QUESTIONNAIRE ON RURAL/SMALL TOWN FAMILY PRACTICE

Students must answer the following questions about their rural experience to discuss and turn in during the required Debriefing Session at the end of the rotation.

Referral Service
1. How many patients did you or your preceptor refer over the month? To what specialist or for what kind of service?
2. How difficult was it to refer the patient for your preceptor? How difficult was it for the patient to receive the services?
3. What specialties and services are located within 15 miles of your preceptor’s office?
4. How does your preceptor communicate with specialists or service providers?

Hospital Support
1. Does the preceptor have hospital privileges?
2. How far is the nearest hospital from your preceptor’s office?
3. How large is the hospital and what services does it offer?

Support Care for the Elderly
1. How close is the nearest nursing home or assisted living domicile?
2. Does your preceptor see any patients who are in a nursing home or in assisted living?
3. What community resources are available for the elderly?

Obstetrical and Pediatric Care
1. Does your preceptor do OB?
2. Are there other physicians in the community doing OB?
3. How far is the nearest hospital that does deliveries?
4. What pediatric services does the hospital offer? Where are the Children’s Rehabilitation Services based?

Procedures
1. What procedures does your preceptor perform?
2. Are these procedures performed in their office or in the hospital?

Community Health & Support Services
1. Is there a community health department in the county your preceptor’s office is located in? How far is it from their office?
2. Is there a Senior Center in the county? A Senior Nutrition Program?
3. What percentage of children in the public schools participate in the breakfast or free/reduced lunch program?

4. Is there an independent home health care agency or physical therapy group in your preceptor’s community?

5. What is the most pressing health need in the community of your rural rotation? How would you address it?

**Practice Style & Economics**

1. Is your preceptor part of a group or are they solo?

2. Did your preceptor start their own practice or are they employed by a health care organization?

3. What call arrangement does your preceptor have? How far away are the other members of the group?

4. Does your preceptor utilize any form of computerization in his/her office? What functions are computerized?

5. Describe how appoints are made.

6. Describe how medical encounters are documented and billed.

**Community Activities & Lifestyle**

1. What social activities are available in the community off-hours? Describe by age-groups.

2. What recreational/outdoor activities are available around the community?

**Assessment of Ambulatory Care Patients**

1. Describe at least four patients who you have seen over the last month who were either newly diagnosed with hypertension or had their medication changed. What medication did your preceptor use and why?

2. Describe at least two patients with depression who you have seen over the last month. What criteria were used to make the diagnosis? What medication or other treatment modalities were used and why?

3. Describe at least two patients with diabetes who you have seen over the last month. What criteria were used to diagnose the condition? What medications were used to treat the diabetes? What type of follow-up was performed, such as lab work or specific physical examination?

4. Describe at least one patient with asthma. Were any tests or procedures helpful with the diagnosis and follow up? What medications were used and why?

5. Describe two people with hypercholesterolemia. What treatment was used and why?