



## **Undergraduate Medical Education**

### **Family Medicine Clerkship**

### **6-Week Curriculum (Program Overview)**

**Objective:** To prepare and engage medical students in the delivery of comprehensive care to patients of all ages and genders by addressing the diverse health needs of both the individual and the family as a unit. Students will learn the value of primary care and its integral role in a healthcare system. They will develop an approach that is patient-centered, and follows the Bio-psycho-social model of care that is fundamental in family practice. Students will be in an optimal environment to harness and form the key characteristics of Family Physicians:

- Prior knowledge of the patient
- Care for heterogeneous patient population
- Multiple clinical settings with different diagnostic prevalence
- Multipurpose visits (providing different types of care within the same visit)
- Staged diagnostic approach
- Opportunity for follow-up care

These key characteristics are interwoven in the didactic sessions and in the learning objectives of everyday patient contact. Teaching is based on developing the students' content knowledge as well as advancing their skills in history assessment, physical examination, communication, and critical thinking and decision-making. Together, these skills will be employed in planning screening, treatment, and care continuity for the acute, chronic condition, preventive, and health promotion visits encountered at the clinic site. At the end of the rotation, students should be able to assess and address regular office visits as well as conditions of common presenting symptoms, and be able to differentiate their common etiologies from those that are more serious or urgent. Including, but not limited to:

Abdominal conditions/diseases	Cardiovascular diseases
Dermatologic conditions/diseases	Genitourinary diseases
Gynecological visits/conditions/disease	Head and neck complaints
Infectious diseases & prevention	Musculoskeletal complaints/Sports injuries
Neurologic complaints/disorders	Psychological complaints/assessment
Respiratory complaints/diseases	Rheumatologic disorders
Well Child visits	

With focus on problem-based learning, system-based practice, and professionalism, students should also enhance their understanding of mechanisms of disease process, inpatient care, referrals, consultations, and general resources for health promotion and disease prevention in a manner that is evidence based, individualized, and cost effective.

#### **KJMC Program:**

- **Daily Sign-In (in log book): 15 minutes before the start of didactic/clinical sessions**
- **Morning lectures: 9:00am (Tuesdays and Wednesdays, Thursdays)**
- Morning rounds with Attending Physician.
- Clinical encounters on regular floors, clinics (outpatient) and nursing home.
- Clinical OSCE Sessions (Thursdays; time as per Clinical Instructor)
- Daily case presentations/discussions.

- Consults and short-calls with Attending/Residents.
- Daily Sign-Out (in log book): Students may sign out when leaving for clinic (if off-site) after scheduled clinic shift (if on-site).
- Short-Call/Clinic Service: Cut-off time is **8:00pm**
- 6 Weekly Case Logs (submitted weekly as hard copies to the UME Office); Forms may be downloaded from [www.kingsbrook.org/ume](http://www.kingsbrook.org/ume)
- 3 H&P Case Write-Ups (submitted every two weeks as hard copies to Attending and as electronic copy to the UME Office; H&P instructions and sample H&P available at [www.kingsbrook.org/ume](http://www.kingsbrook.org/ume))
- Midterms (Week 3)
- Final Exam (Week 6)

- Supplemental Reading Materials:

<i>Master the Boards USMLE Step 2 CK, 2<sup>nd</sup> Edition</i>	Fischer <i>et al</i>
<i>Washington Manual of Medical Therapeutics, 31<sup>st</sup> Edition</i>	Green <i>et al</i>
<i>Pocket Medicine, 4<sup>th</sup> Edition</i>	Marc S. Sabatine
<i>Goldman's Cecil Medicine</i>	Goldman <i>et al</i>
<i>Harrison's Principles of Internal Medicine, 17<sup>th</sup> Edition</i>	Fauci <i>et al</i>
<i>Step-Up to Medicine, 2<sup>nd</sup> Edition</i>	Agabegi & Agabegi
<i>First Aid for the USMLE Step 2 CK, 8<sup>th</sup> Edition</i>	Le <i>et al</i>

- Medical Library Digital Databases (accessible via in-house computers only):

Computers: Username: <b>doctor</b>	Password: <b>hospital</b>
MDConsult: <a href="http://www.mdconsult.com">http://www.mdconsult.com</a>	No password required
UpToDate: <a href="http://www.utdol.com">http://www.utdol.com</a>	No password required
STAT!Ref: <a href="http://www.statref.com">http://www.statref.com</a>	
Username: <b>Kingsbrook</b> Password: <b>Library</b>	
McGraw-Hill's Access Surgery: <a href="http://www.AccessSurgery.com">http://www.AccessSurgery.com</a>	
Username: <b>kingsbrook</b> Password: <b>medicine</b>	
Journals/Publications: <a href="http://gateway.ovid.com">http://gateway.ovid.com</a>	
Username: <b>kjm199001</b> Password: <b>changeme</b>	

## ROTATION SCHEDULE

### ***Didactic Lectures :***

- Tuesdays 9:00am-10:00am Lecture, Classroom C
- Tuesdays 10:00am-12:00pm Review, Classroom A
- Wednesdays 8:00am-10:00am Lecture, Classroom A
- Thursdays 9:00am-10:00am Lecture, Classroom A
- Thursdays 10:00am-11:00am SimLab (M411) - Clinical OSCE Sessions

### Clinicals:

- After Lecture, please report to your respective Attending Physician for clinical hours, case presentations and topic-based discussions.
- Time and commitment is based on your individual Attending Physician for that particular clerkship week. Note the time that you leave for clinic in the Log Book.
- Write SOAP note for assigned patients, as per Attending Physician.
- Follow assigned patients from admission to discharge. Perform a mini H&P of each new patient to present to the Attending and colleagues in your respective group, as well as follow up on, and presentation of, the patient's continuing in-house care.

- **Maintain comprehensive list of patient log/cases:** Chief Complaint, DD<sub>x</sub>, H&P, PMH, Meds, Labs, Assessment & Plan.
- FRIDAYS, by 4:00pm ⇒ Submit weekly **Case Log(s)** to the UME Office (M429) as hard copies only.
- FRIDAYS, by 4:00pm ⇒ Submit a hard copy of **H&P Case Write-Up** to your Attending for review. The report must be done on one patient that the student has seen within the past 7 days of the paper due date. You must ALSO email an electronic copy of your H&P to Dr. Raman Sharma ([UME@kingsbrook.org](mailto:UME@kingsbrook.org)) by Friday 4:00pm at the latest.
- **Midterm exam** (Week 3)
- **Final Exam**, (Friday, Week 6)

**Patient Interview & Examination:** Students are not permitted to see any patient until the attending physician has introduced the student to the patient and identify him or her as a member of the medical team. Students are not permitted to write in the charts. Review of patient records is encouraged.

**Evaluation and Management Documentation Provided by Students:** Any contribution and participation of a student to the performance of a billable service must be performed in the physical presence of a teaching physician or resident in a service that meets teaching physician billing requirements (other than the review of systems [ROS] and/or past medical history, family history and/or social history [PFSH], which are taken as part of an E/M service and are not separately billable). You, the student, may document services in the medical record; however, the teaching physician may only refer to your documentation of an E/M service that is related to the ROS and/or PFSH. The teaching physician may not refer to your documentation of physical examination findings or medical decision making in his or her personal note. If you document E/M services, the teaching physician must verify and re-document the history of present illness and perform and re-document the physical examination and medical decision-making activities of the service.

**Please Note: Removal of patient data (notes, meds, labs, etc.) from the chart is strictly prohibited.**