Syllabus and Course Information

FAMILY MEDICINE PRECEPTORSHIP FAM:8301

Jill Endres, M.D., M.S., Course Director

Medical Student Education Program
Department of Family Medicine
The University of Iowa Carver College of Medicine
PRECEPTORSHIP CONTACT INFORMATION:

If any problem occurs while you are at your preceptorship site, we want you to let us know as early as possible and we will work with you to resolve it.

Our fax number is 319/384-7647. Listed below are individual office addresses, where you may direct U.S. or campus mail.

Jill Endres, MD, MS, Associate Professor, is the Director of Family Medicine Medical Student Education. She is the course director for the M3 FM Preceptorship, and for M4 electives (excluding the sub-internship).

353-7175 01293-D PFP jill-endres@uiowa.edu

Chris Lake is the Medical Student Education Program Coordinator, who also provides coordination for all M4 required and elective rotations as well as the MECO program.

384-7517 01293-G PFP fm-clerkship@uiowa.edu

IMPORTANT NOTE: Students with disabilities that may require some modification of course requirements should contact the Medical Student Education Program within the Department of Family Medicine, fm-clerkship@uiowa.edu well in advance of their rotation dates, so that appropriate accommodations may be made. Students who require special exam accommodations should notify APM Coordinator Sharon Peck at the beginning of the APM 12-week block.

SYLLABUS AND COURSE INFORMATION
Family Medicine Preceptorship FAM:8301

INTRODUCTION:

During your preceptorship, you will be spending 4 weeks working with a practicing family physician in an outpatient medical office. Most students enjoy this rotation greatly. They are often able to participate in and observe aspects of medicine not available on campus.
COURSE OBJECTIVES

Family medicine is the medical specialty which provides continuing, comprehensive health care for the individual and family. It is a specialty of holistic care that integrates the biological, clinical, and behavioral sciences. The scope of family medicine encompasses all ages, genders, organ systems, and disease entities.

Family physicians provide high quality care in the context of a personal doctor-patient relationship and with an appreciation for the individual, as well as their family and community influences.

This clerkship will provide an outstanding learning experience for all medical students emphasizing these basic tenets of family medicine. Upon completion of the Family Medicine Preceptorship, students will be able to:

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<th>Assessment</th>
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<td>1. Define continuity of care.</td>
<td>Preceptor evaluation</td>
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<tr>
<td>1.1 Describe the value of continuity of care in the context of patient outcomes and experiences.</td>
<td>Preceptor evaluation</td>
<td>SBP02</td>
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<tr>
<td>1.2 Apply continuity of care in the follow-up of patients.</td>
<td>Preceptor evaluation</td>
<td>PR05</td>
<td>C1</td>
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<td>2. Administer comprehensive health care to the patient and family, attending simultaneously to mental and physical health issues.</td>
<td>Preceptor evaluation, written exam, patient-based assessment</td>
<td>PBL02</td>
<td>A1-3, C2</td>
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<td>3. Provide comprehensive care of common acute and chronic conditions in a family medicine setting for patients, including:</td>
<td>Preceptor evaluation, Performance-based assessment, written examination</td>
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<td>A1-3</td>
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<tr>
<td>3.1 Gather accurate information,</td>
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<td>PC01</td>
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<td>3.2 Formulate a prioritized differential diagnosis, and</td>
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<td>PC02, MK02, MK03</td>
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<td>3.3 Propose a plan for evaluation and management</td>
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<td>PC04, MK04</td>
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<td>4. Explain the importance of the social and cultural context of health and disease in</td>
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<tr>
<td>4.1 Individuals.</td>
<td>Preceptor evaluation</td>
<td>SBP01</td>
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<tr>
<td>4.2 Communities.</td>
<td>Preceptor evaluation</td>
<td>SBP01</td>
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<td>5. Apply knowledge of scientific concepts as they pertain to clinical patient care.</td>
<td>Preceptor evaluation, written examination</td>
<td>PC03, MK01, MK02</td>
<td></td>
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<td>6. Apply effective patient communication skills and interact positively with patients.</td>
<td>Preceptor evaluation, Performance-based assessment</td>
<td>ICS01, PR06</td>
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<td>7. Apply effective counseling skills.</td>
<td>Preceptor evaluation, Performance-based assessment</td>
<td>ICS01, PC05</td>
<td>B1-6</td>
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<td>8. Collaborate with other members of the interdisciplinary health care team to maximize the quality care of patients through:</td>
<td>Preceptor evaluation</td>
<td>ICS02, SBP03, PR01</td>
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<td>8.1. Clear oral reports of relevant patient information.</td>
<td>Preceptor Evaluation</td>
<td>PC03</td>
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<td>8.2. Thorough and concise written documentation of patient encounters.</td>
<td>Preceptor evaluation, Performance-based Assessment</td>
<td>ICS03</td>
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<td>9. Develop evidence-based health promotion/disease prevention plans for patients of any age, ethnicity, and gender.</td>
<td>Preceptor evaluation, Performance-based assessment, written examination</td>
<td>PBL02, MK01, MK02</td>
<td>B1-6</td>
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STUDENT RESPONSIBILITIES DURING THE PRECEPTORSHIP:

- Re-confirm details with site for arrival.
- Ask your preceptor to discuss the following details.
  - Review your student information form ("green sheet")
  - The office layout and the office staff
  - Patient care documentation and expectations (You should write at least one note per day)
  - Hospital location and layout, if applicable
  - Mutual goals and expectations
  - PxDx (Checklist)

TIME EXPECTATIONS AND RESPONSIBILITIES:

- All students are expected to be on site Tuesday morning. If it is more than a 4 hour drive and in the western half of Iowa, you may begin Tuesday afternoon at the start of afternoon clinic hours.
- Notify your preceptor and submit online time off request if an emergency or inclement weather/road conditions prevent your arrival as expected.
- If you are absent from the preceptorship, you must submit an online absence request and notify your preceptor.
- You are expected to be active at the preceptorship site for the full four weeks. Be available for all professional duties of your preceptor during the entire rotation, including nights and the weekends. If personal obligations create a conflict, it is your responsibility to request time off well in advance and if approved, make arrangements for making up time.
- Participate fully in your preceptor’s professional life, including clinic hours, and also meetings, clinics, rounds, nursing home visits, house calls, emergencies, and staff functions as they arise. Pharmaceutical-sponsored events are excused.
- If the preceptor has the day off, it is expected that you will work with a partner or other healthcare professional in the practice.

YOUR PROFESSIONAL ROLE AND DEMEANOR:

- Do not accept or volunteer to engage in any activity that may be construed as the actual practice of medicine without the on-site presence and direction of the preceptor.
- Wear your medical student ID badge at all times.
- Conduct yourself at all times with the honesty and professionalism consistent with the dignity and reputation of the practice of medicine.
- Always observe patient confidentiality.
- Dress in appropriate professional clothing similar to that of your preceptor and the clinic staff. Revealing clothing, overly casual clothing, body piercings, and visible body art (tattoos) are generally not considered to be acceptable professional attire.
- Always treat all members of the health care team with respect, courtesy, and appreciation.
COURSE REQUIREMENTS:

- Students who require **special exam accommodations** should notify APM Coordinator Hugh Hansen **at or before the beginning of the APM 12-week block.**
- Attend the **Orientation to the Family Medicine Preceptorship.** Students who are absent must contact Dr. Jill Endres to discuss their absence.
- **Mid-rotation review** – at the end of the 2nd week, you and your preceptor must complete the following:
  1. Mid-rotation review (for your feedback)
  2. PxDx Checklist review (Identify outstanding requirements and make a plan to address the deficiencies).
- Complete 4 Direct Patient Observation forms: According to LCME, students must receive feedback about their clinical skills based on direct patient observation by faculty. Each student must document the observation of their clinical skills using the Direct Patient Observation Form. Students are required to complete at least 4 of these assessment forms during the Family Medicine Preceptorship. In each assessment, at least one of the aspects of clinical care (Medical interviewing skills, Physical examination skills, Clinical Judgment, and Counseling/Education skills) must be reviewed. Each of the areas should be assessed at least once.
- Complete and pass the Family Medicine written exam which is given at the end of each 12-week block on APM Education Day 6.
- At the end of the rotation, complete (PxDx) requirements and the course evaluation forms which are available online. Initiate a preceptor evaluation of yourself through the Clerkship Evaluation website.
- Return the textbook.

EVALUATION:

There are 3 components to your Family Medicine Preceptorship grade:

- Clinical score (assigned by your preceptor) = 40%
- Performance Based Assessment = 25%
- Exam score = 35%

- Each quarter, the students’ total weighted scores will be listed in rank order.
- Approximately the top 40% ranking students for that quarter will receive Honors or Near Honors grades. The exact percentage may vary.
- The multiple choice examination will be based entirely upon the assigned readings and/or cases, the education day and weekly case-based discussion materials.
- Any student who fails to achieve a score of 60% or higher will be required to schedule a make-up exam with the Medical Student Education Program, [fm-clerkship@uiowa.edu](mailto:fm-clerkship@uiowa.edu) or 319-384-7517, within 2 weeks unless an extension is granted by the course director.
- Any student who is required to retake the exam because of failure to score 60% will not be eligible for Honors or Near Honors regardless of their total weighted score.
- Students who must re-take the exam will have a grade of Incomplete (I) until they successfully complete the exam. Students who fail the exam twice will be referred to Promotions Committee in accordance with CCOM policy.
- Any student who scores below 60% of the possible point total on the preceptor’s clinical evaluation will be required to meet with the course director to discuss the situation.
- Any student who scores below a 52% on the PBA exam will be required to set up a time with Dr. Endres to review the PBA videos and will also be referred to Promotions Committee.
- Final responsibility for determining your course grade rests with the Course Director. These guidelines may be adjusted at the discretion of the Course Director.
CLINICAL EVALUATIONS BY PRECEPTORS:

Final responsibility for the clinical score rests with the preceptor, who will assign the score which best reflects the student’s clinical performance.

All preceptors receive detailed guidelines for fair and consistent student evaluation. We will not re-adjust preceptor-assigned scores or ask preceptors to change their ratings.

We have asked all preceptors to review the evaluation with you before you leave the site. Please remind them if they forget to do this.

SUPERVISION:

Supervision by more than one preceptor -

The majority of your time in this rotation should be spent with one (or possibly two, if pre-arranged) preceptors. If there are partners in the same office, you may spend a day with one of them. However, the approved preceptor for that rotation should be the primary teacher.

Supervision by family members -

Students may not complete their M3 Family Medicine Preceptorship under the supervision of an immediate relative or in the same office with a relative, including a parent, grandparent, sibling, aunt or uncle, cousin, or in-laws. Students should consider carefully the educational advantages and disadvantages of choosing to work with a preceptor with whom they have a close personal relationship.

CONTACT WITH PHARMACEUTICAL REPRESENTATIVES

Policies and practices in individual preceptor’s offices vary greatly regarding contacts with pharmaceutical representatives. The UIHC has a strict policy about pharmaceutical industry-sponsored events. Student views on pharmaceutical personnel interactions and events also cover a wide range. It is possible that a student’s views and those of the preceptor/practice may differ significantly. Students should not be or feel compelled to interact with pharmaceutical personnel or participate in pharmaceutical industry-sponsored events. Students with concerns are encouraged to make those concerns known to their preceptors. If concerns are not adequately addressed, please contact Course Director, Dr. Endres.

OTHER INFORMATION:

- Make responsible decisions about travel safety in inclement weather. Please do not take safety risks to travel to your preceptorship site or return to campus in dangerous weather situations. Contact your preceptor and our office if weather delays your travel.
- Preceptors for this course are volunteers. Our research shows that when they have a medical student with them, their work day is longer and their income may decrease. Please keep this in mind and be appreciative of their contribution to your education.
REQUIRED READING
The following material is required for this course.

- **Selected chapters from Essentials of Family Medicine, Sloane, Slatt, et al, eds., 6th Edition, 2012, as listed below.** The Essentials text is an introductory text widely used in third-year family medicine courses across the country. It will be loaned to you for the block and must be returned at the final exam. Also included in this table are relevant cases in the fmCases online resource, relevant APM Education Day topics, and correlating CCOM exemplars for your reference. Topics marked with an asterisk (*) are covered in weekly discussion cases with your preceptor.

- **All readings assigned for APM Education Days.**

- **At least 5 fmCases online cases**

- **The four cases assigned to Family Medicine Preceptorship students during the FM rotation.** Students will be responsible for discussing the material in these cases with their preceptors. The readings assigned for these cases will be covered on the FM final exam. Cases will be distributed during the FM Preceptorship Orientation. The cases are:
  
  (1) Headache  
  (2) Dysuria  
  (3) Acute Respiratory Infection  
  (4) Chest Pain

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<td>Common cancers</td>
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<td>Obstructive Airway Diseases</td>
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**PXDX-REQUIRED PATIENT ENCOUNTERS**

- Below are the required patient encounters.
- While it is our hope that you experience as many of these as possible at the “Full” level, please note that it is a required part of this clerkship that all experiences be completed at least at the OBSERVE level.
- If an encounter is not observed a remediation (practice on simulation model, case discussion etc.) will be created. Please contact Medical Student Education Program Office immediately to fulfill the requirement.

Log in to the PxDx System at: [https://www.e-value.net/](https://www.e-value.net/)

We do not anticipate that this will be a problem for you. By communicating and planning with your preceptor, and by careful attention on your part, we expect you will readily be able to complete all items below. Please be certain that each patient encounter is logged under the appropriate patient number, as this data can be audited as part of the accreditation process and it is expected to be an accurate representation of your patient encounters. It is acceptable to log multiple tasks/diagnoses/skills under a single encounter, but the log must accurately reflect the tasks completed in each encounter.

### A. PATIENT CARE

1. Acute or chronic conditions/diseases diagnosis or follow-up –
   - a. hypertension
   - b. hyperlipidemia
   - c. low back pain
   - d. life stressors
   - e. diabetes
   - f. asthma or COPD
   - g. osteoarthritis
   - h. headache
   - i. dyspepsia/GE reflux/GI complaints
   - j. abdominal or pelvic pain
   - k. otitis media
   - l. musculoskeletal (back, knee, shoulder, ankle, neck, or other) complaint
   - m. dermatitis or rash
   - n. upper respiratory illness (URI, bronchitis, sinusitis or other)
   - o. UTI

2. Well patient visits:
   - a. well child visit, 0 – 12 yrs
   - b. well adolescent / young adult visit
   - c. well adult visit, 40 – or over

3. Common family medicine procedures:
   - a. pelvic/pap exam
   - b. breast exam
   - c. Male genital-urinary exam
   - d. biopsy or laceration or wound repair (specify in PxDx note field the procedure performed)

### B. PATIENT COUNSELING, EDUCATION AND HEALTH PROMOTION ACTIVITIES

Promotion of healthy lifestyles/illness prevention: patient education and counseling of physical and mental health.

1. Counseling and/or patient education about common acute or chronic condition
2. Counseling/patient education for patient about medication use and side effects
3. Counseling/patient education for parents about a child patient’s normal growth and development
4. Counseling/patient education about weight loss
5. Counseling/patient education about smoking cessation
6. Counseling/patient education about depression, anxiety, or other mental health diagnosis or life stressors

### C. OTHER

1. Continuity of Care: Contact at least one patient more than one time. (follow-up visit, or follow-up phone call)
2. Care of Family: Care for at least 2 members of 1 family OR work w/ family members on care of a patient
MEDICAL STUDENT MISTREATMENT POLICIES

The Carver College of Medicine’s Medical Education Committee has used AMA guidelines to create the following definition of medical student mistreatment.

Defining Mistreatment

On the behavioral level, mistreatment may be operationally defined as behavior by healthcare professionals and students which is exploitive or punishing. For the purposes of this policy, examples of mistreatment include:

- physical punishment, physical threats, or violence;
- sexual harassment or sexual assault;
- discrimination based on race, creed, color, national origin, age, sex, disability, sexual orientation, or gender identity.
- repeated episodes of psychological punishment of a student by a particular superior, such as public humiliation, threats, intimidation, or removal of privileges;
- grading used to punish a student rather than to evaluate objective performance;
- assigning tasks for punishment rather than educational purposes;
- requiring the performance of personal services;
- taking credit for another individual’s work;
- intentional neglect or intentional lack of communication.

Reporting Mistreatment

Student mistreatment should be reported as follows:

- Crimes: Students who are the victims of misconduct that is also a crime are encouraged to contact the University’s Department of Public Safety (“DPS”) http://police.uiowa.edu/. Students should call 911 in an emergency. The Carver College of Medicine may refer allegations of mistreatment that may constitute criminal behavior to DPS.
- Violence: Students are encouraged to report incidents of violence to the College or to the University’s Department of Equal Opportunity and Diversity (“EOD”) https://diversity.uiowa.edu/office/equal-opportunity-and-diversity. The Carver College of Medicine may refer allegations of mistreatment that may constitute a violation of the University’s violence policy to EOD for investigation and resolution.
- Sexual Harassment/Assault: Students are encouraged to report criminal incidents of sexual harassment or sexual assault to DPS http://police.uiowa.edu/. Complaints may also be forwarded to the College, to the University’s Department of Equal Opportunity and Diversity (“EOD”) https://diversity.uiowa.edu/office/equal-opportunity-and-diversity, the Office of the Dean of Students http://dos.uiowa.edu/, or to the Sexual Misconduct Response Coordinator https://osmrc.uiowa.edu/.
- Other Mistreatment: All other types of mistreatment covered by this policy will be investigated and resolved by the Carver College of Medicine. These reports can be submitted in the following ways: Mistreatment can be reported to any CCOM faculty member, a course or clerkship director, a faculty learning community director, a collegiate dean, or the Medical Student Counseling Center.

More Information

More information about the CCOM’s policies and the reporting process can be found at the Medical Student Mistreatment page in the Educator’s Handbook https://medicine.uiowa.edu/md/supporting-students/administration/educators-handook/medical-student-mistreatment and in the University Operations Manual https://opsmanual.uiowa.edu/.
Protocol for Reporting Blood and Body Fluid Exposure During FM Preceptorships:

Students are reminded that the College of Medicine protocol for reporting blood and body fluid exposure is in place even when they are on off-campus preceptorships, including their Family Medicine Preceptorship.

The CCOM is committed to the safety of its students in the clinical setting. Students should not undertake participation in a procedure involving sharps or needles without first completing prescribed training. In the event of a sharps or needle stick injury, the student or his/her supervisor should access this site and proceed as directed:

Exposed to Blood or Body Fluids-In your student role (not while working as a paid employee)

<table>
<thead>
<tr>
<th>Health Science Student (while participating in a health science rotation)</th>
<th>Any student (when not acting as an employee at UI and not on a health science rotation)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wash/flush the exposed area</td>
<td>Wash/flush the exposed area</td>
</tr>
<tr>
<td>Inform your instructor/preceptor/attending physician</td>
<td>Call Student Health &amp; Wellness (SHW) Nurseline (319) 335-9704 (9-7:00) for further instructions. If after SHW hours, contact the UIHC Integrated call center at (319) 777-8442</td>
</tr>
<tr>
<td>Identify the source of exposure, including name/hospital number/ID of individual if applicable (preceptor, RA or hospital staff can assist with this)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>College of Dentistry (COD)</th>
<th>Colleges of Medicine, Nursing, Physician Assistant and other programs not listed</th>
<th>Iowa City Veterans Affairs Hospital (VA)</th>
<th>Offsite (not VA hospital)</th>
</tr>
</thead>
<tbody>
<tr>
<td>The source patient testing is initiated at the COD and sample sent to UIHC</td>
<td>Report immediately to Student Health &amp; Wellness for evaluation and treatment during business hours M-F</td>
<td>Report as directed to the VA Employee Health Clinic for evaluation and treatment during business hours</td>
<td>Instructor/preceptor will identify local evaluation and treatment center for initial workup of exposed student (may be SHW)</td>
</tr>
<tr>
<td>Report immediately to the University of Iowa Hospitals and Clinics (UIHC) Emergency Treatment Center (ETC) if during evenings, weekends, holidays</td>
<td>Report immediately to the University of Iowa Hospitals and Clinics (UIHC) Emergency Treatment Center (ETC) if during evenings, weekends, holidays</td>
<td>Instructor/preceptor will investigate source patient with primary MD and initiate testing as soon as possible</td>
<td>Instructor/preceptor will inform both Student Health &amp; Wellness and local treatment center of source patient results</td>
</tr>
</tbody>
</table>

Follow up with Student Health & Wellness as needed


After washing/flushing the exposed area, a call should be placed immediately to the Student Health Hotline number 319-335-9704. If after hours, contact the UIHC integrated call center at 319-777-8442 (Fax: 319-335-7247).

Information you will need to know to report:
- Your student ID number
- Name and phone # of your supervisor – your preceptor
- Nearest fax # when off campus
- Information about the incident
Preceptor Evaluations of Student

You are required to do a mid-rotation feedback session; see form on page 13. This form lets you review the skills your final evaluation will be based upon and allows you time to address any areas of opportunity noted by your preceptor.

For final clinical evaluations, preceptors will soon have direct access to the online evaluation system. As of January 1, 2016, paper/electronic clinical evaluation forms will no longer be accepted. A clinical evaluation form can be found on page 14 for your review.
Please note below any areas which the student needs to work to improve in the next two weeks, as well as areas of strength.

- Please provide this information to the student at the end of week 2.
- This brief form is based upon the final evaluation form you will be completing for the student. It is important to identify to the student areas that you feel they need to improve in time to make changes - well before (2 weeks before) you complete that evaluation.

<table>
<thead>
<tr>
<th>Check in this column if this area needs improvement →</th>
<th>Specific suggestions for improvement – use reverse for more space</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Establishes rapport with patients.</td>
<td></td>
</tr>
<tr>
<td>2. Demonstrates respect for patients</td>
<td></td>
</tr>
<tr>
<td>3. Works well with all members of the healthcare team</td>
<td></td>
</tr>
<tr>
<td>4. Reports clinical data by obtaining and communicating the clinical facts in an organized manner</td>
<td></td>
</tr>
<tr>
<td>5. Interprets clinical data by prioritizing problem list and selecting clinical findings and test results to support the most likely diagnoses.</td>
<td></td>
</tr>
<tr>
<td>6. Devises an appropriate and comprehensive management strategy.</td>
<td></td>
</tr>
<tr>
<td>7. Demonstrates a high level of knowledge/scholarship and can teach/educate others.</td>
<td></td>
</tr>
<tr>
<td>8. Shows initiative addressing deficits in own knowledge/skills</td>
<td></td>
</tr>
<tr>
<td>9. Follows through effectively on commitments and tasks</td>
<td></td>
</tr>
<tr>
<td>10. Demonstrates sensitivity and competence in working with people from diverse backgrounds.</td>
<td></td>
</tr>
</tbody>
</table>

Other areas of concern needing improvement:

Particular areas of strength:

Preceptor Signature: ___________________________ Student Signature: ___________________________ Date: ___________________________
UI College of Medicine – Family Medicine Clinical Evaluation Form

Family Medicine Preceptorship  Course Number: FAM:8301  Class:

Student Name:  Date of Rotation:  
Faculty/Resident Name:  Location:

<table>
<thead>
<tr>
<th>For level of training</th>
<th>Does not meet expectations</th>
<th>Meets expectations</th>
<th>Far exceeds expectations</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

**Interpersonal Skills**
1. Establishes rapport with patients.................................
2. Demonstrates respect for patients.................................
3. Works well with all members of the healthcare team..............

**Clinical Skills**
4. Reports clinical data by obtaining and communicating the clinical facts in an organized manner.
5. Interprets clinical data by prioritizing problem list and selecting clinical findings and test results to support the most likely diagnoses.
6. Devises an appropriate and comprehensive management strategy.
7. Demonstrates a high level of knowledge/scholarship and can teach/educate others.

**Professional Attributes**
8. Shows initiative in addressing deficits in own knowledge/skills ....
9. Follows through effectively on commitments and tasks..............
10. Demonstrates sensitivity and competence in working with people from diverse backgrounds....................................

**Overall Evaluation Score:**

11. Do you have any concerns about this student’s professional behavior?
( Reliability and punctuality, demonstrating respect for staff, verbal and electronic communication, composure in difficult and stressful times, maintaining confidentiality of patient information, accepting and incorporating feedback, acknowledging errors or omissions.)

*Yes* [ ]  No [ ]  If yes, please explain:

- [ ]  Mark five (5) of the following adjectives which most accurately describe this student.
  - Compassionate  - Efficient  - Inquisitive  - Professional  - Self-directed
  - Confident  - Enthusiastic  - Mature  - Quick learner  - Sensitive
  - Conscientious  - Hard working  - Motivated  - Reliable  - Team player
  - Dependable  - Independent  - Observant  - Respectful  - Thorough

**Number of days spent with student:**

*Yes* [ ]  No [ ]  I completed a mid-rotation feedback form and gave it to this student during the rotation.

**Return completed form (ASAP) to:**
Email: fm-clerkship@uiowa.edu  Fax: 319-384-7647  Mail:

Department of Family Medicine
200 Hawkins Dr, 01293-G PFP
Iowa City, IA 52242