

CASE #1

Role: Family Medicine Clerkship Director

Learner: Alex, 4th-year medical student

Timing: Alex is completing an acting internship rotation and plans to interview at your residency program. They just finished spending 4 weeks with the family medicine inpatient team.

Event: You are seeking feedback from the inpatient team regarding Alex's performance during the rotation and receive the following information:

- Great to work with and eager to learn
- Built rapport with inpatient team and patients that they followed
- Submitted notes late in the day and the notes were often missing updated plans from rounds
- Consistently struggled to develop appropriate and specific plans for patients

History: Has never failed a clinical rotation, all previous evaluations report how Alex is a team-player and a pleasure to work with.

You are meeting with Alex to discuss their acting internship rotation performance and experience

CASE #1

Role: Alex, 4th-year medical student

Supervisor: Family Medicine Clerkship Director

Timing: You just completed your 4-week inpatient family medicine block as part of your acting internship rotation. You enjoyed your experience and plan to interview at the residency program.

Event: Due to social-distancing requirements and the COVID-19 pandemic, this was your first true inpatient clinical experience:

- You made sure to show up on time every day and ask a lot of questions
- You enjoyed being able to interact with patients, but you felt nervous presenting during rounds
- You felt very behind on your medical knowledge, so you spent most of your time reading medical literature in the afternoons
- In order to dedicate your time to learning, you frequently copy-forwarded your notes from the day before, as you noticed that this is what the resident physicians would do

History: Everyone you have worked with has said how wonderful you are. The residents sometimes commented on your notes, but they always said it may be just a difference in "styles."

You are meeting with the Family Medicine Clerkship Director as part of your end of rotation evaluation, and you hope it goes well, as you are very interested in attending this residency program.

CASE #2

Role: Attending Physician

Learner: Pat, 3rd-year medical student

Timing: Pat is on their family medicine clerkship rotation and is spending time with you in your outpatient clinic. They are about half-way through their time with you.

Event: Pat frequently shows up late for clinic and appears generally disinterested. They often do not prepare to see patients and have disorganized presentations when precepting. They have not been writing any notes.

History: Pat's last rotation was with orthopedics, and there were not any concerns or red flags reported. However, during their internal medicine rotation, there were multiple comments that Pat was unprepared for rounds.

You are meeting with Pat to discuss that they are not meeting the rotational expectations and to develop a plan of action.

CASE #2

Role: Pat, 3rd-year medical student

Supervisor: Attending physician on outpatient clinical rotation

Timing: You are half-way through your outpatient block for your family medicine clerkship rotation.

Event: You are completely miserable. You plan to pursue a general surgery residency after medical school, so you do not understand why you need to know family medicine. You would rather spend time practicing your suturing skills. You want to do the bare minimum to pass, as you do not think this experience is relevant to your future.

History: You felt like you have excelled on the rotations that matter most to you in the past.

You are asked to meet with your Attending Physician, but are unsure why, as this is not a common occurrence on your clinical rotations.

CASE #3

Role: Attending Physician

Learner: Cam, 4th-year medical student

Timing: Cam just finished their first week of their family medicine acting internship rotation, where they were working with the inpatient team. You are starting your week with the inpatient team, which will be Cam's second week on service.

Event: When you are receiving sign-out from the previous inpatient attending physician, you ask if they have any comments regarding how Cam has been doing. They provide you with the following information:

- Cam gives excellent case presentations and appropriately develops care plans for patients
 - Cam will often read extra materials to learn about the conditions their patients present with
 - There have been reports from nursing staff that Cam asks them to put in orders for patients under one of the resident physicians' names
 - Some of Cam's patients have asked to no longer be seen by a medical student due to negative interactions
 - The resident physicians feel that Cam does not work well in a team environment
- The previous attending physician stated that they found out all this information at the end of the week, and they were too busy to talk about these items with Cam.

History: Cam underwent remediation for professionalism issues during their 3rd year of medical school.

You are meeting with Cam at the beginning of your inpatient week to set expectations and hope to address some of these items.

CASE #3

Role: Cam, 4th-year medical student

Supervisor: Inpatient Attending Physician

Timing: You just finished your first week of your family medicine acting internship rotation, where you have been working with the inpatient team. You are feeling excited to start your second week with a new Attending Physician.

Event: You feel very confident in your medical knowledge, as you always receive positive feedback on your case presentations during rounds. You even feel like your medical knowledge is greater than that of the resident physicians you are working with, so you figure that you should help them out to make them look good too. Since your plan of care for patients is generally correct, you expedite care by asking nursing staff to put in orders during your pre-rounding. You spend just enough time with patients in order to get the information you need; you have no time to stay and chat. If you could, you would rather do everything by yourself, as you dislike having to depend on other people.

History: Your medical school made you complete professionalism remediation last year, which you felt was pointless. You think that others were simply jealous of how advanced of a medical student you are.

You are meeting with the Attending Physician for the upcoming inpatient week to set goals and you are hoping that you will be granted more autonomy in managing patient care.

CASE #4

Role: Family Medicine Clerkship Director

Learner: Cris, 3rd-year medical student

Timing: Cris finished their outpatient clinic-based family medicine clerkship rotation.

Event: You received the following evaluations on Cris' clerkship performance:

- Friendly and nice to faculty, residents, and staff
- Oral presentations were disorganized and often missing key history and physical components
- Notes did not contain sufficient information and could not be used as part of medical record
- Was given feedback half-way through to include more details in oral presentations but no change/improvement was noted

History: Cris has passed all of their other rotations, frequently with honors, without any issues.

You are meeting with Cris to review their Family Medicine Clerkship evaluations and inform them that they will receive a passing grade but not honors.

CASE #4

Role: Cris, 3rd-year medical student

Supervisor: Family Medicine Clerkship Director

Timing: You just finished your outpatient clinic-based family medicine clerkship rotation.

Event: You really enjoyed your family medicine clerkship experience. You felt accepted, as everyone was very warm and welcoming. Prior to starting your rotation, your peers told you that this block was very relaxed and not to worry about being perfect. You recently finished some very grueling rotations, and this was just the break you needed. You know that you did not give your best effort, but you think that everyone is too nice to not give you high marks.

History: You have worked hard in your previous rotations and strive to always pass with honors.

You are meeting with the Family Medicine Clerkship Director to review your end of rotation evaluations, which you are confident will result in passing with honors.