



# National Capital Consortium Pediatric Residency Program Continuity Clinic

The ACGME Pediatrics RRC requires that residents participate in a longitudinal outpatient experiences for 36 half-day sessions per year scheduled in at least 26 weeks. Each resident will be assigned a panel of patients that will increase each year – automatically and through recruitment by the resident – in order to maintain an adequate volume of patients. Resident panels will include patients of all ages with the full spectrum of normal development, as well as children with special health care needs. The parents of patients, and clinical systems within the hospital, will identify the resident as the primary care provider. A core group of faculty with expertise in ambulatory pediatrics and the principles of the medical home serve as preceptors.

Continuity Clinic takes place at Walter Reed Bethesda within the Patient Centered Medical Home for all three years, with focus on prevention, wellness, coordination of care, longitudinal management of chronic health conditions and special health care needs. If residents wish to have an additional longitudinal patient experience as a PGY3, they may do so as part of their ARM Longitudinal Curriculum.

Continuity Clinic may be schedule in the morning or afternoon and in special circumstances as a full-day. Residents are expected to participate in the Continuity Clinic Conference from 1215-1300 on the day of their clinic.

Logistics and details of Continuity Clinic are listed below:

1. Arrive to Continuity Clinic Conference on time. The conference will begin promptly at 1215. If there are any problems with arrival to clinic, please make your preceptors aware of the situation.
2. Your presence in clinic is expected until 1600. Appointments may be converted to acute appointments on the same-day, and patients may be booked into your clinic up to 5 minutes prior to the appointment. If you need to leave continuity clinic prior to 1600, it should be discussed with your preceptors prior to your departure.
3. The RRC requires that interns evaluate 3 patients on average during each half-day continuity clinic, PL-2's 4 patients, and PL-3's 5 patients. To document that our residency program is meeting this requirement, the program coordinator tracks the number of clinics and the number of patients. Residents can review these metrics at any time in their portfolio.
4. Every attempt will be made to have each resident have a set continuity day. The chief resident will determine continuity dates based on your block rotation, post-call days, holidays, and leave requests. This schedule will be forwarded to the resident for review prior to forwarding on to the clinic administrative secretaries. It is the responsibility of each resident to verify correct continuity dates with the chief resident in a timely manner. Any changes in continuity dates need to be cleared through the chief resident and Primary Care Service Chief as soon as you are aware of the change.