



FAMILY MEDICINE CLERKSHIP
EOQ HIGHLIGHTS Newsletter
March 8th-9th, 2019

RSVP for the SUMMER EOQ: Friday, June 7th1
SAVE-THE-DATE: 2019-2020 End of Quarter Meetings1
Top Take-Away Points from the March EOQ2
Clerkship Updates2
A Day in the Life.....3
 Cheyenne, WY3
 Buffalo, WY4
Admissions Update4
Update on Suffering Curriculum5
NBME Examination Discussion5
SOAP-Q.....6
PCOF/ABFM Educational Part IV Update.....6
Best Practices.....7
Therapeutics Update.....7
Teaching Physician Update and Setting Expectations with your Students7
Learning Environment Discussion and Update8
Queer and Trans Health.....8
Not Your Average “Mindfulness” Workshop.....9

RSVP for the SUMMER EOQ: Friday, June 7th

[Click here to RSVP for the event](#)

SAVE-THE-DATE: 2019-2020 End of Quarter Meetings

AUTUMN October 18, 2019

WINTER March 6-7, 2020

Top Take-Away Points from the March EOQ

1. **Final Exam:** Aquifer online cases and exam are ending at the end of Winter B. Our new exam will be the NBME Shelf Exam. We will have a list of [study resources available to students](#).
2. **Assignment Tracker:** The required items on the FM tracker will now be [14 required clinical encounters](#). If students cannot see these, they must complete the readings. We will continue to have a list of the clinical encounters recommended by the STFM and clerkship curriculum (these are the old tracker items). The clinical encounters are required by the UW School of Medicine and are a part of the response to the LCME visit.
3. **GPA Cutoff:** We will be dropping the required GPA to achieve clinical honors from 4.9 to 4.7. This change will bring us more in alignment with grade cutoffs for other clerkships and, more importantly, will give you more latitude in your grading to give students meaningful feedback and areas for growth. This means that you can give the student up to three 4's and still award honors. Please make sure to use the [GPA calculator](#) and indicate your recommended clinical grade.
4. **ABFM “Educational Part IV” Modules:** There will be multiple ABFM “educational part IV” modules available to our faculty, including a module for improving use of the Patient Centered Observation Form and another for improving teaching competencies using [teachingphysician.org](#).
5. **SOAP-Q:** Students may add a “Q” for quality onto their SOAP presentations. This reflects the quality and safety thread and students may assess and advocate for a quality solution.
6. **Feedback Circle:** One best practice for setting expectations is the “feedback circle:” set a goal for the day, huddle at the end of the day to see if that goal was met, and then set a goal for the next shift. It's the student's responsibility to carry those goals forward.

Clerkship Updates

Misbah Keen, MD and Jeanne Cawse-Lucas, MD
Family Medicine Clerkship Co-Directors

1. To be compliant with LCME guidelines, UWSOM is requiring all clinicians who teach and assess medical students have a faculty appointment. We request all site directors notify us of any clinicians at their site who teach and assess medical students but do not have a faculty appointment of this requirement. We will send the new streamlined faculty appointment application.
2. Clinical Cases Tracking Changes: To also be compliant with LCME guidelines, UWSOM has instituted a centralized tracking of clinical encounters. This has resulted in reducing the number of tracked patient conditions in FM (and other) clerkship from over 50 to 14. The clinical encounters that have been retained from last year's list are:
 - 1) Low Back Pain
 - 2) Depression
 - 3) Fever
 - 4) Asthma
 - 5) DM Type -2
 - 6) Chronic Obstructive Pulmonary Disease
 - 7) Childhood ADHD
 - 8) Substance Use / Dependence / Abuse
 - 9) Chronic Pain management
 - 10) Prenatal management
 - 11) Health Maintenance Adult 50 to 75 Male
 - 12) Health Maintenance Adult 50 to 75 Female
 - 13) Health Maintenance Adult 14 to 45 Female (Reproductive age)
 - 14) Childhood Immunizations

This does not change any workflow for Site Directors. Our Assignment Tracker will be updated to reflect the changes in clinical encounters. We will still put a list of the encounters suggested by the STF National Clerkship curriculum, but they will no longer be required.

3. We will NOT be making changes to Clinical Grade Anchors for AY 2019-2020. Grading criterium will be updated to lower the honors GPA to 4.7, further described in the Best Practices section.
4. Collaboration Opportunities:
 - 1) PNWU (Pacific Northwest University) is looking for clinicians who teach both MD and DO students and are interested in developing their skills as a faculty to participate in a “Master Preceptor” program. This is a HRSA grant. They will cover 10% FTE for one year for faculty that are selected for this pilot.
 - 2) Sherilyn Smith, MD (UWSOM Pediatrics Clerkship Director) is looking for eight “frontline teachers” who are not involved in overall course design. All it involves is a 30 minute interview.

Please let us know if you are interested in either of these collaboration opportunities.

5. Clerkship Trends: Congratulations Family Medicine is back at #1 for BOTH “Contribution to Medical Education” and “Clerkship Overall”.

[A Day in the Life](#)

[Cheyenne, WY](#)

Doug Parks, MD

Site Director, Cheyenne Regional Medical Center

Dr. Parks gave an overview of the UWY Family Practice Residency, located in Cheyenne, WY. Students rotate on the inpatient full-spectrum family medicine service and in the clinic, where they enjoy a designated work station with access to Centricity and a private apartment in close proximity to a number of activities in Cheyenne.



Buffalo, WY

Alyse Williams, MD

Preceptor, Johnson County Healthcare Center Family Medicine Clinic

Dr. Williams shared on the clerkship experience at the 25-bed critical access hospital. With 470 admissions per year, the Johnson County Healthcare Center maintains roughly seven inpatients per day and has a five bed Emergency Room. As the hospital is at the base of the highly touristic Big Horn Mountains, the ER experiences the highest trauma volume in summer months. At the Family Medicine Clinic, 7 Family Physicians (3 of whom are WWAMI grads, including Dr. Williams) and 2 PAs work with 18,000 visits per year.



Admissions Update

LeeAnna Muzquiz, MD

Associate Dean for Admissions, UWSOM

LeeAnna Muzquiz, MD, presented on the UWSOM admissions procedure and her vision as new Associate Dean for Admissions. Holistic review is an admissions process that considers each applicant individually by balancing their academic metrics with experiences and attributes. By viewing these factors in combination, the admissions committee considers how an individual might contribute value not only as a medical student, but also as a future physician. Holistic review is applied to the UWSOM admissions process to screen, interview, and select a diverse cohort of incoming medical students. Over the past five years, this has led to an overall increase in the student population who are underrepresented in medicine or otherwise meet the mission of the UWSOM. Dr. Muzquiz's vision is to transition away from a "pipeline" metaphor for encouraging students towards a career in medicine and instead creating a healthy ecosystem that helps students from all backgrounds consider and pursue this path.

Update on Suffering Curriculum

Melissa A. Bender, MD

Department of Family Medicine, Palliative Care Section, UWSOM

Students have requested more guidance on caring for patients with serious illness and more guidance on how to take care of themselves, themes which fit with the currently optional suffering curriculum. Palliative Care attending Dr. Melissa Bender is taking the lead on revising the optional Suffering in Medicine curriculum with the goal of elaborating on the structural forces (such as socioeconomic status and racism) that may contribute to suffering, how to recognize when a patient may be suffering, and how to respond to patient suffering. Clinician resiliency influences how we respond to patient suffering, so she will also be incorporating curriculum that addresses how both personal resilience skills and workplace environment may contribute to or be barriers to resiliency.

NBME Examination Discussion

B. Earl Salser Jr. MD

Director of Medical Education, University of Alabama in Birmingham

Jeanne Cawse-Lucas, MD

Co-Director, UW Family Medicine Clerkship

B. Earl Salser, Jr. MD, from the University of Alabama at Birmingham (UAB), provided an overview of the NBME Family Medicine Subject Exam, which UWSOM will be switching to this academic year (starting April 1st, 2019). As the Clerkship Director for the UAB FM program, Dr. Salser reviewed benefits of using a shelf exam, such as data averages offering score comparisons across institutions, and talked about how their students prepare for the exam. With input from other institutions that are using the NBME shelf exam for family medicine, the clerkship team has compiled a list of [study resources](#) for students which will be available on our website.

Jeanne Cawse-Lucas, MD, led a discussion about grading criteria cutoffs and whether the UW clerkship should revisit our current grading standards. Recommendations included setting the cutoff for honors on the examination at one standard deviation above the mean (85th percentile), the high pass range one standard deviation above and below the mean (17th-84th percentile), and the threshold for passing the exam at 50, which is below the 1st percentile. We are putting the “pass” threshold extremely low because students have to repeat the whole clerkship if they fail the exam.



SOAP-Q

Karen Segerson, MD

UWSOM, Curriculum Lead for Health Improvement

Building on the traditional SOAP format (Subjective, Objective, Assessment, Plan), Karen Segerson, MD, introduced a fifth element to this format, “Q,” triggering students to assess and advocate for quality patient care. In piloting this program at the UWSOM, assessment phases will examine impact on student behavioral metrics including documentation of quality assessment, participation in error identification and reporting, and performance on quality measures. In utilizing SOAP-Q, the University of Washington offers opportunities for students to build competency in the newest of the AAMC’s Entrustable Professional Activities for Entering Residency, EPA-13. This EPA calls for the student to identify system failures and contribute to a culture of safety and improvement. Students all will have been trained to look for opportunities to include the “Q” in their SOAP presentations; our ask is that you be ready to consider their observations and suggestions

PCOF/ABFM Educational Part IV Update

Jeanne Cawse-Lucas, MD

Co-Director, UW Family Medicine Clerkship

Misbah Keen, MD, MBI, MPH

Co-Director, UW Family Medicine Clerkship

The ABFM is adding an option to complete “educational” part IV (performance improvement) modules for maintenance of certification. The clerkship team is creating a performance improvement module about the Patient Centered Observation Form (PCOF). To complete the module, participants will take a pre-survey, complete the PCOF online training, do 4 student observations using the PCOF, and take a post-test. We hope it will be available by July 2019.



Best Practices

Breaking out into three small groups, each rotated to discuss the following topics:

1. Group 1: Grade Cutoff

Other UWSOM required clerkships set the cutoff for clinical honors between a GPA of 4.5-4.8. At 4.9, Family Medicine is an outlier. The group agreed that dropping the cutoff for clinical honors to 4.7, which is more in line with other UWSOM clerkships, would also help site directors have more room to give students meaningful feedback for areas of growth.

2. Group 2: Messaging Expectations to Students

The group suggested showing students the grade anchors and framing in positive terms what behaviors an honors student demonstrates. Many people have students grade themselves using the grade anchors before sitting down for midclerkship feedback.

3. Group 3: New Formal Curriculum

Over the next year, we will attempt to start building video modules for the 14 required clinical encounters. Melissa Bender, MD, is willing to make a module on suffering and resilience.

Therapeutics Update

Alvin Goo, PharmD

Clinical Associate Professor, UW Schools of Pharmacy and Medicine

Alvin Goo, PharmD reviewed recent changes in pharmacotherapeutic management of chronic disease and critically evaluated primary literature supporting changes. Dr. Goo cautioned us to pay attention to the relative risk reduction and number needed to treat of new pharmacotherapeutics, since RRR can make the benefit of a new medicine seem more compelling than it really is while the NNT more accurately reflects how many people need to use an intervention for one person to benefit from it. Other updates include: Direct Oral Anticoagulants (DOACs) are now considered first line for atrial fibrillation. 70/30 is much less expensive than long-acting insulins.

Teaching Physician Update and Setting Expectations with your Students

Amanda Kost, MD

Associate Professor, Family Medicine, UWSOM

Editor, teachingphysician.org

Teaching Physician (www.teachingphysician.org; Username: **uwfamedmse**; Password: **uwfamedpassword**) is an online faculty development website developed by the Society of Teachers of Family Medicine. It is free and worth CME credit. They are in the process of reorganizing their content into “[teaching competencies](#)” and will be rolling out an ABFM Educational Part IV module.

Focusing on the “Expectations and Responsibilities” competency, Dr. Kost led the group in a [crowdsourcing activity](#) to help everyone develop their abilities in setting expectations and responsibilities of learners. One best practice for setting expectations is the “feedback circle:” set a goal for the day, huddle at the end of the day to see if that goal was met, and then set a goal for the next shift. It’s the student’s responsibility to carry those goals forward.



Learning Environment Discussion and Update

Larry Kirven, MD

Assistant Clinical Dean, Wyoming WWAMI

Leo Morales, MD

Director, Center for Equity Diversity and Inclusion, UWSOM

Raye Maestas, MD

Associate Dean for Student Affairs, UWSOM

Melinda Frank

Director of the Learning Environment, UWSOM

The diversity subcommittee presented data from a national graduation questionnaire that compares the UWSOM with national averages. UWSOM has far exceeded the national mean for student reports of mistreatment, including public humiliation, being exposed to racist or sexist remarks, or having grades or educational opportunities impacted by gender or race. By far, the most “confidential comments” received by the learning environment committee relate to public humiliation. The group discussed these data, and what we might do as a department to respond to this concerning trend, such as adding a short learning module to faculty reappointments. Thanks for your involvement and awareness and stay tuned for next steps.

Queer and Trans Health

Elizabeth Eaman, MD

Family Physician, Oodle Family Medicine, Renton, WA

Elizabeth Eaman, MD, introduced proper medical terminology with relation to gender/sexual minorities and introduced ways to care for these patients. She emphasized that gender affirming care can be truly life saving for patients.

Not Your Average “Mindfulness” Workshop

Laura A Katers, PA-C, MCHS, MS

UWMC Clinical Faculty; Lecturer on Behavioral Medicine

Through an hour and a half of interactive practice, Laura A Katers, PA-C, MCHS, MS, guided the group through [mindfulness practices](#) to help in clinicians’ medical practices. She recommends starting small and meditating just a few minutes each day, then working up as you become comfortable.



Thank you all for your hard work & thank you for attending!

Our next EOQ will be **Friday, June 7th, 2019**

[Click here to RSVP for the event](#)

We are very open to feedback for upcoming EOQs. If there is a particular topic you would like to see covered, please email: fmclerk@uw.edu