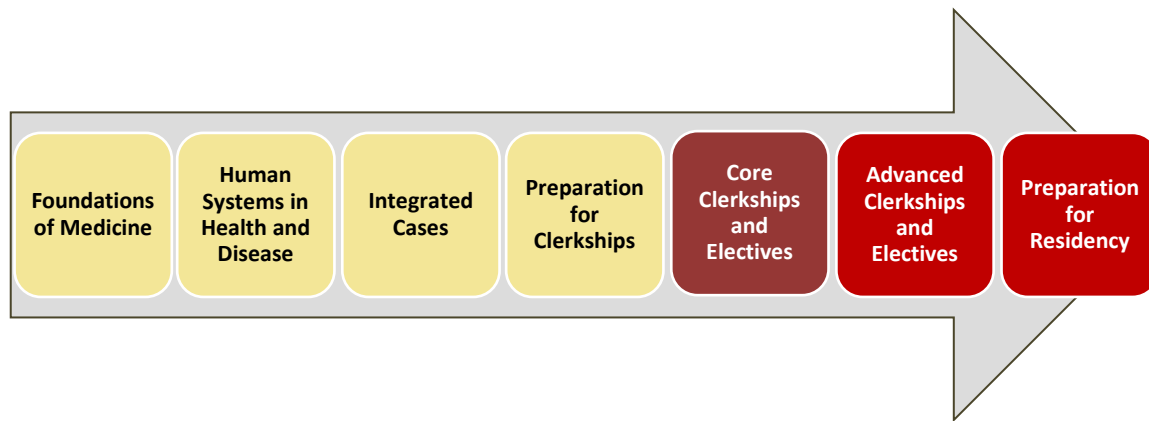


MEDICINE



BCC 7175 FAMILY MEDICINE CLERKSHIP

Florida State University
College of Medicine
Last Updated: 6/20/17

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Instructors

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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 Clerkship is a competency-based clerkship 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 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. Students will participate in the Clerkship as either a 6-week block or through the Longitudinal Integrated Curriculum (LIC).

Course Components

Assignment #1: Personal Educational Goals

The purpose of this assignment is to enhance the student's ability to recognize their own learning needs and develop strategies to meet those needs. The student will choose THREE (3) educational goals specific to their current learning needs as a 3rd year medical student. These goals must be appropriate for the specific learning environment and able to be achieved in the allotted time (block or LIC). A preliminary plan regarding their personal educational goals must be discussed with assigned Clerkship Faculty and Regional Campus Clerkship Director no later than Saturday at the end of the first week of the block Clerkship, or by the end of the 4th week for LIC students.

The student will create a strategy for self-improvement that includes appropriate evidence-based resources, with pre-selected benchmarks by which they will assess their own progress. Using these benchmarks, the student will track advancement of clinical skill, knowledge or behavior throughout the rotation. Students are encouraged to seek and incorporate feedback from their Clerkship Director prior to submitting a final report at the end of the Clerkship.

Submission of project materials: At the end of the block, the final written report in MS-WORD format will be submitted to the Student Academics site. This report is due by 5 p.m. on the last day of the Family Medicine Clerkship. Students are encouraged to send a copy of this report to the Education Director in the event that electronic systems are down/unavailable. Examples of exemplary student performance are available on Blackboard.

Evaluation of project: This assignment will be evaluated by the Education Director at the conclusion of the Clerkship. Performance on this 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 the educational goals assignment is returned for revision, 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 benchmarks?
 - b. Were appropriate evidence-based resources identified?
3. Was the student insightful in his/her reflection on the process?
4. Did the student identify what was learned and what was left to learn (next step)?

Evaluation Rubric for Personal Educational Goals

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

Assignment #2: Systems Project

The purpose of this assignment is to highlight the systems involved in the care of a patient, and how they impact access to care, financial burden, adherence and coordination of care. Students are encouraged to seek and incorporate feedback from both Clerkship Faculty and Regional Campus Clerkship Director prior to submitting the final assignment. Examples of exemplary project performance are posted to Blackboard.

The student may choose one of two options for this project.

- Option #1 is the **Referral Project**, which is designed to explore the teamwork and collaboration between physicians and other healthcare professionals in the care of the patient, to examine other factors that influence successful referral and consultation and to emphasize the potential for system errors when care is not delivered continuously.
- Option #2 is the **Cost of Chronic Care Project**, which is designed to highlight the financial impact to patients of our management recommendations and to demonstrate the importance of evidence-based guidelines in the clinical care of patients as related to medical management of a chronic conditions.

Submission: At the end of the Clerkship, the final written assignment in MS-WORD format will be submitted to the Student Academics site. The final project is due by 5 p.m. on the last day of the Clerkship. Students are encouraged to send a copy of this assignment to the Education Director via email in the event that electronic systems are down/unavailable.

Evaluation: This assignment will be evaluated by the Education Director. 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 Clerkship. If the assignment is returned for revision, the student is no longer eligible for "honors" and will be assigned an initial grade of "IR" until remediation has been completed.

Option 1: Referral Project

Through this option, 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 are to benefit the patient. With the guidance of Clerkship Faculty, the student will identify a patient who might benefit from referral to another physician for consultation regarding a specific medical or surgical condition. The student will 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 suspected diagnosis, suggest alternative diagnosis, suggest plan of evaluation or treatment, perform specific procedure, temporarily manage a particular problem, assume care of a particular problem). The student will then accompany the patient to the consultation and observe the encounter from the perspective of the patient and/or family. Lastly, the student will write a 500-1000 word reflection about

the experience. The essay should include the challenges associated with arranging the appointment, communication issues with the patient and between physicians. Include your own lessons-learned in the process of caring for this patient and his/her family. All identifying information must be redacted in compliance with HIPAA.

The assignment objectives are as follows: As a result of this activity, the student will...

- Demonstrate effective written communication through a SOAP note based on the initial encounter; this note should be worthy of inclusion in the patient’s medical record.
- Advocate for and assist a patient in coordinating care within a complex healthcare system.
- Demonstrate an understanding of, and respect for, the roles of the primary care physician and the consulting physician when collaborating in the mutual care of a patient.
- Describe how system flaws can contribute to medical errors.

Evaluation Rubric for Referral Project

Component		Does not meet expectations	Meets Expectations	Exceeds expectations	Feedback
SOAP Note	Organization				
	Pertinent details				
	Differential diagnosis				
	Treatment plan				
	Question for consultant				
Reflection	Patient challenges				
	Communication issues				
	Systems errors				
	Lessons learned				
Overall Evaluation					

Option 2: Cost of Chronic Care Project

Through this option, the student will learn more about patient costs for a chronic health conditions – 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 partnership 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 Clerkship Faculty, the student will identify a patient who agrees to a longer appointment for the purpose of discussing costs associated with their chronic conditions. The student will participate in the initial evaluation and write a SOAP detailing that encounter, including a comprehensive problem list and management strategy. After discussing financial impact with the patient, the student will create a worksheet outlining one-time and recurrent costs associated with medical care of all chronic conditions, and then write a an 500-1000 word essay in which the student compares the patient’s management with evidence-based guidelines. The essay must also include a reflective component that includes patient’s challenges associated with living with their chronic conditions. All identifying information must be redacted in compliance with HIPAA.

The assignment objectives are as follows: As a result of this activity, the student will...

- Demonstrate effective written communication through a SOAP note based on the initial encounter; this should be worthy of inclusion in the patient’s medical record.
- Evaluate costs associated with management of chronic conditions through an individualized discussion with the patient. Consider and include information regarding cost for medications and comparison with

generic equivalents, diagnostic testing, supplies for home-monitoring, therapies, employer-paid sick leave, hospitalizations and additional costs for child care or adult day care due to appointments or hospitalizations.

- Demonstrate knowledge of how healthcare costs associated with management of chronic conditions can influence decisions regarding utilization of resources.
- Advocate for the patient in coordinating cost-effective evidence-based care plans and improved functional ability.

Evaluation Rubric for Cost of Chronic Care Project

Component		Does not meet expectations	Meets Expectations	Exceeds expectations	Feedback
SOAP note	Organization				
	Pertinent details				
	Problem list				
	Treatment plan				
Cost worksheet	All conditions listed				
	All cost items delineated				
	Annualized cost				
Reflection	Patient challenges				
	Variations from EBM guidelines				
	Lessons learned				
Overall evaluation					

Pharmacy Field Trip

Students will participate in a field trip to a local pharmacy during the Family Medicine Clerkship. As a result of this educational activity, the student will 1) recognize the frequent use of over-the-counter medications, supplements and other products by patients; 2) compare the numerous formulations and options patients are confronted with in choosing an OTC product; 3) apply knowledge gained to specific patient conditions.

Patient Care

Students will participate in ambulatory care during this clerkship, with an emphasis on 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: a) gathering appropriate histories and performing the appropriate physical examinations; b) formulating preliminary diagnostic impressions including differential diagnosis; c) creating diagnostic and therapeutic care plans; d) performing appropriate health screenings; and, e) documenting patient care through an electronic health record and/or written SOAP notes.

Patient Log

Students will record **a minimum of 100 patient encounters during the Family Medicine Clerkship**, with at least 80% at the “moderate” or “full” level of care. Students are expected to record all clinical conditions, procedures and healthcare screenings that were part of patient encounters. The following table includes required clinical conditions and healthcare screenings that must be documented to successfully complete the Family Medicine Clerkship. Patient encounter data will be collected through the E*Value system. Failure to record required patient care by 5:00 p.m. on the last day of the Clerkship will result in a grade of “IR” (incomplete, requires remediation); the student will therefore be ineligible for honors and additional time on the Clerkship may be required. If a student fails to meet this deadline, they risk failure for the clerkship.

Required Clinical Conditions (30) Links go to AAFP reference site	Required Healthcare Screenings (23)
<ol style="list-style-type: none"> 1. Abdominal Pain 2. Abnormal Vaginal Bleeding 3. Allergic Condition (any type, not drug allergies) 4. Anxiety Disorder 5. Arthritis (any type) 6. Asthma 7. Atherosclerotic Disease (any type) <ol style="list-style-type: none"> Coronary Peripheral 8. Cancer (any type) 9. Chronic Back Pain 10. Chronic Kidney Disease 11. Chronic Obstructive Pulmonary Disease 12. Dementia 13. Depression 14. Diabetes Mellitus 15. Dizziness 16. Dyslipidemia 17. Gastroesophageal Reflux Disease 18. Headache 19. Heart Failure 20. Hypertension 21. Joint Pain or Injury (other than back pain) 22. Obesity 23. Skin Lesion (benign or malignant) <ol style="list-style-type: none"> a. Benign b. Malignant 24. Skin Rash or Infection 25. Substance Use Disorder <ol style="list-style-type: none"> a. Alcohol b. Substance c. Opioid Epidemic 26. Thyroid Disorder 27. Tobacco Use Disorder 28. Upper Respiratory Infection 29. Urinary Tract Infection 30. Vaginal Discharge <ol style="list-style-type: none"> a. STIs b. Vaginitis 	<p><u>USPSTF A Recommendations</u></p> <ol style="list-style-type: none"> 1. Cervical Cancer (2012) 2. Colorectal Cancer (2016) 3. Folic Acid Supplementation (2017) 4. High Blood Pressure (2015) 5. HIV Infection (2013) 6. Tobacco Use (2015; 2013-children, B) <p><u>USPSTF B Recommendations</u></p> <ol style="list-style-type: none"> 1. Abdominal Aortic Aneurysm (2014) 2. Alcohol Misuse (2013) 3. Aspirin Use (2016) 4. Blood Glucose (2015) 5. Breast Cancer (2016) 6. Chlamydia/Gonorrhea (2014) 7. Depression (2016 adults/children) 8. Fall Prevention (2012) 9. Healthy Lifestyle (2014) 10. Hepatitis B/C (2014, 2013) 11. Intimate Partner Violence (2013) 12. Lung Cancer (2013) 13. Obesity (2012-adults, 2010-children) 14. Osteoporosis (2011) 15. Skin Cancer Counseling (2012) 16. Statin Use (2016) <p><u>Immunizations</u></p> <ol style="list-style-type: none"> 1. Adults (CDC, 2017) 2. Children (CDC, 2017)

fmCASES and Readings

The required didactic content for the clerkship is contained within fmCASES, the Family Medicine Computer-Assisted Simulations for Educating Students. This is a virtual patient program and will be incorporated into the clerkship through required cases that encompass the Society of Teachers of Family Medicine (STFM) National Clerkship Curriculum. 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. There are 40 cases on a variety of topics, and each takes approximately 45-90 minutes to complete. **Students are required to complete 6 cases, 4 of which are specifically required. The required cases include well woman exam (case 1), well man 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 in the Block Clerkship are encouraged to complete all 6 cases in the first 4 weeks to allow for dedicated study time and test prep during the latter part of the clerkship. Students in the LIC are encouraged to complete the required cases during the first half of the academic year to allow for dedicated study time and test prep after the winter break.

fmCASES can be accessed at the MedU website <http://www.med-u.org/fmcases>. After registering with MedU, each student will have access using their FSU COM email account. Student progress will be monitored by clerkship director. Failure to complete the required cases by 5:00 p.m. on the last day of the Clerkship will result in a grade of "IR" (incomplete, requires remediation); the student will therefore be ineligible for honors and additional time to complete the cases may be required. If a student fails to meet this deadline, they risk failure for the clerkship.

In addition, students are expected to locate and read pertinent journal articles and evidence-based guidelines that assist in the evaluation and management of patients. Students are encouraged to join the [Academy of Family Physicians](#) for additional resources, including pertinent journal articles and test prep materials. Suggested readings are also available on Blackboard.

Meetings and Educational Sessions

Students will participate in required weekly educational meetings conducted by the Clerkship Director or Clerkship Administrator. For students on away rotations, this will be arranged through videoconference or teleconference. These meetings will include clinical topic discussions, feedback on oral patient presentations and pharmacy field trip. Clerkship Directors will also provide review patient encounter log and progress on clerkship assignments.

General Clerkship orientation is required and will be accomplished via video posted to Blackboard. The campus-specific orientation will be completed by the Clerkship Director at the first regularly-scheduled meeting and/or via email, and the site-specific orientation will be done on the first morning when student arrives at assigned at office/clinic for assigned Clerkship Faculty.

Each student will be observed at least once during clinical care of patients. This will be done by the Clerkship Director (or designate for away rotations). This 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. When concerns about student performances are noted by the Clerkship Director or Clerkship Faculty, additional student observations will be completed.

A mid-clerkship formative evaluation will be completed by the Clerkship Director based on input from Clerkship Faculty, direct clinical observation, participation and performance during weekly educational meetings and professionalism.

End-of-clerkship debriefing will occur during the final week of the Clerkship.

Evaluations

An evaluation of student clinical performance will be completed by the Clerkship Faculty at the end of the clerkship. An additional summative report will be completed by the Clerkship Director at the end of the clerkship. The Education Director will collate all grading components, including evaluations, assignments, completion of fmCASES and NBME, to be considered in the final grade after the Clerkship is complete.

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 an additional module on chronic care. LIC students will take the FM subject examination in the second half of the academic year, and are encouraged to delay until the near the end of the academic year.

Scheduled Hours

The Family Medicine Clerkship will consist primarily of ambulatory care. 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. Students enrolled in the Block 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. Students enrolled in the LIC will participate on the schedule provided by the Clerkship Administrator at the Marianna rural training site.

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.

Competencies and Assessment

Domain	Competency	Assessment	EPA
Patient Care	Demonstrate the ability to assess the “patient’s unique context” and incorporate that information into care.	Direct observation by Clerkship Faculty	EPA 1: Gather a history and perform a physical examination
	Demonstrate the ability to elicit an accurate and thorough medical history appropriate for the patient’s reason for visit.	Direct observation by Clerkship Director	EPA 2: Prioritize a differential diagnosis following a clinical encounter
	Conduct accurate and thorough physical and mental status examinations appropriate for the patient’s reason for visit.	Mid Clerkship feedback	EPA 3: Recommend and interpret common diagnostic and screening tests
	Recognize physical exam findings that are common variants of normal and those physical exam abnormalities that are frequently found in patients with common diseases/conditions.	Summative evaluation at end of clerkship	EPA 5: Document a clinical encounter in the patient record
	Understand the purpose and limitations of screening and diagnostic tests and utilize appropriately in clinical situations.		EPA 6: Provide an oral presentation of a clinical encounter
	Demonstrate the ability to assess a patient’s functional capacity.		EPA 13: Identify system failures and contribute to a culture of safety and improvement
	Demonstrate the ability to clearly and accurately summarize patient findings in verbal presentations and common written formats.		Multiple EPAs make reference to shared decision-making
	Formulate accurate clinical hypotheses (differential diagnosis) based on an analysis of the patient’s clinical presentation, the “patient’s unique context” and knowledge of clinical epidemiology.		
	Negotiate a plan of care with the patient utilizing shared decision-making techniques.		
	Demonstrate the ability to education patients about their health, assist patients who want to change health behaviors and assess/encourage patient adherence.		
Apply evidence-based information to identify and implement preventive services that are appropriate for the patient’s age and gender.			

Medical Knowledge	Describe basic bio-behavioral and clinical science principles used to analyze and solve problems related to the diagnosis, treatment and prevention of disease.	Direct observation by Clerkship Faculty	EPA 2: Prioritize a differential diagnosis following a clinical encounter
	Recognize the scientific basis of health, disease, and medicine in the management of common, chronic and high impact medical conditions.	Direct observation by Clerkship Director	EPA 3: Recommend and interpret common diagnostic and screening tests
	Describe normal human psychosocial development across the life-span and recognize deviations requiring further evaluation and intervention.	NBME	EPA 7: Form clinical questions and retrieve evidence to advance patient care
	Discuss the application of psychodynamic theories of human thought and behavior in describing and analyzing patient behavior.		
	Demonstrate the effective use of pharmacotherapeutic agents and other therapeutic modalities.		
Interpersonal and Communication Skills	Demonstrate respect, empathy, compassion, responsiveness and concern regardless of the patient's problems, personal characteristics.	Direct observation by Clerkship Faculty	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.	Direct observation by Clerkship Director	EPA 5: Document a clinical encounter in the patient record
	Demonstrate effective oral communication skills with colleagues and other health professionals.	Mid-clerkship feedback	EPA 6: Provide an oral presentation of a clinical encounter
	Demonstrate effective written communication with colleagues and other health professionals.	Summative evaluation at end of clerkship	
	Demonstrate appropriate and effective use of alternative communication methods including but not limited to telephone and electronic methods.	Systems Project	
	Evaluate health literacy by assessing patient's comprehension of verbal & written health information, and assist patients in obtaining and understanding health information.		
	Recognize and respond professionally to various common forms of behavioral and emotional presentations.		
	Demonstrate culturally and linguistically appropriate interviewing skills with patients from diverse backgrounds.		
Professionalism	Formulate and use strategies to support life-long learning to remain current with advances in medical knowledge and practice.	Direct observation by Clerkship Faculty	EPA 7: Form clinical questions and retrieve evidence to advance patient care

	<p>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.</p> <p>Recognize one's personal abilities and limitations, knowing when to request assistance.</p> <p>Display professionalism, high ethical standards, and integrity in relationships in all aspects of medical practice, especially with respect to confidentiality, informed consent, and justice.</p> <p>Utilize basic ethical principles including autonomy, beneficence non-maleficance and justice in the care of each patient.</p> <p>Practice self-evaluation and reflection concerning cultural, moral and ethical issues encountered in the care of patients and the practice of medicine, identifying biases, perceived differences between practitioners and patients, and employing a nonjudgmental approach to patient care.</p>	<p>Discussion observation by Clerkship Director</p> <p>Mid-clerkship feedback</p> <p>Summative evaluation at end of clerkship</p> <p>Educational Goals assignment</p>	<p>EPA 9: Collaborate as a member of an interprofessional team</p>
Practice-Based Learning and Improvement	<p>Recognize and demonstrate the ability to address the unique needs of patients from underserved environments.</p> <p>Apply the principles and methods of Evidence-Based Medicine to acquire, appraise, and assimilate new clinical information to improve patient care.</p> <p>Demonstrate knowledge of learning styles, preferences or strategies to facilitate lifelong learning.</p> <p>Demonstrate knowledge of the occurrence of medical errors/adverse events throughout the continuum of care or demonstrate appreciation for the culture of patient safety.</p>	<p>Direct observation by Clerkship Faculty and Clerkship Director</p> <p>Mid Clerkship Feedback</p> <p>Summative evaluation at end of clerkship</p> <p>Educational goals assignment</p> <p>Systems project</p>	<p>EPA 7: Form clinical questions and retrieve evidence to advance patient care</p> <p>EPA 13: Identify system failures and contribute to a culture of safety and improvement</p>
Systems-Based Practice	<p>Demonstrate the ability to work effectively as a member of a health care team.</p> <p>Demonstrate respect for the roles of other healthcare providers and of the need to collaborate with others in caring for individual patients and communities.</p> <p>Advocate for and assist patients in coordinating care and in dealing with system complexities.</p> <p>Recognize that errors occur in providing health care and how providers and system flaws contribute to hazards in care; seeks to improve systems and prevent future errors.</p>	<p>Direct observation by Clerkship Faculty and Clerkship Director</p> <p>Mid Clerkship feedback</p> <p>Summative evaluation at end of clerkship</p> <p>Systems project</p>	<p>EPA 9: Collaborate as a member of an interprofessional team</p> <p>EPA 13: Identify system failures and contribute to a culture of safety and improvement</p>

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. Student learning areas, complete with computers, textbooks and internet access, are available at each regional campus site and at the Rural Training Sites in Marianna, Thomasville and Immokalee. Taken together, these resources (people, equipment, materials and services) are adequate to provide an excellent educational experience for students.

Required Readings

The required content for the clerkship is fmCASES – Family Medicine Computer-Assisted Simulations for Educating Students. This is a virtual patient program and will be incorporated into the clerkship through required cases that encompass the Society of Teachers of Family Medicine national FM Clerkship Curriculum. These cases are self-directed and will help build clinical problem-solving skills through independent study. They can be accessed at the MedU website: <http://www.med-u.org/fmcases>.

Students are also expected to locate and read pertinent journal articles and guidelines that assist in the evaluation and management of patients or their personal educational needs. Suggested readings associated with required content available on Blackboard.

Grading

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

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](#).