The good ole' family medicine.... Going into it, I thought most of my days would consist of annual physicals, medication refills, and routine follow-up visits. While that was definitely part of it, I quickly realized that there is so much more that goes into primary care. Every patient had a different story, and it was interesting to see how one office visit could involve managing multiple chronic conditions while also addressing whatever new concern brought them into the clinic that day.

One of my favorite parts of this rotation was getting to manage patients with chronic diseases. I saw patients with HTN, DM, HLD, asthma, COPD, and hyper/hypothyroidism almost every day. At first, I thought these visits would become repetitive, but they never really did. Every patient was different, even if they had the same diagnosis. I remember seeing a patient with DM whose A1C continued to stay elevated despite taking multiple medications. Instead of immediately increasing the dosage of another medication, I asked about the patient's diet, work schedule, and whether they were actually able to take their medications every day. That visit reminded me that treating a chronic disease isn't always about following an algorithm. Sometimes the biggest challenge isn't knowing what medication to prescribe, it's figuring out what is preventing the patient from succeeding in the first place.

This rotation was also a lot more hands-on than I expected. I was able to perform histories and physicals, come up with my own treatment and plan and even had the opportunity to perform ear irrigations and cryotherapy. I remember a little girl who came in with a wart on her finger, and my preceptor let me perform the cryotherapy. Although it was a simple procedure, it was nice being trusted to do it under supervision. Those little opportunities added up throughout the rotation and definitely helped me become more confident in the outpatient setting.

One thing I struggled with at first was time management. Family medicine patients rarely come in with just one complaint. Someone would schedule an appointment for a BP follow-up, and somehow by the end of the visit we'd also be talking about shoulder pain, trouble sleeping, and a rash that they've had for the past month. Early on, I wanted to address everything, but I quickly learned that isn't always possible. My preceptor taught me that it's okay to prioritize the most important issues first and have patients come back to discuss the rest. It sounds simple, but that's something I think I'll carry with me moving forward.

Another thing that stood out to me was how much patient education happens in family medicine. We spent a lot of time talking about diet, exercise, smoking cessation, vaccinations, and routine screenings. Before this rotation, I don't think I knew how important those conversations really are. They're not always exciting, and patients don't always want to hear them, but they can make a huge difference over time. It made me realize that preventing disease is just as important as treating it.

Overall, this rotation reminded me that medicine isn't always fast-paced or filled with emergencies/excitement. Sometimes it's about helping patients make small changes that eventually lead to big improvements. Even though I was only there for five weeks, I still felt like I became part of the team. I gained a greater appreciation for continuity of care. Unlike some of my previous rotations where I only see a patient once, I had the opportunity to see the same patients multiple times and actually follow how their conditions changed over time. Instead of just getting a snapshot of their health, I could see the progression. It reminded me that sometimes the biggest improvements happen little by little, and being able to witness that was one of my favorite parts of the rotation.