Phase 3 ECMH Common Objectives

- **Objective 1**: Perform comprehensive and targeted patient histories and physicals when appropriate and document efficiently in the medical record (PCMC-1; PCMC-2; PCMC-3; PCMC-5; ECIS-1;ECIS-2)

- **Objective 2**: Acquire and apply evidence-based knowledge about primary care-specific conditions and diseases (MKS-1; MKS-3; CLQI-3; PCMC-3)

- **Objective 3**: Demonstrate effective interpersonal communication skills as a member of the healthcare team (ECIS-1; ECIS-3; ECIS-4; PCMC-6; CES-2)

- **Objective 4**: Demonstrate professional characteristics as a caregiver and member of the healthcare team (PBMR-3; PBMR-5; PBMR-6; PBMR-7; SATBC-2a-b; CLQI-1a-b; CLQI-2)

- **Objective 5**: Advocate on behalf of patients and their families (CES-1; CES-2; SATBC-1)

Phase 3 ECMH Goals
Phase 3 ECMH has 2 major components, the continuation of your 4-year longitudinal experience in a primary care office as well as growing as a teacher. You will continue your bimonthly attendance at your ECMH throughout the year. The focus in Phase 3 ECMH is the continued care of patients and families longitudinally, focusing on moving toward independent management of patients with complex chronic medical and psychosocial issues. In addition, you will participate in teaching M1s-M3s. This will consist of doing Peer Assessments on M3 students, as well as a mobile observation on an M1 or M2. There will also be one Weekly Report case conference during the year.

The goal of the clerkship is to give students the foundation of knowledge and skills necessary to care for ambulatory patients regardless of chosen specialty.

Objectives:
The following are the objective for the rotation, mapped to the Feinberg School of Medicine Competencies and to the Association for American Medical Colleges Entrustable Professional Activities:

Patient Centered Medical Care

- Efficiently obtain a full medical and social history from patients, tailored to the nature of the patient’s presentation. (PCMC-1, ECIS-1) & (AAMC EPA-1)

- Independently perform a complete physical exam in a sensitive manner on adult and pediatric (if in FM or Pediatric sites) patients, tailored to the nature of the visit or complaint. (PCMC-2) & (AAMC EPA-1)

- Interpret history and physical exam findings to generate differential diagnosis. (PCMC-3) & (AAMC EPA-2)

- Formulate a patient care plan based on the most likely differential diagnosis. Include necessary diagnostic tests, therapeutic treatment, and family education. (PCMC-3, PCMC-6) & (AAMC EPA-2, 3, 4)

- Recognize criteria for the need for an emergency room visit or an admission to the hospital. (PCMC-3) & (AAMC EPA-10)

- When appropriate, reassess patients after initial examination. (PCMC-2) & (AAMC EPA-1)
● Efficiently report findings of history, physical exam, labs/studies and other findings to members of the medical team. (PCMC-3, ECIS-2, PCMC-5) & (AAMC EPA-6, 9)
● Efficiently share relevant clinical information with specialty or other clinicians, eg home care, family members as appropriate. (ECIS-3) & (AAMC EPA-8, 9)
● Write orders for preventive issues, eg vaccines, cancer screening for patients. (PCMC-5) & (AAMC EPA-4)
● Practice appropriate infection control measures while caring for patients and families. (CLQI-5) & (AAMC EPA-13)

Medical Knowledge and Scholarship

● Care Management
  ○ Efficiently obtain a history from a patient with an undifferentiated concern, collect data from the EMR, independently perform a focused physical examination tailored to symptoms, develop prioritized differential diagnoses, and develop an evidence based, cost effective diagnostic and/or therapeutic plan (PCMC-1, PCMC-2, PCMC-3, PCMC-5, CLQI-3, SATBC-1) & (AAMC EPA-1, 2, 3)
  ○ Propose care plans that take into account psychological and social contextual variables of patient’s illnesses. (CES-1, CES-2) & (AAMC EPA-1, 2, 3)
  ○ Be the primary provider of several patients and families. Make connections with them between clinical sessions by phone calls, follow up after hospitalizations, specialist appointments (PCMC-3) & (AAMC EPA-1-9)
  ○ Propose specialty care or other health care needs beyond the primary care physician, clearly identify the proposed need. (PCMC-3) & (AAMC EPA-8)
  ○ Define and identify patients and families that would benefit from a telemedicine encounter and demonstrate knowledge of the utilization and application of a telemedicine encounter. (CES-1, ECIS-1, ECIS-3) & (AAMC EPA-1, 2)
  ○ Triage patients by identifying symptoms that require urgent medical attention. (PCMC-3) & (AAMC EPA-10)

● Acute Outpatient Care
  ○ Delineate possible diagnoses based on the history and physical, identify the most likely and “can’t miss” diagnoses, elaborate a diagnostic plan and propose initial therapy. (PCMC-3) & (AAMC EPA-2)
  ○ Demonstrate how the review of the EMR can enhance your ability to prioritize differential diagnoses, propose care plans. (PCMC-5) & (AAMC EPA-5)
  ○ Demonstrate understanding of the patient’s medical and social history in the context of acute complaint. (PCMC-3, CES-1) & (AAMC EPA-1,2)
  ○ Understand the role of bias and errors in diagnostic reasoning (CLQI-3) & (AAMC EPA-7)

● Chronic Care
  ○ Describe the physiology, presentation, diagnosis, and management of common chronic illnesses seen in the primary care setting. (MKS-3a, MKS-3b) & (AAMC EPA-2)
  ○ Demonstrate competence in counseling patients and families on personal goal setting and self-management of chronic illness. (PCMC-6) & (AAMC EPA-1,2)
  ○ Explain the role of evidence-based and expert opinion guidelines in informing the management of chronic illness. (CLQI-3) & (AAMC EPA-7)

● Wellness and Prevention
○ Recommend appropriate vaccines to patients and families and inform them of indications. Know common concerns for reticence. (PCMC-6, MKS-1e) & (AAMC EPA-4)
○ Evaluate quality of screening tests and recommend guideline driven screening tests based on age. (CLQI-3, MKS-1f) & (AAMC EPA-3)
○ Use lifestyle modification counseling skills with patients and families to enhance their health, eg nutrition, exercise, sleep and stress. (PCMC-6) & (AAMC EPA-1)

● Mental and Behavioral Health
○ Screen, evaluate, and propose appropriate treatment for anxiety, depression. Assist patients and families in obtaining mental health resources through NOWPOW (PCMC-1, PCMC-3, MKS-1c, PCMC-6, CES-2) & (AAMC EPA-3,4)
○ Utilize motivational interviewing to address substance use disorders and be able to describe treatment options. (PCMC-1, ECIS-3, PCMC-3) & (AAMC EPA-1,2,4)
○ Understand multidisciplinary approach to mental illness and demonstrate ability to direct patients and families to appropriate resources based on diagnosis. (PCMC-3, PCMC-6) & (AAMC EPA-1,2,4)

Continuous Learning and Quality Improvement
● Demonstrate effective techniques for giving feedback as a clinical teacher. (CLQI –1b)
● Describe the tools used by practices to analyze their delivery of essential services to their patient population, including strategies to improve care of their patients. (CLQI-4) & (AAMC EPA-13)
● Perform chart reviews and analyze for care gaps to populate core metrics for your ECMH site. (CLQI-4) & (AAMC EPA-13)

Communication and Interpersonal Skills
● Communicate effectively with patients using non-medical jargon, shared decision making, and checking for understanding. Utilize the above skills to address negative lifestyle behaviors. (ECIS-3, PCMC-6)
● In relaying bad news to a patient and family, demonstrate the ability to provide support to the patient, deliver the appropriate medical information and utilize shared decision making in creating a plan. (ECIS-4, ECIS-3)
● Communicate with a specialist regarding your patient and document appropriately to ensure care coordination. (ECIS-3, SATBC-3)

System Awareness and Team Based Care
● Demonstrate the ability to work effectively and collaboratively in teams; communicate effectively with other team members. (SATBC-2a, SATBC-2b) & (AAMC EPA-9)
● Utilize teaching frameworks to model evidence based care and mentor junior students. (MKS-4b)

Professional Behavior and Moral Reasoning
● Consistently take initiative for own learning and patient care. (PBMR-7)
● Demonstrate accountability, dependability, and integrity when interacting with patients, families, and members of the health care team. (PBMR-5)
● Demonstrate respect, compassion, accountability, dependability, and integrity. (PBMR-3)
● Observe all patient privacy guidelines. (PBMR-6)
● Adhere to standards regarding punctuality, dress, and professional boundaries. (PBMR-3, PBMR-5, PBMR-7)
Community Engagement and Service

- Describe the tools used by practices to analyze their delivery of essential services to their patient population, including strategies to improve care of their patients. (CES-2)
- Identify social determinants of health affecting individual patients and demonstrate system level advocacy to better achieve equity. (CES-1)
- Advocate for patients and families in your ECMH and appraise the outcome. (CES-2)
- Demonstrate understanding of health care reimbursement and its effect on the patient and family. Synthesize and communicate information with and to patients, families, and other members of the healthcare team. (SATBC-1)