



**Ambulatory Elective Curriculum**

NGMC- Family Medicine Residency Program  
Gainesville, Ga

**PGY: 1, 2, 3**

**Description of Rotation:**

This is a 4-week elective ambulatory experience with direct supervision by board certified Family Physicians. Supplemental longitudinal learning in the FMP supervised by Family Physician Faculty is also expected. Residents will see patients in a private family medicine clinic.

**Overall Goals of Ambulatory Rotation:**

- Develop appropriate interpersonal skills to establish a quality doctor-patient relationship with sensitivity to emotional, physical, cultural, and socioeconomic environment.
- Develop a broad-based knowledge of common acute and chronic medical conditions to be able to diagnose and treat these problems.
- Incorporate evidence-based medicine in the risk-assessment, treatment, and management of patients.
- Develop the knowledge, attitudes, and skills necessary to effectively diagnose and manage common medical problems.
- Manage and coordinate with specialists, service lines, and care management in delivering the appropriate interventions to patients under care.
- Become competent and confident in the care and disposition of the assigned patients.

**Rotation Location(s):** Various

**Preceptor(s):** Various

Sample PGY 2-3 Rotation Schedule

M	T	W	TH	F	Sat	Sun
Ambulatory Office	FM Clinic	Ambulatory Office	FM Clinic	Ambulatory Office		
Ambulatory Office	FM Clinic	Didactic Half Day	FM Clinic	Ambulatory Office		

<b>Patient Care:</b>	
PGY level	
1-3	Role model gathering subtle and reliable information from the patient for junior members of the healthcare team.
1-3	Routinely identify subtle or unusual physical findings that may influence clinical decision making, using advanced maneuvers where applicable.
1-3	Recognize disease presentations that deviate from common patterns and that require complex decision making.
1-3	Appropriately perform procedures as recommended by AAFP guidelines and provide post-procedure management.
1-3	Consider the costs, risks, and benefits when recommending diagnostic tests.
1-3	Independently manage patients with a broad spectrum of clinical disorders seen in the practice of general medicine, including gender-specific diseases



1-3	Coordinate the care of patients with complex and rare medical conditions
1-3	Customize care in the context of the patient's preferences and overall health.
1-3	Consider the costs, risks, and benefits when recommending diagnostic tests.
1-3	Independently manage patients with a broad spectrum of clinical disorders seen in the practice of general medicine, including gender-specific diseases

<b>Medical Knowledge Objectives and Competencies</b>	
PGY level	By the end of rotation:
1-3	Demonstrate sufficient knowledge to evaluate and coordinate the care of complex medical conditions and multiple coexistent conditions.
1-3	Demonstrate sufficient knowledge of socio-behavioral sciences including but not limited to health care economics, medical ethics, and medical education.
1-3	Skills & knowledge required to practice independently.
1-3	Model ability to access resources to continually update clinical practice based on EBM.

<b>Interpersonal and Communication Skills</b>	
PGY level	By the end of the rotation:
1-3	Role-model effective communication skills in challenging situations.
1-3	Actively seek to understand patient differences and views and reflects this in respectful communication and shared decision-making with the patient and the healthcare team.
1-3	Communicate consultative recommendations to the referring team in an effective manner

<b>Practice Based Learning and Improvement Objectives and Competencies</b>	
PGY level	By the end of the rotation:
1-3	Engage in quality improvement intervention
1-3	Appraise the quality of medical information resources and select among them based on the characteristics of the clinical question
1-3	Customize clinical evidence for an individual patient
1-3	Communicate risks and benefits of alternatives to patients
1-3	Integrate clinical evidence, clinical context, and patient preferences into decision making
1-3	Calibrate self-assessment with feedback and other external data
1-3	Reflect (in action) when surprised, applies new insights to future clinical scenarios, and reflect (on action) back on the process.
1-3	Take a leadership role in the education of all members of the health care team.

<b>Systems Based Practice Objectives and Competencies</b>	
PGY level	By the end of the rotation:
1-3	Negotiate patient-centered care among multiple care providers.
1-3	Demonstrate how to manage the team by utilizing the skills and coordinating the activities of interprofessional team members.
1-3	Understand mechanisms for analysis and correction of system errors.
1-3	Demonstrate ability to understand and engage in a system level quality improvement intervention.
1-3	Partner with other healthcare professionals to identify, propose improvement opportunities within the system.



1-3	Identify the role of various health care stakeholders including providers, suppliers, financiers, purchasers and consumers and their varied impact on the cost of the access to health care.
1-3	Understand coding and reimbursement principles.
1-3	Demonstrate the incorporation of cost-awareness principles into complex clinical scenarios.

<b>Professionalism Objectives and Competencies</b>	
PGY level	By the end of the rotation:
1-3	Uphold ethical expectations of research and scholarly activity.
1-3	Provide leadership for a team that respects patient dignity and autonomy.
1-3	Maintain ethical relationships with industry.
1-3	Recognize and manage subtler conflicts of interest.
1-3	Effectively advocate for individual patient needs.

<b>Teaching Methods</b>	
Clinical Teaching	Faculty Role Modeling
Case Based Teaching	Supervised Clinical Management
Didactic	Guided Research
<b>Research Scholarly requirement:</b>	
Patient Oriented Point of Care Research	

<b>Procedures/Skills Taught (PC5)</b>	
PFT	Skin biopsy

<b>Supervision/Evaluation:</b>
Resident will work one-on-one and be supervised by board certified Family Physician. While the resident will interact with several health care providers, supervision of patient care, behavior and diagnostic interpretations will be provided by the preceptor. The faculty preceptor will directly observe patient care and the performance of all procedures.

<b>Assessment Methods</b>	
Direct Observation	Procedure evaluation
End of Rotation Evaluation	Chart Review
Case Log	Procedure Log

<b>EPA's</b>
(EPA 2) Care for patients and families in multiple settings. (PC1, 2, 3, 4)
(EPA 6) Evaluate and manage undifferentiated symptoms and complex conditions. (MK1, 2)
(EPA 7) Diagnose and manage chronic medical conditions and multiple co-morbidities. (SBP1, 2, 3)
(EPA 9) Diagnose and manage acute illness and injury (PBLI1, 3)