

Increasing Interest in Family Medicine Through Innovative Student Curriculum and Promotion of Shared Work Among All Levels of Medical Learners

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Published In/Presented At

Valavanis, K. Brohm, V. (2018, May). *Increasing Interest in Family Medicine Through Innovative Student Curriculum and Promotion of Shared Work Among All Levels of Medical Learners*. Presentation Presented at: The Society of Teachers of Family Medicine Annual Conference, Washington DC.

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Increasing Interest in Family Medicine Through Innovative Student Curriculum and Promotion of Shared Work Among All Levels of Medical Learners

May 7, 2018

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Disclosures

- Katerina Valavanis, MD – Nothing to Disclose
 - Primary Care Clerkship Director
- Veronica Brohm, DO – Nothing to Disclose
 - MS4 Clerkship Director
 - Associate Program Director- Family Medicine Residency
- Yasir Abunamous, MD – Nothing to Disclose
 - PGY3 Family Medicine Resident

Objectives

- Review structure of family medicine medical education at the Lehigh Valley Health Network Campus in Allentown, Pennsylvania
- Identify the advantages of medical learner interaction, from student to attending, in fostering an environment for increased family medicine interest
- Generate ideas on how to increase interest in Family Medicine within your own clinical sites

Background

- Primary Care shortage of over 8700 physicians by the year 2030
- 2018 NRMP match results
 - 3535 medical students matched into family medicine (up from 3237 students in 2017)
 - 96.7% fill rate of residency slots (up from 95.8% in 2017)
- AOA match and the merge

Background

Top specialties grads knew they wanted to enter before starting med school



Orthopaedic Surgery or subspecialty



Pediatrics or subspecialty



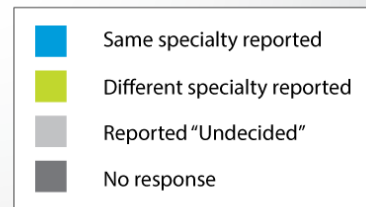
Neurological Surgery



Emergency Medicine or subspecialty



Family Medicine or subspecialty



From the *Report on Residents*, Association of American Medical Colleges, December 2015

<https://wire.ama-assn.org/education/specialty-preferences-and-after-med-school-numbers>

Who We Are

- 8 Campuses
- 3 Institutes
- 1 Children's Hospital
- 160+ Physician Practices
- 17 Community Clinics
- 25 Health Centers
- 18 ExpressCARE Locations
- 1 Children's ExpressCARE
- 45 Rehab Locations
- 81 Testing and Imaging Locations
- 18,000+ Employees
- 2,005 Physicians
- 834 Advanced Practice Clinicians
- 4,208 Registered Nurses
- 69,346 Acute Admissions
- 274,879 ED Visits
- 1,838 Acute Care Beds

Who We Are

A Complete Health Network



LVH-Cedar Crest



LVH-17th Street



LVH-Muhlenberg



LVHN-Tilghman



LVH-Pocono



LVH-Hazleton



Lehigh Valley Health Network



LVH-Schuylkill
E. Norwegian St.



LVH-Schuylkill
S. Jackson St.



ExpressCARE



Home Health



LVPG



Health Centers



Lehigh Valley
Children's Hospital

Background



Initial Contact

- MS1/MS2
 - Doctoring
 - Coaching
 - SELECT course

SELECT Curriculum at LVHN

	(3 weeks) – Inpatient					(3 weeks) – Outpatient				
	Mon	Tues	Wed	Thurs	Fri	Mon	Tues	Wed	Thurs	Fri
AM	Surgery					PC FM	Outpatient Surgery	PC Peds or IM	Outpatient Surgery	Outpatient Surgery
PM	Surgery			SELECT course	Rotation specific Didactics	PC FM	Outpatient Surgery	Outpatient Surgery	SELECT course	Rotation specific didactics

Integration

- MS4s
 - Formal teaching sessions
 - OSCEs
 - FMIG

Integration

- Family Medicine Residents
 - Formal teaching sessions
 - OSCEs
 - Clinical precepting
 - Capstone Projects
 - FMIG

Integration

- Faculty
 - Formal Teaching Sessions
 - OSCEs
 - FMIG
 - Mentorship
 - Special Interests

Further Immersion into Family Medicine

- 4th Year Track
 - Family Medicine Acting Internship
- FMIG

Reflections on the Process

Reflections on the Process

"I started medical school with an open mind and heart regarding which area of medicine I wanted to practice. As the years went by, I realized that I enjoyed a diversity of things pertaining to medicine and patients. By the end of my 3rd year, my experience in our ***primary care longitudinal clerkship was one of the biggest factors leading to my decision to choose Family Medicine*** because it ***felt like a second home***. I loved everything about the year including: my attendings and how they act as coordinators of care, the clinical staff I spent time getting to know, patients and families of all ages, and the exposure to a variety of medical fields. After some reflection and honesty, I realized I was enthusiastic about the continuity in family medicine and that real change starts with day-to-day actions that build up over time. If I were to make a difference and have an impact, I knew that family medicine would be the best fit for me and the longitudinal curriculum is what helped me confirm my choice."

- Andrew Shenoi MS3

Reflections on the Process

I was fairly confident from the start of third year that I would go into Family Medicine. One of the greatest aspects of this specialty is the continuity of care: ***building relationships with patients*** over many visits, ***gaining their trust***, and ***being an integral part of someone else's life***. By having my third-year clerkship in Family Medicine spread out over the entire year, I got to see some of the same patients multiple times throughout the year and get a glimpse into what that kind of continuity is like in a way that a six or twelve-week clerkship could never really do.

- Scott Hoecke MS3

Reflections on the Process

Even before being accepted to medical school, I knew I was interested in the preventative ideals of family medicine and considered it for my future speciality. When I started medical school I got to also learn about health systems management, leadership styles, and quality improvement through the SELECT program. This knowledge **boosted my confidence** and **solidified my desire to open up my own private family medicine practice**. At LVHN we also completed a longitudinal family medicine clerkship and **I found myself always looking forward to it** while on other clerkship rotations. The longitudinal aspect allowed me to see some of the same patients and I really got to experience the pleasure of continuity of care.

- Jeanette Qablawi MS4

Reflections on the Process

The yearlong curriculum helped me understand how to address chronic care concerns with patients...as I would probably see them again at their next appointment. Not only did the longitudinal curriculum help in developing long-term relationships with patients, but also with the staff at the clinic. It really helped me to get to ***know my clinical care team***, learn how to navigate the healthcare system and different insurances, ***how to be a leader in the office***, and learn more about local resources available to patients that I could offer while managing care.

My fourth year experiences in FM were diverse and enriching, which ***opened up my mind ... to all I could do within Family Medicine***. I had fun with continuing to develop relationships with patients and ... addressing ... their concerns, even with limited time. The diversity of 4th year (helped me) see that this diversity in population is something I wanted and could achieve within Family Medicine.


- Ainslee Juarbe MS4

Pair and Share

- Review the list of your current interactions
- Share these with a partner and brainstorm how you can incorporate one other learner from a different level into your activity

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