

LEARN WHY THEY PICKED OUR PENN FAMILY MEDICINE RESIDENCY PROGRAM

JACOB (JAKE) NAIR, MD

"I wanted to go to a program that embraced the ever changing landscape of healthcare and Penn Family Medicine was that place. They offer great training in my interests, especially LGBTQ+ health. I felt like there were not only talking the talk but also walking the walk when it comes to diversity in medicine. Not to mention, the passionate residents and faculty help support your personal and professional growth from day one!"



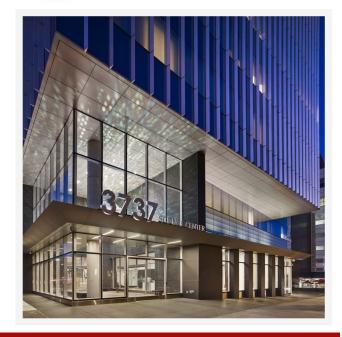


Program Highlights

- · Strong, supportive residents & faculty
- Community Medicine in underserved
 West Philadelphia neighborhood
- Continuity FMOB & FM Inpatient service
- Rigorous inpatient training
- · High-volume, advanced OB
- FQHC and academic clinic sites
- Repro health, terminations, & procedures
- LGBTQ health program
- · Addiction Medicine
- HIV training (AAHIVS eligible)
- · Sports Medicine
- Healthcare Leadership & Global Health
- Research Mentorship
- · Diverse patient population
- Fellowships in Sports Medicine, Addiction
 Medicine, and Faculty Development







Contact us

University of Pennsylvania Family Medicine Residency 3737 Market Street, 9th Floor Philadelphia, PA 19104 (215) 294-9284

Questions? Email our Program Coordinator Darcy.MacDonald@pennmedicine.upenn.edu



Follow us



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Twitter: @Penn_DFMCH



UNIVERSITY OF PENNSYLVANIA FAMILY MEDICINE RESIDENCY



Service







Leadership

About Us

Our mission is to prepare residents to deliver full-spectrum primary care, particularly for underserved communities. We cultivate outstanding leadership and clinical skills, combined with a firm grasp of current evidence-based practices. Alongside their technical skills, we aim to instill an understanding of the social and historical factors that impact health outcomes, so that our residents graduate equipped to recognize and dismantle systems that perpetuate disparity and injustice wherever they go.

Family Medicine at Penn

Our Family Medicine residency is in the heart of Penn's campus, with our hospital services, clinical offices, research teams, and medical student teaching opportunities all within walking distance of each other.

Our residents receive full-scope clinical training under our experienced faculty in a variety of urban settings. Within our Family Medicine clinic, residents have the opportunity to train in office procedures, prenatal care, LGBTQ+ care, HIV care, and addiction medicine. Our adult inpatient and OB services support residents to grow into confident, capable, well-rounded physicians under the guidance and mentorship of Family Medicine attendings.

West Philadelphia offers the opportunity to train in a major city with a unique neighborhood feel. Philly is rich in culture and history, with an abundance of art, music, restaurants and outdoor activities to explore with coresidents and friends in your time off!











Resident Salary and Benefits 2023-2024

PGY1 \$69,867 | PGY2 \$72,536 | PGY3 \$76,062

- 3 Weeks Paid Vacation + 1 Week Paid Holiday
 - Paid Conference Time:
 - PGY-2: 3 days & \$1000
 - PGY-3: 5 days & \$1500
 - Access to Penn Library online services including Up-to-Date®
 - iPhone and computer stipend
 - Mortgage Guarantee for housing in Penn's Neighborhood

Where we practice

- · Hospital of the University of Pennsylvania
 - Obstetrics, newborn nursery
- Penn Presbyterian Medical Center
 - Adult inpatient, Cardiac ICU
- Penn Family Care
 - Resident continuity clinic, subspecialty clinics
- Cedar Family Medicine FQHC
 - Resident continuity clinic
- Children's Hospital of Philadelphia (CHOP)
 - Pediatric inpatient, ED and Urgent Care
- Community-based organizations
 - eg. Mobile MOUD clinic, Prevention Point, Unity Clinic
- · Elective sites
 - eg. Puentes de Salud clinic, Pennsylvania Hospital, local FQHCs, rural hospital site, Allentown Women's Center... just to name a few!

Core Curriculum*

PGY 1 Rotations

Family Medicine Inpatient
Family Medicine OB /OB with OB
Family Medicine Outpatient
Behavioral Health and Addiction
Internal Medicine Inpatient
Adult Emergency Department (ED)
Cardiac Care ICU
Pediatric Inpatient
Pediatric Urgent Care
Newborn Nursery
Family Medicine OB Nights
Elective

PGY 2 Rotations

Community Medicine
Family Medicine OB
Family Medicine Inpatient
Family Medicine Outpatient
Health Systems Quality Improvement
Inpatient Geriatrics
Sports Medicine
Pediatric ED
Electives

PGY 3 Rotations

Family Medicine Inpatient
Family Medicine OB nights
Community Medicine
Outpatient Subspecialties
Family Medicine Outpatient
Adult ED
Dermatology
CHOP Pediatric Urgent Care
Sports Medicine

Electives

*varies by curricular track, total elective time equal in all tracks Longitudinal Elements: Prenatal Care, Procedure Clinic training, Continuity Patient Care, Quality Improvement





INPATIENT MEDICINE

OUR PHILOSOPHY

We believe that robust inpatient training is critical for Family Physicians to be prepared to manage chronic conditions, slow disease progression, and support patients' goals of care. We highly value patient-provider continuity and interdisciplinary collaboration.

OVERVIEW

Our curriculum includes rigorous inpatient training, in which junior residents are closely supervised by senior residents and faculty, gaining progressive autonomy over the 3 years of residency.



OUR HOSPITAL

Our FM service is located at Penn Presbyterian Medical Center, a longstanding hospital in West Philadelphia, beloved for its intimate "community hospital" feel. Residents develop close relationships with nursing, social work and specialist teams throughout their residency.

OUR TRAINING

- Management of "bread and butter" conditions like CHF, COPD, sepsis, stroke, chest pain, PE, and addiction medicine
- Point-of-care ultrasound
- Management of rapid responses
- ACLS training with regular simulations



of Care







PROMOTE OB

PRimary care Obstetrics and Maternal Outcomes Training Enhancement

- PROMOTE is the advanced obstetrical training track in the Penn Family Medicine Residency program. All residents are required to select a track (Community Medicine, Inpatient, or PROMOTE OB) at the end of intern year.
- Upon graduation, PROMOTE residents will be equipped to practice pregnancy care in a variety of practice settings including academic, community, urban, and rural. Graduates will be able to provide high quality care to marginalized and vulnerable patient populations in low resource settings, helping to reduce health care disparities in pregnancy care.
- PROMOTE residents spend additional weeks on the labor floor at the Hospital of University of Pennsylvania and Pennsylvania Hospital. There are also PROMOTE 2 and PROMOTE 3 rotations, where residents spend time on the antepartum service, in high-risk clinic, and in the antenatal testing unit to learn advanced obstetrical skills and management.
- PROMOTE residents can participate in cesarean deliveries, group prenatal care, a rural OB month in New Hampshire, and a longitudinal experience at an FQHC managing prenatal patients.
- Advanced didactics and FMOB mentorship are benefits of the PROMOTE track. Residents also have opportunities to be involved in OB related QI work, participate in hospital and city based perinatal committees, and get involved in research opportunities related to pregnancy care.

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PROMOTE residents can obtain procedural skills:

- Minimum of 80 vaginal deliveries
- Perineal laceration repair
- Opportunity for assisted vaginal deliveries
- OB ultrasound including dating, AFI/BPP, and basic biometry
- Minimum of 20 cesarean deliveries with opportunity for competency if desired
- Colposcopy
- And more!

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PROMOTE residents will learn to manage:

- Hypertensive disorders of pregnancy
- Diabetes in pregnancy
- Perinatal Opioid Use Disorder
- HIV/Hepatitis B/Hepatitis C
- Preterm Premature Rupture of Membranes
- Refugee patient care
- LGBTQ+ reproductive care
- 4th Trimester Postpartum Care

• And more!



Please contact the director of the PROMOTE OB track with any additional questions: Jennifer Cohn, MD jennifer.cohn2@pennmedicine.upenn.edu





Visiting Clerkship Program

In partnership with the Alliance of Minority Physicians, the University of Pennsylvania's Department of Family Medicine and Community Health offers a Visiting Student Clerkship experience for rising 4th year medical students. This 4 week rotation pairs each student with faculty and resident mentors. Students also have the opportunity to meet one-on-one with our program director. Students selected for this competitive

program will receive scholarship amounts up to \$1500 to help reimburse the costs of travel and housing.





Apply through VSLO. Find out more here:



Clinical Experience

Choose from one of our dedicated Family Medicine experiences:

- Externship
- Maternal & Child Health
- Sub-Internship

Mentorship

Meet with your faculty and resident mentor to discuss family medicine career goals. Receive feedback on your personal statement and ERAS application.

Community

Find your community here at Penn! Throughout the block connect with residents and faculty, while also forming connections with the other visiting students across specialties at Penn/CHOP.





The Alliance of Minority Physicians Renn Medicine | CH Children's Hospital of Philadelphia

The Alliance of Minority Physician's mission is to develop leaders in clinical, academic, and community medicine through active recruitment, career development, mentorship, social opportunities and community outreach.





AMP's efforts are geared towards underrepresented (UIM) faculty, housestaff, and medical students across Penn and CHOP, as well as those economically disadvantaged, first-generation medical students and those underrepresented in their specific discipline.



Pipelines & Recruitment	Mentorship	Social Events
 Visiting Clerkship for UIM Medical Students Participation in local and national conferences eg. SNMA, LMSA 	 "Mentoring Families" support relationships between our medical students, residents, fellows, and attendings 	 New Housestaff Welcome Reception Happy Hours Housestaff Holiday Potluck Graduation Gala





STAND UP AGAINST MICROAGGRESSIONS:

4 Ds TO BECOME AN UPSTANDER

<u>DIRECT</u>: Check in, directly engage with the person who acted in a discriminatory way. Can be immediate or delayed.

<u>DISTRACT</u>: Interrupt the situation or redirect individuals that may be at risk. Can be useful in the moment, but does not truly address the issue, so should follow up with one of the other Ds.

<u>DELEGATE</u>: Tell another person who can help address the situation such as your Program Director or Office Manager.

<u>**DELAY**</u>: Check in with impacted parties after the incident occurred and continue with follow up.





Family Medicine &

STAND UP AGAINST MICROAGGRESSIONS:

Can you help me understand what you meant by...?

AMPLE PHRASES FOR UPSTANDERS:

- I'm worried that statement could make that person feel... [undervalued as a member of the team, tokenized, isolated,
- unwelcome, invisible]
- That comment makes me feel a bit uncomfortable, because...
- I'm worried that comment could perpetuate the stigma around... AMPLE PHRASES FOR RECEIVING FEEDBACK:
- Thank you for bringing that to my attention. I'm going to take some time to reflect on your feedback so that I can try and learn from it. It sounds like my comments really hurt you. I am so sorry. I
- appreciate you letting me know, because I realize it might have been easier for you to say nothing and I would not have had this opportunity to learn from this situation. Thank you.



REDUCING



STIGMA & BIAS: EXAMPLES & SUGGESTIONS



Potentially

Stigmatizing Language

Suggestions for Improvement



<<<<

~Stigmatizing Language ~	of tor Improvement of Improvement
Adherence and compliance (non-adherent, non-compliant)	List barriers to treatment plan (unable to refrigerate insulin due to displaced housing)
Chief compliant	Chief concern, primary reason for visit
Chronic medical condition management (uncontrolled diabetes)	X level above X goal (Elevated A1C above X goal, hyperglycemia)
Elderly	Use numerical age
Failed treatment	Medication was not effective in treating X condition
Gender	Ask if patient is amenable to their gender identity and pronouns being documented
History (denies, endorses, states, reports)	Use has or does not have (no fever, knee pain 10/10)
Obesity	Document patient's weight related condition and BMI (HTN secondary to BMI 45)
Perpetrator/Abuser	Person who uses violence
Player, Frequent Flyer	Patient
Quotation Marks	Use with extreme caution given it suggests skepticism

This is not one size fits all Ask your patient what language they prefer

For More Information

Fernández L, Fossa A, Dong Z, et al. Words Matter: What Do Patients Find Judgmental or Offensive in Outpatient Notes?. J Gen Intern Med. 2021;36(9):2571-2578.

USE PATIENT-FIRST LANGUAGE

Document conditions as nouns instead of adjectives

Instead of "diabetic", use patient with diabetes Instead of "smoker", use patient who smokes Instead of "sickler", use patient with sickle cell disease

Instead of "addict", use patient with substance use disorder Instead of "alcoholic", use patient with alcohol use disorder