

St. Mary's Hospital Family Medicine Residency

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Curriculum

PGY-1

- Community Medicine 2 weeks
- ER 3 weeks
- Mole (clinic calls and back up call) 3 weeks
- Ambulatory Pediatrics 4 weeks
- General Surgery 2 weeks
- Geriatrics 2 weeks
- Obstetrics 8 weeks
- Orthopedics/Sports Medicine 2 weeks
- Teaching Service (med/peds) 16 weeks
- Copic-1 week
- POCUS-1week
- Ophthalmology-1week
- Behavioral Health Curriculum (longitudinal)



- Elective 1-4 weeks
- Vacation 3 weeks

PGY-2

- Community Medicine longitudinal
- Elective 12 weeks
- Geriatrics 2 weeks
- Gynecology 4 weeks
- Mole 1 week
- ER 2 weeks
- ICU 2 weeks
- Neurology 1week
- Night Float 4 weeks
- Obstetrics 4 weeks
- Orthopedics/Sports Medicine 1 week
- Ambulatory Pediatrics 1 week
- Pediatrics (inpatient and ambulatory) 2 weeks
- Peds House Officer 2 wintertime weeks
- Primary Care 7 weeks
- Rural in Buena Vista, CO (Pop. 2150) 3 weeks (done in PGY1 or PGY2 year)
- Teaching Service (med/peds) 4 weeks
- Behavioral Health Curriculum (longitudinal)
- Vacation 3 weeks

PGY-3

- Chief Resident 4 weeks
- Dermatology 1 week
- Electives 16 weeks
- ENT 3 weeks
- Mole 2 weeks
- Night float 2 weeks



- Orthopedics/Sports Medicine 1 week
- Pediatrics (inpatient and ambulatory) 2 weeks
- Peds House Officer 3 wintertime weeks
- Primary Care 7 weeks
- Ambulatory Pediatrics Specialties 3 weeks
- Teaching Service (med/peds) 3 weeks
- Behavioral Health Curriculum (longitudinal)
- Vacation 3 weeks

Didactics

Didactics are taught on a weekly basis through our Education Day afternoons on Wednesdays. Our core didactic curriculum is based on a 12-month cycle, where you will be exposed to each topic area at least twice during residency. Topics of discussion include:

- The breadth of Family Medicine with a focus on board relevant topics
- American Family Physician Journal discussions
- Wilderness medicine
- Point-of-care ultrasound
- Casting and splinting
- Pediatrics topics
- Emergency drills
- Wellness
- Business of medicine

Outside of Education Day, there are a variety of other didactic opportunities regularly scheduled into the curriculum, including:

- Primary Care Weeks
- Outpatient Rounds
- Family Medicine Teaching Service Didactics
- Regular CME lectures taught by regional experts
- Behavioral Health Team



Clinic Structure and Quality Improvement

Our clinic is organized into Care Teams that work together to care for patients. These care teams consist of one first-year resident, one second-year resident, one third-year resident, one faculty member, and one Medical Assistant.

First Year Residents - Focus on learning QI tools and processes, and working with the rest of the care team to continually improve patient care

Second Year Residents - Take on leadership roles in helping to create QI projects, develop SMART goals, and implement PDSA (Plan-Do-Study-Act) cycles

Third Year Residents - Lead team meetings, focusing on care metrics, and helping to coordinate multidisciplinary care of our most complex patients

Longitudinal Behavioral Medicine Curriculum

We know that major determinants of health in the US currently involve behavioral, relational, and lifestyle factors. Consequently, we focus on developing competencies and skills related to caring for the whole patient – facilitating relational and individual changes that lead to better overall health outcomes.

Training residents to meet the complex challenges presented by patients in primary care, including mood/anxiety disorders, addiction to substances/alcohol, and relational problems is a central focus of our curriculum. Our team includes two full-time behavioral medicine faculty, physician faculty trained in addiction medicine, pharmacy faculty, as well as doctoral level fellows in medical family therapy. Additionally, we have a team of other therapists, social workers, case managers, etc. that provide support to residents in our clinic.

All residents are exposed to a longitudinal curriculum, developing and refining skills and competencies over the three years through structured workshops, seminars, rotations, and didactic lectures. Throughout residency, trainees will be observed, coached, and supported by our faculty to develop necessary skills for future practice of family medicine.

Where We Train

The St. Mary's Family Medicine Residency Clinic is a busy, full-service family medicine clinic with a diverse patient population. We are a NCQA Patient Centered Medical Home focused on providing care for all individuals regardless of ability to pay for services. Currently, 42% of our patients have Medicaid, 26% have Medicare, 22% are commercially insured and 7% have no insurance. We have employees who are bilingual in Spanish and translation services are also available to help us care for our patients. Our goal is to provide care for the underserved.



We focus on providing residents training in an innovative model that is designed to teach them skills to care for patients in a wide variety of future practice environments. We offer a number of specialty clinics to provide an in-depth exposure to certain patient populations, conditions and procedures. Residents also see these types of patients and perform many procedures in their own full-spectrum primary care clinics. Our specialty clinics include:

- Gyn procedures
- Sports medicine
- Surgical procedures
- OB ultrasound
- OMT
- Medication Assisted Treatment

We teach and use a team-based approach to care, encouraging all of our care team providers to work at the top of their licenses. You will work alongside medical assistants, care coordinators, a pharmacist, registered nurses, and behavioral health providers. Our integrated behavioral health model is a unique part of our clinic. Behavioral health providers are available in the clinic to consult on patients, help with behavioral health crises, and help teach skills in counseling and motivational interviewing.

We provide care at the Mesa County Health Department for expanded access to family planning training.

All hospital-based rotations occur at St. Mary's Regional Hospital.

There is one required rotation that is out of town for 3 weeks, families (but not pets) are able to travel with the resident if the available housing works for their needs.

Opportunities

Areas of Concentration

We allow residents to pursue Areas of Concentration during their residency, giving them additional training in an area of their choice. Choosing an area of concentration allows a resident guidance and additional resources to focus on skill sets they might need in their future practice and requires some additional scholarly activity. These are optional opportunities and there is no requirement to complete an area of concentration. Examples of recent areas of concentration for residents include:

Additional study in integrative medicine through the Andrew Weil Institute



- Focus on additional training in MAT, exercise stress tests, dermatology, and sideline sports medicine
- Focus on advanced obstetrics/women's health

Global Health

All residents at SMFMR are included in a set of didactic presentations on topics of global health such as the major international aid organizations, global burdens of disease, epidemiology, HIV, TB, and pre- and post-travel recommendations. Several faculty members have extensive experience with international work in complex emergencies, military missions, and refugee care. Those with interest in additional training are encouraged to participate in our partnership with the Lesotho-Boston Health Alliance program in Hlotse, Lesotho!

HIV

St. Mary's Family Practice houses the Western Colorado HIV Specialty Care Clinic, established in 2000. All residents receive some training in care of HIV and Hep C positive patients. Additionally, the St. Mary's Family Medicine Residency HIV and Viral Hepatitis Area of Concentration is a 24-month longitudinal experience which will train family medicine residents to provide comprehensive and high-quality care to patients living with HIV and viral hepatitis; and become educators and leaders in the care of these patients in community-based settings. Participants will learn to manage all aspects of HIV care, including:

- · Antiretroviral management
- · Opportunistic infections
- HIV-specific disease manifestations
- HIV-related primary care as well the management of Hepatitis B and C without decompensated cirrhosis or hepatocellular carcinoma

Obstetrics and Women's Health

Residents desiring to develop additional procedural and management skills in obstetrics and women's health have this opportunity, under the guidance of our two Family Medicine/Obstetrics fellowship trained faculty. Opportunities include:

- · One on one on experience with labor and delivery
- Provide prenatal care in our clinic
- Provide care for high-risk conditions, including preterm labor, abruptions, TOLACs, trauma, pre-eclampsia, and postpartum hemorrhage
- Gain experience with vacuum deliveries, cesareans, and OB ultrasound
- Perform contraceptive procedures at the Mesa County Health Department



- Perform LEEPs and colposcopies in the residency clinic
- Receive certification as providers in Advanced Life Support in Obstetrics
- Assist pregnant women with substance abuse disorders through their pregnancy
- Participate in scheduled cesareans for additional surgical experience

Osteopathic Medicine

Osteopathic examination and treatment are taught to all residents during their time at St. Mary's Family Medicine Residency. DO residents start with OMT clinics with an Osteopathic faculty and are then cleared to do some OMT in their continuity clinic. MD residents also rotate through OMT clinic with an emphasis on structural examination and how that can help with diagnosis, appropriate referrals and treatment.

Addiction Medicine

All residents will be assigned time within the residency's weekly clinic that addresses substance use disorders through an integrated model of care. Residents will work alongside a physician, clinical pharmacist, and behavioral health fellow to care for patients with various substance use disorders. Residents will receive one-on-one didactics regarding the use of medications for substance use disorder, including buprenorphine for the care of opioid use disorder and chronic pain. Residents will also see patients alongside behavioral health clinicians to provide an additional point of experience within the residency's longitudinal behavioral health curriculum. The goal of this part of the curriculum is to help all residents feel comfortable managing substance use disorders within a full-spectrum family medicine clinic.

For residents with additional interest in addiction medicine, including co-management of psychiatric conditions and substance use disorders and specific addiction therapy modalities the residency partners with St. Mary's Integrated Addiction Medicine program to provide elective rotations. Here residents can learn more about utilizing medication for outpatient withdrawal management, expanded use of medications for substance use disorders including long-acting injectable medications, various levels of substance use care, managing specialty populations such as adolescents or pregnant persons with substance use disorder, and therapeutic and community support modalities for sustaining recovery. For residents interested in pursuing a fellowship in Addiction Medicine, the clinic provides an area of concentration over 12-18 months that will further prepare residents for the full-time practice of addiction medicine, including seeing a small panel of patients for addiction services independently within the Addiction Medicine clinic.