

# Mount Carmel Health System Medical Education

# **CORE Family Medicine Rotation**

Welcome to the Mount Carmel Health System! During your rotation in the Department of Family Medicine, you will rotate with several of our residents and attendings in our Family Medicine Center. This opportunity will allow you to experience the breadth that defines <u>Family Medicine</u>. You will be able to hone your history-taking skills through evaluating undifferentiated patients, learn the complexity of chronic disease management, and see the skill of motivational interviewing at work during preventive care visits.

The following educational objectives are expectations of the competencies you should demonstrate by the end of your Family Medicine experience. They are designed to help you develop the basic skills of history-taking, develop an appropriate differential diagnosis, and project a professional demeanor. You are encouraged to review these objectives carefully because your progress and evaluation will in large measure be based on these objective criteria.

## By the end of this rotation, you should be able to:

I. Obtain an adequate, logical and sequential medical history which will include:

A. **History of present illness** (HOPI) including a complete description of the presenting illness, with pertinent positive and negative features. All drugs, current or prior treatments, and important previous milestones concerning that illness should be clearly noted.

#### B. **Past history** consisting of:

- Past medical history which contains previously diagnosed chronic conditions, hospitalizations and specialists with whom the patient follows up with routinely;
- Past surgical history including the approximate dates of procedures;
- Social History including substance use, occupational history, sexual history and social concerns;
- Family history of all first degree relatives including the age at which diagnoses were made;
- Review of medication list including over the counter medications and supplements;
- Review of allergic and adverse reactions to medications, foods and environmental factors, specifying the type of reaction (i.e. rash vs. anaphylaxis);
- And Immunization history.

C. **Review of systems** will contain some notation for each body system. Detailed and complete system histories are mandatory for symptoms uncovered during the review of systems. II. Perform and record an appropriate physical examination. Your exam should include at a minimum:

- A. Accurate and complete vital signs;
- B. A thoughtful description of the patient's general appearance and behavior;
- C. A thorough and complete description of physical findings pertinent to the HOPI;
- D. And careful attention to findings suggested by the past medical history or review of systems.

The remainder of the physical examination must be comprehensive and sufficiently detailed to identify incidental abnormal findings not related to the present illness or any positive historical clues.

III. Apply basic medical knowledge in synthesizing an assessment and plan of management to address the patient's problems. You must be able to:

- A. Generate a clear and prioritized problem list;
- B. Develop a plan for evaluation and treatment;
- C. Review the pertinent literature to expand your knowledge of the problem;
- D. Define patient education objectives and assess the patient's understanding of his or her problems.

IV. Orally present your patient in a thorough, concise manner. You should demonstrate your ability to obtain a complete history as well as an understanding of the patient's basic disease process and its manifestations in your patient. You will be able to practice you case presentation skills with a variety of residents and attendings throughout your rotation.

V. Document your visit in a SOAP note format.

- Subjective
- Objective
- Assessment
- Plan

One note per week should be submitted to Shoba Belgundu, MD at Shoba.Belegundu@mchs.com for review and feedback.

VI. Demonstrate the following professional behaviors:

- Reliability and dependability;
- A professional attitude and demeanor when interacting with fellow medical professionals;
- Respectful and compassionate interactions with patients;
- Integrity and honesty;
- Initiative and enthusiasm;
- Self-directed learning.

## **Structure of Clinical Rotation**

#### Outpatient Clinic: St. Ann's Family Medicine Center at 477 Cooper Rd, Suite 300

Unless otherwise instructed, rotation hours are from 8:00 am to 5:00 pm with lunch from noon – 1:00 pm. On your first day you will attend a brief orientation with Dr. Belegundu at the Family

Medicine Center after which you will be assigned one physician with whom you will spend the rest of the morning seeing patients. Each half day you will be assigned to a new resident or attending to accompany in evaluating and treating patients.

#### Didactics

You are expected to attend Wednesday morning didactics with the Family Medicine residents unless it conflicts with requirements from your institution. Didactics begin either at 7:00 or 7:30 am and generally conclude by noon. Most lectures are held in the conference room at the Family Medicine Center. You will be provided a complete schedule at the beginning of your rotation. Please note that one week of the month we begin with Grand Rounds located within St. Ann's Hospital in Conference Room A or B. Please ask for specific directions prior to Wednesday morning. Also, one week is held at the Mount Carmel West Simulation Center.

#### **Evaluations**

Your progress will be evaluated throughout your rotation using QuickNotes as a feedback mechanism. The student QuickNote forms are located in the preceptor room. At the end of each half-day of clinic please ask your resident or attending instructor to complete a QuickNote for you. All QuickNotes should be placed in Dr. Belegundu' mailbox. Dr. Belegundu will provide feedback mid-rotation and at the end of your rotation with us.

## **Other Information**

Below is a list of key people in the family medicine residency program. If you have any questions/difficulties, feel free to contact one of them.

Timothy Graham, MD, Program Director

- tgraham@mchs.com
- Shoba Belegundu, MD, Faculty Lead for Medical Student Curriculum
  - Shoba.Belegundu@mchs.com
- Madison Womeldorf, Program Administrator
  - Madison.Womeldorf@mchs.com

We also offer a fourth year sub-internship which allows you to participate with our inpatient service. Please contact Rebecca Nance (rnance@mchs.com) if you are interested in applying.