medications and supplements, adherence challenges and potential safety issues related to medications at home. Demonstrate the ability to create patient discharge documents and patient education that is clear and free of jargon or abbreviations, awareness of patient literacy and health literacy. The student will be evaluated on the inclusion of pertinent details regarding events during hospitalization and discharge care plan.
3. Demonstrate insight through reflective writing regarding specific challenges faced by the patient and his/her family at the time of transition and lessons-learned by the student regarding transitions of care?

Specific instructions, grading rubric 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 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.

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 and office-based procedures. Management expectations include: a) gathering 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 and procedure notes.

Patient Log

Students will record a minimum of 30 patient encounters in the inpatient setting. Students will record a minimum of 20 patient encounters in the outpatient setting. Students will record a minimum of 10 procedures; these may occur in either inpatient or outpatient setting.

Students will record at least one of each of the following types of encounters in the ambulatory setting: 1) Hospital follow-up; 2) Chronic disease management; 3) Periodic preventive care; 4) Well-child check; and 5) Women's health visit (contraception, gynecologic condition, prenatal care, 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.**

A worksheet detailing requirements is available on Blackboard for student reference and convenience.

Reading

Students are expected to locate and read pertinent journal articles and guidelines that assist in the evaluation and management of patients. Several resources are available on Blackboard and will be updated regularly. There is no required text for this clerkship.

Meetings/Lectures

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 communicate weekly with clerkship director weekly throughout the clerkship; this may be via in-person meetings, email or telephone. 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 clerkship director with feedback provided by the student and clinical faculty.

Evaluations

An evaluation of student clinical performance will be completed by Clerkship Faculty at the end of the clerkship. A final Summative Report will be completed by the Clerkship Director at the end of the

clerkship. The Education Director will include all components of evaluation into the final grade summary once all evaluation data has been compiled and considered.

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 care, on-call shifts, lectures, conferences, self-identified reading, clerkship project and completion of educational goal assignment. 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 on-site orientation or on the first day of the clerkship.

Competencies and Assessment

Domain	Competency	Assessment
Patient Care	Demonstrate the ability to assess the patient's unique circumstances and experience of illness and incorporate that information into his/her care.	Transitions project Direct observation by clinical faculty 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 examination findings.	Direct observation by clinical faculty Summative evaluation at end of clerkship
	Develop appropriate plans for diagnostic evaluation in the inpatient and outpatient setting.	Direct observation by clinical faculty Summative evaluation at end of clerkship
	Perform appropriate evidence-based healthcare screenings in the inpatient and outpatient setting.	Direct observation by clinical faculty
	Evaluate the functional status of patients during discharge planning and arrange for appropriate safety measures at home as indicated.	Transitions project Direct observation by clinical faculty Summative evaluation at end of clerkship
	Evaluate the health literacy by assessing patient's comprehension of written material, verbal instructions and understanding of health information.	Transitions project Direct observation by clinical faculty
Medical Knowledge	Perform detailed review of patients' medications that included indication, treatment targets interactions with other medications, contraindications and potential adverse events.	Transitions project Patient log Direct observation by clinical faculty Summative evaluation at end of clerkship
	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

Practice-Based Learning and Improvement	Evaluate the specific challenges and risks for a patient at the time of discharge, and then provide an analysis of potential improvements in that process.	Transitions project Direct observation by clinical faculty
Interpersonal and Communication Skills	Respond with empathy and sensitivity to patients with challenging behaviors.	Direct observation by clinical faculty
	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. Recognize and address personal bias/prejudice when interacting with patients.	Direct observation by clinical faculty Transitions project.
	Communicate diagnostic information and clinical reasoning to healthcare team with suggested intervention and plan of care through effective oral presentation.	Direct observation by clinical faculty Summative evaluation at end of clerkship.
	Demonstrate the ability to document medical encounters including ambulatory care notes, procedure notes, comprehensive admission evaluation, progress notes in a hospitalized patient, and discharge summary.	Transitions project Direct observation by clinical faculty
Professionalism	Identify personal learning needs and choose a goal for improvement during the clerkship. Develop a strategy to address personal educational goal that includes specific targets by which to measure progress.	Educational goal assignment Mid-clerkship feedback and communication with clerkship director
	Demonstrate motivation to learn. Incorporate feedback into clinical care and other activities.	Direct observation by clinical faculty Mid-clerkship feedback and communication with clerkship director
	Complete all clerkship requirements in a timely manner.	Patient log Educational Goal Transitions Project
	Demonstrate respect for the contributions of all healthcare providers (physicians, nurse practitioners, physician assistants, nurses, social workers, other staff, etc.) involved in the care of a patient.	Direct observation by clinical faculty Summative evaluation at end of clerkship
Systems-Based Practice	Advocate for and assist patients in arranging follow-up care at the time of hospital discharge.	Transitions project Direct observation by clinical faculty
	Work effectively with other healthcare providers, social workers, community agencies, nurses and other healthcare professionals.	Transitions project Direct observation by clinical faculty Summative evaluation
	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.	Transitions 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 [FSUCOM Student Handbook](#) for details of attendance policy, notice of absences and remediation.

Library Policy

The [COM 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 "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.

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

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