
STIPEND

Stipend support is commensurate with the previous training and experience of each fellow. Fellows receive malpractice and health insurance.

ELIGIBILITY

Candidates should have finished a family practice residency program and be board eligible or certified in family practice. A strong background in the psychosocial aspects of care is desirable.

APPLICATION PROCEDURE

For further information, write or call:

Ronald M. Epstein, M.D.
Director, Patient-centered Care Fellowship
Department of Family Medicine
Research Programs
University of Rochester
School of Medicine and Dentistry
1381 South Avenue
Rochester, NY 14620-2399
Phone: (585) 506-9484
Fax: (585) 473-2245

Email: Ronald_Epstein@urmc.rochester.edu

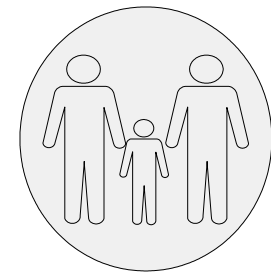
For fellowship information:

www.urmc.rochester.edu/FamMed/Research

University of Rochester
School of Medicine and Dentistry
Department of Family Medicine
Att: Steve Marcus
1381 South Avenue
Rochester, New York 14620

Patient- centered Care Fellowship

*A comprehensive training
program developing clinical,
teaching and research skills
for family physicians*



UNIVERSITY OF
ROCHESTER
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An equal opportunity/Affirmative Action employer

ABOUT THE FELLOWSHIP

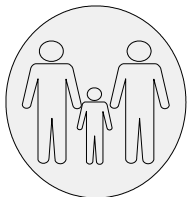
The Department of Family Medicine and the Program on Biopsychosocial Studies offer a unique 2-year fellowship devoted to research on the patient-physician relationship. Rochester, the home of the biopsychosocial model, has a long tradition, international recognition and rich resources to support this work. The curriculum is tailored to the interests and needs of each fellow.

GOALS

This fellowship links clinical training in patient-physician communication with research skills training to prepare fellows for an academic career devoted to scholarship on the patient-physician relationship.

RESEARCH

Training in qualitative and quantitative research methods is offered through the Department of Community and Preventive Medicine and may be coupled with a Masters in Public Health degree. Fellows will choose an area of interest early in the fellowship related to ongoing research in the department, such as patient-physician communication, domestic violence, HIV, somatization, depression or geriatrics. Fellows will participate in, and learn about, all aspects of the research process, including concept, design, grant-writing, data analysis and publication. Fellows will be paired with a faculty mentor with whom they will meet regularly. Since fellows are expected to complete a substantive project and acquire the research skills to do so, the fellowship will take 2 years to complete. Research-related activities will occupy at least 50% of the fellows' time. Dr. Ronald Epstein, Director of the Patient-centered Care Fellowship, will oversee fellows' research projects, and offer expertise on qualitative and quantitative multi-method research.



CLINICAL

We believe that researchers in doctor-patient relationship must also be excellent practitioners. Weekly interviewing rounds with experienced senior faculty, videotape review sessions and reflection groups will provide opportunities to develop clinical skills and pedagogic expertise in patient-physician communication. Fellows will maintain a continuity primary care practice (20% time) at the Family Medicine Center and will take night and weekend call on a rotating basis. There are opportunities for advanced clinical training with special populations in HIV, hospice, ethics consultation, geriatrics and consultation/liason psychiatry programs.

TEACHING

Fellows will participate in teaching medical students at all levels, with emphasis on seminars that provide training in patient-physician communication. They will offer seminars for residents and precept at the Family Medicine Center 1-2 sessions per week. Teaching assignments will reflect the fellow's individual interests.

COLLABORATIVE AGREEMENTS

Dr. Timothy Quill is director of the Program for Biopsychosocial Studies, and will act as mentor for interested fellows and offer advanced clinical training. Dr. Susan McDaniel in the Department of Psychiatry will offer expertise in writing, family systems and mental health in primary care. The Department of Community and Preventive Medicine offers courses in biostatistics and epidemiology for clinician-researchers that may lead to a Masters of Public Health degree.

FAMILY MEDICINE

The University of Rochester Family Medicine Program, the third such program established in the U.S., was founded in 1967. Hundreds of graduates have achieved clinical and academic success across the country. The residency training program has 30 residents, and the practice

has approximately 62,000 patient visits per year. The patient population is diverse, with all economic strata represented and a rich cultural and racial mix. The program has just moved into a new facility that is a short distance from the hospital.

THE COMMUNITY

Rochester is a metropolitan area of just under one million people. The community is prosperous and stable, with an economy based largely on high tech industries and education. Housing is relatively inexpensive, and the quality of life is high in Rochester. There are many fine museums and restaurants; theater and music opportunities are abundant. The surrounding countryside is full of recreational possibilities and is easily accessible. Rochester is a great place to raise a family.

FACULTY

Family Medicine Center:

Ronald M. Epstein, M.D., Director of the Patient-centered Care Fellowship

Professor of Family Medicine and Psychiatry
Thomas Campbell, MD, Professor of Family Medicine and Psychiatry

Kevin Fiscella, M.D., Associate Professor of Family Medicine and Community and Preventive Medicine

Cleveland Shields, Ph.D., Associate Professor of Family Medicine and Psychiatry

Susan H. McDaniel, Ph.D., Professor of Psychiatry and Family Medicine

David B. Seaburn, Ph.D., Assistant Professor of Psychiatry and Family Medicine

Strong Memorial Hospital Department of Medicine:

Timothy E. Quill, M.D., Professor of Medicine and Psychiatry