Required Rotation
The required rotation in Family Medicine is a core experience for Year III students within the College of Osteopathic Medicine. In year three, students spend two four-week sessions or eight (8) continuous weeks in a structured, predominantly ambulatory experience intended to develop the student’s decision-making and cognitive skills, and to apply didactic material in a clinical setting.

Elective Rotation
The elective rotation in Family Medicine is a four (4) week rotation during which the student will be given opportunities to further develop clinical skills as described for the required rotation. Most students electing to take this rotation will be in the fourth year of osteopathic medical school.

Purpose
A major goal of this rotation is to impress upon students the contexts in which a family medicine physician provides care for both acute and chronic illness while emphasizing the value of prevention and wellness. Students are expected to assist in the management of adult, pediatric and geriatric patients. The student will also be given opportunities to perform basic procedures, among them OMT, collection of vaginal specimens and Pap smears, performance of breast, rectal and bimanual examinations, suturing simple lacerations, splint and simple cast application, treatment of verrucae, and skin lesion removal. In select settings, the student may be exposed to more complex procedures such as upper and lower endoscopy, colposcopy, or nasal endoscopy.

Principles
There are five principles of Family Medicine that define our profession and guide care given to our patients:

- Biopsychosocial Model (Patient-Centered)
  - Family Medicine is based on a biopsychosocial model that is patient-centered and teaches students to approach patients with sensitivity and responsiveness to culture, age, gender, and disabilities and develops their ability to collect and incorporate appropriate psychosocial, cultural, and family data into patient-centered management plans.

- Comprehensive Care (Whole Person Care)
  - Family Medicine emphasizes the importance of caring for the whole person by providing opportunities for students to participate in longitudinal, integrated, preventive services and treatment of common acute and chronic medical problems for patients and families in all phases of the life cycle.

- Continuity of Care (Continuous Health Relationships)
  - Family Medicine values and promotes continuous healing relationships by providing a personal medical home for patients and their families and maintaining ongoing responsibility for the health care of patients and families and facilitating transitions between the primary care provider, referral agencies, and consultants.

- Context of Care (Evidence-Based)
  - Family Medicine emphasizes the development of patient- and family-centered treatment plans that are evidence-based, safe, and designed to produce high-quality results that enhance functional outcome and quality of life in a culturally responsive manner.

- Coordinator/Complexity of Care (Integration)
  - The family physician functions as the integrator of complex care and collaborates as a health care team member in disease management, health promotion, and patient education.
Objectives

We recognize that four to eight weeks is insufficient time to cover a comprehensive list of objectives; experience gained is dependent on the numbers of patients and types of disease entities presenting to a particular clinic. Nevertheless, certain minimum content must be addressed, either by clinical exposure or by didactic material to assist the student in preparing for Board examinations and other evaluations.

Objectives have been formulated with the goal of incorporating the seven Core Competencies of the Osteopathic Profession. It is assumed that appropriate increases in knowledge, skills and attitude/awareness will take place to improve mastery of these competencies. By the end of the Family Medicine clerkship, students will be able to meet the following objectives:

1. Osteopathic Philosophy and Osteopathic Manipulative Medicine
   - Perform an appropriate structural evaluation.
   - Outline a plan of treatment utilizing the appropriate modality (HVLA, muscle energy, facilitated release, Still techniques, etc).
   - Carry out the treatment under supervision.

2. Medical Knowledge
   - Discuss the anatomic/physiologic natural history of the most common problems/illnesses seen in family medicine as outlined under core topics.
   - Reflect upon the complexity of providing longitudinal comprehensive and integrated care for patients with chronic medical problems.
   - Identify prevalent diseases, injuries and conditions in which prevention plays a role.
   - Define primary, secondary and tertiary prevention.
   - List characteristics of a good screening test.
   - Describe the principles of behavioral change strategies (e.g. smoking cessation).
   - Recognize the impact of cultural diversity on health promotion and disease prevention issues at the individual and community level.
   - Recognize relevant laws relating to protection and promotion of public health.

3. Patient Care
   - Collaborate with other health care professionals to provide patient-centered care and preventive services across the lifespan.
   - Collect and incorporate appropriate psychological, cultural, and family data into a patient management plan.
   - Make informed decisions about diagnostic and therapeutic interventions using patient information and preferences, scientific evidence, and clinical judgment.
   - Develop and implement a management plan for common, acute illnesses using a focused, problem-oriented assessment.
   - Perform office-based procedures under supervision of a physician.
   - Apply screening protocols based on guidelines and recommendation schedules for children and adults.
   - Recite immunization schedules for children and adults.
   - Use appropriate technology to support patient education and disease prevention strategies.

4. Interpersonal and Communication Skills
   - Create and sustain therapeutic and ethical relationships with patients and families using a patient-centered approach.
   - Document appropriate information for acute and continuing care in the patient record.
   - Participate in consultations and referrals to other health care professionals.
   - Demonstrate effective, respectful communication with other health care providers and clinical staff.
   - Translate epidemiologic findings and guidelines into patient recommendations for a specific disease – prevention intervention.

5. Professionalism
   - Demonstrate respect for patients and families both inside and outside of the care facility.
   - Uphold regulations regarding patient confidentiality and privacy.
   - Conduct him/herself at all times in a manner consistent with a member of the medical community.

6. Practice-Based Learning and Improvement
   - Research current evidence and incorporate it into the plan of care for patients.
   - Consider the impact of ethnicity, socioeconomics, and environment on adherence to treatment plans and lifestyle changes.
   - Remain up-to-date with standard clinical guidelines/pathways.
7. Systems-Based Practice

- Describe the role of the family physician as coordinator of care.
- Understand barriers to delivery of health care and recommend means of improving this.
- Recognize the various settings in which family physicians provide care (office, in-patient, nursing home, home visits, etc) and the integration of care that must occur.
- Be aware of methods of controlling health care costs and allocating resources that do not compromise quality of care.
- Discuss the implications of managed care, billing and coding, and third-party payer issues in the practice of Family Medicine.

Texts and Resources

**Suggested References:**


Supplemental readings may be assigned to address diseases and disorders of patients seen during clinic hours. During this rotation, the student must make continuing efforts to review and understand all material listed in order to be adequately prepared for licensure examinations and college evaluations and must do so by all means available.

**Post-rotation Examination and Evaluations**

Des Moines University Department of Family Medicine will require a mandatory, comprehensive examination for students completing their required Family Medicine clerkship rotation(s) during Year 3. Post-Rotation examinations will be available online through Des Moines University’s Portal on Angel and should be arranged, by the student, through the DME’s office, library or clinical education office at each institution. This examination will provide the student an opportunity to be informed of his or her progress in the clerkship. **It is required to take the examination on Thursday or Friday of the last week of the 2nd four-week block of the Family Medicine rotation, and it must be completed.**

Passing score for the initial exam is **70%**.

A retake examination will be available to those who fail the initial exam; **70%** is the passing score for the retake. The retake is to be taken within 2 weeks of the initial examination date. Those failing the retake will be required to complete an **oral examination** with at least two members of the DMU Family Medicine faculty. The student will need to notify the Clerkship Director, or his or her secretary immediately following the **failure of the retake examination so that an oral examination may be scheduled at DMU.** The final examination grade will be determined by the Department of Family Medicine at the completion of the oral examination. The student is responsible to make all arrangements, including the scheduling of the exam time with the Department of Family Medicine; scheduling time away from their rotation that they are presently on; and travel expenses. **The oral examination will be video-taped.**

**Assignments**

In addition to passing the post-rotation exam, students are required to complete the **41 assigned FM cases by the last day (Friday) of your 2nd four week Family Medicine Rotation.** The Family Medicine Department Clerkship Director and Secretary will electronically monitor student progress and verify that all 41 cases have been completed by the end of the student's last four weeks of rotation.

The cases are interactive web-based cases. FM cases are meant to be a learning tool for the student, and should be treated that way. Since there are 41 required cases, students are encouraged to complete one case per day on their Family Medicine rotation. Each case takes between 30 and 60 minutes to complete. Inadequate time spent on the cases will place the student at risk for not doing well on the post-rotation examination.

The Family Medicine Post-rotation Examination as well as the remediation retake are based on the FM Cases, so the more time spent on these; the better your chances will be to obtain a higher score on the examination.

There will **NOT** be a substitute or make-up for incomplete FM cases. See "Instructions", on next page.
Instructions for Registering with FM Cases

1. FM Cases are run by InTime and Med-U just as are the SIMPLE (internal medicine) and WISE-MD (surgery) and CLipp (peds) cases. If you have previously registered for either SIMPLE or WISE-MD, you do NOT need to register again. You will use the same user name and password for all 3 modalities. If you have not previously registered, please continue to #2.

2. Go to the Med-U Homepage (www.med-u.org).

3. Select 'FM Cases'.

4. Select 'Go to Cases'.

5. Click the 'First Time User' tab on the right hand side of the screen margin.

6. Follow the prompts to complete your registration.

7. Because institutional access is controlled by email domain, you must use your institutional email address when registering (dmu.edu). Your email address will then become your log-in. Also as a student, you select your own password when registering.

8. Review and accept the FM Cases Site User Terms and Conditions. Type the security password which appears in the lower window. Select Send.

9. Expect to receive an email with a link to confirm your registration. By clicking on this link you will finalize the registration process. (These emails could be from CASUS or In-time. Please be sure to OPEN and complete any instructions these emails could contain).