

Family Medicine Residency Program Curriculum

Eisenhower Health's Family Medicine Residency Program is a unique program that will provide the foundation for your professional career as a family physician. Founded in 2011, our Family Medicine Residency Program is designed to train exceptional future family physicians in a vibrant environment, allowing them to learn and provide health care as it should be. Our goal is to train residents with the broad spectrum of skills required of a family physician, but more importantly, residents will achieve the ability to become expert self-learners as they develop their breadth as family physicians in the changing health system.

Family Medicine is complex and constantly evolving. Our mission, however, is simple. We provide the best learning environment to maximize the residents' opportunity to achieve their full potential in practicing the highest quality, comprehensive family medicine in caring for our patients – one patient, one family at a time.



Adult Inpatient Medicine

PGY1, 18 weeks; PGY2, 12 weeks; PGY3, 8 weeks

- Large community hospital providing a high level of care to the community with multiple subspecialties including neurosurgery, cardiothoracic surgery,

interventional cardiology performing TAVR procedures, major stroke center, and others

- General Inpatient Medicine service is supervised by Internal Medicine hospitalists – two blocks in first year and one block in second year
- Teams are made up of three residents and an attending – GIM has two first year residents and a senior resident; the family medicine service typically has one first year resident, one second year resident and a third year resident
- Family Medicine Inpatient Service is run by the Family Medicine attendings with a focus on continuity of care for patients from the family medicine practice site – one block in the first year, one block in the second year and one block in the third year
- First year focus is primarily direct patient care. Second and third year focus is acting as senior and junior faculty, managing the team
- One block of ICU in the first year – the team is usually made up of three or four first year residents and a senior resident
- Full responsibility for patient care with open ICU providing a broad scope of comprehensive adult care; ability to perform many standard inpatient procedures from paracentesis to intubation
- Night Service – one week in the first year, two weeks in the second year, and four longitudinal weeks in the third year. Main responsibilities are rapid response, code team, and admissions
- Electives – there are many opportunities for subspecialty rotations along with procedure-focused electives
- Pulmonology consult service – work one-on-one with the pulmonary attending. This is a one block rotation as a third year resident
- Excellent didactics with morning report and noon conference lectures. Grand rounds are held once a week along with monthly M&M



Family Medicine Practice Sites

Eisenhower George and Julia Argyros Health Center – La Quinta

Located 20 minutes from the main Eisenhower Health campus in Rancho Mirage, the Center for Family Medicine (CFM) at the Eisenhower George and Julia Argyros Health Center in La Quinta is the primary practice site for the Eisenhower Family Medicine Residency Program. The Eisenhower Argyros Health Center provides a comfortable setting for patients and employees in an architecturally distinct building. It serves all age groups from prenatal and newborn to geriatrics, with more than half of patients over age 65. Our patients have private insurance and/or Medicare plus supplemental insurance. Many procedures are performed in the office, including ultrasound.

Family Medicine residents are provided workspaces when they are scheduled for patient care in the clinic and separate cubicles for use anytime. Our faculty, residents and support staff belong to teams for a more efficient delivery of care. We utilize Epic for our electronic medical record (EMR). In addition to its basic



features, Epic facilitates more efficient communication among Eisenhower providers, teaching faculty, residents, staff and patients signed up on MyChart.

The weekly schedule is as follows:

- PGY1: 1-2 half-days
- PGY2: 2-3 half-days
- PGY3: 2 days per week



Fundamentals of Family Medicine

PGY1, four weeks

- Provides an extended orientation with focused education in physical examination skills, EKG reading, ultrasound, and other common Family Medicine procedures
- Introduction to community resources
- Introduction to Inpatient Medicine
- Time to complete online courses in quality improvement, patient-centered medical home, EKG reading and intern boot camp
- Extra time in the Center for Family Medicine to learn electronic health record, connect with nursing staff and begin to establish individual practice

Electives

Longitudinal throughout the three-year program

- We have one elective in the first year, two in the second year, and three in the third year. Residents may use this time to broaden their family medicine experience or to focus on a particular area such as maternity care, hospital medicine, emergency medicine, integrative medicine, sports medicine, etc.
- Residents may choose from electives in internal medicine subspecialties or other standard rotations. They may use electives previous residents have developed such as procedural medicine. Residents are welcome to develop their own electives, too; this requires submission of goals and objectives and a schedule for the block.
- There is the option to do one block away from the program in the third year if individual clinic numbers are adequate.

Care of Children

PGY1 and PGY2, four weeks inpatient each year (eight weeks total)

PGY1 and PGY2, four weeks outpatient each year (eight weeks total)

PGY3, four weeks Pediatric Emergency Medicine

- Typical schedule in the inpatient rotation is 12 hours/six days a week per block
- Hospital team will be under general pediatrics team in PGY1 and specialty team in PGY2
- Morning report and noon conferences daily during inpatient rotation
- Responsible for pre-rounding in the morning for patients assigned during inpatient rotation and presentation to the attending during rounds; morning report presentation



- Additional inpatient experience with common pediatric problems on the Family Medicine Inpatient Service
- Outpatient schedule is usually from 8 a.m. to 5 p.m.
- Learning in outpatient rotations and practice sites includes well-child visits from newborn to adolescence, age-appropriate anticipatory guidance, common pediatric conditions, jaundice in the newborn, normal and abnormal growth and development, routine and catch-up immunizations, medication dosing for the pediatric age group; additional acute care experience during urgent care rotation in PGY2
- Additional longitudinal pediatric outpatient experience at the Center for Family Medicine practice site

- Pediatric Emergency Department rotation at Eisenhower Health
- Supervision will be by pediatric staff in both inpatient and outpatient pediatrics block rotation; Family Medicine attending faculty supervise in the Family Medicine practice sites and the Emergency Department attending physician in the Emergency Department
- Procedures such as lumbar puncture, removal of foreign bodies in ears/nose, and possibly intubation on a case-to-case basis; circumcision is learned during OB rotation

Maternity Care

PGY1 and PGY2 four weeks each year at the Eisenhower Health Labor and Delivery

The goal of the maternity care curriculum is to train all residents in management of normal, low-risk vaginal delivery and in the care of the pregnant woman and normal newborn. Residents who wish additional experience may arrange electives.

- Prenatal care, triage, labor and delivery, couplet care of post-partum mothers and babies
- Baby-friendly hospital with breastfeeding support

Electives available at several locations for additional experience

Care of Women

PGY1 and PGY3, four weeks each year

- Teaching and clinical experience with all routine gynecological procedures and care
- IUD insertion and Nexplanon® placement taught in the Center for Family Medicine and in community rotations
- Community experience with both private practitioners and medically underserved clinics
- Weekly resident-run women's health clinic for underinsured/uninsured patients at the Coachella Valley Volunteers in Medicine Clinic

General Surgery

PGY1, four weeks

- Experience outpatient surgery consults in the busy practice of a surgery group under direct supervision
- Learn to initially evaluate and manage common surgical problems, develop basic outpatient procedural skills and surgical assisting skills and develop an appropriate evaluation and treatment plan for a range of surgical problems
- Conduct a focused history and physical of the presenting problem and determine need for surgical consultation and/or intervention
- Complete an appropriate pre-operative evaluation of the patient, including the patient's clinical status, determination of the indication for surgical intervention
- In both inpatient and outpatient surgical settings, residents learn to perioperatively manage patients and effectively act as first assistant intraoperatively
- Learn and demonstrate sterile technique in the OR setting; pre-operative endotracheal intubation; basic suturing/laceration repair; incision and drainage of abscesses and thrombosed hemorrhoids; wound debridement; wound management; and incisional, shave and excisional biopsy of masses
- Appropriately manage the post-operative care of the patient, including maintenance of electrolyte, acid-base and fluid balance; manage common

post-op organ damage; identify and manage sepsis; select antibiotics for infectious complications and prophylaxis; manage suctions and drains, implement plans for post-operative diet and activity

- Adequate pain management, including the use of short-acting, parenteral narcotics, longer acting, oral or peri-rectal preparations, non-narcotic analgesics and non-pharmacological methods

Emergency Medicine

PGY2, four weeks

- Each week compromised of four 10-hour shifts in the Emergency Department under direct supervision
- Competently and cost-effectively evaluate and manage patients of all ages presenting to the Emergency Department
- Assess and appropriately triage patients, prioritizing their care as needed by the severity of their illness or injury
- Recognize and manage complications seen in the emergency care setting and engage in consultations when appropriate
- Perform emergency procedures common in the emergency care setting such as arterial blood gas collection, airway management, lumbar puncture and laceration repair
- Learn to competently describe the pathophysiology and clinical presentation of common emergency conditions such as altered mental status, syncope, chest pain, respiratory failure, abdominal pain, psychiatric disorders, and substance use disorders



Behavioral Health

PGY1, four weeks and longitudinal throughout the three-year program

- An integrated behavioral health approach emphasizing the collaboration between medical providers and behavioral health faculty in patient care
- Didactic lectures covering major behavioral science topics and medication management
- Experience in primary care counseling of basic family medicine issues, such as depression, anxiety, grief, life cycle issues, etc.
- Experience training in medication management when appropriate
- Taught by family physicians, psychiatrists and behaviorists
- Emphasis on personal wellness, mindfulness and balance
- Training with psychiatrists on consult liaison service and in behavioral health clinics

Rheumatology

PGY2, two weeks each year

- Work one-on-one with a clinical Rheumatologist
- Develop an understanding on common indications, workup and management of common rheumatologic conditions

Sports Medicine

PGY2, two weeks; PGY3, four weeks

- Extensive orthopedic exposure along with direct supervision by subspecialty trained orthopedists
- Sideline and event coverage along with participation in mass pre-participation examinations (PPEs) at various high schools and College of the Desert
- Orthopedic/physiatry subspecialties: spine, shoulder/elbow, hand/wrist, hip/knee, foot/ankle with either arthroscopy or total joint replacement
- Exposure to musculoskeletal ultrasound while working with sports medicine fellows/faculty and during dedicated ultrasound workshop held by the sports medicine staff



Care of the Elderly

PGY2 and PGY3, four weeks each year and longitudinal

- Longitudinal care of institutionally bound elderly
- Specialty sub-rotations in neurology, hematology/oncology, and hospice care
- Full responsibility for patient care with excellent faculty backup
- Special attention to performing cognitive assessment, functional assessment, falls, balance and gait assessment
- Medication management with a thorough understanding of Beer's List
- Transitions of care from hospital to skilled nursing facility (SNF), SNF to community
- Direct care of the elderly in the SNF environment
- Assessment and treatment of pressure sores and surgical wounds
- Biology of aging and atypical presentation of disease





Community Medicine

Longitudinal throughout the three-year program, includes active involvement in community-based health clinics and street medicine outreach

PGY1, three weeks

- Community-based clinics, including Coachella Valley Volunteers in Medicine
- Eisenhower Memory Care Center – Adult Day Center
- Emphasis on population health and street medicine
- Didactics with national experts in addiction
- Differential diagnostics and treatment approaches with alternative health care providers
- Active participation and engagement with high school students in a local health and nutritional science academy
- Elementary school health education programs
- Eisenhower primer to volunteer services and case management
- Educational and speaking engagements with local schools, senior centers and other agencies
- Home visit opportunities with support and supervision

Practice Management Curriculum

PGY3, four weeks

The curriculum in practice management prepares the residents to improve and manage their own practices and to gain a wider understanding of health care systems as a whole. The overriding goal is to help the resident make wise career decisions as to what practice settings are a good fit for them after residency. It also provides a basis for the resident to step in to roles of leadership, design and implementation of future health systems.

- Individual appointments with Eisenhower Health executive leadership to better understand the three “worlds” of an organized health system: clinical, financial and operational
- A half-day experience with reception and also with nursing in the back office of the Center for Family Medicine. These experiences develop understanding and empathy with the various roles in a medical office
- Reading the book, *What Works to Improve Primary Care: Effective Strategies and Case Studies*, 2017 by Suzanne Houck
- Discuss the book, other readings and experiences with the Practice Management Curriculum Director at the beginning and end of the rotation

Urgent Care

PGY3, two weeks

- Each week consists of five 9-hour shifts in one of three state-of-the-art Eisenhower Urgent Care facilities that span the Coachella Valley, under the direct supervision of the urgent care physician
- Assess and triage patients of all ages presenting to the urgent care; recognize and perform initial management; refer patients to higher level of care when appropriate

- Perform procedures common to the urgent care setting such as abscess incision and drainage, local anesthesia, laceration repair, X-ray interpretation and reduction and splinting of simple fractures
- Communicate effectively with patients and families across a broad range of socioeconomic and cultural backgrounds
- Communicate effectively with physicians, other health professionals and health-related agencies
- Elicit a history and physical examination relative to a suspicion of child abuse, family violence or sexual assault and provide access to community resources
- Work effectively as a member or leader of a health care team

Cardiology

PGY2, four weeks

- Includes management of the cardiac patients in both inpatient and outpatient environments while working one-on-one with cardiologists
- One-on-one didactics with cardiologists with "capstone" presentation by the resident at noon conference
- Rotation focuses on building EKG interpretation skills, provides exposure to treadmill and nuclear stress testing as well as Holter and implantable monitoring, provides exposure to angiography and stent placement procedures in cath lab and exposure to trans-arterial valve replacement
- Rotation provides extensive exposure to acute and chronic heart failure, myocardial infarction, arrhythmias, coronary artery disease and dyslipidemia, including management of conditions in patients with multiple comorbidities

Introduction to Addiction Medicine

PGY1, one week

- Immersive experience in the world-famous Hazelden Betty Ford Center under the direct supervision of their medical and clinical staff
- Compassionately gather information from patients and their families, develop effective patient management plans that address their medical and emotional needs
- Learn and demonstrate effective implementation of behavioral change strategies, using principles of motivational interviewing
- Foster and develop provider self-awareness, empathy and well-being
- Determine the psychosocial needs of the patients who have diverse ethnic and cultural backgrounds
- Integrate psychological and behavioral knowledge and socio-cultural factors into the care of patients with physical symptoms and diseases
- Integrate the principles of screening, brief intervention and referral to treatment (SBIRT) for patients with alcohol and other substance use disorders
- Develop skills in the physician/patient relationship, patient interviewing skills, and counseling skills, utilizing motivational interviewing as a basic construct for addressing lifestyle behavior changes
- Develop competence in the psychopharmacology of commonly used medications in the management of addictive disorders and co-morbid conditions
- Understand the DSM-V multi-axial classification system of mental disorders and approach to treatment



Dermatology

PGY3, two weeks

- Develop the ability to apply knowledge of classification and terminology of skin disorders to physical findings
- Develop the ability to describe primary and secondary lesions
- Practice diagnosis of common dermatologic disorders based on history, topography and morphology

- Office-based procedures, such as the punch biopsies, shave biopsies, excisional biopsies as well as scrapings and microscopic examinations can be practiced in longitudinal fashion as electives. Skin closure techniques include: non-suturing techniques (e.g., benzoin and steri-strips, skin glues); simple interrupted; simple continuous; vertical and horizontal mattress; layered closures; and subcuticular suturing
- Use of dermoscopy to complement physical examination
- Principles and practice of wound care, including use of occlusive dressings is taught in longitudinal fashion including geriatrics, inpatient and emergency department rotations
- Counseling and anticipatory guidance for dermatologic disorders

Urology

PGY3, two weeks

- Develop the ability to apply knowledge on common urologic conditions in adult male and female
- Develop an understanding on indications, risks and potential complications of common urologic surgical procedures

Ear, Nose and Throat (ENT)

PGY3, two weeks

- Work one-on-one with specialists in a busy ENT clinic environment
- Exposure to in-office ENT procedures including fiberoptic endoscopy
- Diagnosis and treatment of sinusitis, pharyngitis, thyroid disease, GERD, vocal cord dysfunction, allergy management

Endocrinology

PGY2, four weeks

- Work one-on-one with the endocrinologist
- Develop a detailed understanding on common endocrine abnormalities such as diabetes, thyroid disorders, electrolyte disorders, bone disorders, etc.
- Be capable to evaluate and interpret continued glucose monitoring reports

Evidence-Based Medicine

Longitudinal throughout the three-year program

- Includes faculty-led journal club discussion once each block with different statistical teaching points highlighted each month

Point of Care Ultrasound (POCUS)

Longitudinal throughout the three-year program

- Hands-on application is taught and required in the emergency department and sports medicine elective rotations and strongly encouraged in the family medicine practice during hospital rotations
- POCUS applications include FAST Exam, obstetrics/ gynecology applications, limited echocardiography, screening exams for AAA, DVT, PAD, carotid artery stenosis, pulmonary ultrasound, musculoskeletal exam, hepatobiliary exams and more
- Development of hospital certification and privileging criteria is currently underway



Osteopathic Recognition

The Family Medicine Residency Program at Eisenhower Health received initial recognition by the ACGME for osteopathic recognition in 2019 and is committed to teaching Osteopathic Principles (OPP) at the graduate medical education level.

Designated osteopathic family medicine residents receive additional curriculum focused on the integration of osteopathic philosophy into patient care as well as utilizing skills in osteopathic manipulative techniques (OMT). Designated osteopathic residents follow the same core curriculum of the residency program, including monthly didactic sessions dedicated to OPP and OMT.

During outpatient clinic, residents can participate in OMT clinic with core faculty who also serve as preceptors in our continuity clinics. As residents progress into their PGY2 and 3 years, they are encouraged to routinely integrate OMT for their continuity clinic patients. The goal is to have residents demonstrate competency in the integration of OPP and OMT as they transition to independent clinical practice.

Both DO and MD residents are eligible to participate as designated osteopathic residents. Applicants must meet the qualifications of the Eisenhower Health Graduate Medical Education Eligibility and Selection of Residents and Fellows Policy and one of the following requirements based on the type of medical school from which the applicant graduated. These requirements must be completed within the first three (3) months of starting the Family Medicine Residency Program.

- Be a graduate of a Commission on Osteopathic College Accreditation (COCA)-accredited college of osteopathic medicine in the United States, who holds a DO degree.
 - No additional requirements are required beyond successful graduation and holding a DO degree.
- Complete the eligibility requirements for residents who did not graduate from a COCA Accredited College of Osteopathic Medicine. This includes:
 - Submission of a letter of intent to be a designated osteopathic resident sent to the Director of Osteopathic Education
 - Academic criteria
 - Graduation from a medical school in the United States and Canada accredited by the Liaison Committee on Medical Education (LCME) or from a medical school outside of the United States or Canada
 - Passing scores on the USMLE Step 1 and 2
 - Completion of one of the following prior to entering a designated osteopathic resident position:
 - Completion of forty (40) hours of didactic education in osteopathic principles and practice and hands-on training in diagnosis and osteopathic manipulative treatment (OMT) for somatic dysfunction. This may be accomplished by completing Osteopathic Principles and Practice (OPP) classes at a College of Osteopathic Medicine in the United States or through Continuing Medical Education (CME) courses that are approved by the American Osteopathic Association (AOA). Applicants must submit a certificate of completion for the course.
 - Completion of one hundred sixty (160) hours of osteopathic clinical training with a board-certified NMM/OMM or CSPOMM preceptor in an Osteopathic Manipulative Medicine (OMM)-focused practice. Applicants must submit an attestation from the preceptor verifying successful completion of this osteopathic clinical training experience.