

## Frequently Asked Questions

- 1) **Will I be able to learn to perform C-Sections? If so, where will this training occur? What other types of advanced or even high-risk obstetrical experience might I be able to gain? Who on faculty is able to provide this teaching to residents?**

C-section training is available to highly motivated residents who wish for this to be part of their individualized learning plan. Many of the opportunities for C-section training exist through our program's rotation options outside of Tucson, such as Nogales, Yuma, and Maricopa in Phoenix. One of our residency's core family medicine faculty is highly experienced in performing C-sections and will offer workshops and individualized mentoring for interested residents. C-section training will not be a requirement of our curriculum.

- 2) **How many months of inpatient training will I receive? Which procedures do residents get to do during their inpatient experience?**

Residents will have 8 months of adult inpatient training and 2 months of pediatric inpatient training. Our strong inpatient procedural emphasis includes endotracheal intubations, ventilator management, central lines, arterial lines, paracentesis, lumbar puncture, and thoracentesis. Our facility has an open ICU and our family medicine faculty serve as primary attendings in the ICU.

- 3) **What about casting/splinting experience, as well as suturing and other outpatient office-based procedures?**

Residents will gain experience in procedures including but not limited to suturing, incision and drainage, skin biopsies procedures, toenail removal, endometrial biopsy, colposcopy, IUD placement/removal, casting & splinting, as well as training in reduction of fractures and dislocations. These experiences will occur through didactic workshops, and various rotations including orthopedics, sports medicine, emergency medicine, and urgent care, in addition to procedures performed in the family medicine center itself.

- 4) **Where do the rural rotations occur? Am I assigned to go to a site or will I have some choice in where I am able to go?**

Our residents will spend 1-3 months of each year of residency in completely unique settings in rural areas of Arizona. The University of Arizona has a tremendous network for rural training. The number of opportunities for residents at rural sites exceeds demand such that residents will have a number of options for where to schedule their rural rotations, ranging from Indian Health Service sites to those near the US-Mexican border, to more traditional rural areas. Residents will have the option of attempting to do most of their rotations at the same site or trying a variety of sites. Some of the rural rotations will need to occur close enough to Tucson to allow residents to return once weekly for continuity clinic, especially if the resident is planning to do other elective months outside of Tucson (in order to meet the national requirement that all residents participate in the residency's main continuity clinic for at least 40 weeks of each training year). Please refer to our website under "rural opportunities" for a list of some of our current opportunities, understanding that as the new residency develops, further opportunities at sites in Arizona will be developed.

**5) What opportunities will I have to learn Spanish?**

Continuity clinic and inpatients often are Spanish-speaking only. Additional opportunities for extensive medical Spanish exposure will exist in the rural sites close to the US-Mexican border, such as in Yuma and Nogales. We are also developing a didactic curriculum for medical Spanish. Residency will be more enjoyable if you have a desire to learn/practice Spanish. Residents who speak Spanish or are interested in learning this language will find plentiful opportunities to practice their skills, though interpreters by phone or in person are widely available to help whenever needed.

**6) What if I want to go into private practice? Will I learn the practice management skills needed for this?**

All family medicine residencies in the U.S. are required to provide practice management training to residents. For our program, this will occur both longitudinally during inpatient and outpatient clinical training, as well as during didactic sessions offered as part of the didactic “teaching day” sessions. You will also have quarterly productivity/financial as part of your meetings with your faculty advisor. Residents will furthermore participate in practice management didactic blocks in both the 2<sup>nd</sup> and 3<sup>rd</sup> year of residency, as well as attend state-wide practice management conferences for all Arizona family medicine residents, hosted by the Arizona Academy of Family Physicians. Many of our rural preceptors work in a private practice setting, providing additional experience and exposure and training in practice management.

**7) I am really interested in working internationally when I complete residency. How might this program help me reach that goal?**

A key focus of our program is to train residents to practice in under-resourced settings, be they here or internationally. Although residents will gain exposure to practicing in underserved areas of Arizona, it is our goal to train residents in such a manner that they be equipped to practice wherever they choose upon completion of residency. The University of Arizona and our Department of Family & Community Medicine are particularly strong in international medicine, with many of our faculty having extensive experience in this arena. Furthermore, the University of Arizona is host to an annual Global Health course that can be incorporated into your individualized residency training.

**8) I’m not sure I want to work in a rural area. I’m also interested in inner city populations or perhaps building a practice in a place like Tucson. Would this program be right for me?**

Yes. Our training is designed to help residents who desire to work with vulnerable populations of all cultures and backgrounds, in under-resourced settings, be these rural, urban or suburban. Our faculty are a diverse group with interests and experience ranging from HIV work in inner cities, to helping adults with developmental disabilities receive healthcare, to providing obstetrical care for refugee/immigrant populations. We have faculty who have worked for the Indian Health Service, who have spent time providing healthcare internationally, and who have had their own private practice. We also have several faculty with significant public health

experience. It is a passion to provide medical care to the underserved, combined with a diverse set of clinical experiences and skill sets that make our faculty ideal for training residents for any population or practice setting.

9) **What fellowships might I complete after training with your program?**

Faculty development, sports medicine, and integrative medicine fellowships are offered through our department. A faculty development fellowship is also offered. A geriatrics fellowship is offered through a collaboration with internal medicine. A Global Health/MPH fellowship is being developed. We do not currently offer an obstetrical fellowship through our department, but would provide assistance to interested residents in arranging such training elsewhere upon completion of residency.

10) **What is your call schedule?**

A “night float” system is in place for adult inpatient rotation months. In-house call for off-service rotations will be no more frequent than an average of every fourth night. Home-call will sometimes be used, especially during the rural rotations. A home call system will also be used for continuity obstetrical deliveries.