Erik Wallace, MD, FACP
Associate Dean for Colorado Springs Branch
Chad Stickrath, MD, FACP
Assistant Dean for Education, CSB
Regional Medical Campuses

- In 2015, 59/158 schools operate 115 RMC’s
- RMC’s formed to increase class size and to serve needs of the community
- RMC’s provide opportunities for educational innovation and community engagement
Colorado Springs Branch

- The University of Colorado School of Medicine expanded from 160 to **184** students starting with the **Class of 2018**.
- The additional **24 students** will complete their 3\(^{rd}\) year of medical school at the Colorado Springs Branch (**CSB**). Students can choose to complete 4\(^{th}\) year electives in CS.
Colorado Springs Branch Student Cohort
Class of 2019

Vivianne Andersen  Nicholas Anderson  Aya Angstadt  Rima Baliga  Heather Caulkins  Olivia Charlier

Alex Clinkenbeard  Carl Dernell  Benjamin Fitzgerald  Jacob Fox  Fred Gonzales  Robin Harland

Samantha Humann  Colton Ladbury  Kevin Lee  Jacob Mago  Derek Marlor  Katie Raskob

Tyler Reinking  David Sabio  Ellen Snyder  Kristen Stahl  Kelly Stewart  Reade Tillman
Penrose-St. Francis Health Services

Memorial Hospital
UNIVERSITY OF COLORADO HEALTH

U.S. ARMY MEDICAL DEPARTMENT
Evans Army Community Hospital

United States Air Force Academy

10TH MDG
10th MEDICAL GROUP

Peak Vista
Community Health Centers

HEALTHSOUTH
Rehabilitation Hospital of Colorado Springs

CSHP
COLORADO SPRINGS HEALTH PARTNERS, P.C.

Mountain View
MEDICAL GROUP, P.C.

Kaiser Permanente

El Paso County Medical Society

...and many more!
Vision for Colorado Springs

• To develop 21st century physician leaders who will deliver high-quality, cost-conscious, and patient-centered care to the community

• To transform and integrate health education and health care delivery systems to improve the health of the community
### Table 1: Regions with the Worst (Highest) Ratios of Patients to Full-Time Primary Care Physicians

<table>
<thead>
<tr>
<th>Rank</th>
<th>HSR</th>
<th>Counties</th>
<th>Additional FTEs Needed to Reach 1,900:1 Benchmark</th>
<th>Percentage Increase to Reach Benchmark</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>HSR 5</td>
<td>Cheyenne, Elbert, Kit Carson, Lincoln</td>
<td>13.8</td>
<td>197%</td>
</tr>
<tr>
<td>2</td>
<td>HSR 17</td>
<td>Clear Creek, Gilpin, Park, Teller</td>
<td>12.8</td>
<td>79%</td>
</tr>
<tr>
<td>3</td>
<td>HSR 4</td>
<td>El Paso</td>
<td>120.1</td>
<td>54%</td>
</tr>
<tr>
<td>4</td>
<td>HSR 13</td>
<td>Chaffee, Custer, Fremont, Lake</td>
<td>14.8</td>
<td>54%</td>
</tr>
<tr>
<td>5</td>
<td>HSR 18</td>
<td>Weld</td>
<td>34.4</td>
<td>32%</td>
</tr>
<tr>
<td>6</td>
<td>HSR 12</td>
<td>Eagle, Garfield, Grand, Pitkin, Summit</td>
<td>21.5</td>
<td>30%</td>
</tr>
<tr>
<td>7</td>
<td>HSR 6</td>
<td>Baca, Bent, Crowley, Huerfano, Kiowa, Las Animas, Otero, Prowers</td>
<td>7.5</td>
<td>25%</td>
</tr>
<tr>
<td>8</td>
<td>HSR 3</td>
<td>Douglas</td>
<td>29.0</td>
<td>22%</td>
</tr>
<tr>
<td>9</td>
<td>HSR 1</td>
<td>Logan, Morgan, Phillips, Sedgwick, Washington, Yuma</td>
<td>4.2</td>
<td>12%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td><strong>258</strong></td>
<td></td>
</tr>
</tbody>
</table>
TRADITION

Just because you’ve always done it that way doesn’t mean it’s not incredibly stupid.
Longitudinal Integrated Clerkships

- Have continuous learning relationships with clinicians
- Participate in the comprehensive care of patients over time
- Meet the majority of core clinical competencies across multiple disciplines simultaneously

Core clinical education

Consensus LIC definition
CLIC 2007
Why LIC for the CSB?

- Longitudinal relationships (patients, preceptors, peers)
- Similar/improved knowledge/skills, feedback
- Improves student empathy toward patients
- More practical and sustainable for community-based preceptors
- Can integrate students into systems
  - Transactional vs. Transformational relationship
  - Value-added Medical Education
- Community buy-in
- Denver Health LIC
- Growing interest in LIC’s in North America
**Immersions**

- **Beginning of Year**
  - Medicine – 2 wks
    - CHMG, KP (Evans, CSHP?)
  - Surgery – 1 wk preceptor, 1 wk breast/anesthesia
    - Memorial, Evans (St. Francis?)
  - Labor & Delivery – 1 wk
    - Evans Army Hospital
  - Pediatric Nursery – 1 wk
    - Mountain View HM
  - Psychiatry – 1 wk
    - Pueblo State Facility?

- **During the Year**
  - Medicine – 2 one-week bursts
    - CHMG, KP (Evans, CSHP?)
  - Surgery – 1 week burst (fill gaps)
    - Memorial, Evans (St. Francis?)
# COSMIC Clinical Experiences

<table>
<thead>
<tr>
<th>Week 1</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
<th>Sunday</th>
</tr>
</thead>
<tbody>
<tr>
<td>7:00 - 8:00 AM</td>
<td>Round on Inpatients / AM Conferences, Master Clinician, or Radiology</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8:30 AM - 12:30 PM</td>
<td>Internal Medicine</td>
<td>Psychiatry</td>
<td>Pediatrics</td>
<td>Self-Directed Learning/Panel</td>
<td>Periop Surg OR</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1:30 - 5:30 PM</td>
<td>Self-Directed Learning/Panel</td>
<td>LIC Specialective</td>
<td>Family Medicine</td>
<td>Periop Surg OP</td>
<td>Education</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Other: Three acute care shifts per month: EM, Pediatric Urgent Care, and Psychiatry (evening, or weekends) Additional IP Weeks: 4 Internal Medicine, 1 Labor & Delivery, 3 Perioperative, 1 Peds Nursery, 1 Psych LIC Specialective: 2 Palliative care, EMS ride, 2-4 Acute rehab, 4 Peds specialty, 4 Surg specialty, EEG, 4 NS

<table>
<thead>
<tr>
<th>Week 2</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
<th>Sunday</th>
</tr>
</thead>
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<td>7:00 - 8:00 AM</td>
<td>Round on Inpatients / AM Conferences, Master Clinician, or Radiology</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8:30 AM - 12:30 PM</td>
<td>Internal Medicine</td>
<td>Neurology</td>
<td>Self-Directed Learning/Panel</td>
<td>Self-Directed Learning/Panel</td>
<td>OB/GYN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1:30 - 5:30 PM</td>
<td>Self-Directed Learning/Panel</td>
<td>Musculo-skeletal</td>
<td>Family Medicine</td>
<td>OB/GYN</td>
<td>Education/Panel</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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Cambridge/Harvard LIC example

- Article – students follow/present cancer patient
  - Diagnosis, testing, discussion of results, surgery, post-op care, medical/radiation treatments, therapy, phone calls
  - Average: 7 months, 12 encounters, 4 specialties
  - Presentation: What does cancer mean to this patient?
    - Course/treatment of unusual cancer, systems issues, P-P relationship and impact on care, psychosocial impact

- “Present like faculty”
- “This is my favorite day all year”
- “This has changed my practice”
Cambridge/Harvard LIC example

- Student knows the patient better than anyone else
  - “eyes and ears” for the physician
- LIC students able to do things that block students can’t
  - “The student can’t run from me”
  - Treat them like adults
- Feedback
- Mentorship
  - “I worked with (this student) for 1 year.”
“(PICOS) got me thinking more critically about the world around me….It made me dig deep and really think about the perspectives and everyday lives of those who are under-resourced…It helped me regain my faith in medical education.”

-Erica Martinez, 2nd year medical student, CUSOM
Why should you consider the CSB?

1. Small class size (24 students)
   - All CSB students in 3 PBL groups and 3 Advisory Colleges
2. Longitudinal Integrated Clerkship (LIC) model
   - Working one-on-one with attendings
3. Past/Present/Future connections to Colorado Springs/Southern Colorado
4. Community focus
5. Military/Underserved/Sports Medicine (OTC)
FAQ’s

• Will I get the same patient diversity in CS as I would in Denver?
  • Yes (CS population 431,834)

• Can I participate in one of the “Tracks” as a CSB student?
  • YES

• How/when will CSB campus selection take place?
  • May 2016 by CSB selection committee

• Can I request a change once campus assignment made?
  • Only if demonstrable personal or economic hardship

• Do I have to apply to a primary care specialty as a CSB student?
  • No

• How do I express an interest in the CSB?
  • Complete CSB essay
  • Complete campus preference form
CSB Participation Form

1. MY FIRST PREFERENCE IS THE COLORADO SPRINGS BRANCH BUT I AM WILLING TO BE ASSIGNED TO THE ANSCHUTZ MEDICAL CAMPUS

2. MY FIRST PREFERENCE IS THE ANSCHUTZ MEDICAL CAMPUS BUT I AM WILLING TO BE ASSIGNED TO THE COLORADO SPRINGS BRANCH

3. MY FIRST PREFERENCE IS THE COLORADO SPRINGS BRANCH AND I PREFER NOT TO BE ASSIGNED TO THE ANSCHUTZ MEDICAL CAMPUS.

4. MY FIRST PREFERENCE IS THE ANSCHUTZ MEDICAL CAMPUS AND I PREFER NOT TO BE ASSIGNED TO THE COLORADO SPRINGS BRANCH.
<table>
<thead>
<tr>
<th>University Village</th>
<th><a href="http://www.uvcshopping.com/shops">http://www.uvcshopping.com/shops</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Trader Joe’s</td>
<td>• Over Easy</td>
</tr>
<tr>
<td>• Costco</td>
<td>• Bonefish Grill</td>
</tr>
<tr>
<td>• Starbuck’s</td>
<td>• Chipotle</td>
</tr>
<tr>
<td>• Lowe’s</td>
<td>• Panera</td>
</tr>
<tr>
<td>• Petco</td>
<td>• Smashburger</td>
</tr>
<tr>
<td>• Kohl’s</td>
<td>• BJ’s Brewhouse</td>
</tr>
<tr>
<td></td>
<td>• Tokyo Joe’s</td>
</tr>
</tbody>
</table>