

FMIG Program of Excellence (PoE) Application

CATEGORICAL OR SPECIAL CONSIDERATION 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. It is highly recommended that all writing and editing be completed in a shared document (like a Google Document) or in Word, especially if multiple people are contributing to or reviewing the application material. When ready to submit the application, transfer the information into this PDF.

Please fill in the following:

1. Medical School Name: University of Texas Southwestern Medical School-Dallas, Texas
2. FMIG Name: UTSW FMIG
3. ☒ Main Campus or ☐ Regionally Separated (branch) campus
a: If regionally separated (branch) campus, name: _____
4. Number of students in your medical school: ~700
a: If your campus is a regionally separated (branch) campus, number of students on your campus: _____
5. Number of active FMIG members: 20 members and ~80 on the email list
6. Number of students serving in FMIG leadership positions: 5
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: ☒ YES ☐ NO
9. Has your FMIG won this award in the past: ☒ YES ☐ NO

Contact information:

10. Primary Student Leader Name: Jordan Hoese
11. Primary Student Leader Email Address: jhoese2011@gmail.com
12. Primary Student Leader Phone: 210-288-1793
13. FMIG Faculty Advisor Name(s): Tamara McGregor MD; Zaiba Jetpuri DO
14. FMIG Faculty Advisor Email Address: Tamara.McGregor@UTSouthwestern.edu
15. FMIG Faculty Advisor Phone: 214-577-1718
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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?

The Family Medicine Interest Group (FMIG) at the University of Texas Southwestern Medical Center in Dallas (UTSW) is a student-run organization with active faculty and resident and staff participation. We are associated with and receive support from the Texas Academy of Family Physicians (TAFP) and the AAFP as well as the local Dallas chapter DAFP. The UTSW FMIG is an established medical student organization on campus and is highly regarded by the department chair, Dr. David Schneider, as well as our large faculty, staff and family medicine residents as a critical and vital mechanism to fostering and developing interest in Family Medicine as a specialty, a philosophy and a way of life. We believe strongly that the FMIG is a vital "first contact" for medical students with the specialty of Family Medicine as many have not been treated by nor previously worked with a family physician before. We also feel that the FMIG experience, from first meeting to graduation and residency can be a true asset to a thriving Family Medicine department and is a key determining factor for a "successful match" into family medicine. Over the past 3 years, UTSW has graduated 11 students (2017) then doubled its FM match to 22 students (2018). This past match (2019), we matched 24 students into Family Medicine, an all-time record for UT Southwestern. We believe strongly that this trend is not random, but indeed is undoubtedly related to the passionate efforts of our FMIG leaders and members.

The FMIG requests student applications for leadership positions in the late Spring as the current leaders are graduating from medical school. The FMIG student leaders meet with the FMIG faculty sponsor, co-sponsor, education coordinator and education assistant approximately every quarter to address the student's goals and wishes and to clarify budgets, establish guidelines and discuss scheduling needs and faculty availability. Our 2018-2019 student leaders, elected by their peers included: President- Jordan Hoese, MS4, Vice-President-Amy Luu, MS3, TAFP Liaison Maggie Leland, MS4, Clinical representative Lysandra Yang MS4 and Pre-clinical representative Kristin Bristow MS2. The president's role is as the leader of the group, representing the standards and mission of the FMIG to the students. As president, Jordan helped craft the procedures elective, gave input to the new FM sub-internship rotation, arranged and coordinated the post-match event and helped maintain the FMIG facebook page. Vice-president Amy Luu served to support the functions of the president, to take the lead when her fellow officers were out for residency interviews and also helped with FMIG activity coordination and engaging with the student body. The clinical representative, Lysandra Yang and the pre-clinical representative, Kristin Bristow participated actively in planning and work duties and stayed in close touch with students during their pre-clerkship classes as well as those classes during the clinical clerkship rotations. A former FMIG president, Maggie Leland, served this past year as the TAFP community liaison, communicating and networking with our state chapter and was integral (and the spark behind) the new pre-clinical Procedures elective and was active in almost every component of FMIG life throughout her time at UTSouthwestern. Most of the leaders attended local, state and national meetings and also received scholarship money. All of the FMIG leaders have been active in family and community medicine research to some extent and all represent to all the students and patients they encounter a vigorous and passionate love for "All Things Family Medicine".

18. Describe your FMIG's mission and goals.

The mission statement as written by our FMIG leaders is to promote public health perspectives, including the role of a robust primary care workforce in an ever-changing healthcare system, and raise awareness of the myriad opportunities for training and practice afforded by the discipline of family medicine.

Specific goals of our FMIG include but are not limited to the following:

1. Increase student interest in the specialty of family medicine through exposure to practicing family physicians via the establishment this past year of a longitudinal clinical shadowing experience for pre-clinical medical students in the residency clinics with faculty and resident physicians as well as with community physicians.
2. Spark enthusiasm in medical students to "learn BIG or go home", by sponsoring and promoting monthly and sometimes biweekly student-chosen speakers' lunch lectures as well as requested and popular skills workshops and hands-on sessions with FM faculty and resident and student instruction.
3. Nurture and maintain long-term relationships between students and student mentors and between students and residents as well as between students and assigned faculty advisors over the four-year medical school time period. Students are identified early as potential family physicians and matched with peer and resident and faculty mentors to make first contact as "go-to's" for questions and guidance at each learner level.
4. Facilitate relationships with community, state and national FM advocacy organizations by supporting scholarship and attendance of students, staff and faculty at DAFP, TAFP, AAFP, STFM and NAPCRG conferences for learning and leadership.
5. Encourage student interest in family medicine as a highly diverse collection of people of all interests and backgrounds with a goal of universal and holistic care of patients in all types of practice settings (urban, suburban, rural, underserved, global etc.) and with various types of specialization and procedural emphases (LGBTQ, adolescent, women's health, palliative and hospice medicine, sleep medicine, geriatrics, sports medicine, hospitalist, emergency room, dermatology, HIV/ID, aesthetic medicine, travel medicine, mental health, integrative medicine, osteopathic, pain medicine, addiction medicine).
6. Support and advise students from First- through Fourth- years according to level-specific needs (History/Physical skills, wellness support, symptom-based differential diagnoses and clinical decision making, advocacy for patient-centered rights to care and comfort, hospital and clinic skills, applications for scholarships and for residency programs, mock interviews, residency and fellowship advisement and practice management).
7. Promote practice-based and quality-improvement research efforts to strengthen the academic rigors of the specialty and increase evidence-based practice, ultimately to improve patient care outcomes.
8. Model healthy life behaviors by demonstrating different practice styles with a goal for better life-work balance.

19. Describe the role of your FMIG Faculty Advisor.

The role of the FMIG Faculty Advisor is to listen first to the wants/needs of the FMIG students and to facilitate each event and educational activity. The advisor must always remember what it was like to be an "undifferentiated stem cell-medical student" who likely lacks a clear idea of what kind of medical specialty to pursue and to teach, coach, advise, listen some more and continue to support the goals of mission of the interest group. The faculty advisor provides guidance as to what other groups have done in the past as well as give ideas for additional learning and leadership opportunities. The advisor also functions as a liaison between the students and faculty matching the student wishes with faculty availability and to be a conduit between the students and family medicine residents.

Our FMIG Faculty Advisor position is shared by Dr. Tamara McGregor and Dr. Zaiba Jetpuri. Dr. McGregor, a UTSW graduate (Class of 1991), who has been practicing for 24 yrs and teaching for 18 of those in a private large group, then small group practice and in an academic practice at UT Southwestern since 2002. She brings also a specialty of hospice and palliative medicine which gives her deeper insight into the need for learners to be better trained in patient-centered communication skills and how to provide care and comfort to the most medically fragile patients and their families. Dr. Zaiba Jetpuri, a gifted educator and UTSW FM residency graduate (class of 2013) also leads the FM Clerkship and co-leads with Dr. McGregor, the new FM subinternship rotation. Her clinical and teaching skills, her compassion and technical skills and her ability to get things done come from her tireless energy and experience and MBA training. Her osteopathic training as a DO, gives her added understanding as to the importance of holistic and compassionate care for all patients. Dr. McGregor and Dr. Jetpuri are both Mentors in the UTSW Colleges Mentor program which also lends itself well to increasing exposure of pre-clinical and clinical students to family medicine as we spend 2 hrs a week with the students for 18 months then monthly through graduation. The FMIG advisor's job could not be complete, nor even adequate without the help of the FMIG coordinator Dallas Peoples and the tutelage of Carolyn Lindeman (clerkship coordinator) to help keep up with the wants/needs (equipment, supplies, FOOD, MORE FOOD) of the FMIG students throughout the year.

The FMIG Faculty Advisor's role as "mom, friend, facilitator, calm-voice-of-reason, educator, advisor and feeder of minds and bellies" is time-consuming but wholly gratifying especially at Match Day and Graduation when we see more and more medical students choosing our favorite specialty as their career path each year.

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 three programs, initiatives, or projects, meaning that you may fill out the block of questions up to three times total to reflect up to three individual programs, initiatives, or projects.

While there is a three 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 Marselle Bredemeyer at poe@aafp.org or (913) 906-6368.

- In what category is your FMIG applying for a categorical or special consideration award?
 - ☐ Community service: What your FMIG does for the community.
 - ☐ Professional development: What your FMIG does to promote professional and/or leadership development among your members.
 - ☐ Exposure to family medicine and family physicians: What your FMIG does to expose its members to family physicians in your medical school or the community.
 - ☐ Promoting the value of family medicine as primary care: What your FMIG does to tell members about the role of family medicine in enhancing primary care. This could include the patient-centered medical home, primary care workforce, National Primary Care Week Activities, or other collaborations with primary care interest groups.
 - ☐ 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.
 - ☐ Current issues or innovations in family medicine.
 - ☐ First-time applicant.
 - ☐ Most improved FMIG.
 - ☐ Collaboration with another campus group.

Please indicate which group (SNMA, another primary care interest group, etc.): _____

- ☐ Other: **UTSW is a clear choice for the Most Improved FMIG**

PROGRAM/PROJECT/INITIATIVE 1

- Title of FMIG event, project, or initiative: UTSW Pre-clinical Procedures Elective Course
- Date(s) and time(s) held: Aug 28, Sept 11, Oct 2, Oct 23, Nov 6, Nov 14 2018
- Number of students/student work hours it took to organize: 30 student work-hrs
- Number of students who participated: 21 students participated and received UTSW elective credit
- 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.

In order to promote further interest in Family Medicine and improve exposure to common FM-based procedures, FMIG leaders instigated a 6-Session Pre-clinical Procedural Skills Elective to be taught by FM Resident Faculty. The sessions included a short didactic instructional component followed by hands-on procedure training.

Session ONE: Skin procedures: application of local anesthesia, simple laceration suturing/repairs, punch biopsies, excisional biopsies on chicken thighs and fruit. Faculty: Dr. Tamara McGregor, Dr. Neelima Kale
 Session TWO: Gynecologic procedures: Simulated colposcopy and cervical biopsies (chicken flesh), pap smears, endometrial biopsies of fruit. Faculty: Dr. Mahdi Awwad, Dr. Neelima Kale, Dr. Tamara McGregor
 Session THREE: Musculoskeletal assessment/ exam skills and Osteopathic Manipulative Medicine session with DO residents/faculty. Faculty: FM Residents Josh and Alexis
 Session FOUR: Casting/splinting practice and instruction on simple Xray interpretation. Faculty: Dr. Dan Sepdham and Dr. Tamara McGregor
 Session FIVE: Sono workshop including fetal aging, obstetric assessment as well as the use of ultrasound for local soft tissue eval, vascular access and joint injections. Faculty: Dr. Dan Sepdham, Dr. Emily Levy, Dr. Mahdi Awwad
 Session SIX: Circumcisions and vasectomies. Faculty: Dr. Dan Sepdham, Dr. Neelima Kale, Dr. Mariam Afzal, Dr. Tamara McGregor

PROGRAM/PROJECT/INITIATIVE 2

- Title of FMIG event, project, or initiative: FMIG Lunch lecture series and workshops
- Date(s) and time(s) held: August 2018 through April 2019
- Number of students/student work hours it took to organize: Student work-hrs will be included with description of events
- Number of students who participated: Average 16-30 students attended each event
- 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.

1. Aug 9: Student Org Fair on campus- active and energetic recruiting of students into FMIG by signing them up on social media via newly-formed UTSW FMIG Facebook page/Instagram and twitter-students were kept abreast of activities via biweekly reminders. On-site registrations for AAFP/TAFP and STFM were done and a list of planned activities were provided to an estimated >200 1st- and 2nd-year med students. 8 FMIG students, 6 faculty, 2 staff- estimated 20 student work-hrs including time spent organizing and creating the Facebook page and calendar and the event itself.
2. Aug 28: Pizza with the chiefs- FMIG-initiated near-campus pizza party w students and FM Chief Residents and residents for advice and fellowship. ~ 30 students participated- 6 student work-hours.
3. Sept 4: "Intro to FM" lunch lecture- Dr. Tamara McGregor. ~21 students, 3 student work-hrs.
4. Oct 1: "Patient-centered communication" lunch lecture-Dr Philip Day ~35 students 3 student work-hrs.
5. Nov 26: " Breaking Bad News Communications Workshop " -Dr McGregor, 16 students, 3 student work-hrs.
6. Dec 6: "Direct Primary Care" lunch lecture- Dr Howsen Kwan, ~20 students, 3 student work-hrs
7. Jan 15: The history and future of family medicine"- Jordan Hoese, MS4, ~20 students, 8 student work-hrs.
8. Feb 26: FMIG-OBinterest group Collaborative OB sono workshop- ~35 students, 12 student work-hrs
9. Mar 20: Inaugural Post-match event: Networking, Panel discussion and Faculty Club Dinner with community physicians, invited faculty, dept chair, newly matched MSIVs and FM-interested students ~30 students, 30 student work-hrs.
10. Apr 16: Physical Exam Workshop-CS and OSCE Prep for MS1-3s- activity pending
11. Global Health and Fam Med (GHIG=FMIG): lunch mtg w Dr Ruth Kagwima-activity pending.

PROGRAM/PROJECT/INITIATIVE 3

- Title of FMIG event, project, or initiative: Summary of activities begun/developed during the 2018-2019 academic year
- Date(s) and time(s) held: August 2018 -April 2019
- Number of students/student work hours it took to organize: Student work hours- multiple
- Number of students who participated: Multiple (average 3-4 student leaders and about 16-30 students per event)
- 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.

Longitudinal Clinical Shadowing Activity: Set up for MS1 and MS2 students with an interest in seeing patients, gaining H&P skills and patient presentation practice while being supervised by Faculty +/- FM residents.

Purpose: learning and increase in comfort level in clinical settings and to show the diverse nature of FM experiences

Students are matched with Faculty advisors (Academic and Community Faculty) for shadowing opportunities and students were assigned to shadow in the Wednesday night FM Clinic as well. 1 student per clinician. Time Sept-Feb (night clinic), now only with academic and community faculty

The 2018-2019 UTSW FMIG deserves the AAFP prize for MOST IMPROVED FMIG for numerous reasons. In the course of one academic year, the FMIG leaders:

1. Innovated a year-long longitudinal clinical shadowing program which matched interested pre-clinical medical students with faculty advisors and set up a shadowing experience for students, not just in the Wednesday night Family Medicine Residency clinic but also with willing and able faculty.
2. Planned and got approval for a six-session pre-clinical procedures elective
3. Orchestrated and scheduled monthly lunch sessions and workshops as well as a Meet the Chiefs first month activity at a local restaurant.
4. Started a UTSW FMIG Facebook page and twitter page using relevant hashtags to stir up student interest and to provide a centralized interactive platform for students to utilize including announcements, pertinent articles and postings about current and future events.
5. Sent weekly email reminders to a medical student collection of around 100 students who were identified as "Family Medicine Interested or Curious" about upcoming FMIG events, FM Grand Rounds presentations, scholarship deadlines and memberships and conferences and research opportunities.
6. Set up and coordinated Mock residency interviews w students and faculty.
7. Attended several local, state, conferences and presented papers/posters in community and basic research.
8. Collaborated with the OB interest group in an OB Sono workshop, fostering interdisciplinary partnerships with other specialties.
9. Organized and complete the first annual UTSW FM Post-Match celebration involving a slideshow explanation of where each student is bound for residency, presentation of awards, full dinner with interested students, academic and community faculty as well as a panel discussion of graduating seniors' comments as to their residency interview experiences and reasons behind their match choices/preferences.

It is extremely likely that this enthusiastic and motivated group of FMIG leaders with faculty and departmental support contributed significantly to the most successful Family Medicine match in the history of UT Southwestern Medical School.