

FMIG Program of Excellence (PoE) Application

Please fill in the following:

1. Number of students in your medical school: Approximately 600
2. Number of active FMIG members: Approximately 270
3. Check all that apply to you:
 - Our school does not have a department of family medicine.
 - Our FMIG has minimal support from our state chapter.
 - Our school has minimal faculty support (i.e. from Dean, Dept. Chair, etc.)
4. Our FMIG has won this award in the past:
 - YES What years? 2002, 2003, 2004, 2005, 2006, 2007, and 2008
 - NO
5. We intend to apply for [Select one]:
 - Overall award
 - Award for Excellence / Innovation in: [Select one]

INSTRUCTIONS FOR THE PROGRAM OF EXCELLENCE AWARD APPLICATION:

- You must use this template for your application. Please complete all sections (unless #8 does not apply to you).***
- The length of this document should be between five and 15 pages. Any longer or shorter and your application will not be considered.***
- In answering questions #3-6, describe what your FMIG learned from the previous year(s), what enhancements/changes you made or what innovations were developed.***

1. Contact Information:
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2. FMIG Operation: Provide a brief overview of how your FMIG operates, including your leadership structure, mission statement and goal(s), student involvement and retention, and the role of your faculty advisor.

Infrastructure and Goals

The University of Iowa Family Medicine Interest Group (FMIG) has a long history of excellence at the Roy J. and Lucille A. Carver College of Medicine. The group is committed to strengthening the field of family medicine on campus, in the community, and across the country. The goals of the group are to:

- Expand medical students' understanding of and interest in family medicine
- Increase the visible presence of the group and its programs/activities
- Prepare medical students to be leaders in family medicine
- Foster medical students' personal and professional development
- Build networks and relationships to connect medical students with practicing family physicians

It has been our experience that specialty interests evolve over the course of the four years of medical school; therefore, we invite and encourage all medical students, regardless of specialty interests, to join the group and/or attend our functions. Not only does this allow students to feel welcome to explore a career in family medicine at any point in their medical education, it also allows students pursuing a career in another specialty ample opportunities to learn more about family medicine and to develop an appreciation for the role of family physicians in primary care in an open, encouraging environment.

Leadership Structure and Description of Officer Positions

The leadership of our group is uniquely structured to accommodate the dichotomic nature of medical school—the first two "classroom" years and the subsequent two clinical years. This vertical integration provides a wonderful chance for developing mentoring relationships between upper and underclassmen. As a result, there is a degree of continuity incorporated into our leadership team from one year to the next. After several years of adjusting positions to meet the needs of the group, we have established an extensive but successful combination. Experimentation has taught us that it is essential to have a large team to help distribute formal responsibility for our numerous events, programs, and projects. Currently, we are in our third year with an expanded leadership team, and have 16 students, ranging from M1-M4, filling a total of 17 executive positions. We have found this structure encourages students of all classes to become involved and stay involved with the group as they continue through their medical education. In addition, this leadership structure improves the group's effectiveness in operational capacities and also facilitates incorporating students in every medical class. The size and class year diversity of the committee results in valuable input which reflect the needs and ideas of all levels of medical education. Programs and events are consequently planned to specifically target different educational levels, interests, and schedules. In particular, the president and vice president roles are each divided into two positions to be held by an upperclassman as well as an underclassman. This not only emphasizes the importance of contribution from all classes but has also been critical in optimizing event planning. Included below are descriptions of our elections and leadership positions within the group and our sources of financial support.

The elections for club officers are held each April. Current executive members give a description of their leadership title and duties to the members in attendance. Any member may volunteer to run for office, or students may nominate other qualified members. Voting is conducted by secret ballot and officers assume duties immediately upon their election and serve a one-year term. At the end of the meeting, newly elected officers meet with the previous term officers to celebrate the successes of

the past year, brainstorm
group, discuss the transition of responsibility, and share records and notes about programming and
event planning.

ways to improve the impact of the

This past year our leadership structure included the following positions:

- 2 Co-Presidents, one M3/M4 and one M2: Responsible for running leadership team meetings and coordinating the Iowa residency program recruiting events in the fall and spring. They are also responsible for facilitating cohesiveness within the group and motivating their fellow leaders and FMIG members to pursue our mission of promoting interest, awareness, and understanding of family medicine. The Co-Presidents communicate within the group and with various faculty and staff support persons in order to assure open communication.
- 2 Co-Vice Presidents, one M3 or M4 who is responsible for coordinating the fall evening dinner and the procedure clinic program, and one M2 who is responsible for coordinating the spring evening dinner and coordinating the schedule of lunchtime talks. The Vice Presidents also fill in for the Presidents as needed.
- 1 Secretary: Responsible for taking minutes at each meeting and distributing them via email to all leadership members. The secretary is in charge of club correspondence in general, and also writes and/or coordinates student articles for submission to the Iowa Academy of Family Physicians (IAFP) quarterly publication entitled, The Iowa Family Physician.
- 1 Treasurer: Develops and maintains a budget for our events throughout the year and works closely with the support staff in the Department of Family Medicine to communicate group expenses.
- 1 Membership Chair: Responsible for coordinating the recruitment of new members, maintaining an up-to-date membership database, and assisting with other roles as needed.
- Service Learning/Community Outreach Chair: Coordinates Tar Wars and facilitates other outreach activities such as volunteering at the Iowa Children's Museum.
- Professional Development Chair: Responsible for planning/promoting at least one social event each semester (picnics, pot lucks, holiday parties, socials hosted by faculty members, etc.) and also primarily coordinates the Professional Development events held each semester for upperclassmen and leadership team members at a Department of Family Medicine faculty member's home.
- Technology Liaison: Responsible for keeping the club website updated through communication with the Office of Student Affairs and Curriculum.
- Iowa Academy of Family Physicians (IAFP) Representative and Alternate: One or both of whom serve as liaisons to the IAFP for all meetings and represent students' interests at the state level. These students serve as full voting members of the IAFP Board of Directors.
- Student Representative to the IAFP Task Force on Physician Supply: Responsible for attending meetings of the Task Force as an FMIG representative, and reporting the decisions/results of the committee to the FMIG leadership team.
- M4 Representative: Serves as liaison to the M4 class and maintains residency program evaluation notebook.
- M2 Representative: Serves as liaison to the M2 class, is responsible for making class announcements about FMIG events, and coordinates the Ward Walks program with Family Medicine residents.
- M1 Representative: Serves as liaison to the M1 class, makes class announcements about FMIG events, and coordinates the M1 mentoring/shadowing program with the Department of Family Medicine faculty.
- Primary Care Week Coordinator: FMIG's representative on the Primary Care Week committee, and is responsible for working with AMSA and other primary care student interest groups to plan and organize events for National Primary Care Week held each October.

Of note, the position descriptions as depicted above serve solely as guidelines for formal responsibilities of each elected officer. Participation on the leadership committee also implies involvement in all aspects of leadership responsibility, and in fact, many of the officers volunteer to plan or coordinate activities well outside of their formal "job descriptions." This further emphasizes the value of a well-balanced leadership group composed of a variety of class levels and previous family medicine exposure. Our experience has been that a large and diverse leadership committee

results in students who frequently surprise us with innovative ideas for future projects, and who are always eager and willing to assist the group in whichever ways they can. excel within their roles, who

Student Involvement and Retention

The University of Iowa Carver College of Medicine Family Medicine Interest Group continues to be one of the largest and most active student groups on campus, and we are encouraged by the constant level of interest and participation among students from all classes. Membership to the AAFP, IAFP, and FMIG is open to all medical students and is free of charge due to generous financial support from the IAFP's Adopt-A-Student program. Through the Adopt-A-Student program, family physicians across the state of Iowa are given an opportunity to provide support to FMIG students by monetary donations specifically designated for student membership dues to the AAFP and IAFP. Our group receives a list of donors, and individual thank-you notes are written to each physician who donates to support the Carver College of Medicine FMIG members.

We have specifically designated one executive officer to be our membership chair. This person is responsible for all recruitment efforts to the club, including emails, fliers, and posters, and they are also in charge of maintaining a database of current members. The membership chair coordinates the recruitment efforts at the Student Activities Fair booth during M1 orientation each fall, and receives the majority of the student application forms at that time. Additionally, he/she continues to make application forms available at meetings and events throughout the year in order to continually recruit new members. The membership chair is responsible for sending all application forms to the executive director of the IAFP, who attaches the membership fees collected in the Adopt-A-Student program and then sends each completed application into the AAFP.

Incoming M1s are introduced to FMIG by fliers in their student mailboxes when they arrive on campus. During the M1 orientation week, our FMIG has a booth at the college's activities fair where interested students are enrolled simultaneously to the FMIG, IAFP, and AAFP, and additionally, where students may purchase lab coats for Gross Anatomy Lab at a cheaper rate than the bookstore. At the booth, enthusiastic M2s-M4s are present to promote FMIG by describing the benefits of membership, which include: Free participation in procedure clinics, evening dinners through our spring/fall speaker series, community service activities, and a trip to the National Conference of Family Medicine Residents and Students. It is at this time that we also promote the journal, *The American Family Physician*, another free perk obtained by membership to our club. FMIG members find this journal particularly helpful with strengthening daily classroom learning and writing case-based learning issue reports. Students are also able to fill out and submit applications to join the AAFP and IAFP while at the booth, which reinforces the efficiency and ease of becoming a member. Throughout the year, membership increases as students desire to join our group after noticing advertisements for our free monthly procedure clinics. Extremely popular with students, the procedure clinics are open to all students, but priority is given to FMIG members when space is limited. Therefore, when email reminders are sent to the student body to advertise these procedure clinics, many students from all class levels decide to enroll at this later date through our membership chairperson. During the 2008-2009 academic year, we recruited 47 new members, for a total of approximately 270 active M1-M4 students (nearly 50% of the student body).

As email is the main form of communication for many students, we have created an email listserv so students can receive timely notices about meetings, programs, and other activity opportunities. Posters and fliers are still posted in the medical school to advertise all major FMIG events, but the listserv is especially useful for communicating with M3 and M4 students who are not regularly in the medical school building or who may be on away rotations. Our technology liaison helps keep our website updated with a list of upcoming events, photographs, contact information, and other helpful links. Keeping the website updated is difficult as it must be done through the Office of Student Affairs and Curriculum. However, we find it to be a valuable tool for students as well as for family physicians across the state who may be interested in following our group's activities. Recently, we have expanded our electronic communication this year by creating a webpage on the popular Facebook website and have also purchased a new webpage which will allow faster updates and better imaging. We anticipate these media to be beneficial as they will not only allow users to view the names of

other students who might share their common interest in family medicine, but also expedite the delivery of vital club information with fellow group members.

In order to foster student interest in family medicine and encourage active participation in FMIG, we offer activities specifically designed for particular classes. Our M1 and M2 programming continues to be extremely active and successful. This begins with the M1 mentoring program which is now in its fourth year. Coordinated by our M1 representative, seven M1 students were paired with family medicine faculty mentors from the University of Iowa, and each student shadowed their mentor several times during the fall and spring semesters. This experience provides more continuity than one-day shadowing opportunities offered by the traditional medical curriculum, and it has also been a wonderful way for students to get exposure to family medicine during their first months of medical school.

Another program intended to increase M1 and M2 participation in family medicine is Ward Walks. This program, designed to introduce students to inpatient care, is in its third year of operation and is coordinated by our M2 representative. Each week during the fall semester, 1-4 students spend one hour on the family medicine inpatient service with the senior family medicine resident on duty. These students are given an opportunity to see and discuss real patient cases with the resident, including physical exam findings, imaging studies, laboratory results, and any other relevant psychosocial or multidisciplinary issue. In addition to the clinical exposure this program offers, students participating in Ward Walks connect with residents and thus take advantage of an underutilized mentoring source. Students evaluated this experience highly, and one student commented: "I really enjoyed talking with [the resident] and hearing about the structure of a family medicine residency program and I enjoyed seeing the facilities and hearing about the role of a family physician in an inpatient ward setting." Residents also benefit from the experience of interacting with students and this offers the opportunity for them to improve their teaching skills. Based on student and resident evaluations of the Ward Walks program, we believe this has been a worthwhile addition to our programming as a way to introduce students both to the wards and to the inpatient side of family medicine versus the outpatient setting commonly experienced during M1 mentoring.

Our organization has the distinction of being one of the few clubs on campus with significant involvement of upperclassmen both on our leadership team (75% of our officers this year were M3s or M4s), as well as at other club events and meetings. One of the most important changes resulting from leadership discussions at our planning meeting last year was improving programming specifically for M3 and M4 students. To keep M3 and M4 students interested and involved in FMIG, we hold the majority of our leadership meetings in the evenings, so that attendance is easier for students on rotations. This has greatly increased attendance at leadership meetings. Additionally during the spring, in association with the Department of Family Medicine, a post-match day dinner is traditionally hosted for M4s who have currently matched in Family Practice. This event recognizes the efforts made by graduating students, many of whom have been involved in our club since their first year of medical school. Another program intended for upperclassmen is the M4 panel held each spring. The M4s who recently matched in family medicine are invited to sit on a panel to answer questions from underclassmen, generally M3s interested in family medicine, about residency applications, interviews, how to choose a residency program, and rotation electives. Information is also provided to students about internet resources, including the AAFP's "Strolling Through the Match" publication.

Last year we also initiated a new program unique from any other that our group offers. Entitled "Professional Reflections," this series of Sunday evening gatherings is meant to bring upperclassmen together for a variety of activities over the common bond of family medicine. This event occurs in a small, more intimate setting in which students can meet and discuss topics in family medicine of interest or concern with their peers. This program, which is detailed later, has also helped with student interest and retention.

Our FMIG also values events and activities which foster interaction between all classes, as well as between students, residents, and faculty. Each year with funding from the IAFFP, we are able to hold a picnic and ice cream social in the fall to kick off the school year and encourage early exposure of family medicine to M1s. This event, held on a green space adjacent to the medical school, attracts approximately 60-70 students, residents, faculty, and their families to meet, mingle, and learn about FMIG activities. The event serves as a great opportunity for students to meet other students interested in family medicine, and for students and faculty to get to know one another.

Each year our FMIG also holds two popular residency information events. In the fall we host a chili supper at which residents from each of the eight University of Iowa-affiliated family medicine residency programs informally present information about the programs in which they train. The residents sit with students throughout the dinner, casually answering questions about family medicine, residency in general, and what to look for in a residency program. A representative from each program also sits on a panel to answer questions posed by the students in attendance. All of the college's M1s through M4s are invited to attend this free event. The Iowa Family Medicine Residency Information Meeting (informally called the "Eat & Greet") in the spring is another recruitment event we co-sponsor for the Iowa family medicine residency programs. Held at a local hotel and conference center, each program has a booth with up to four representatives (residents, faculty, and recently matched M4s) who promote family medicine and their respective program. Both M2 and M3 students are invited to this event to have the opportunity to ask each residency program different questions as a proactive way of learning what each program has to offer. In the process, we also hope that students are able to identify what qualities they may be searching for in a residency program. Students highly appreciate this opportunity to discuss life as a family medicine resident, opportunities for community-based M3 and M4 rotations, and career opportunities with faculty and residents while dining on a buffet of hors d'oeuvres and gourmet desserts.

Last summer our FMIG sent 13 students to the National Conference for Family Medicine Residents and Medical Students in Kansas City, Missouri. At last year's meeting we had one student serve on a reference committee, while others presented for the Student National Congress. We begin to promote the National Conference in the fall during our membership drives, and continue announcements throughout the year at our procedure clinics and other largely attended events. Specific information regarding scholarship applications and conference registration is distributed via email, website, and meetings in the late spring, and a student officer coordinates sending email reminders and collecting registration forms. Our FMIG faculty advisor works with clerkship directors so students can be excused from their clinical duties to attend. We are quite fortunate to have funding available from the IAFP and our FMIG treasury to support students who attend this conference. During the past year, the IAFP paid for conference registration fees for students and spouses, paid for half of the hotel accommodations per student, and also reimbursed for gas mileage and other travel expenses.

It is very evident through our diverse programming and specific event accommodations to specific interests and education levels why we are able to enroll and retain so many active FMIG members. Our programs are constantly assessed and revised to provide the most informative, extensive exposure possible to the field of family medicine.

Role of Faculty Advisor

Our FMIG also has a faculty advisor who attends officer meetings and assists the executive officers in maintaining continuity, establishing contacts, and generating new ideas. Our advisor, Jill Endres, is a University of Iowa Department of Family Medicine faculty member who was approved by the Board of Directors of the IAFP. She is very accessible to the club officers and other FMIG members throughout the year. We are also fortunate enough to have the assistance of a predoctoral support staff person in the University of Iowa Family Medicine Department who provides invaluable assistance and guidance to the FMIG officers and students interested in family medicine.

Financial support for events and programming

Funding for our FMIG comes from a variety of sources. Traditionally our club has relied heavily on the IAFP for the majority of our funding; however, this past year we were fortunate enough to receive a large, outside donation which came from a family physician from within the state of Iowa. In addition, the IAFP continues to assist students by sponsoring the Adopt-A-Student program in which family physicians who are members of the IAFP are invited to sponsor student memberships with financial donations. The Adopt-A-Student fund covers AAFP and IAFP membership for four years, and also helps sponsor registration and hotel room expenses for students attending National Conference. Funding for procedure nights and the Chili Supper in the fall is provided by the Iowa Network of Family Medicine Residency Programs.

3. Community Service: What does your FMIG do for the community? [If you have several community outreach activities, list all of them.] Also, if your FMIG collaborates with your school's SNMA chapter, describe your activities here.

The University of Iowa FMIG realizes that in becoming family physicians, we are not limited to our respective offices and hospitals, but are called to be role models in the communities we serve. With the stress of medical school, finding time to volunteer in our community can be a challenge. Over the last year, our chapter has continued to provide opportunities for our members to apply the skills we are learning in both the classroom and hospitals to serve and educate others.

For the fifth year in a row, our chapter has staffed the Tar Wars program. This program, which was initially developed by a family medicine resident in Denver, Colorado, attempts to educate elementary students with the tools to make healthy decisions about smoking and stress prevention. This year the circumference of our program outreach area grew as we attempted to reach schools in smaller communities outside of Iowa City. These smaller schools have traditionally received less exposure to these programs in the past. Our Community Outreach Chair and a local family physician worked with elementary school teachers to coordinate programs for 4th, 5th, and 6th graders at 12 schools in Johnson County. This year, in January, February, and March, 22 medical students presented this AAFP-endorsed anti-tobacco program. The program highlights the immediate, short-term effects of tobacco, which has proven to be more effective than discussing long-term smoking effects in allowing young minds to see the negative aspects of smoking. Students discuss effects such as bad breath, decreased endurance, and having less money available to purchase other things. A new addition to this year's program was Lou Wheez, a lung model that allowed students to see the long-term internal effects of smoking on the body.

The commitment our chapter has made to Tar Wars is highly valued by our FMIG members. Many of our presenters have continued to help with this program through their entire medical education. It is our hope that through this program we are improving health for generations to come.

A new event added to our volunteer repertoire last year was the Women in Science Event held at the University of Iowa Hospitals and Clinics. Area Girl Scouts were invited to this interdepartmental event and encouraged to consider science-related careers, especially those in healthcare. The girls who participated were able to visit different departments and learn about various specialties. Our club members provided information about why and how they decided to become medical students, why they chose the specialty of family practice, and how to perform basic physical exam skills. It was a great chance to inspire both the Girl Scouts and refresh our love for family medicine!

Additionally, we were able to achieve our goal this year of expanding our program at the Iowa Children's Museum. This venture is currently in its fifth year, and with the help of the Dermatology and Pediatric Interest Groups, it has provided 2 sessions each semester involving approximately 20 volunteers per session. These Saturday morning events were fun for all who attended, and once again, included many repeat volunteers. The program is designed for pre-school and early elementary aged children and aims to reduce anxiety about doctor visits and educate children and their parents about health issues that affect kids. It emphasizes preventative health, teaches children about the major organ systems that are examined at a typical doctor's visit, and instructs children how to keep their bodies healthy. Medical students use trivia, displays, anatomic models, and interactive props to inform the kids about the physical exam and why it's important. Examples of activities include allowing children to use stethoscopes to listen to hearts and lungs, a "body puzzle," the anatomy of the HEENT exam, and stations that emphasize physical activity and nutrition. New this year was a station about muscles and bones, which included "real" human bones, and a skin station which emphasized the importance of skin care and protection using UV-sensitive beads. This program has continued to grow and improve with each session and we are constantly making revisions to improve its content.

4. Professional Development: What activities does your FMIG do to promote professional and/or leadership development among its members? If you describe a program that has been in existence for a number of years, please explain its *current significance*.

The varied activities of our FMIG provide students with numerous opportunities throughout the year to participate in leadership positions and professional development. At the most basic level, our leadership infrastructure provides 17 positions students can fill; any member may volunteer to run for office or students may nominate other qualified members. Obviously, partaking in a leadership role with our program is a great way to foster responsibility, accountability, and organizational skills.

As mentioned previously, in order to foster student interest in family medicine and to encourage active participation in FMIG at all educational levels, we offer activities specifically designed for particular classes. Our M1 and M2 programming continues to be extremely active and successful. Specifically, the M1 mentoring program is a great way to promote professionalism and create a sense of continuity with a highly esteemed Family Medicine faculty member. Many of these student-physician relationships blossom into beloved comrades and life-long friendships. Another program intended to not only promote the specialty of family practice but to also develop a sense of responsibility and conscientiousness among underclassmen with little clinical experience is the Ward Walks program. As described above, this program is designed to increase M1 and M2 inpatient experiences in family medicine. This fall program pairs one to four students with a senior family medicine resident for one hour on the wards to see and discuss interesting cases, physical exam findings, and laboratory studies. In addition to the clinical exposure this program offers, students participating in Ward Walks connect with residents and learn more about clinical medicine, in addition to empathy, humility, and respect. This program is highly esteemed by both students and residents alike for the relationships and lessons it provides.

One unique program which was begun last year and has continued to undergo extensive development this year is "Professional Reflections." Advertised as a "journal/book/case-based/medical ethics/practice management/lifestyle club," Professional Reflections is a gathering meant to bring upperclassmen together for a variety of activities over the common bond of family medicine. This event occurs in a small, more intimate setting in which students can meet and discuss topics in family medicine of interest or concern with their peers. Family Medicine faculty volunteer to open their homes to the group for 2 hours on a Sunday evening, and food catered from local restaurants allows students to gather over a meal before discussion of the evening's topic commences. Attendance is limited to 8-10 students, with preference given first to M3s and M4s pursuing family medicine, then to FMIG leadership team members. One or two residents and faculty members are also invited to each Professional Reflections, which helps provide different and perhaps more experienced insight into the discussion. Topics during our second year have ranged from a discussion about the Patient-Centered Medical Home Model to Anne Fadiman's book, "The Spirit Catches You and You Fall Down" to a conversation with a practicing family physician about the interesting and unique challenges of a rural family medicine practice. This program has provided both an academic and social atmosphere for interaction between students and faculty, and plans are already being made for sessions for the upcoming year. Our final Professional Reflections of the year will highlight M4s who matched in Family Medicine with discussion centered around the transition from medical school to residency.

Our FMIG highly values events and activities which foster interaction between all classes, as well as between students, residents, and faculty. One new idea for next year is to hold a lunchtime speaker series showcasing specific areas within the realm of family medicine. These monthly talks will feature faculty with professional expertise in areas such as OB, geriatrics, rural medicine, emergency medicine, sports medicine, and psychiatry. These lunchtime talks will allow M1-M4s to explore and ask questions about the different areas of family medicine and how to tailor a practice according to personal and professional interests. These talks will hopefully provide continuity about the unique and extensive aspects of family medicine, while still allowing students to explore their individual interests. We hope these lectures will also serve as a

great opportunity for
and students with professional interests similar to their own.

students to meet faculty members

One of our most popular programs every year is the monthly procedure clinics hosted by each of the eight family medicine residency programs within the state of Iowa. The procedure clinics introduce students to the various medical procedures performed by family physicians in clinical practice. Suturing skills, sports medicine, casting and splinting, phlebotomy, colposcopy and LEEP, obstetrical perineal repair, and joint injections have been offered each year, and new clinics this year included airway management and various OB topics (artificial ROM, vacuum/forceps deliveries, dilation/effacement/station, and ultrasound.) Students learn and practice these skills under the direction of practicing family physicians and residents from around the state. A different residency program co-hosts each of the monthly workshops and supplies that evening's dinner, the necessary equipment, and a team of enthusiastic and outgoing residents and faculty to work with and instruct the students. Registration for these clinics is open to all students within the college of medicine and spots are quickly filled by M1s and M2s eager to gain clinical experience and M3s and M4s looking to perfect their techniques in a supportive environment. One student said of the airway management clinic, "I thought the clinic was great—very informative! Having no knowledge about the procedure coming in, I was very appreciative of them breaking down the steps and allowing us to try it on multiple models. It was great to have sufficient time to practice with the mannequins and equipment. Thanks for the opportunity!" The feedback from these clinics is used to make improvements and has led to new topics being integrated each year.

Another event our club co-sponsors are the fall and spring residency information events, the "Chili Supper" and the "Eat & Greet." Expounding on what was previously mentioned, both of these events help our students to learn about the challenges and benefits of life as a family practitioner. Although informative in nature, both events consistently depict the necessary qualities a doctor must possess to be successful in practice, as evidenced by each resident and/or faculty member when describing thriving residents and colleagues in their programs. Qualities such as eagerness to learn, desire to do what is best for the patient, humility, patience, and a thirst for knowledge are themes constantly expressed to our students during these events. Professionalism and leadership are two characteristics members of our FMIG attain and hone by their affiliation with our club.

5. Exposure to Family Medicine and Family Physicians: Tell us what your FMIG does to expose its members to family physicians – in your medical school or community – and how the scope of family medicine is demonstrated.

Two of the goals our FMIG specifically strives to achieve are to expand medical students' understanding of and interest in family medicine and to build networks and relationships to connect medical students with practicing family physicians. To facilitate these ideals, great efforts have been made by our club to expose and introduce our members and fellow peers to family physicians and the scope of family medicine. As indicated above, our group participates in numerous events, each of which provides a glimpse of what the practice of family medicine entails. For example, our monthly procedure clinics, Ward Walks, informative lunch time talks, and specifically, M1 mentoring are programs deliberately devised to expose underclassmen to the field and practicing family physicians. Programs such as the M4 panel discussions and Professional Reflections are designed to aide upperclassmen develop meaningful relationships with family medicine faculty, as well as assist with deciding what types/aspects of medicine they hope to practice in the future.

Already planned for next year is a series of lunch time lectures outlining the specific areas of practice within the field of family medicine. These monthly talks will feature faculty with professional expertise in such areas as OB, geriatrics, rural medicine, emergency medicine, sports medicine, and psychiatry. It is our hope that these talks will not only allow for greater exposure to the field of family medicine, but will also facilitate knowledge and interest about the unique and extensive opportunities family medicine affords. We also hope these lectures will

serve as a great opportunity for students to meet faculty members and students with professional interests similar to their own.

6. Promoting the Value of Primary Care: Describe what your FMIG does to tell members about the role of family medicine in enhancing primary care. This could include talking about the patient-centered medical home and the primary care workforce or coordinating activities with other primary care interest groups (internal medicine, pediatrics, OB/GYN or emergency medicine).

Another goal our FMIG seeks to accomplish is to show not only our members, but all medical students within our school, the important role that family medicine plays in enhancing primary care. We do this by portraying the broad spectrum that family medicine encompasses and the depth of care that is given by family physicians. This enthusiasm and appreciation for family medicine is fostered through an array of activities that we sponsor and support throughout the year.

Many lunch time talks are held during the year on various aspects of family medicine and why it is important in our healthcare system. This is best conveyed with Primary Care Week, a week-long informative event in which FMIG works with AMSA, the Pediatric Interest Group, the Leopold Society, and Club Med to organize a week of activities to particularly showcase the diversity and the importance of primary care. Specifically, on the family medicine day of Primary Care Week in October 2008, FMIG hosted a lunch meeting with Dr. Kate Thoma, a fellow in family medicine at the University of Iowa, to discuss various fellowship programs. Dr. Thoma spoke to M1-M4 students about the broad spectrum of family medicine and how the various fellowships in obstetrics, sports medicine, and geriatrics – just to name a few – exemplify the diversity of family medicine and the importance of this field in our healthcare system. This was a great way to show medical students of all educational levels that the opportunities are limitless within the scope of family practice.

Specifically, during the fall of this past year, one of our Professional Reflections nights was spent discussing the Patient-Centered Medical Home Model. This discussion was led by Dr. Steven Wolfe, a faculty member at the University of Iowa Hospitals and Clinics at his home one Sunday night during the fall semester. This controversial idea was addressed by all the attending M3s, M4s, and FMIG leadership executives, and novel ideas and great remarks were made about the importance of our field despite hostile incentives and a failing national healthcare plan.

In every event our FMIG sponsors, from talking to children about tobacco prevention with the Tar Wars program to OB procedure clinics, the importance of family practice within the realm of primary care is clearly highlighted, most of all by our enthusiasm to make a difference.

7. Measures of Success: What programming elements has your FMIG considered successful? How do you track measurable improvements? This could include increasing membership, showing improvements in Family Medicine match rates among active FMIG members, or receiving recognition from your medical school/state chapter/AAFP.

The programming elements we consider most successful are our monthly procedure clinics, our Professional Reflections evenings, our fall and spring dinner speaker series, and the Tar Wars program. These evaluations are based upon participation numbers, longevity, and general positive student body comments. To be honest, we consider all our programming efforts successful because we constantly seek to improve and enhance our events to better facilitate the needs, expectations, and ideals of our FMIG members and fellow peers. We accomplish this in many ways, from sending emails to event participants asking for any comments or ideas for improvements to tracking club enrollment and event participation numbers to leadership team brainstorming discussions aimed at planning effective changes to provide better programming outcomes. These inquiries have fostered many of our current adaptations, including providing more hands-on procedural experience at clinics (ultrasound and intubation), providing a better overall depiction of the scope of family medicine to underclassmen (lunch time talks planned for



next year), and mentoring to increase participation. We have consistently been one of the largest medical student groups on campus, with yearly membership numbers typically representing half of the student body population. Each year we continue to graduate many M4 students who match into family medicine residency programs around the country. We are also proud of the seven consecutive Program of Excellence Awards we have received, which we believe are an excellent measure of the successes we have had as an organization. Last year we were nominated as one of the best student leadership groups on campus, another honor we cherish.

For us, the greatest measures of accomplishment are the smiles we receive when volunteering at the Children's Museum, the appreciation that is given from a first year medical student who excitedly sees their first "real" patient on the wards, the utter joy seen on the face of a fellow M4 member who just matched in family practice. These incalculable, indescribable, inspiring moments are what we deem as true successes.

8. Special Consideration for First-Time Applicants or Those Wanting to Show Significant Enhancement in Programming, Membership or Operation: If your FMIG has never submitted an application for this award, or if your FMIG has made significant strides in a particular area, tell us why you think you should be considered for this award. [If this does not apply to you, you do not need to fill out this section.]

Thank you for your submission!