

## Family Medicine Residency Program



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## Family Medicine Residency Program

The St. John Health System is an ideal setting for Family Medicine. It has the resources to provide excellent training for residents and to give comprehensive, continuing care to patients for both medical and behavioral problems. The SJH&MC Family Medicine Residency trains its residents to be specialists in breadth, allowing them to treat the whole patient and the whole family. The thrust of the family medicine resident training is ambulatory care of families. The Program draws upon the teaching of the Family Medicine faculty, as well as the physicians in the other specialty departments within the St. John Health System.

The Family Medicine resident is introduced to ambulatory Family Medicine patients from the first day of the residency. Since 80-90% of their practice in the future will be spent in the outpatient setting, the emphasis of teaching will be ambulatory care. The first year Family Medicine resident spends one to two half-days per week at the Family Medical Center. The resident will see four to five patients per half-day session. The emphasis for the first year resident will be how to effectively function in the ambulatory setting, utilizing the proper amount of time, laboratory, consultants, and community resources.

Second year Family Medicine residents spend two to three half-days per week in one of the two clinics, which will become their continuity clinic. The resident will see six to seven patients per half-day session. The emphasis for the second year resident is increasing efficiency in utilization of office personnel for physician assistance, an increasing awareness of office finances and management and increasing sophistication in the management of ambulatory patient problems.

Third year Family Medicine residents spend four to five half-days per week at their continuity clinic. The third year residents see eight to ten patients per half-day session. During the resident's third year, there will be guidelines to increase efficiency to ensure financial success in future practice and didactic sessions on managing common business problems.

While the Family Medicine residents are in the clinics, there are one or more supervising Family Medicine faculty immediately available for consultation. A Ph.D. behavioral scientist is also present for added expertise with behavioral or social problems. She also reviews with residents the videotapes of patient interviews that they have performed to aid them in interviewing and counseling skills.

St. John Hospital has a broad spectrum of educational conferences available to all residents and attending staff. The Family Medicine Department has resident-oriented conferences two or three

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times weekly. An additional combined resident/attending conference is held Friday mornings. There are also monthly testing and procedural workshops.

As the St. John Health system expands its reputation for excellence in Southeast Michigan, opportunities for resident education continue to emerge. We currently have experiences in urban, suburban, and rural medicine built into our residency and also offer rural electives for 2nd and 3rd year residents.

### *Curriculum in Internal Medicine*

Family Medicine residents will have four months of inpatient medicine in the first year of training. This includes two months on the Inpatient Family Medicine Service and two months with the Internal Medicine Department, which includes experience in the MICU. During the second year, residents will spend four months on the Family Medicine Service, with one of those months as the team leader with a supervisory and teaching role. Second and third years will also have rotations in Outpatient Cardiology, Dermatology, Hematology/Oncology, and a rural Family Medicine preceptorship.

### *Curriculum in Pediatrics*

Family Medicine residents are assigned three months of pediatrics in their first year which includes NICU. The curriculum includes inpatient pediatrics, outpatient clinic, newborn nursery, neonatal intensive care experience and a month of pediatric ER.

### *Curriculum in Obstetrics and Gynecology*

Family Medicine residents spend 2 months on OB Service during their first year of training. The obstetrical service at SJH&MC is one of the largest in the state, averaging approximately 300 deliveries per month. A family-centered LDRP unit provides a state-of-the-art setting.

The objective of training in obstetrics and gynecology is to teach residents the management of normal obstetrics and to identify potential problems. The importance of family-centered obstetrics is stressed, with the emphasis on prenatal education for parents, natural delivery and bonding. In the OB clinic, the residents are expected to evaluate and conduct normal prenatal care for expectant mothers, follow postpartum patients, and assist in the management of high-risk patients.

The residents will follow patients at the two family medicine clinics through their prenatal course, assist the mothers during birth, follow their postpartum course and care for the newborns. Four full-time family physicians in the department are available for OB supervision in the office and in the labor and delivery suite. Consultation with OB specialists is available when needed. Family Medicine

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residents will also have the opportunity to care for high-risk obstetrical patients in the High-Risk Obstetrical Clinic under the direction of the Chief Obstetrical Resident and full-time obstetrical staff.

During the second year, a block month is devoted to GYN under the direction of a precepting gynecologist. While on the gynecology service, residents learn to evaluate GYN patients in the office and on preoperative admissions. The residents assist on minor gynecological surgeries and procedures such as D&C's, biopsies and colposcopies. Residents will also assist on some major gynecological surgeries. Family Medicine residents are actively involved with the management of emergency gynecological patients.

For residents who wish to make obstetrics and gynecology a significant part of their future practice, additional experience in this department is recommended and is easily obtained through electives available.

### *Curriculum in Surgery*

Two months of the Family Medicine curriculum are spent in general surgery. The first month is a preceptorship with a busy general surgery practice at River District Hospital. This affords the resident a full spectrum surgical experience, including pre-operative diagnosis and preparation intra-operative skills and postoperative management and follow-up. They are also exposed to an environment where family medicine physicians are routinely involved in the surgical procedures for their patients.

The second surgical month is an ambulatory experience. Residents work one on one with general and specialty surgeons in their offices and at the hospital performing minor surgical procedures. This experience focuses on those problems and procedures that a typical family physician would perform in practice.

### *Curriculum in Behavioral Science/Psychiatry*

Family Medicine residents spend one month in psychiatry during the second year of training. The rotation is designed around the Psychiatric-Medical Unit and the Psychiatric Consultation Liaison Service at SJH&MC. Residents learn to diagnose and manage a variety of psychiatric problems under the guidance of staff psychiatrists and psychologists. The teaching focus is on differential diagnosis, treatment formulation and psycho-pharmacology. Behavioral science is an on-going curriculum dealing with the psycho-social factors affecting the health of the individual and family. The methodology includes didactic lectures, videotaping and individual precepting with the behavioral scientist.

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### *Electives Offered*

The Family Medicine resident will have a total of six months of elective time in the second and third years. The resident has the option of either inpatient or outpatient electives. All electives are selected by the residents with prior approval of the program director and the participating physician on the elective. Available electives include: allergy, cardiovascular disease, community medicine, emergency medicine, endocrinology, gastroenterology, hematology, occupational medicine, infectious diseases, medical ethics, nephrology, obstetrics and gynecology, oncology, oral surgery, pathology, pediatrics, physical medicine, plastic surgery, psychiatry, pulmonary diseases, rheumatology, podiatry, rural preceptorships, and sports medicine.

### *Call Schedule*

While serving on inpatient rotations, residents will do call for that specific department. While on outpatient rotations, they share in covering the FM inpatient service. This translates into call for PGY I - PGY III as listed below:

|                       |                                 |
|-----------------------|---------------------------------|
| <b><i>PGY I</i></b>   | 1 call every 5 days (~70 calls) |
| <b><i>PGY II</i></b>  | 2-3 calls per month (~30 calls) |
| <b><i>PGY III</i></b> | 2 calls per month (24 calls)    |

St. John Hospital adheres closely to the recently instituted ACGME Resident Duty Hours, and this is monitored on a monthly basis.

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