

OVERALL AWARD

APPLICATIONS ARE DUE APRIL 1, AND CAN BE SUBMITTED ELECTRONICALLY VIA EMAIL TO POE@AAFP.ORG. YOU MUST USE THIS TEMPLATE FOR YOUR APPLICATION. Please fill in the following:

1.	Medical School Name:	
	FMIG Name:	
3.	O Main Campus or O Regionally Separated (branch) campus	
	a: If regionally separated (branch) campus, name:	
4.	Number of students in your medical school:	
	a: If your campus is a regionally separated (branch) campus, number of students on your campus:	
5.	Number of active FMIG members:	
6.	Number of students serving in FMIG leadership positions:	
7.	Check all that apply:	
	☐ Our school does not have a department of family medicine.	
	☐ Our FMIG has minimal support from our state chapter.	
	☐ Our school has minimal faculty support (i.e. from Dean, Dept. Chair, etc.).	
8.	Has your FMIG applied for this award in the past: O YES O NO	
9.	Has your FMIG won this award in the past: O YES O NO	
Contact information:		
10.	Primary Student Leader Name:	
11.	Primary Student Leader Email Address:	
12.	Primary Student Leader Phone:	
13.	FMIG Faculty Advisor Name(s):	
14.	FMIG Faculty Advisor Email Address:	
15.	FMIG Faculty Advisor Phone:	
16	Institutional Mailing Address:	



CONTINUED

FMIG OPERATION

Please answer the following three questions to describe your FMIG's structure and approach to operation. These questions will help describe the environment and provide the background for the programming/initiatives/projects section of the application.

17. How is your FMIG structured? What roles do student leaders play?

FMIG PROGRAMMING, INITIATIVES, AND PROJECTS

In this section of the application, please describe your FMIG programming. Each block of questions should reflect one program, initiative, or project. In total, you may submit eight programs, initiatives, or projects, meaning that you may fill out the block of questions up to eight times total to reflect up to eight individual programs, initiatives, or projects.

While there is an eight program/initiative/project maximum, there is NO MINIMUM. You are not required to fill out eight separate entries. Certain programs can be combined into one entry. For example, National Primary Care Week Celebration can be one programming entry, and you can describe the week's activities and how they fit into that initiative.

Questions during the application process can be directed to Sam Carlson at poe@aafp.org or (913) 906-6000, ext. 6722.

PROGRAM/PROJECT/INITIATIVE 8

Title of FMIG event, project, or initiative:			
• Date(s) and time(s) held: Dr. Wanda Filer (11/3/14), Dr. Doug Spotts (12/5/14), Dr. Thomas Weida (1/14/15), Dr. Kenneth Rictor (2/11/15)			
Number of students/student work hours it took to organize: 3 main student organizers/ 20 hours			
Number of students who participated:			
Choose the categories that apply. Please choose all that apply, but be disc your program/initiative/project.	erning with your selections. Chosen categories should strongly apply to		
 Community service: This is something your FMIG does for the community. Professional development: This is something your FMIG does to promote professional and/or leadership development among your 	☐ Promoting the scope and diversity of family medicine: What your FMIG does to educate students and increase their understanding of and appreciation for the broad range of opportunities in family medicine.		
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□ Exposure to family medicine and family physicians: This is something your FMIG does to expose its members to family physicians in your medical school or the community.	☐ New event for this FMIG.		
	☐ Significant changes/improvement made on an existing FMIG program.		
	☐ Collaboration with another campus group.		
☐ Promoting the value of family medicine as primary care: This is something your FMIG does to tell members about the role of family medicine	Please indicate which group (SNMA, another primary care interest		
in enhancing primary care. This could include the patient-centered	group, etc.): _Direct Primary Care (Dr. Rictor) cosponsored by Business of Medicine Association		
medical home, primary care workforce, National Primary Care Week Activities, or other collaborations with primary care interest groups.	☐ Other:		

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Title of FMIG event, project, or initiative:		
Date(s) and time(s) held: Lectures: 10/22/14 12:00-1:00pm, 11/12/14 12:00-1:00pm, 4/15 12:00-1:00pm; Skills Night: 4/7/15		
Number of students/student work hours it took to organize:		
Number of students who participated:		
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Please describe the event, project, or initiative. Your answers should reflect the program, its goals and objectives, details about how the idea was generated, how the program was set up, collaboration or community participation, FMIG leader roles, FMIG Faculty Advisor roles, how family medicine was communicated through the initiative, program execution and student participation, and how your FMIG evaluated success of the program to plan for the future. If this was an existing program, what changes and improvements did your FMIG make this year? You will have a 750 word count limit for this section.

One of the goals of our FMIG this year was to raise money for the Juvenile Diabetes Research Foundation (JDRF) while encouraging exercise and overall health and wellness in our community by hosting our annual Dash for Diabetes 5K and 1 mile run/walk fundraiser. Building off of last year's improvements on our "fun run" to engage more of the community, we added a new collaboration for the 11th annual Dash for Diabetes. This year we teamed up with another student interest group, Penn State College of Medicine (PSUCOM) Wellness Committee, by making the run/walk the opening event for the intra-collegiate Society Wellness Cup. The PSUCOM Wellness Committee encourages medical and physician assistant students to make their personal health a priority throughout their rigorous academic training by rewarding participation points for wellness activities (exercise, attend spiritual services and humanities presentations, pursue musical interests, etc.). The Society Cup is the culmination of students' year-long personal health efforts. Four societies compete for a trophy by participating in numerous wellness events over several days. We are really excited for this partnership with PSUCOM Wellness because it will encourage more student involvement in the race, promote community service amongst students, and help spread awareness about JDRF's outreach missions and goals.

A few of the early hurdles for this year's leadership board included a full transition of the leadership team before the event, choosing an event date and location that worked with a significantly changed school curriculum, and deciding on admission prices while keeping the interests and values of both FMIG and Wellness in mind. With the newly changed medical school curriculum at PSUCOM, we had to transition FMIG leadership a few months prior to the 2015 Dash. This meant we had to start the work early and ensure a smooth transition to the newly elected FMIG board so that all of the goals, materials, and ground work for the event were understood by the new team. Also, we had to choose a date when the most students could participate in the co-Wellness event. This was challenging since Penn State has been undergoing changes in the academic calendar over the past two years. Finally, we had to brainstorm how to rectify the issue that students are not allowed to pay for Society Cup events but still raise money for JDRF. Ultimately, we were able to find a way to maximize student participation and decided to have a box at the event for donations rather than a mandatory entrance fee for students.

Since last year's theme was so welcomed, we wanted to continue to encourage the participants to dress in costumes, celebrating the superheroes who fight diabetes in their everyday lives. We decided, however, to expand the theme to "superheroes and princesses" in order to better appeal to boys and girls and allow more room for creativity in costumes. We chose a theme that would appeal to families and foster youth participation. FMIG believes it is important to promote health and fitness in adolescents. We wanted to provide an opportunity for parents to demonstrate that being active and healthy is both fun and beneficial.

The early student leadership involved in organizing this event included one FMIG board member, one FMIG member, two Wellness board members, and one dual FMIG/Wellness board member. Through the leadership transition, we maintained two FMIG board members and one Wellness board to facilitate the collaborative efforts of both interest groups, and employed the help from other FMIG board members not on the Dash Committee to delegate some of the soliciting and advertising. Though it may not seem beneficial to transition leadership teams during the year, this necessary switch allowed us to lay a better framework for future Dash Committee members. For example, we created a shared Google folder for FMIG and uploaded and organized all of the forms, maps, and contacts from previous 2008-2014 Dash for Diabetes events. In addition we created a proposed timeline of planning agenda, suggestions, and hints to future members. We believe that this framework will immensely benefit future leadership transitions.

Overall, planning, organizing and implementing the new collaboration for the 11th Annual Dash for Diabetes was an incredible experience for all involved. It promoted leadership skills, communication, community service, and collaboration within the College of Medicine and with the hospital, local schools, local companies, and the JDRF. We are excited that our FMIG has such a great opportunity to exemplify individual, family, and community health.

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Number of students who participated:	
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Each year Penn State organizes a Primary Care Day, where undergraduate students from around Pennsylvania as well as our own medical students are introduced to the many aspects of primary care. This year, significant changes and improvements were made to the event by adding a separate schedule for medical students and inviting residencies to participate. The event is organized every year by a group of students consisting of leaders from several different interest groups on campus, who plan the event with our advisor, Dr. Dennis Gingrich. Student interest groups represented in the planning of Primary Care Day this year include: the Family Medicine Interest Group, the Internal Medicine Interest Group (IMIG), the Student Pediatric Society (SPS), the Women's Health Interest Group (WHIG), The Rural, Urban and Underserved Medicine group (RUUM), the Global Health Interest Group (GHIG), the American Medical Student Association (AMSA) and the Student National Medical Association (SNMA). Leading up to the event, leaders from each group met once per week over the course of one month to organize speakers, create a brand new schedule, discuss skills labs and create simulated patient encounters. Leaders within our FMIG found it exciting and rewarding to work with other students who also had such a passion for primary care. 209 college students from across Pennsylvania and several medical students from Penn State attended and spent the entire day interacting with panels, engaging in discussions and participating in skills sessions designed to enhance their knowledge of primary care.

The day began with an Admissions Panel, made up of both students and faculty, who discussed the process of applying to medical school and allowed time for undergraduate students to ask any questions they had. The second session was "Primary Care: A Penn State Perspective." A panel of four primary care physicians discussed different interests they have pursued in primary care, including sports medicine, women's health, global health and underserved medicine. The students really enjoyed learning about the breadth of possibilities within the primary care field. During the lunch hour we had a "Med School Student Life" panel made up of medical students who talked about their daily life at medical school and left it open to questions the undergraduate students had for them. For the medical students in attendance, we held a "Residency Program Networking Event" where they could spend some time talking to the different residency programs that came to Primary Care Day including Penn State Hershey Family Medicine Residency, Penn State Family Medicine Residency at Mt. Nittany Medical Center, Reading Family Medicine Residency, Williamsport Family Medicine Residency, and Penn State Hershey Internal Medicine Residency.

New this year, student leaders created "Patient Encounters" simulating what would be seen on any given day in a primary care office. The leaders from IMIG, SPS and Underserved Medicine, each wrote up a case scenario that they believed represented primary care well. These cases included a cardiac exam, a young student with depression and a diabetic patient who could not afford her medication. These students then paired with another fellow student who acted as a standardized patient while the leader helped the undergraduate students work through the history and physical. Students in attendance enjoyed the opportunity to work through different case scenarios and learn important aspects of a history and physical along the way.

After the patient encounters, students had the opportunity to work with our visiting residency programs for skills workshops. These included a newborn exam workshop, a joint injection workshop, a vaginal delivery workshop, and a workshop on interesting patient encounters from an experienced physician. Not only did the students enjoy working with the residents, the residents appreciated the opportunity to work with the undergraduates and medical students.

Following the workshop sessions, students were divided into smaller groups and lead on tours of the Hershey Medical Center. During this time, undergraduate students were encouraged to ask any extra questions they had. At the end of the program each participant was asked to complete a survey listing his or her favorite sessions as well as improvements that can be made for next year's event. Overall, the comments were tremendously positive and the students felt that the program effectively exposed them to the possibilities that a career in primary care provides.

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Other:___

medical home, primary care workforce, National Primary Care Week

Activities, or other collaborations with primary care interest groups.

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