

From: Taylor D, Picker B, Woolever D, Thayer E, Galper A, Carney P. A Pilot Study to Address Tolereance of Uncertainty Among Family Medicine Residents. Fam Med. 2018;50(7):531-538.

Appendix A: OPFM-T Curricular Overview

Outpatient family medicine-teaching (OPFM-T) is a longitudinal curriculum where residents are scheduled for a one-month outpatient block rotation annually. OPFM-T resident groups include 2-4 residents to promote small group discussions and shared learning experiences. Half day blocks (2 hours of each) consist of a combination of direct patient care and small group learning facilitated by a faculty member. This allows time to practice skills learned and to reflect on those experiences. It also allows the resident groups to function as an outpatient team toward mitigating the solitary or parallel work that can make outpatient care challenging. Each annual rotation has a required reflection paper presented in small group with subsequent facilitated discussion near the end of the block.

PGY1 rotations are strategically scheduled between October and December to allow residents to experience the Family Medicine Center in terms of patient flow and design of the practice environment. They spend enough time there to ask appropriate questions and put learning immediately into practice, though are still new to the skills associated with patient care.

Example Topics for PGY1 Small Group Learning Include:

- Working on a team
- Community health project
- Maximizing the EHR
- Common diagnoses such as HTN, DM, Prenatal care, Well child care
- Point of care evidence resources
- Agenda setting
- Buprenorphine training
- Billing 101

PGY2 and PGY3 rotations are in the second half of the annual block schedule. There are some required learning sessions, but all groups also meet with a faculty mentor early in the schedule to discuss topics covered and elicit additional educational goals from the participants, which are then embedded into teaching sessions.

Example Topics for PGY2 Include:

- Maintenance of Certification, Practice improvement and PDSA cycles
- Disease registries /population health/ Guideline directed care-examining the evidence
- Reflective practice
- Immigrant/refugee health
- Group visits
- Chronic pain
- Billing 201
- FM classics— review and discussion of classic articles in FM

Example Topics for PGY3 Include:

- Right care—avoiding over and underuse of care
- Compare Maine exercise (comparing cost and quality care throughout Maine)
- ACO model of care
- Physician advocacy
- Review of basic office counseling skills/strategies/tools
- SBIRT (Screening, Brief Intervention and Referral to Treatment)
- Shadow precepting (learning by teaching)
- Health disparities
- End of life care (Atul Gawande Night Line feature)