Training at Kaiser Permanente Washington differs from the traditional "block" model employed by most programs. Instead of focusing exclusively on one service or specialty each month, our residents continuously see patients in clinic, provide inpatient OB and IM care, treat the urgently sick, care for a geriatric panel and participate in rotating sets of specialty experiences.

Kaiser Permanente Washington

# **Longitudinal Training**

The longitudinal pacing of the core inpatient and outpatient experiences throughout training is designed to minimize resident burnout, maximize learning and develop an early identity as a family physician by practicing like one.

#### **Family Medicine Month**

The first 4 weeks of each academic year are dedicated to learning the core skills of a family doctor. R1s receive an introduction to practice, R2s focus on the art of medicine and teaching, and R3s learn practice management and mentoring.

### **Residency Clinic**

All residents have a panel of 400 patients throughout residency, and clinic schedules that provide the time and training for their care. R1s are in clinic for 4-5 half days a week, R2s for 3-4 half days, and R3s for 2-3. Third-year residents work under the same clinic schedule template as all practicing family physicians at Kaiser Peremanente Washington. In addition to outpatient clinic, R2s and R3s also practice in our Teen Pregnancy and Parenting Clinic, offering continuity care to young expectant mothers and their children.

## **Specialty and Community Medicine**

For each resident, the academic year alternates between 24-week intervals focused on medical and surgical specialty experiences. The medical experiences include dermatology, outpatient pediatrics, hospice, and selectives like neurology and ophthalmology. The surgical experiences include general surgery, abortion training, gynecology, orthopedics, sports medicine, podiatry, and procedural clinics. Throughout the year, residents work in school-based and community health clinics, as well as receive exposure to addiction medicine, psychiatry, and behavioral health.

#### **Four-Week Blocks**

Though most of our schedule is longitudinal, some experiences follow a block format because of their learning objectives or scheduling necessity. These include an Elective Away (R2), Primary Care Clinic Away (R3), Inpatient Pediatrics (R2), Pediatric ER (R2 - R3).

#### Wellness

The curriculum is designed to help trainees grow into well-balanced family physicians by learning core skills and forming an identity as a practitioner early in training. Residents have the opportunity to develop confidence in caring for patients in multiple different outpatient settings before completing advanced inpatient rotations later (inpatient peds, peds ER, ICU).

## **Training Model**

