



SYLLABUS

FCM-813C

Family & Community Medicine Clerkship

Course Description

The Family & Community Medicine (FCM) Clerkship is a 6-week rotation that encompasses the comprehensive and longitudinal care of patients with a special emphasis on care of individuals in the context of families and communities. This is primarily an outpatient rotation, working with preceptors throughout the state. The goal of this clerkship is for students to learn family-centered primary health care that is humanistic, comprehensive, cost-effective, continuous, and sensitive to psychosocial, ethical, and financial issues.

The FCM clerkship provides an opportunity for students to learn about the diagnosis and management of patients with acute common problems, as well as chronic disease. Students will be expected to learn a comprehensive approach to the patient with these diagnoses that entails consideration of etiology, incidence, pathophysiology, clinical presentation, course, prognosis, treatment, and the appropriate aspects of patient education, disease prevention, and health promotion.

Instructor and Contact Information

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Sites/Site Directors

The Family & Community Medicine clerkship utilizes a variety of clinical settings exposing students to a broad array of patients across the life span. In addition to the on-campus sites, the clerkship uses community faculty preceptors in Tucson as well as rural and urban clinics throughout Arizona. Sites include Community Health Centers, residency training programs, private practice clinics, Indian Health Service clinics and tribal health clinics. A current list of active clerkship sites is available at the clerkship office.

Issues at a Site: While uncommon, if students experience a personal or academic/ instructional problem with a preceptor, they are encouraged to contact the clerkship director as soon as possible. This includes perceptions of harassment, sexual or academic, or other unprofessional behavior. This is standard University of Arizona policy.

Course Objectives

During this clerkship, students will:

1. Incorporate ethical, social, and diversity perspectives to provide culturally competent health care.
2. Apply recommended preventive strategies throughout the lifespan of families.
3. Learn to demonstrate clear and professional communication with patients, families, and healthcare teams.
4. Develop a sound knowledge of common problems encountered in family medicine that This includes knowledge and understanding of the presenting symptoms, clinical evaluation and appropriate care of these clinical conditions.

Expected Learning Outcomes

Upon completion of the clerkship, students will be able to:

1. Demonstrate knowledge of the impact of medical conditions, genetics, social, environmental and other risk factors on patient health.
2. Incorporate ethical, social, and diversity perspectives to provide culturally competent health care.
3. Demonstrate knowledge of the common problems encountered in Family Medicine including those on the Patient log list and discussed in the Evidence-Based Medicine sessions.
4. Demonstrate knowledge in the following 6 topics of preventive care: Diagnosing and Preventing illness – the Continuum; Primary Prevention: Behavioral Counseling to Prevent Cardiovascular Disease and Obesity; Secondary Prevention: Screening to Make a Difference; Family Medicine and Public Health; Care of Older Adults- Health Promotion and Disease Prevention; Women’s Health)
5. Demonstrate clinical reasoning skills to develop a list of differential diagnosis for common problems in family medicine.
6. Demonstrate clear and professional communication with patients, families, and healthcare teams.

Clinical Skills Goals

1. Enhance and refine data collection and problem-solving skills.
2. Demonstrate the principles and interventions for health promotion and disease prevention.
3. Incorporate health-care resources and identify community-based challenges.
4. Recognize social/economic factors that impact health care delivery for each patient.
5. Demonstrate knowledge and proficiency in assessing patient and developing plan.

Scheduled Topics and Activities

Students will attend orientation during the first week of the rotation.

Students will be at their clinical site for the majority of their time in this clerkship. Students will participate in all activities expected by the supervising physicians at their site, including on-site teaching conferences and, for their own patients, following continuity of care including consults to other physicians or community and home health agencies.

Night and weekend call is not required by this Clerkship. Several of the sites offer night call opportunities. Participating in nighttime call activities is strictly voluntary and can enhance the clerkship experience. The choice whether to take call will not be factored into the clinical grade.

Flex-time Option: Some of the FCM Clerkship sites offer an approved flex-time option to broaden exposure to family medicine activities beyond the ambulatory clinic. Depending upon the site, alternative flex-time activities may include such experiences as emergency room, podiatry, public health nursing visits, home or nursing home visits, satellite family medicine clinics, homeless care, or other activities that relate to your clinic's practice. These alternative activities may comprise up to (but no more than) 10% of the clerkship time (e.g., one half-day per week or one full day on alternate weeks).

Problems/presentations common to Family Medicine

- Age appropriate prevention/screening/immunizations including well child and adolescent care (includes screening for common cancers)
- The Aging patient
- Abdominal pain
- Anemia
- Behavior Change (e.g. smoking cessation)
- Chest pain in adults
- Cough & Dyspnea
- Dizziness
- Dysuria
- Fatigue
- Fever
- GI bleeding (e.g. hematemesis, melena or hematochezia)
- Headache
- Leg swelling
- Low back pain
- Common musculoskeletal problems
- Nausea & vomiting
- Skin problems
- STI's
- Upper respiratory symptoms
- Asthma
- Chronic pain
- Common Psychosocial problems – Mood and anxiety disorders (including bipolar disorder and PTSD) AND substance use disorders
- COPD
- Coronary artery disease
- Type 2 Diabetes
- Common eye problems
- Heart failure
- Hyperlipidemia
- Hypertension
- Obesity
- Osteoporosis
- Women's health care
- Contraceptive management

Evidence-Based Medicine Sessions:

The Evidence-Based Medicine (EBM) sessions schedule is provided and discussed the week of orientation. In general, most of the teaching is scheduled weekly, and all students must participate. Attendance at EBM sessions is

required. Students should plan on bringing a case from their clinical site and be prepared to present in the EBM sessions. Students will be graded on their presentation and participation in the sessions. Students inform the clerkship if they cannot attend any part of any session for any reason prior to the scheduled meeting time.

Assignments and Examinations: Schedule/Due Dates

- Evidenced Based Medicine (EBM) Topic Presentation: Due as assigned
- Aquifer Cases: Due as assigned
- Mid-clerkship Formative Feedback: Due by the end of the third week of the rotation.
- Subject Shelf Exam: Scheduled for the last day of the clerkship.

Required Patient/Clinical Conditions

Family Medicine	Abdominal Pain	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Asthma	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Chest Pain	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Complete a history and physical exam and recommend a wellness plan for a well adult female	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Complete a history and physical exam and recommend a wellness plan for a well adult male	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Complete a history and physical exam and recommend a wellness plan for a well child	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Complete a history and physical exam and recommend a wellness plan for an elderly patient	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Cough	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Depression	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Diabetes type 2	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Diarrhea	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Discuss contraceptive choice	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Discuss exercise	Evaluate and treat	Outpatient	Actively participate in care

Required Patient/Clinical Conditions

Family Medicine	Discuss nutrition	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Discuss screening for breast cancer	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Discuss screening for cervical cancer	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Discuss screening for colon cancer	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Discuss screening for Osteoporosis	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Discuss screening for prostate cancer	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Discuss screening for STI	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Dysuria	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Extremity Pain	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Fatigue	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Hyperlipidemia	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Hypertension	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Low Back Pain	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Obesity	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Review a vaccine record and identify needed vaccines for a child	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Review a vaccine record and identify needed vaccines for an adult	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Skin disorders	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Substance disorders	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Substance use/abuse (Etoh, nicotine or illicit drugs)	Evaluate and treat	Outpatient	Actively participate in care
Family Medicine	Upper Respiratory Illness	Evaluate and treat	Outpatient	Actively participate in care

Students are expected to meet the required clinical experiences and procedures listed on Medlearn. If the student does not encounter all the clinical experiences listed in the table above, the student must inform the clerkship prior to the final exam. The clerkship director will assign an alternative experience/requirement if needed.

History & Physical Exam

Students are required to be observed at least once per clerkship taking a medical history (partial or complete) and performing a physical exam (partial or complete). Students must document this observation in MedLearn. It is only necessary to document one observation for this clerkship.

Duty Hours

Students are expected to be at their clerkships from roughly 8am to 5pm daily, and no call is expected, therefore students do not need to keep a duty hours log.

Patient Encounter Log

Students need to document each required patient/clinical condition in MedLearn once. The required patient/clinical conditions are outlined in the syllabus. The clerkship is not considered complete until the patient encounter/procedure list is completed. No notes are necessary, and students only need to document each item once.

Suggested Texts and Readings

- Pre-Test
- Textbook: Essentials of Family Medicine- Sloane Sixth Edition (optional purchase)
- AAFP medical student membership
 - FREE
 - Reading materials
 - Question bank
- NBME review
 - <http://www.nbme.org>
 - Students & residents → subject exams → content and sample items.
 - Shelf review questions for all specialties

Required reading : Ventres WB. How I think: perspectives on process, people, politics, and presence. *J Am Board Fam Med.* 2012; 25(6): 930–936.

Required or Special Materials

Stethoscope and White Coat

Mid-Clerkship Formative Feedback

This clerkship expects students to seek formative feedback from their attending physicians and residents throughout the rotation to improve their performance based on the six competencies. Approximately half-way through the scheduled rotation students will document feedback using the Mid-Clerkship Formative Feedback form. We expect students to present this form to their attending to discuss both their strengths and areas in which they need to improve. This will serve as a strategy to ensure adequate evaluation by the end of the rotation and to remedy any experiential gaps prior to the end of the rotation. These forms should be filled out in a one-on-one session with your attending physician or resident, signed and then returned to the clerkship office. Although the mid-clerkship feedback is not considering in the determination of your grade, completion is mandatory, and lateness is considered in professionalism points.

Grading Scale and Policies

There are four grades awarded in the FCM clerkship:

Honors

High Pass

Pass

Fail - Students who do not complete the clerkship requirements at the pass level because they have failed clinically based on FCM 5-point Likert scale, fail the final exam and retake exam, or obtain an Unsatisfactory in any competency. A failure requires repeating the clerkship.

Grading for the Clerkship is determined by the following:

Clinical Assessment	35%
NBME Shelf Exam	15%
Workplace Based Assessment	35%
Professionalism	5%
Evidence Based Medicine Sessions/ Aquifer	10%
Total	100%

Clinical (35%)	WBA (35 %)	EBM/Aquifer (10%)	Exam (15 %)	Professionalism (5%)
4.5 – 5.0 Honors	Pass	Pass	80% - 100% Nat'l Norm	Pass
4.0 – 4.49 High Pass	Pass	Pass	65% - 79%	Pass
3.0 – 3.99 Pass	Pass	Pass	10% - 64%	
< 3.0 Fail			< 10%	

Clinical Assessment (35% of the composite grade):

This is based on the assessment completed by the preceptor(s) during clinic. Students are assessed using the six core competencies: medical knowledge; physical exam skills; interpersonal communication skills; professionalism; practice-based learning improvement; and systems-based practice. The scores for each competency are averaged and students must achieve a 'Satisfactory' overall assessment in each competency to pass the clerkship.

Work based Assessment (35% of composite grade):

Students are required to be assessed on a minimum of 4 different EPAs (Entrustable Professional Activities) during each clerkship. A grade of "pass" is awarded for 35% of the grade when a student has completed a minimum of 1 per week of patient interaction. For the FCM clerkship, a total of 5 WBA's are required.

In the Family Medicine clerkship there are 6 EPAs students can choose to be evaluated on:

EPA1: Gather a History and Perform a Physical Examination

EPA2: Prioritize a differential Diagnosis Following a Clinical Encounter

EPA3: Recommend and Interpret Common Diagnostic and Screening Tests

EPA5: Document a Clinical Encounter in the Patient Record

EPA6: Provide an Oral Presentation of a Clinical Encounter

The clerkship director may allow additional EPAs as part of the list of EPAs for this clerkship. Students are encouraged to talk to the clerkship director to obtain approval.

Final NBME Examination (15% of composite grade):

The Equated Percent Correct Score (raw score) is converted into a Percentile Rank using the NBME Academic Year Norms graph, and the quarter (1-4) in which the exam was taken. The Percentile Rank may change over the course of the academic year in each quarter (e.g. a raw score that converts to the 15th percentile in quarter 1 may fall in the 10th percentile in quarter 4 for the same raw score).

Retake exams will utilize the same method. The Equated Percent Correct Score (raw score) will be converted to the Percentile Rank for the quarter (1-4) in which the retake exam was taken. Students who successfully complete a retake will receive the grade of “Pass” for the clerkship.

See Appendix A for the 2019-2020 NBME Academic Year Norm graph.

Evidence Based Medicine Sessions (10% of Composite grade):

Students will be graded on your presentation and in your participation in these sessions. Students will receive a “Pass” if they attend the sessions, participate, and prepare and present a case.

Professionalism Grade (5% of composite grade):

Professionalism accounts for 5% of the total grade; it is an all or nothing component. A significant lapse and/or a pattern of lapses will result in a deduction of the full 5%. The Clerkship Director makes the final decision. It is expected that most students will receive full credit.

The following list, while not exhaustive, should help to clarify what is included in the Professionalism grade throughout the clerkships.

Students will:

- Complete credentialing paperwork and site-specific requirements such as, but not limited to, fingerprinting and drug screening, by the stated deadline.
- Complete assignments by due date. This includes but is not limited to the following:
 - o MedLearn (Duty hours, H&P feedback, Patient Logs)
 - o Surveys (e.g. MedLearn, New Innovations)
 - o Written History and Physicals
 - o SOAP Notes
 - o Mid-Clerkship Formative Feedback Form
 - o Return of books and other borrowed items
- Respond to emails in a timely manner (within 2 business days)
- Refrain from using cell phones during meetings/sessions/didactics
- Always inform your team/preceptor of your whereabouts
- Be considerate to staff, faculty, residents, and/or patients
- Be on time for required meetings/sessions and do not leave without permission or until dismissed.
- Sign-in for didactics or other activities where requested ONLY for yourself
- Be punctual and comply with NBME Shelf Exam rules
- Obtain advance permission from the Clerkship Director/Program Manager for absences from activities and/or wards; inform appropriate residents and/or attendings

We reserve the right to assign a failing grade for the entire clerkship if a student performs in an unprofessional manner in terms of interactions with patients and other health professionals, falsifying patient care data, completing assignments, non-attendance at scheduled activities or falsely covering for a colleague, unprofessional behavior as deemed by the site on away rotations, or failing to follow the rules while occupying University arranged housing.

Incomplete –Students who pass clinically but have failed their initial shelf exam have a grade of incomplete until they retake and pass the exam. If a student passes their retake exam and has passed clinically a grade of “pass” will be entered for the clerkship.

Final Grade Distribution:

The Department of Medicine, in keeping with the policy of the College of Medicine, will assign final grades using a cumulative, point-based system calculated with the above criteria. Final grades will be distributed using the following COM guidelines:

Honors: Top 25%

High Pass: Next 26-50%

The remaining cohort who did not meet the criteria for Honors or High Pass, and who met the minimum passing criteria will be awarded a grade of “Pass.”

What to do if students have questions about your grade.

If a student has a concern about their final grade or any part of your final evaluation, please do not approach the instructors or clinic site preceptor. Instead, make an appointment to discuss your grade with the clerkship director. The clerkship director will then review the final grade and, if it appears warranted, will discuss discrepancies with those who evaluated the student. If a preceptor chooses to revise the final clinical assessment, the final grade will be recalculated.

The reason for this policy is as follows: 1. The clinical evaluation from any instructor is only a part of your total clinical evaluation. Individual preceptors do not know the clinical scores that have been assigned to you by other preceptors, 2. The final grade is composed of 5 parts as detailed above. 3. The final grade is thus determined by the totality of input to the FCM clerkship director and is not determined at the site.

Attendance Policy

- All clerkship experiences are mandatory and any absence must be reported and remediated as deemed appropriate by the clerkship director.
- Students are expected to carefully read the full text of the Clerkship Attendance and Absence Policy and will be held accountable for adherence to the policy. The full text of the attendance policy can be accessed at: https://medicine.arizona.edu/sites/default/files/attendance_and_absence_policy_emergency_notification_protocol_tepc_approved_1.15.2020.pdf .
- All absences must be requested a minimum of 30 days prior to the anticipated absence by contacting the clerkship office. The clerkship director may approve the absence based on the College of Medicine Absence and Attendance policy (see weblink above)

If you must be absent from clinic due to an emergency or illness, please contact the clinic first and then contact the clerkship office at 626-7865 or email lcontrer@email.arizona.edu. Absences should be logged into MedLearn within a business day.

If a student is absent from clinic or didactics session for more than 3 days total, the student will receive a grade of incomplete and be required to re-take the clerkship.

University Policies

Absence and Class Participation Policy

The UA's policy concerning Class Attendance, Participation, and Administrative Drops is available at <http://catalog.arizona.edu/policy/class-attendance-participation-and-administrative-drop>.

The UA policy regarding absences for any sincerely held religious belief, observance or practice will be accommodated where reasonable: <http://policy.arizona.edu/human-resources/religious-accommodation-policy>.

Classroom Behavior/Attendance Policy

To foster a positive learning environment, students and instructors have a shared responsibility. We want a safe, welcoming, and inclusive environment where all of us feel comfortable with each other and where we can challenge ourselves to succeed. To that end, our focus is on the tasks at hand and not on extraneous activities (e.g., texting, chatting, reading a newspaper, making phone calls, web surfing, etc.).

Students are asked to refrain from disruptive conversations with people sitting around them during lecture. Students observed engaging in disruptive activity will be asked to cease this behavior. Those who continue to disrupt the class will be asked to leave lecture or discussion and may be reported to the Dean of Students. College of Medicine – Tucson Attendance Policy: <https://medicine.arizona.edu/form/attendance-policies-medical-students-com>

Threatening Behavior Policy

The UA Threatening Behavior by Students Policy prohibits threats of physical harm to any member of the University community, including to oneself. See <http://policy.arizona.edu/education-and-student-affairs/threatening-behavior-students>.

Accessibility and Accommodations

At the University of Arizona, we strive to make learning experiences as accessible as possible. If you anticipate or experience barriers based on disability or pregnancy, please contact the Disability Resource Center (520-621-3268) Link: <https://drc.arizona.edu/> - to establish reasonable accommodations.

Code of Academic Integrity

Students are encouraged to share intellectual views and discuss freely the principles and applications of course materials. However, graded work/exercises must be the product of independent effort unless otherwise instructed. Students are expected to adhere to the UA Code of Academic Integrity as described in the UA General Catalog. See: <http://deanofstudents.arizona.edu/academic-integrity/students/academic-integrity>.

The University Libraries have some excellent tips for avoiding plagiarism, available at <http://new.library.arizona.edu/research/citing/plagiarism>.

UA Nondiscrimination and Anti-harassment Policy

The University is committed to creating and maintaining an environment free of discrimination; see <http://policy.arizona.edu/human-resources/nondiscrimination-and-anti-harassment-policy>

Our classroom is a place where everyone is encouraged to express well-formed opinions and their reasons for those opinions. We also want to create a tolerant and open environment where such opinions can be expressed without resorting to bullying or discrimination of others.

Confidentiality of Student Records <http://www.registrar.arizona.edu/personal-information/family-educational-rights-and-privacy-act-1974-ferpa?topic=ferpa>

University and COM-T Policies

See [University of Arizona Policies](#)

See [COM-T Student Policies](#)

Subject to Change Statement

Information contained in the course syllabus, other than the grade and absence policy, may be subject to change with advance notice, as deemed appropriate by the instructor.