

## FAMILY PRACTICE RESIDENCY CURRICULUM OUTLINE

Effective 7.1.13

<b>OGME 1</b>	General Internal Medicine (GIM) ICU Family Practice General Surgery Pediatrics (Inpatient RBC or SJMC) Pediatrics (outpatient) OB/GYN Emergency Medicine (EM) Electives Anesthesia Pain Management	3 months 1 month 1 month 1 month 1 month 1 month 1 month 1 month 1 month 2 weeks 2 weeks
<b>OGME-2</b>	General Internal Medicine (GIM) Medicine Subspecialties Surgical Subspecialties Pediatrics (outpatient) Pediatrics (MetroHealth outpatient) OB/GYN Emergency Medicine (EM) Electives	2 months 2 months 2 months 1 month 1 month 1 month 1 month 2 months
<b>OGME-3**</b>	General Internal Medicine (GIM) Medicine Subspecialties Surgical Subspecialties Pediatrics (outpatient) OB/GYN Sports Medicine Electives	1 months 2 months 2 months 2 months 1 month 2 weeks 3 1/2 months

Internal Medicine Subspecialty Rotations	Surgical Subspecialty Rotations
Allergy & Immunology Cardiology Dermatology Endocrinology Gastroenterology Infectious Disease Nephrology Neurology Oncology Pulmonary Medicine Rheumatology	Dermatology ENT Hand Surgery Ophthalmology Orthopedics Podiatry Urology

\*\*All Residents must have successfully completed COMLEX Part III, have obtained a state medical license and DEA number, and have completed the first draft of their scholarly activity in order to be advanced to OGME-3.

**All elective and selective rotations must be pre-approved by the rotation's preceptor as well as the Family Practice Residency Director.**

Residents must review rotation specific curriculum on New Innovations prior to the start of each rotation. This curriculum must be "confirmed" to document that the resident has reviewed the appropriate material.

In addition to scheduled rotations, residents will be required to complete a continuity care experience at the Family Medicine Center. Residents are expected to build a panel of patients to follow throughout their training. A minimum of 150 patient visits must occur during the OGME-1 year, with a total of at least 1,650 patient visits over the course of the residency. Residents must see patients in the continuity of care clinic site for a minimum of forty weeks per year. The Continuity Care Clinic must have the availability of minor surgery on site.

Residents must receive at least 100 hours of training in the care of the geriatric patient in addition to the training that occurs in the continuity of care site or general internal medicine residents. This will occur in the nursing home setting and must be logged as such when entering Duty Hours in New Innovations.

Residents must receive 50 hours of documented training in community medicine.