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Primary Care Special Interest Section
Tuesday, December 2, 2008
9:00pm EST
Conference Call Minutes

Attending: Nathan Bennett, MD (nbennett@ppcp.org); Michael Ready, MD; Robert Sheeler, MD; Gary Ruoff, MD; Larry Bauer, MSW, MEd

Staff: Andrea Taylor

I. Headache Medicine Curriculum and Core Competencies

- Dr. Bennett started to review the Headache Medicine Fellowship Curriculum and Core Competencies document that was previously distributed to the section members. The goal of the section is to modify these core competencies so that they are appropriate for primary care physicians in training (PCPT).
- Implementation: The most difficult aspect of our task will be implementation of these competencies. We want to give our work to highest possibilities of being implemented. As previously discussed, it is felt that in order to have a successful implementation several different modalities will need to be developed. We will have to assess the needs of the different groups so that the appropriate modalities can be made available to them. Along these lines, Dr. David Dodick was approached and is very open to work with our section to take the internet based training for neurology residents and modify them for PCPT's.
- Each component of the Headache Medicine and Core Competencies document was reviewed and discussed in terms of how it is applicable to the PCP. The following components may not pertain to Primary Care Training: Establishing Headache Centers, Information Technology, Role of the Consultant, Conferences, and Teaching Duties. Research and Quality Improvement & Evaluation should remain in order to encourage these activities.
- Dr. Bennett would like the members of the section review the document and email him comments and suggestions (nbennett@ppcp.org). Both he and Dr. Sheeler will then put together a first draft of the document prior to our next teleconference.

II. Family Medicine Education Consortium (<http://www.fmec.net>)

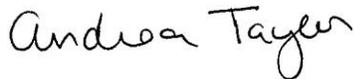
- In an effort to explore different avenues of getting the core competencies implemented, Larry Bauer was invited to discuss the Family Medicine Education Consortium.
- The Consortium was founded by a Board of Family Medicine Chairs and Residency Directors. The participants include Family Medicine educators and residents from Departments of Family Medicine at medical schools and Family Medicine Residency Programs in the northeastern United States.
- The Consortium is a bridge to encourage and support collaboration among Family Medicine Residency Programs and Departments of Family Medicine. Among its functions is to develop better ways of teaching Family Medicine. There are collaborative projects that bring together faculty and practitioners who have special interests in different areas (i.e. pain, low birth weight, etc.). There are currently about a dozen collaborative projects that, although developed regional, many of them are implemented on a national basis. The Consortium meets

once a year in October. The Consortium also developed an 8-hour “Train the Trainer” program that has been completed by 150 Family Medicine faculty.

- In 2000, a group of about 8 family physicians initiated the first collaborative project based on pain. They look at issues from both the physician and the patient perspective. Mr. Bauer feels that this would be the best place for our group to begin working with the Consortium. Dr. Bennett would like to have a webcast or conference call with the leaders of the Pain group to explore the potential of working together with our section to expand their focus to include headache medicine.
- III. Section Member Research: The group shared the details of their respective research projects. There are multiple ongoing physician and industry driven studies in which our members are participating.
- IV. Self Assessment Modules (SAM's): Dr. Sheeler explained SAM modules and how they are used. Family Physicians are required to complete a certain number of SAM's every 7 – 10 years to obtain board recertification. There are currently 10 modules available. Headache would be an ideal topic for a SAM. Dr. Sheeler led the team that completed the heart failure SAM and is familiar with the process. He has already approached the American Board of Family Medicine (ABFM) about the possibility of developing a Headache SAM and a letter has been drafted to officially present the potential project.

The call was adjourned at 10:08pm EST.

Respectfully submitted by,



Andrea Taylor



Nathan L. Bennett, MD