**LEARNING UNIT : LU7 Coordinator : DR. Anna Guia Limpoco**

**Course Co-Coordinator : DR. Peter Julian Francisco**

**DFCM Interns Committee (DFCM faculty and Residents)**

**COURSE CODE : FCH 260.1**

**COURSE TITLE : INTERNSHIP IN FAMILY MEDICINE**

**COURSE DESCRIPTION:**

The 2 week rotation in the service areas of the Department of Family and Community Medicine (FMC-outpatient and ambulatory care clinic) as first contact care physicians provide opportunities for the post graduate interns to formulate and implement a biopsychosocial approach to care that is patient centered, family focused, evidenced based plan of management for patients and their families depending on the level of care needed.

It is also an avenue for the postgraduate interns to do analysis of cases using the systems perspective. This will also be preparatory for the patient centered family focused community oriented care that they should provide for patients and families that they will care during their community immersion.

CREDIT: 2 Weeks

LO ADDRESSED:

L1 Clinical Competence

L2 Effective Communication Skills

L3 Leadership and Management

L4 Generation and Utilization of Relevant Knowledge

L5 Inter-professional practice

L6 System-based Approach to Health Care Practice

L7 Lifelong Personal & Professional Development

L8 Adherence to Professional and Ethical Standards

L9 Volunteerism, Nationalism and Internationalism

L10 Advocacy for Social Equity and Social Accountability

L11 Effective Teaching and Organizational Skills

**INSTRUCTIONAL DESIGN**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Learning Objectives** | **Learning Outcome Addressed** | **Content** | **Teaching/Learning Strategies** | **Resources** | **Evaluation** |
| 1. Obtain a comprehensive History and Physical Examination of Patients seen in the **Ambulatory** and **Family Medicine Clinic** | L1-L4-D  L6-D L8-D | History Taking of a Patient:  Chief Complaint  History of Present Illness  Past Medical History  Personal/Social History  \*OB History, Nutrition History, Birth/Maternal History, Adolescent History  Review of Systems  Complete Physical Examination (Pedia, Adult, OB Pxs) | Clinic Preceptorials  Small Group Discussions | Patients  Reference Books  Clinical Practice Guidelines  References uploaded at UvLe | Case Summary (BedSide)  Rating Scale |
| 1. Provide a thorough analysis of the differential diagnosis and justified the main diagnosis | L1-L4-D  L6-D L8-D | List of Considerations for Diagnosis and reasons for ruling out | Clinic Preceptorials  Small Group Discussions | ICD-10  Reference Books | Case Summary (BedSide)  Rating Scale |
| 1. Provide appropriate diagnostics | L1-L4-D  L6-D L8-D | List of Appropriate Diagnostics | Clinic Preceptorials  Small Group Discussions | Clinical Practice Guidelines | Case Summary (BedSide)  Rating Scale  Written Exam (Cased Based) |
| 1. Present a cost effective management plan with all levels of care covered | L1-L4-D  L6-D L8-D | Primary, Secondary and Tertiary Management | Clinic Preceptorials  Small Group Discussions | PHEX  USPSTF  Clinical Practice Guidelines  Reference Books | Case Summary (BedSide)  Rating Scale  Written Exam (Cased Based) |
| 1. Determine Service, Specialty, Organization needed for the continuity of care for the patient | L2-L6-D  L8-L11-D | Definition of Urgent/Emergent Patients in the Ambulatory Setting  Warning/Danger Signs for Symptoms | Clinic Preceptorials  Small Group Discussions | Ambulatory Care Orientation  Reference Books | Case Summary (BedSide) |
| 1. Completed and Interpreted Family Genogram | L1-L2-D | Elements of Genogram | Lectures  Small Group Discussions | Patients  Reference Books | Oral Report (Family case Presentation)  Written Exam |
| 1. Used appropriate Counseling Skills : to address the Psychosocial Issues of the Patient | L1, L2 and L10-P | Active Listening Skills  CEA ( Catharsis, Education and Action) | Lectures  Small Group Discussions  Bedside Preceptorials | Patients  Reference Books | Oral Report (Family case Presentation |
| 1. Adequately used appropriate Family Assessment Tools in Analyzing Family Psychodynamics | L1,L2,L3,L6-P  L7-I | APGAR  SCREEM  Family Timeline  Family MAP | Lecture  Small Group discussions | Patients and Family  Reference Books | Oral Report (Family Case Presentation)  Written Exam |
| 1. Used Evidence Based Approach in any Diagnostic/Therapeutic Dilemma | L1, L4,L6,L7,L8-D | Steps in Appraising an Article/Journal | Self learning via uvLe  Small group discussion  Clinical Appraisal of Journal/Article | Internet  Journals | Rating Scale  Written Exam |
| 1. Analysis of Simulated case using the PFC (patient centered family focused, community oriented care | L1-L7, L10 | See table on PFC\*\* | Small group discussion  Lecture | References thru UvLe | Oral presentation (Family Case) |

PFC Table



**INTERNS’ SCHEDULE**

**Academic Year 2018-2019**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sunday** | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** |
| Day 1  Reporting to Ambulatory Care Unit  3 interns am 7-7pm  2 interns 7 pm-7 am  enrollment to UvLe | Day 2  7-8 am  orientation of the block  PFC matrix lecture  Ambulatory Care Unit  3 interns 8am-7pm  2 interns 7 pm-7 am  Family Medicine Clinic: All interns (8am-4pm)  Ambu post duty Interns unitl 12 nn  Interns for Ambu PM duty until 12 nn | Day 3  7-8 am  EBM pre test  Case vignette on common diseases vignettes  Ambulatory Care Unit  3 interns 8am-7pm  2 interns 7 pm-7 am  Family Medicine Clinic: All interns (8am-4pm)  Ambu post duty Interns unitl 12 nn  Interns for Ambu PM duty until 12 nn | Day 4  7-8 am  EBM sgd on Diagnostics  Ambulatory Care Unit  3 interns 8am-7pm  2 interns 7 pm-7 am  Family Medicine Clinic: All interns (8am-4pm)  Ambu post duty Interns unitl 12 nn  Interns for Ambu PM duty until 12 nn | Day 5  7am-10 am  Staff conference  Ambulatory Care Unit  3 interns 10 am-7pm  2 interns 7 pm-7 am  Family Medicine Clinic: All interns (10am-4pm)  Ambu post duty Interns unitl 12 nn  Interns for Ambu PM duty until 12 nn | Day 6  7am-8 am  EBM sgd on therapeutics  Ambulatory Care Unit  3 interns 8am-7pm  2 interns 7 pm-7 am  Family Medicine Clinic: All interns (8am-4pm)  Ambu post duty Interns unitl 12 nn  Interns for Ambu PM duty until 12 nn    Cancer Institute duty 2-3 interns  7pm-7am | Day 7  Group assignment on PFC using simulated case  Ambulatory Care Unit  3 interns 7am-7pm  2 interns 7 pm-7 am |
| Day 8  Ambulatory Care Unit  3 interns am 7-7pm  2 interns 7 pm-7 am | Day 9  7-8 am  PFC discussion with faculty  12-1 \*  Consultant’s Lecture: Tools for Family Assessment  Ambulatory Care Unit  3 interns 7am-7pm  2 interns 7 pm-7 am  Family Medicine Clinic: All interns (8am-4pm)  Ambu post duty Interns unitl 12 nn  Interns for Ambu PM duty until 12 nn | Day 10  Ambulatory Care Unit  3 interns 7am-7pm  2 interns 7 pm-7 am  Family Medicine Clinic: All interns (8am-4pm)  Ambu post duty Interns unitl 12 nn  Interns for Ambu PM duty until 12 nn | Day 11  7-8 AM  PFC small group discussion with residents  Ambulatory Care Unit  3 interns 8am-7pm  2 interns 7 pm-7 am  Family Medicine Clinic: All interns (8am-4pm)  Ambu post duty Interns unitl 12 nn  Interns for Ambu PM duty until 12 nn | Day 12  7am-10 am  Staff conference  Ambulatory Care Unit  3 interns 10 am-7pm  2 interns 7 pm-7 am  Family Medicine Clinic: All interns (10am-4pm)  Ambu post duty Interns unitl 12 nn  Interns for Ambu PM duty until 12 nn | Day 13  Ambulatory Care Unit  3 interns 7am-7pm  2 interns 7 pm-7 am  Family Medicine Clinic: All interns (7am-4pm)  Ambu post duty Interns unitl 12 nn  Interns for Ambu PM duty until 12 nn  3-5 pm  Exit exam  Post EBM test  Feedback  Cancer Institute duty 7pm-7am  2-3 interns | Day 14  Ambulatory Care Unit  3 interns am 7-7pm  2 interns 7 pm-7 am |

**Notes:**

* \*12-1 lecture usually any day in the 2nd week of rotation
* Family Case Presentation is scheduled on the 4th Monday of the 6-week Community Medicine Rotation