



The Florida State University
College of Medicine

BCC 7175

Family Medicine Clerkship

2010

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Instructors

Education Director

Suzanne Harrison, M.D.
Main Campus

Clerkship Directors

Campus	Director
Fort Pierce	Nancy Baker, M.D.
Daytona	George Bernardo, M.D.
Orlando	Douglas Meuser, M.D.
Pensacola	Dennis Mayeaux, M.D.
Sarasota	Nicole Bentze, D.O.
Tallahassee	Amanda McBane, M.D.

Course Overview

Description

The Family Medicine Clerkship is a six-week, community-based, clerkship. Students spend at least 8 patient care sessions each week providing clinical care to patients under the direct supervision of a practicing family physician/clerkship faculty.

Educational Goals

The **educational goals of the Family Medicine Clerkship** include:

1. To familiarize each student with the medical content and principles that define the discipline of family medicine;
2. To provide opportunities for each student to apply this content knowledge and these principles in a supervised family medicine clinical experience; and,
3. To expose each student to an experienced and competent family physician role model.

The educational content of the Family Medicine Clerkship's clinical experience emphasizes improving the student's ability to recognize, evaluate and manage ambulatory patients with common clinical problems/conditions.

Clinical Data Collection System (CDCS)

In addition to the clinical experience, students document their patient encounters via the CDCS system, complete two (2) required clerkship projects and employ self-directed and faculty-directed learning activities to achieve clerkship objectives.

Competencies-Objectives-Assessment

FSUCOM – Competencies - Family Medicine Clerkship BCC 7175			
Competency Domains	Competencies Covered in the Course	Clerkship Learning Objectives & (Education Program Objectives)	Methods of Assessment
Patient Care	X	<p>Demonstrate the ability to obtain accurate and complete information via the patient interview and conduct an appropriate physical examination in the following clinical situations:</p> <ul style="list-style-type: none"> a) a patient visit to diagnose/treat/manage an acute medical problem; b) a patient visit to diagnose/treat/manage a chronic medical problem; and, c) a patient visit to diagnose/treat/manage a patient presenting with multiple problems. <p>Demonstrate the ability to apply principles of clinical epidemiology and probabilistic reasoning to develop preliminary assessments/diagnoses and treatment plans.</p> <p>(Domain 1: Education program objectives A-H & J-O)</p>	<p>Clerkship Faculty via end-of-clerkship student assessment;</p> <p>Clerkship Director via direct observation of student.</p> <p>Clerkship Faculty via end of clerkship student assessment;</p> <p>Clerkship Director via direct observation of student.</p>
Medical Knowledge	X	<p>Demonstrate familiarity with the common clinical presentations, physical exam findings, appropriate diagnostic tools and evidence-based treatments for each of the following patient problems seen by family physicians.</p> <ul style="list-style-type: none"> a) Hypertension b) Hyperlipidemia 	<p>Clerkship Director via CDCS monitoring;</p> <p>Clerkship Faculty via end of clerkship student assessment;</p> <p>NBME subject exam.</p> <p>Clerkship Faculty via end of</p>

		<ul style="list-style-type: none"> c) Diabetes Mellitus d) Acute URI/Acute Sinusitis e) Low Back Pain f) Mood Disorders, esp., major depressive disorder g) Anxiety Disorders h) Abdominal Pain, undifferentiated i) GERD j) Obesity k) Thyroid disorders l) Degenerative Joint Disease m) Pain, muscle/soft tissue/bursa/tendon n) Ischemic Heart Disease o) Acute cough/Acute Lower Respiratory Infection p) COPD q) Asthma r) Knee pain s) Headache t) Chronic Rhinitis u) UTI <p>Demonstrate familiarity with the common clinical presentations (including, symptoms and physical exam findings), appropriate diagnostic tools and evidence-based treatments for common mental health problems and emotional illnesses seen by family physicians.</p>	<p>clerkship student assessment; Clerkship Director via direct observation of student and questioning at debriefing; NBME Subject exam.</p>
<p style="text-align: center;">Practice-based Learning</p>	<p style="text-align: center;">X</p>	<p>Demonstrate the ability to access and apply clinical information from evidence-based electronic resources during a patient encounter.</p>	<p>Clerkship Faculty via end of clerkship student assessment; Clerkship Director via direct observation of student. Clerkship Faculty via end of</p>

		Structure and complete a patient visit using the current recommendations from the United States Preventive Services Task Force (USPSTF).	clerkship student assessment; Clerkship Director via direct observation of student and questioning at debriefing
Communication Skills	X	<p>Demonstrate the ability to assess the patient's current understanding of his/her illness/condition, identify the patient's most pressing educational needs and implement a "patient education plan" to increase the patient's knowledge or skills required to manage the illness condition.</p> <p>Using the medical record system available in the clerkship faculty's office, create progress notes that document at least one example of each of the visit types described in objective #1 (acute medical problem visit, chronic medical problem visit and visit for patient with multiple medical problems) and #6 (preventive services visit) above.</p>	<p>Clerkship Faculty via end of clerkship student assessment; Clerkship Director via direct observation of student and questioning at debriefing. Clerkship Faculty via end of clerkship student assessment; Clerkship Director via direct observation of student and weekly meetings with student.</p>
Professionalism	X	<p>Participate in and analyze the process of referral/consultation by: creating a referral/consultation letter, analyzing the process of referral/consultation and determining the characteristics that contribute to a successful referral/consultation.</p> <p>Articulate those methods/activities utilized by the clerkship faculty to: 1) identify his/her professional educational needs; 2) update his/her professional knowledge/skills; and, 3) integrate that new knowledge/skill into his/her practice.</p> <p>Design a personal education plan to expand his/her general medical knowledge and skills based on both a self-assessment and on the feedback/evaluation the preceptor.</p>	<p>Education Director via Clerkship Project Clerkship Director via query at debriefing. Clerkship Director via query at debriefing.</p>
System-based Practice	X	Demonstrate awareness of the impact of culture, ethnicity, socioeconomic status, advancing age and gender on the patient's expression of illness and response to treatment, and demonstrate the ability to incorporate that awareness into patient interactions.	<p>Clerkship Faculty via end of clerkship student assessment; Clerkship Director via direct observation of student.</p>

Articulate the theoretical and actual benefits of health care that is continuous, comprehensive, coordinated and is provided within the context of family and community.

Integrate the process of therapeutic review into each patient encounter, regardless of whether the primary reason for visit is an acute medical condition(s), a chronic medical condition(s) or provision of preventive services.

Apply Motivational Interviewing techniques with a patient to encourage behavior change.

Clerkship Director via query at debriefing.

Clerkship Director via direct observation of student.

Education Director via Clerkship Project.

NOTES:

Teaching and Learning Methods

Overview

To insure comparable learning experiences for Family Medicine Clerkship students, a standardized curriculum is employed at all clerkship sites and student experiences are monitored via the CDCS system reports. Students must record a minimum of 100 patient visits during the first 5 weeks of the Clerkship. (Though students may enter CDCS data during the sixth (final) week of the Clerkship, data entry during this last week is not required.)

Orientation

The Family Medicine Clerkship begins with an orientation to the Clerkship conducted by the regional campus Clerkship Director. The Clerkship Director also will meet with the students near the end of the clerkship for a terminal debriefing session. These orientation and debriefing sessions are in addition to weekly meetings with the Clerkship Director. At these weekly meetings, the Clerkship Director reviews CDCS data to insure that clerkship objectives are being met. If it appears that students are not meeting minimum requirements for the numbers of patients or the types of problems expected, the Clerkship Director—working with the clerkship faculty and the student—identifies an appropriate alternative educational activity (usually, a targeted reading) for the student.

Patient Interaction

The Clerkship Director also observes the student interacting with patients. The purpose of this direct observation is to evaluate the student's patient interaction/communication skills, medical interviewing skills, physical exam skills, verbal presentation skills, clinical reasoning skills and clinical informatics skills. Formative feedback is provided to the student following these observations. Each Clerkship student is observed at least once by the Clerkship Director during the Clerkship. When concerns about student performance are noted either by the Clerkship Director or the Clerkship Faculty, additional student observations are completed.

Structured Clinical Apprenticeship

Student learning occurs primarily via a “structured clinical apprenticeship” (supervised experiential learning). Students learn by actively participating in patient care activities. This “active learning” is a key component of the Clerkship, and the student's self-reported “level of care” is routinely monitored by both the Clerkship Director and Education Director. Students are expected to have at least 75% of patient encounters at the “moderate” and/or “full” level of care.

Clerkship Faculty provide informal, patient-triggered teaching with students. This teaching emphasizes appropriate clerkship content and often requires the student to locate and read relevant information. Emphasis is placed on helping the student develop these “life-long learning” skills. In the context of the Family Medicine Clerkship, as students become aware of a personal learning need, they are encouraged to identify, evaluate and utilize learning resources to meet that need.

Projects

Students must complete two (2) written projects: 1) the Consultation/Referral Project; and, 2) the Motivational Interviewing Project.

The Consultation/Referral Project is a self-directed learning activity that requires the student to analyze and reflect on observations he/she has made about a common patient care process: consultation/referral.

The Motivational Interviewing Project encourages students to apply the techniques of Motivational Interviewing when encouraging behavior change in an actual patient, and then answer a series of questions about the student-patient interaction.

Both of these projects are explained on the Family Medicine Clerkship Blackboard site, and all necessary forms and project questions are provided. Completed projects may be discussed at the terminal debriefing session, and are reviewed by the Education Director.

On Call

There are no student requirements for after-hours, on-call participation; nonetheless, students are encouraged to participate in being on call with their Clerkship Faculty.

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.

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, found at <http://www.fsu.edu/~dof/honorpolicy.htm>.)

Attendance Policy

The College of Medicine has detailed attendance policies as they relate to each cohort and events that conflict with course schedules. See pages 27-29 of [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.

Recommended Materials

Fundamentals of Family Medicine: The Family Medicine Clerkship Textbook
Robert B. Taylor, Editor, 3rd edition, 2003. Springer-Verlag New York, Inc., New York, NY.

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 in the **Academic Policies** section of the [FSUCOM Student Handbook](#) – beginning on **page 31**.