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**University of Missouri – Kansas City School of Medicine
Department of Community and Family Medicine**

**Medicine 9471 - Family Medicine 1 Clerkship
5 Credit Hours**

Course Description: Exposes students to the unique specialty that focuses on the family. Students experience the art of medicine as well as science, working with patients in the context of their family and community. Includes care of the child, the adolescent, pregnant women, young and middle-aged adults, and the elderly. Addresses ambulatory medicine, prevention and health maintenance.

FM I Clerkship Director – Angela Barnett, MD

816-292-9585 (pager)

816-404-7115 (academic office)

Preferred contact – angela.barnett@tmcmcd.org

Office hours for Dr. Barnett are by appointment at Lakewood. To schedule an appointment, please contact Gayle Price, Medical Education Coordinator

Medical Student Coordinator - Gayle Price

816-404-7146 (office)

(fax) 816-404-7143

(cell) 816-416-6003

Preferred contact - Gayle.Price@tmcmcd.org

***To communicate with Gayle, please use her TMC email address and **not** her UMKC email address.*

Our offices are on the third floor Professional Services Building (PSB) at Truman Medical Center – Lakewood.

An up-to-date version of the clerkship calendar, including due dates, optional noon conferences, and required didactics, is maintained at:

<https://calendar.google.com/calendar/embed?src=dkmflb7be9cq0nra61tl8mem04%40group.calendar.google.com&ctz=America/Chicago>

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Welcome Students!

Family physicians provide first contact, ongoing, and preventive care to all patients regardless of age, gender, culture, care setting, or type of problem. Rather than focusing on one organ system or type of patient, family medicine is an approach to patient care that treats each individual as unique with a personality and social system that affects his or her attitude toward health care. Family physicians are also focused on their community as a whole and recognize that many of the things that impact a patient's health occur outside of the exam room and hospital.

The UMKC SOM curriculum enhances your exposure to this primary care specialty during two required Family Medicine rotations:

- In Year 4, the Family Medicine I Clerkship (FM I) exposes you to urban and suburban family medicine where family doctors have to shift their role to meet the needs of their community. You will be assigned to clinical rotations in the ambulatory, inpatient, and community settings.
- In Year V, the Family Medicine II Preceptor rotation (FM II) is in a rural setting where you work one-on-one with a family physician in a private practice setting. The experience highlights the unique opportunities for continual, comprehensive care for patients and their families in the context of their community.

These two rotations complement one another and are considered a continuation of family medicine education in the UMKC SOM 6-year program curriculum.

Our faculty and resident staff are committed to providing an outstanding educational experience for medical students.

We welcome your feedback on the clerkship and your experience. I am excited to be on this journey with you as you explore the role of the family physician in the healthcare system.

Angela Barnett, MD
FM 1 Clerkship Director

Course Expectations

Before Rotation Responsibilities

- Read the entire syllabus carefully
- Log on to your TMC e-mail to verify that you have access. If you do not have access, email gayle.price@tmcmcd.org right away using the subject line, "Clerkship Rotation."
- Go to the Aquifer website (<http://www.aquifer.org/fmcases>) and create an account using your UMKC email. If you already have an account, verify that your login is active.
- Send Gayle your clinic time, any schedule conflicts, and requests for excused absences.
- Review your schedule at orientation for any conflicts or errors.
- Develop a plan to maintain personal wellness and promote healthy behaviors in patients

During the Rotation Responsibilities

- √ Bring a laptop or tablet to each clinical assignment.
- √ Check your e-mail at least twice per day (once after 1700) for schedule changes.
- √ Respond promptly (within 24 hours) to communications from clerkship staff.
- √ Participate in small group discussions.
- √ Demonstrate a positive attitude.
- √ Follow dress code and have a tidy appearance.
- √ Engage with patients and their family as well as all members of the clinical team.
- √ Ask for help when needed.
- √ Bring reading materials relevant to family medicine to review during downtimes.
- √ If an activity is canceled, contact Medical Student Coordinator, Gayle Price for further instructions. Do not leave without discussing with her first.

Goals and Objectives

At the end of the clerkship, the student will be able to:

1. Discuss the principles of patient care from the family medicine perspective
2. Gather information, formulate a differential diagnosis, and propose plans for the initial evaluation and management of patients with common acute and subacute illnesses
3. Manage follow-up visits for patients with one or more chronic problems
4. Develop evidence-based health promotion and disease prevention plans for patients of any age or gender
5. Demonstrate competency in advanced elicitation of history, communication, physical examination, and critical thinking skills
6. Name inequalities in the healthcare system and the role of the individual physician is promoting a more effective and equitable healthcare system

I. Interpersonal and Communication Skills

a. Goal:

- i. Communicate effectively with patients, family members, and healthcare providers to ensure the delivery of quality patient care.

b. Objectives:

- i. Use motivational interviewing skills to encourage patient compliance with recommended treatments and lifestyle changes.
- ii. Demonstrate non-verbal communication skills that convey compassion and engagement with patients, family members, and the medical team.
- iii. Explain the risks and benefits of a diagnostic approach or treatment to encourage active involvement by patients in treatment decisions.
- iv. Communicate with clerkship faculty and staff in a professional manner via e-mail.
- v. Demonstrate active listening skills including reflective statements and summary statements to ensure effective communication with patients.
- vi. Use patient-centered interviewing skills when working with patients in an ambulatory setting
- vii. Reflect in writing on the experience of patients who struggle with addiction

II. Professionalism

a. Goal:

- i. Interact in a professional manner with patients and their families, peers, and the healthcare team.

b. Objectives:

- i. Attend student interactive sessions and participate in discussions.
- ii. Complete all assignments by the posted deadline.
- iii. Discuss professional dilemmas in small group discussions.
- iv. Provide honest and reliable information when presenting patients to the attending, preceptors, and residents.
- v. Acknowledge errors.
- vi. Arrive on time to all scheduled assignments.
- vii. Present yourself as a professional member of the team through your choices in your clothing, grooming, language, and general demeanor.
- viii. Explore the need to balance competing demands on the time of physicians.

III. Medical Knowledge

- a. Goal:
 - i. Apply knowledge and principles learned in the basic science coursework to the care of patients.
- b. Objectives:
 - i. Use a knowledge of human anatomy and physiology to develop a differential diagnosis for a patient presenting with acute and undifferentiated complaints.
 - ii. Apply knowledge on the pathophysiology of chronic diseases when recommending lifestyle changes and monitoring for disease progression.
 - iii. List recommended screening tests for early identification of treatable condition in adult and pediatric patients.
 - iv. List common bacterial pathogens that infect various organ systems to inform choices in antibiotic regimens.
 - v. Participate in the required weekly on-line interactive Aquifer family medicine CASES and quizzes.
 - vi. Recommend lifestyle changes to obese patients that can promote weight loss.

IV. Practice-Based Learning and Improvement

- a. Goal:
 - i. Recognize strengths and weaknesses across the competencies to develop an individual learning plan for this clerkship that can serve as a foundation for maintaining a habit of lifelong learning.
- b. Objectives:
 - i. Complete a personal wellness assessment and develop one goal to promote personal wellness during the rotation
 - ii. Develop a plan to maintain personal wellness and promote healthy behaviors in patients
 - iii. Use point-of-care tools to access evidence to guide your evaluation
 - iv. Recognize your individual knowledge gaps and consider ways to fill in those gaps.
 - v. Ask questions of those around you to gain a deeper understanding of family medicine topics.
 - vi. Ask clinical questions using the "PICO" format, identify resources that can help answer those questions, and present the answer to peers.

V. Systems-Based Practice

- a. Goal:
 - i. Work with a variety of disciplines to ensure patients receive comprehensive and coordinated care.
- b. Objectives:

- i. Consider the costs of medications and diagnostic evaluations when recommending these services.
- ii. Work with patients to identify areas where their social environment may impact their health.
- iii. Apply methods of health promotion and disease prevention through the use of written protocols, risk identification, screening for disease, and counseling asymptomatic patients.
- iv. Identify tools used by organizations, including medical schools, to provide medical care to underserved patients
- v. Describe the impact that access to primary care can have on a community.
- vi. Explain how economic disparities, racism, and other forms of discrimination can affect personal health

VI. Patient Care

- a. Goal:
 - i. Perform focused histories and physical examinations.
- b. Objectives:
 - i. Develop a differential diagnosis to guide your history taking and physical examination
 - ii. Use a mixture of open and closed-ended questions to obtain a history from a patient
 - iii. Use patient-centered language to ask sensitive questions.
 - iv. Develop and justify a differential diagnosis for an acute, undifferentiated complaint.

Clerkship Structure – Clinical Experiences

Your clerkship time is composed of three parts:

1. **Preceptor experience** - Four weeks with a community or academic preceptor
 - a. This experience is designed to show the core work of family medicine with a focus on ambulatory care of acute and chronic problems as well as preventive care
2. **Specialty selective experience** – Four days with a family medicine specialty
 - a. Options:
 - i. Women’s health
 - ii. Inpatient adult medicine
 - iii. Dermatology and procedures
3. **Community and Interprofessional experience**
 - a. One half-day with an integrated behavioral health specialist
 - b. Work at Sojourner Health Clinic
 - c. Attend Alcoholic Anonymous meeting

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- d. One half-day in family medicine center completing a wellness assessment on a patient, then reflecting with Dr. Barnett

You will be given the opportunity to select your preferred experiences for preceptor and your specialty before starting the rotation on a first come, first served basis. You may switch with an agreeable peer. You must have your choices in by the due date. Students who do not select an option by the deadline will be assigned selectives and preceptor sites.

Clinical Expectations and Opportunities

Students should plan to do the following independently when in a clinical environment (a physician is nearby and available for questions but not providing direct supervision)

- Evaluate patients with stable vital signs and clinical situation
- Obtain history
- Perform physical exams other than invasive personal exams
- Counsel patients on behavior change
- Assist with discharging patients
- Compose a note that is reviewed by a physician for documentation in the electronic health record
- Return patient phone calls
- Notify patients of lab results

Students should do the following only with IMMEDIATE and DIRECT supervision (a supervising physician in the room with the student):

- Put orders in the electronic health record for physician co-signature
- Perform a procedure that requires breaking the skin (see examples below)
- Perform an invasive personal exam (genitals, anorectal, hernia, or breast)
- Obtain informed consent
- Evaluate an unstable patient (e.g., acute respiratory distress, abnormal vital signs that have not yet been reviewed by the physician)

Students should NEVER:

- Enter orders or document notes under a physician's log-in
- Give verbal orders to a nurse or other member of the healthcare team

Students may be able to perform the following procedures with permission and immediate supervision from the supervising physician (resident or attending) and patient:

- Venipuncture
- Peripheral intravenous line placement
- Intramuscular injection
- Trigger point injection
- Joint injection or aspiration
- Pap smear

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- Splint placement
- Skin biopsy (punch or shave)
- Cryotherapy
- Ear irrigation
- Cervical check in laboring patient with intact membranes
- Delivery of the placenta after vaginal delivery
- Nasogastric tube placement

Students may be able to observe and assist the following procedures with permission from the supervising physician (resident or attending) and patient:

- C-section
- Vaginal delivery
- Vasectomy
- Newborn circumcision
- Point-of-care ultrasound
- Skin biopsy (elliptical excision)
- Incision and drainage
- IUD insertion or removal
- Nexplanon insertion or removal
- Endometrial biopsy
- Paracentesis
- Thoracentesis
- Central intravenous line placement
- Cast placement or removal
- Laceration repair
- Lumbar puncture
- Nerve blocks
- Other procedures as applicable if agreeable to patient and supervising physician

Oasis Journal

- Students are expected to complete all items listed in the Oasis journal. If a student does not believe they will have the opportunity to complete all elements, they should contact Dr. Barnett 24 hours before sitting for the final exam for an alternative experience.
- It is strongly recommended you enter patients every day.
- After you have met minimum requirements, continue to add to the list to show the breadth of your experience. Document every patient you come into contact with during the clerkship and document every problem addressed during the visit as well as all procedures completed. If a patient has more than one problem, include all current problems discussed during the day's visit.
- Your required encounters should all be met during your preceptor time. You should log patients encountered during your selectives as well.

- If you interact with a student who does not have a medical record number (e.g., at Sojourner) please use a random number to identify that patient in the Oasis log.
- Students must enter all required patient data by midnight of the last day of the clerkship. **Students who fail to meet this requirement will have their final grade in the clerkship reduced by one level (e.g., honors to high pass).**

	Min # required	Level of Responsibility
Required Procedures/Activities to be Completed on Any Patient		
Contraceptive counseling	1	O
Pelvic exam with speculum	1	O
Diabetic foot exam	1	P
Smoking cessation counseling	1	P
DASH diet counseling	1	P
Medication reconciliation	5	P
Knee exam	1	P
Shoulder exam	1	P
Back exam	1	P
Neurological exam	1	P
Ear, nose, and throat exam	1	P
Interpret the PHQ-9 in a patient who presents with confirmed or potential diagnosis of depression	1	P
Explain a new medication to the patient	1	P
Obtain vitals and room a patient	1	P
Obtain a comprehensive family history	1	P
Obtain a complete social and cultural history (ask about occupation, education, military service, living situation, religion/spirituality, hobbies)	1	P
Obtain a complete diet history (daily diet, food allergies or intolerances, snacks, binge eating)	1	P
Write an exercise prescription (type of activity, frequency, duration, intensity)	1	P

Determine risk of coronary artery disease using the ASCVD Calculator	1	P
Acute and Subacute complaints		
Abdominal pain	1	S
Acute joint pain (other than back)	1	S
Acute viral or bacterial illness of respiratory system	1	S
Changes in urination	1	S
Chest pain or Palpitations	1	S
Cough	1	S
Dizziness	1	S
Fatigue	2	S
Headache	1	S
Low back pain	1	S
Menstrual or sexual concerns	1	S
Rash or Skin Lesion	1	S
Shortness of breath or wheezing	1	S
Chronic Conditions		
Anxiety or Depression	2	S
Asthma	1	S
COPD	1	S
Chronic pain	2	S
Coronary artery disease	1	S
Hypertension	3	S
Hyperlipidemia	3	S
Obesity	3	S
Substance abuse (alcohol or illicit drugs)	1	S
Type 2 Diabetes	3	S
Pediatric patient (less than age 18)	1	S
Geriatric patient (older than age 65)	2	S

Young adult patient (age 18 to 30)	2	S
Middle Age Adult (36-64 years)	6	S
Wellness visit	2	S

O = observed (you have watched a faculty member or resident complete the activity)

P = performed (for activities, you should personally complete the task with supervision and feedback as necessary)

S = seen (you saw a patient with the complaint on your own, observed a resident or faculty member seeing the patient, or have completed the Aquifer fmCASES with the complaint or in the expected age range)

Sojourner Clinic

Grand Avenue Temple at 205 E 9th St, KCMO, 64106

- Students will attend at least one Sunday at the Sojourner clinic.
- Sign-ups are at sojournerhealthclinic.com.
- Students should arrive by 11:15 a.m..
- Attire is scrub pants and navy T-shirt or clinic attire. No White Coat! Bring your stethoscope and pen.
- Students are expected to participate in all clinic activities fully.
- Failure to attend Sojourner clinic at some point in the month will be treated as an unexcused absence.
- If a student is scheduled to attend Sojourner on the last Sunday of the month and Sojourner is cancelled without advance notice (for example, due to inclement weather), students may complete a clinic session during the first 2 weeks of the following month.

Clerkship Structure – Other Expectations

Aquifer fmCASES and Weekly Quizzes

- Of the 40 cases available, 20 have been selected for the FM I Clerkship. The rest will be covered during the FM II Clerkship, but you may do them at any time if you choose.
 - Week 1: Complete fmCASES 1, 2, 6, 10, 30
 - Week 2: Complete 5 fmCASES 8, 11, 16, 23, 29
 - Week 3: Complete 5 fmCASES 3, 13, 14, 19, 25
 - Week 4: Complete 5 fmCASES 9, 12, 17, 18, 24
- The student should plan to dedicate 60 to 90 minutes of study time per case; some may require longer.
- Each week, a quiz will be available on Blackboard for a set period to time to allow you to assess your learning. The quizzes will help you recognize areas of weakness and improve performance during the clerkship and on the final examination.
 - The student must take the quiz at the scheduled time.

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- Students should not share the questions, in any format, with other students.
- Students are expected to complete the quizzes by themselves but are welcome to use the Aquifer fmCASES while taking the quiz.
- If questions or answers are shared with anyone at any time, this will be considered a violation of the SOM's Honor Code and will be reflected in the Oasis evaluation as an unprofessional activity.

Didactic Sessions

- Five half days are assigned for learning sessions (four Tuesday afternoons and one Friday afternoon)
 - Tuesday afternoon sessions:
 - Integrated Approaches to Back Pain (1 hour) and PICO Project (1 hour) ***
 - Cardiovascular Medicine (2 hours) and Professionalism (1 hour) ***
 - Preventive Medicine (1 hour) and Dyspnea (1 hour)
 - *** *Additional preparation is required*
 - Friday afternoon sessions:
 - Yoga (1 hour)
 - Sports medicine (1 hour)
 - Geriatrics (1 hour)
 - Anxiety (1 hour)
 - KC Care Clinic Opportunities (1 hour)
- Attendance and participation is mandatory. Unexcused absences will follow the unexcused absence policy.
- Please refer to individual emails and the clerkship calendar for times and locations.
- If afternoon sessions are scheduled on the student's day of continuity clinic, students should inform his or her docent of the mandatory attendance and need for timely arrival. The only exception to this is students who have Friday continuity clinic. Students are excused from the Friday noon lecture but are expected to arrive on time for the 1 p.m. lecture.

Mid-Block Feedback Session

- If you are assigned to Lakewood Pavilion Preceptor, you will meet with Dr. Barnett and should contact Gayle Price to schedule your mid-block.
- If you are assigned to Hospital Hill Pavilion Preceptor, you will meet with Dr. Slack and should contact her to schedule your mid-block.
- All other students will be scheduled by Gayle Price.
- The student will bring the following:
 - A printed copy of an updated Oasis Log Journal
 - A completed copy of the Mid-Block Feedback Session Guide
- During the session, the faculty will:
 - Review the Oasis Log Journal and make recommendations for 100% completion before the end of the rotation.

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- Discuss the student's personal goals and plans for attainment.
- If the student is performing at less than satisfactory pass level, the course director, and the student will establish specific behavioral criteria to enhance improvement. A minimum of weekly re-evaluation sessions will take place to monitor performance improvement.

Requirements and Grading

Being a successful physician requires meeting certain expectations above and beyond those of the non-physician. It is expected the student will meet these high professional standards in all matters relating to the Family Medicine I Clerkship. The student must pass the UMKC-SOM Professionalism Competency to pass the Clerkship.

	25%	15%	35%	15%	10%
	CPE – Preceptor	Brief Evaluations	Final Exam	OSCE	Other Tasks
Honors	3.7 or above	3.5 or above	80 or above	3.75 or above	3.8 or above
High Pass	3.3 to 3.69	3 to 3.49	70 to 79	3.45 to 3.74	3.45 to 3.79
Satisfactory Pass	3 to 3.29	2.5 to 2.9	60 to 69	3.26 to 3.44	3.26 to 3.44
Marginal Pass	2.5 to 2.99	2 to 2.49	50 to 59	3.19 to 2.25	3.19 to 3.26
Fail	Less than 2.5	Less than 2	Less than 49	Less than 3.19	Less than 3.19

Final Grade: Please note that the ranges listed above are provided to give the student guidance as a target to aim for within each of the components that make up the final summative grade. The students' final points will be calculated by using the formula given above, and final grades will be determined by the scale provided below. For example, a student could earn an Honors in CPE, High Pass in Brief Evaluations, High Pass on the exam, Satisfactory Pass on the OSCE, Marginal Pass on the other tasks, and earn a Satisfactory Pass as the final grade.

The following formula is used to convert students' grades on each component into their final grade: $(\text{Clinical Performance Evaluation – Preceptor} \times .25) + (\text{Brief Evaluations} \times .15) + (\text{Clerkship Exam}/25 \times .35) + (\text{Objective Structured Clinical Exam} \times .15) + (\text{Other Tasks} \times .1)$

Final Points Cut Scores:

Honors = 3.51 to 4.00

High Pass = 3.17 to 3.5

Satisfactory Pass = 2.78 to 3.16

Marginal Pass = 2.24 to 2.77

Fail = <2.23

- **Professionalism**
 - Students must pass the professionalism component in order to pass the clerkship. Professionalism is assessed as part of the CPE-Preceptor and Brief Evaluations. Students will fail the professionalism if they receive a score of 0, or “Needs Attention” from at least two evaluators.
- **Clinical Performance Evaluation (CPE)**
 - Scores are weighted by the amount of time spent with the grader
 - You should give a clinical performance evaluation (CPE) form to all physicians (faculty and residents) with whom you work during your preceptor rotation.
 - A copy of the assessment is available on Blackboard.
- **Brief Evaluations**
 - Students should have a brief evaluation from the following sources:
 - Clinical selective (inpatient medicine, dermatology, or OB)
 - Sojourner
 - Integrated psychologist
 - Students may have evaluations from the following sources, if appropriate:
 - Dr. Barnett in the Family Medicine Center
 - Sports medicine clinic
- **Final Exam**
 - 90 questions from Aquifer cases, 5 questions on social determinants of health, 5 questions on lifestyle medicine
 - It is recommended the student take notes while studying the cases and preparing for the weekly quizzes.
 - Administered the last Friday of the block at TMC – Lakewood (see your schedule for date/time).
 - Minimum score for passing the Clerkship Exam is 49 points
 - You will receive an incomplete grade in the course until the final examination is completed with a passing score. An incomplete grade, **for any reason**, will result in a final grade no higher than a Satisfactory Pass, regardless of the score on the second attempt of taking the final examination.
 - No excused absences will be granted for the time of the final exam.
- **Objective Structured Clinical Examination (OSCE)**
 - Students will complete two cases. One case will require students to use motivational interviewing techniques to counsel a patient to lose weight. The second case will involve an office visit with Chris Williams, who will have one of three possible chief complaints (chest pain, back pain, or difficulty breathing).
 - The grade is from the following areas:
 - 25% of score from checklist completed by SP on history and physical exam maneuvers
 - 25% of score from note graded by faculty
 - 25% of score from checklist completed by SP on communication
 - 25% of score from communication evaluation by faculty

- If students do not arrive by their scheduled time or have an unexcused absence on the date of the OSCE, they will receive no credit for the OSCE and no remediation opportunities will be offered.
- No excused absences with advance notice will be given for the OSCE times. If a student has an unplanned excused absence for the OSCE with appropriate documentation (see note on acceptable documentation under excused absence policy), they will be assigned an “incomplete” grade and be given the opportunity to take the OSCE in a future clerkship month according to the Incomplete Grade policy.
- **Other Tasks** – Average of scores for each of the following:
 - PICO research project
 - To be presented at Integrative Medicine and Back Pain session with Dr. Barnett – see Blackboard for instructions
 - AA Meeting Reflection paper
 - To be submitted on Blackboard no later than the start of the final examination and graded by Dr. Crumpecker – see Blackboard for the rubric
 - Average score on weekly quizzes
 - Observed Patient Encounter
 - Students must be observed by an attending or resident performing a history and physical examination on an established patient with an acute complaint or follow-up of a chronic illness.
 - The OPE must be completed during the preceptor portion of the family medicine clerkship.
 - Students must return the completed OPE to the Medical Student Coordinator no later than the start of the final examination.

If students are unable to attend the PICO Research session due to an excused absence, they may summarize their research findings in a 300-word paper to be graded by Dr. Barnett and receive full credit for participation in the event.

Incomplete Grades

An instructor may assign the grade of I (incomplete) to students who have been unable to complete the work of the course because of illness or substantial grounds beyond their control. An incomplete grade is appropriate only when enough work in the course has been completed for the students to finish the remaining work without re-enrolling in the course or attending additional classes.

This policy applies to all courses, both required and elective. “Incomplete” grades received must be satisfactorily removed within one calendar year. If an “Incomplete” grade remains at the end of the calendar year, the grade will lapse to a “no Credit,” “Fail,” or “F.”

Recommended Learning Materials:

- *Essentials of Family Medicine, 7th Edition*; Smith, Schrager, WinklerPrins, 2018. (ISBN: 978-1496364975)
- *Case Files Family Medicine, 4th Edition*; Toy, Briscoe, Britton, Heidelbaugh, 2016 (ISBN: 987-1259587702)
- Symptom to Diagnosis, 3e online version
<http://accessmedicine.mhmedical.com.proxy.library.umkc.edu/book.aspx?bookID=1088>
- JAMA Rational Clinical Examination
<http://jama.jamanetwork.com/collection.aspx?categoryid=5855>

Recommended Websites:

- American Academy of Family Physicians <http://www.aafp.org/online/en/home.html>
 - AAFP Website review questions (must be a member; FREE for students)
 - Review articles
- USPSTF Guidelines <http://www.uspreventiveservicestaskforce.org/BrowseRec/Index>

Recommended Apps:

- AHRQ ePSS
- AFP by Topic
- Qx Calculate
- ASCVD Risk
- Shots by STFM
- GoodRx
- CDC Vaccine Scheduler
- CDC Contraception
- LactMed
- HumanDx
- Which P-vax?
- Aspirin Guide
- Preop Eval

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Excused and Unexcused Absences

The FM1 Clerkship follows UMKC's official policy on excused absences, available here: <http://med.umkc.edu/docs/curriculum/Res-Interview-ExAbsences.pdf>

Students will not be granted an excused absence for the following under any circumstances:

1. Orientation
2. OSCE
3. Final examination

Family Medicine Specific Inclement Weather Policy

If Lee's Summit school district is closed due to snow or icy conditions (but not if closed due to cold), students are not required to report to clinical duties and should use the time as independent study. If students are concerned about their safety when reporting for evening call, they should contact the student coordinator for guidance.

Note on Externship Students

The FM I Clerkship is a one month required rotation scheduled during Year 4. At various times throughout the year, an externship is offered to medical students from UMKC and outside institutions. UMKC students are given priority for scheduling for the clerkship activities. Externs are given a separate and unique curriculum/schedule from the clerkship students.

Exposure to Infectious/Environmental Hazards Policy

To find more information regarding the procedures for attending to an occupational exposure, please visit: http://med.umkc.edu/docs/sa/Immunization_and_Exposure_Procedure.pdf. Any student questions regarding this policy should be directed to Student Affairs/Dr. Rogers.