



- Current Family Medicine Clerkship data
- State expectations of the Family Medicine clerkship
- Review syllabus, RCE, and requirements for passing
- Discuss changes or ideas related to Family Medicine training

Current State 2023-2024

- Uploaded didactics to Echo 360 with polling to allow student interaction
- Health Equity Curriculum going well
- New study schedule with resource links
- Updated/new didactics including Fractures
- Upcoming new Site Director for BG

Our fearless leaders!



Dr. Craig Burrows, Morehead



Dr. Emily Cecil, Bowling Green



Dr. Katie Roberts, Lexington

Dr. Shannon Voogt, Clerkship Director

+ What is going well?

- Students love...
 - the autonomy and hands-on learning
 - getting the chance to perform procedures
 - asynchronous lectures
 - interactive in-person lectures
 - exposure to rural clinics
- Students appreciate
 - teaching on social determinants of health
 - well-organized course and great communication
 - that faculty strongly value their education
- Students highly rate
 - the FACULTY!!

+ What is not going as well?

- Students report
 - Too many U-World questions
 - Varying feedback on in-person didactics
 - Unequal clinical experiences

+ What do we plan to do?

- Transition some in-person didactics to virtual and change schedule of in-person to better facilitate learning
- Continue to provide shelf review but update to better reflect shelf
- Continue to recruit and retain Voluntary Faculty!
- Continue to provide education and resources for Voluntary Faculty

Expectations for Students

- Through a variety of clinical experiences, students will participate in the care of Family Medicine patients. Students will develop and refine their clinical skills (e.g. interviewing, physical examination, differential diagnosis, and formulating diagnostic and treatment plans) for patient problems under the direct supervision of faculty preceptors.
- You will experience first-hand how family physicians provide continuous and comprehensive health care for the family and the community.

+ Expectations for Faculty

- Provide Supervision
- Student should experience all that you do (no nights/weekends required)
- Perform a mid-clerkship feedback form
- Perform a direct observation
- Submit a final evaluation on the student's performance
- Maintain voluntary faculty status (every 3 years) and take one student or more per year

Clinical Supervision Guidelines Family Medicine

Medical students require appropriate clinical supervision in clerkship activities. This means that physicians supervising students (faculty, residents, and fellows) should always ensure at least the following level of supervision for these tasks:

	Direct Supervision	Immediately Available	Available
History and physical exam			х
Communication with patients/families			х
Writing notes			х
Bedside procedures	х		
Operating room procedures			

Full definitions:

- **Direct Supervision** the supervising physician (faculty, resident, or fellow) is **physically present with** the student and patient.
- Immediately Available (indirect supervision with direct supervision immediately available) the supervising physician (faculty, resident, or fellow) is physically present within the hospital or other site of patient care, and is immediately available to provide Direct Supervision.
- **Available** (indirect supervision with direct supervision available) the supervising physician (faculty, resident, or fellow) is **not physically present within the hospital or other site** of patient care, but is immediately **available by means of telephonic and/or electronic modalities**, and is available to provide Direct Supervision.

Student Syllabus

- 1. Obtain a relevant history for a patient
- 2. Conduct an appropriately focused physical exam (or mental status exam) for a patient
- 3. Develop a prioritized differential diagnosis and select a working diagnosis following a patient encounter
- 4. Develop a diagnostic plan for a common clinical presentation
- 5. Develop a basic treatment plan for a common clinical condition
- 6. Write notes that effectively communicate to all health professionals
- 7. Provide an oral presentation of a patient encounter in the ambulatory or inpatient settings

**Generally students score a "2" or "3" and "2" is passing

Student Syllabus, continued

- 8. Seek out and incorporate constructive feedback
- 9. Demonstrate responsibility and accountability in all clinical and educational activities, managing personal attributes, commitments and/or limitations that might impact one's effectiveness as a physician
- 10. Demonstrate sensitivity and respect toward patient individuality, including but not limited to age, gender identity, race, ethnicity, belief system, sexual orientation, ability status, culture, and other social determinants of health
- 11. Have professional and respectful interactions with patients, their families, colleagues and other health professionals
- 12. Demonstrate integrity and ethical behavior in academic and clinical settings

**Generally, students score a "3" or "4" and "3" is passing except for #8 (passing is 2)

Student Syllabus, continued

- 14. Address disease prevention and health promotion strategies for individual patients or populations, including patients and communities from diverse backgrounds
- 15. Obtain a history regarding Social Determinates of Health (SDOH), evaluating how SDOH contributes to health disparities
- 16. Effectively communicate and create a collaborative relationship with patients and their families, particularly during sensitive, complex or distressing situations
- 16. Identify health issues impacting vulnerable populations and apply strategies to advocate and support equity

^{**}Evaluated in activities, quizzes and write ups

Didactics

In-Person

- Intro to FM
- Patient-centered care
- MSK workshop/exam practice
- USPSTF/Preventive guidelines workshop
- Intro to SDOH
- Dermatology
- Radiology
- Race-Based Medical Decision Making
- Acute Presentations in Primary Care
- Shelf Review

Asynchronous

- LGBTQ awareness
- Tobacco cessation/weight counseling
- Racism in Medicine
- Hypertension/Hyperlipidemia
- Chronic Kidney Disease
- Diabetes
- Fractures

Required Clinical Experiences

- Adult man Preventive healthcare
- Adult woman Preventive healthcare
- Back pain
- Cough
- Joint pain
- Rash
- Social determinants of health impacting management*
- Asthma or COPD

- Atherosclerotic cardiovascular disease (ASCVD)
- Chronic kidney disease
- Diabetes mellitus
- Hypertension
- Smoking cessation counseling
- Weight loss counseling
- Medication/vaccine injection

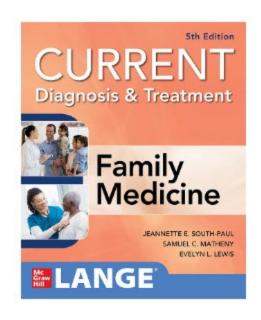
^{*}Examples include income, employment, housing, food access, environment, education, demographics

Recommended Resources



Case Files: Family Medicine, 5e

Author(s): Eugene C. Toy; Donald Briscoe; Bruce Britton; Joel J. Heidelbaugh



And YOU!!!

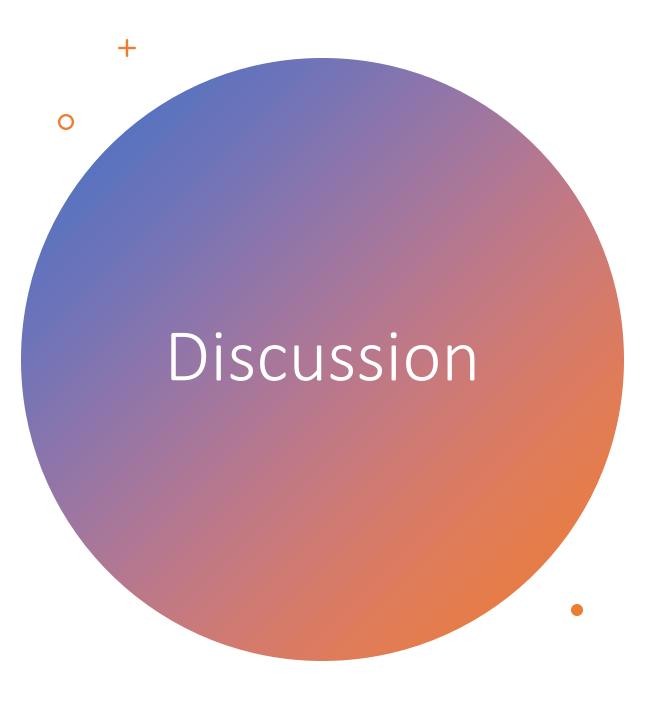


AAFP / Publications / American Family Physicia

AFP by Topic

+ Requirements for Passing

- Performance evaluations
- NBME Exam 63%
- Professional requirements (Direct obs, RCE, feedback, attendance)
- Quizzes
- U-World Quiz completion



- Ideas for teaching?
- Ideas for recruitment?
- Any student issues?

Voluntary Faculty of the Year Award!

