



## UNITED FAMILY MEDICINE TRAINING PROGRAM CURRICULUM GOALS AND OBJECTIVES 2012-2013

Rotation: Family Medicine Continuity Clinic  
Faculty Administrator: Setsuko Hosoda, MD, MPH

### Instructions to Preceptor:

1. Review this document with the fellow at the start of the rotation.
2. At the end of the rotation evaluate the fellow using the attached Competency Based Evaluation Form (or contact the Training Program to obtain access to an online evaluation forms.)

### Instructions to Fellow:

1. Review this document with the preceptor at the start of the rotation.
2. Obtain the completed Competency Based Evaluation Form from the preceptor on the last day of the rotation.
3. Review the completed evaluation with your advisor.

### Instructions to Advisor:

1. Review all Competency Based Evaluation Forms at the next Biannual Evaluation.

### Rotation Schedule:

1. **Tier 1:** Continuity clinic 1-2 half days per week with weekend clinic per availability of the attending
2. **Tier 2:** Continuity clinic 2-3 half days per week with evening and weekend clinics as available
3. **Tier 3:** Continuity clinic 3-4 half days per week with evening and weekend clinics as available

**Required Attendance:** All morning rounds, CME conferences, educational half day sessions and department meetings. Fellows are expected to serve on hospital committees with attendance and active participation at regular meetings.

**Contact Information:** Fellows are responsible for knowing the clinic coordinator contact information specific to their service area and sites in which they rotate. Aside from acute illness, if a fellow has scheduling conflicts or must cancel clinic on short notice (less than 6 weeks) they are personally responsible for arranging coverage or rescheduling their patients. They are responsible for personally contacting the clinic coordinator, department chair and UFH FM program manager (Angela Xiong) notifying them of the schedule change.

### Competency Based Goals:

Acquire the medical knowledge and patient care skills necessary to provide primary care services for patients efficiently and effectively in ambulatory settings.

### Competency Based Objectives:

#### Medical Knowledge

Learn the following:

- Manage the 25 most common medical problems in an ambulatory care setting. (see appendix)
- Develop a team approach to the provision of health care.
- Develop the skills to diagnose and treat psychosocial disorders in the context of the family.
- Become highly skilled at preventive care and health screening procedures.
- Indications, techniques, and complications of ambulatory procedures.
- Advantages of providing continuity.

- Time management and efficiency skills for the outpatient setting.
- Availability of community based ancillary health services that can be called upon when indicated.
- The rationale and procedures for CQI and QA activities in an outpatient setting.
- Understand the basics of billing and coding, and documentation required for proper insurance, and billing procedures (ICD-10 and CPT codes).
- Strategies for providing family-oriented comprehensive care in the family medicine clinic.
- To provide primary care in a cost-effective manner.
- To provide high quality care.

### **Patient Care**

- Provide comprehensive continuity of care for patients with each of the 25 most common medical problems encountered at their family medicine clinic.
- Recognize and treat psychosocial disorders in their patient population.
- Screen patients including pediatric, obstetric, and adult patients for preventative care and health screening procedures. Be familiar with the local and international preventive health guidelines.
- Perform procedures common in ambulatory settings
- Understand and demonstrate patient-centered care

### **Professionalism**

- Comply with established policies and procedures at UFH.
- Carry out assigned responsibilities consistently and reliably.
- Complete medical records thoroughly, and in a timely fashion
- Assist in facilitating continuity of care for family health patients
- Maintain a dignified demeanor and appearance
- Consult with supervising physicians when indicated
- Provide assistance to other health care professionals as necessary
- Provide high quality health care services to all patients regardless of cultural or socioeconomic background
- Adhere to the highest moral and ethical standards of the medical profession
- Be a role model for colleagues, and staff

### **Practice-Based Learning and Improvement**

- Provide efficient and appropriate care for at least four patients per half-day as a Tier-1 eight patients per half-day as a Tier-2 and 10 patients per half-day as a Tier-3.
- Participate in CQI and QA activities.
- Fellows will bill and code for their activities in an appropriate manner.
- Document consideration of related family issues and stressors.
- Receive and understand feedback on practice patterns
- Participate in daily reviews of primary care patient care activities with supervising faculty
- Provide primary care patient care services consistent with best practices

- Demonstrate ability to carry out evidence based searches to answer patient care questions identified during clinic
- Incorporate evidence based principles into patient care activities
- Investigate, evaluate, and improve patient care practices based on appraisals and assimilation of scientific evidence.
- Willingly participate in self appraisal
- Acknowledge opportunities to improve

### **Interpersonal and Communication Skills**

- Demonstrate effective interpersonal and communication skills with colleagues, faculty and staff.
- Effectively and efficiently exchange information with patients, families, and professional associates.
- Communicate effectively with individuals from diverse, multicultural backgrounds
- Describe and identify common reactions of patients and families to family health illnesses

### **Systems-based Practice**

- Demonstrate an awareness of and responsiveness to the larger context of our health care delivery system
- Assist family health patients in dealing with system complexities
- Recognize limits of your knowledge and consult appropriately
- Respect the primary care provider-patient relationship by communicating verbally and in writing with a patient's primary and consulting physicians.
- Increase satisfaction of patients with their family medicine clinic.

### **Evaluations**

Your performance in clinic will be evaluated by your preceptors and nurses. You will also have an opportunity to provide feedback on the rotation and teachers.

### **Resource List FP Clinic Rotations**

#### **Web Sites**

The American Academy of Family Physicians: <http://www.aafp.org>

The American Academy of Pediatrics: <http://www.aap.org>

The American College of Obstetricians and Gynecologists: <http://www.acog.org>

Pub Med: <http://www.ncbi.nlm.nih.gov>

Cochrane Library: <http://www.cochranelibrary.com>

National Guideline Clearing House: <http://www.guideline.gov>

Access Medicine: <http://www.accessmedicine.com>

## **APPENDIX: 25 Common Diagnoses in Family Medicine at UFH**

1. Hyperlipidemia
2. Asthma
3. Hepatitis
4. Headache
5. Hypertension
6. Acute upper respiratory infection
7. Anticipatory guidance for prenatal care/pregnancy/postpartum
8. GERD
9. STDs
10. Low Back pain
11. Sprains/strains and orthopedic injuries
12. Rashes
13. Diabetes
14. Sleep disorders
15. Routine preventive health care
16. Overview of well child visit
17. Diabetes Management: Food, medical management and practical tips
18. Obesity (children and adults)
19. Cervical dysplasia and HPV
20. Urinary Tract Infections in children and adults
21. Menstrual irregularities
22. Depression and Anxiety
23. Abdominal pain
24. Thyroid disorders
25. Contraceptive management