# Subject Index to Volume 29, 2016

Academic medical centers, patient portals and blood pressure control, 29(4):452-459

#### Access to health care

association with lower obesity rates, 29(2):182-190

hearing loss health care for older adults, 29(3):394-403

school-based health centers, 29(3): 339-347

underuse of primary care in China, 29(2):240-247

#### Accountable care organizations, telehealth

in primary care, 29(4):432-433 as useful tool, 29(4):430-431

Acne, treatment, in pregnancy, 29(2): 254-262

Admission data, prediction of hospital readmission risk, 29(1):50-59

Adolescent health, school-based health centers, 29(3):339-347

## Adult survivors of adverse events, screening for adverse childhood experiences, 29(3):303-307

Aging, reducing functional decline in frail elderly, 29(2):209-217

Albuminuria, clinical decision support for chronic kidney disease, 29(5): 604 - 612

Alcohol-related disorders, self-report of alcohol treatment referrals, 29(6):682-687

Alcoholism, pretreatment use and drinking goal in alcohol treatment, 29(1):37-49

# Algorithms

communicating delays in diagnostic evaluation, 29(4):469-473

triage amalgamated dermoscopic algorithm, 29(6):694-701

# Ambulatory care facilities

communicating delays in diagnostic evaluation, 29(4):469-473

electronic portal use among vulnerable patients, 29(5):592-603 kiosk technology for blood pressure,

29(5):620-629

problem drug-related behavior, 29(6): 718 - 726

## American Board of Family Medicine (ABFM), election of new officers and board members, 29(5): 637-638

# Analgesics

PCMH recognition and chronic pain management, 29(4):474-481 problem drug-related behavior, 29(6):

718 - 726Analysis of variance, academic detailing intervention for cancer

screening, 29(5):533-542 Anemia, multiple myeloma and diagnostic delay, 29(6):702-709

Angiotensin-converting enzyme inhibitors, clinical decision support for chronic kidney disease, 29(5):604-612

# Angiotensin receptor antagonists,

clinical decision support for chronic kidney disease, 29(5): 604 - 612

#### Antibacterial agents

antibiotic prophylaxis and total joint replacement, 29(4):500-507 levofloxacin in males with a UTI,

29(6):654-662

Area under curve, almond "appetizer" effect on GTT results, 29(6): 759-766

Arthralgia, PCMH recognition and chronic pain management, 29(4):

Arthritis, infectious, antibiotic prophylaxis and total joint replacement, 29(4):500-507

Asthma, same- vs. oppposite-sex-partnered patients' medical diagnoses, 29(6):688-693

Attitudes, physician, toward diabetes prevention, 29(6):663-671

Auditory brainstem implants, pediatric, for habilitation, 29(2):286-288

# Awards and prizes

federal research funding for family medicine, 29(5):531-532

limited NIH funding for family medicine research, 29(5):528-530

Back pain, multiple myeloma and diagnostic delay, 29(6):702-709

Bacterial infections, nonbacterial causes of lymphangitis, 29(6): 808 - 812

Basal cell carcinoma, diagnostic maneuver to increase early detection, 29(3):404-407

# Behavior therapy

childhood obesity intervention, 29(4): 434-443

physician attitudes toward diabetes prevention, 29(6):663-671

## Behavioral medicine

integrating behavioral health using lean workflow analysis, 29(3): 385-393

provider diversity on the family medicine team, 29(1):8-9

Biomarkers, fertility apps marketed to avoid pregnancy, 29(4):508-511

Biopsy, triage amalgamated dermoscopic algorithm, 29(6):694-701 **Birth,** doula support during pregnancy, 29(3):308–317

Birth rate, fertility apps marketed to

avoid pregnancy, 29(4):508-511 Bisexual persons, improving patientcentered "LGBTQ" primary

care, 29(1):156-160 Bisphosphonates, insufficiency fractures and bisphosphonate therapy, 29(3):404-407

Blood glucose, almond "appetizer" effect on GTT results, 29(6): 759-766

#### Blood pressure

childhood obesity intervention, 29(4): 434-443

control, patient portals and, 29(4): 452-459

kiosk technology, 29(5):620-629 patient portals and blood pressure control, 29(4):452-459

## Blue Cross Blue Shield insurance plans, medical home implementation in small practices, 29(6): 767-774

Body mass index

childhood obesity intervention, 29(4):

participation in weight loss programs, 29(5):572-580

#### Bone fractures

distal radius fracture treatment, 29(2):218-225

insufficiency fractures and bisphosphonate therapy, 29(3):404-407

Breast cancer, academic detailing intervention for cancer screening, 29(5):533-542

Breastfeeding, diagnosis and management of breast milk oversupply, 29(1):139-142

C-reactive protein, level, as marker in febrile children, 29(4):460-468

California, FIT for colon cancer screening, 29(6):672-681

Cancer prevention and control, academic detailing intervention for cancer screening, 29(5):533-542

## Cancer screening

academic detailing intervention, 29(5):533-542

basal cell blanche, 29(3):408-410 FIT for colon cancer screening, 29(6):672-681

lung cancer screening guidelines, 29(1):152-155

PCMH increased colorectal cancer screening, 29(2):191-200

Carcinoma, basal cell blanche, 29(3): 408 - 410

Cardiovascular diseases, PCMH impact on chronically ill patients' utilization, 29(4):482-495

Care coordination, in PCMHs, 29(1): 90 - 101

# Career choice

family medicine residents and educational debt, 29(2):180-181

impact of debt on young family physicians, 29(2):177-179 provider diversity on the family med-

icine team, 29(1):8-9

# Case reports

insufficiency fractures and bisphosphonate therapy, 29(3):404-407 vanished twins and misdiagnosed sex, 29(3):411-413

Centers for Disease Control and Prevention (U.S.), federal re-

- search funding for family medicine, 29(5):531-532
- Certification, care coordinator prevalence in practices and PCMHs, 29(6):652–653
- Cervical cancer, academic detailing intervention for cancer screening, 29(5):533–542
- Child abuse, screening for adverse childhood experiences, 29(3): 303–307
- Childbirth, doula support during pregnancy, 29(3):308–317
- Children, see Pediatrics
- **China,** underuse of primary care, 29(2): 240–247
- Choice behavior, physician use of lowvalue clinical services, 29(6):785– 792

#### Chronic disease

- clinical decision support for chronic kidney disease, 29(5):604-612
- local learning collaboratives for chronic kidney disease, 29(5): 543–552
- patient portals and blood pressure control, 29(4):452–459
- PCMH impact on chronically ill patients' utilization, 29(4):482–495
- PCMH recognition and chronic pain management, 29(4):474–481
- same- vs. oppposite-sex-partnered patients' medical diagnoses, 29(6):688–693
- Chronic pain, management, PCMH recognition and, 29(4):474–481
- **Ciprofloxacin,** levofloxacin in males with a UTI, 29(6):654–662
- Clinical coding, simulation of ICD-9 to ICD-10-CM transition, 29(1): 29–36
- Clinical decision support systems, for chronic kidney disease, 29(5): 604–612

# Clinical medicine

- hearing loss health care for older adults, 29(3):394–403
- social determinants of health in a clinic setting, 29(3):414–418
- Cochlear implants, pediatric auditory brainstem implant for habilitation, 29(2):286–288

## Cohort studies

- C-reactive protein level as marker in febrile children, 29(4):460–468 FIT for colon cancer screening,
- 29(6):672–681
- Collaborative care management, in primary care, time to remission for depression with, 29(1):10–17
- Colon cancer, PCMH increased colorectal cancer screening, 29(2): 191–200
- Colorado, childhood obesity intervention, 29(4):434–443

#### Colorectal cancer

- academic detailing intervention for cancer screening, 29(5):533–542
- FIT for colon cancer screening, 29(6):672–681
- PCMH increased colorectal cancer screening, 29(2):191–200

#### Commentary

- Are We Learning More about Patient-centered Medical Homes (PCMHs), or Learning More about Primary Care?, 29(1):4–7
- Care Coordination for Primary Care Practice, 29(6):649–651
- Evidence, Engagement, and Technology: Themes of and the State of Primary Care Practice-based Network Research, 29(5):521– 524
- The Impact of Debt on Young Family Physicians: Unanswered Questions with Critical Implications, 29(2):177–179
- The Need to Systematically Evaluate Clinical Practice Guidelines, 29(6):644–648
- Social Determinants of Health and Primary Care: Intentionality Is Key to the Data We Collect and the Interventions We Pursue, 29(3):297–300
- Social Justice as the Moral Core of Family Medicine: A Perspective from the Keystone IV Conference, 29(4):S69–S71
- Telehealth: A Very Useful Tool That Enables and Improves Patient Access, 29(4):430–431
- Where You Stand Is What You See: We See a Need for More Primary Care Research Funding, 29(5):525–527
- Communicable diseases, preexposure prophylaxis for HIV prevention, 29(1):143–151

# Communication

- communicating delays in diagnostic evaluation, 29(4):469–473
- electronic messaging and number of incoming telephone calls, 29(5): 613–619
- watchful waiting and diagnostic testing, 29(6):710–717
- Community-based participatory research, using patient navigators to improve diabetes outcome, 29(1):78–89

# Community health centers

- patients with diabetes served by safetynet centers, 29(3):356-370
- primary care continuity improves diabetic health, 29(3):318–324
- **Community medicine,** school-based health centers, 29(3):339–347

# Comorbidity

- admission data predict hospital readmission risk, 29(1):50–59 patient portals and blood pressure
- control, 29(4):452–459 PCMH impact on chronically ill patients' utilization, 29(4):482–495
- Comparative effectiveness research, stakeholder engagement in patient-reported outcomes measure implementation, 29(1):102–115
- Comprehensive health care, primary care panel size, 29(4):496–499
- Consensus, evaluating Choosing Wisely<sup>TM</sup> using SORT, 29(4):512–515

Continuity of patient care, continuity of care and reducing emergency department visits, 29(2):201–208

## Contraception

- fertility apps marketed to avoid pregnancy, 29(4):508-511
- IUD use based on who initiated discussion of placement, 29(1): 24–28
- Control groups, communicating delays in diagnostic evaluation, 29(4): 469–473
- Cooperative behavior, local learning collaboratives for chronic kidney disease, 29(5):543–552

## Correspondence

- clinical decisions made in primary care clinics before and after Choosing Wisely™, 29(1):167– 168
- the diversity of providers on the family medicine team, 29(3):424
- electronic health record challenges, workarounds, and solutions observed in practices integrating behavioral health and primary care, 29(2):289–290
- over half of graduating family medicine residents report more than \$150,000 in educational debt, 29(4):516–517, 29(6):814
- patient preferences for receiving reports of test results, 29(2):289–290
- real life is full of choices, 29(5):636 reporting and using near-miss events to improve patient safety in diverse primary care practices: a collaborative approach to learning from our mistakes, 29(1): 165–167
- social justice as the moral core of family medicine: a perspective from the Keystone IV Conference, 29(6):813
- the use of medical scribes in health care settings: a systematic review and future direction, 29(3):423– 424
- **Cost control,** cost for level 3 medical home recognition, 29(1):69–77

## Cost-effectiveness

- distal radius fracture treatment, 29(2):218–225
- hearing loss health care for older adults, 29(3):394–403
- Cotton fever, self-diagnosis by IV drug users, 29(2):276–279
- Counseling, watchful waiting and diagnostic testing, 29(6):710–717
- Creatinine, multiple myeloma and diagnostic delay, 29(6):702–709

# Cross-sectional studies

- participation in weight loss programs, 29(5):572–580
- PCMH impact on chronically ill patients' utilization, 29(4):482–495
- triage amalgamated dermoscopic algorithm, 29(6):694–701
- Cultural diversity, doula support during pregnancy, 29(3):308–317

Deafness, pediatric auditory brainstem implant for habilitation, 29(2): 286-288

#### Decision making

- decision-to-implement worksheet, 29(5):553-562
- lung cancer screening guidelines, 29(1):152-155
- parents' and pediatricians' views of partnership, 29(5):563-571
- Decision support techniques, technology-based patient engagement strategies within PBRNs, 29(5):581-591

# Delivery of health care

- care coordination in PCMHs, 29(1): 90 - 101
- care coordinator prevalence in practices and PCMHs, 29(6):652-
- clinical risk tools for predicting osteoporosis, 29(2):233-239
- integrating behavioral health using lean workflow analysis, 29(3): 385-393
- reducing functional decline in frail elderly, 29(2):209-217
- school-based health centers, 29(3): 339-347
- strategies for stakeholders to improve EHRs, 29(1):126-134
- Demography, self-report of alcohol treatment referrals, 29(6):682-

# Depression

- community engagement in impoverished communities, 29(3):325-
- family medicine: bridge to life, 29(1): 161-164
- same- vs. oppposite-sex-partnered patients' medical diagnoses, 29(6):688-693
- time to remission with CCM in primary care, 29(1):10-17

# Dermatology

- basal cell blanche, 29(3):408-410 treatment of acne in pregnancy, 29(2):254-262
- triage amalgamated dermoscopic algorithm, 29(6):694-701
- Dermoscopy, triage amalgamated dermoscopic algorithm, 29(6):694-701

#### Diabetes mellitus

- PCMH impact on chronically ill patients' utilization, 29(4):482-495 prediabetes diagnosis and treatment,
- 29(2):283-285 prevention, physician attitudes to-
- ward, 29(6):663-671 primary care continuity improves diabetic health, 29(3):318-324
- primary care panel size, 29(4):444-
- referrals for diabetes education in a medical home, 29(3):377-384
- same- vs. oppposite-sex-partnered patients' medical diagnoses, 29(6):688-693
- using patient navigators to improve outcome, 29(1):78-89

- Diagnosis, differential, nonbacterial causes of lymphangitis, 29(6): 808-812
- Diagnostic errors, nonbacterial causes of lymphangitis, 29(6):808-812
- Diagnostic tests, watchful waiting and diagnostic testing, 29(6):710-717
- Disclosure, same- vs. oppposite-sexpartnered patients' medical diagnoses, 29(6):688-693

## Disease management

- patient portals and blood pressure control, 29(4):452-459
- PCMH impact on chronically ill patients' utilization, 29(4):482-495

## **Doctor-patient relations**

- family medicine: bridge to life, 29(1): 161-164
- IUD use based on who initiated discussion of placement, 29(1): 24 - 28

## **Doctoring**

- complexity of "place" in primary care, 29(4):S24-S27
- countercultural heritage of family medicine, 29(4):S45-S48
- family medicine as a disruptive innovation, 29(4):S60-S63
- Generation III family physicians, 29(4):S49-S53
- holding on and letting go, 29(4):S32-
- impact of time and timing, 29(4):
- people are primary, 29(4):S40-S44 personal doctoring manifesto, 29(4):
- S64-S68 recharging family medicine, 29(4): S15-S18
- reimagining relationships with patients, 29(4):S1-S11
- relationships in tomorrow's health system, 29(4):S54-S59
- seeking relationships in primary care, 29(4):S19-S23
- social justice and family medicine, 29(4):S69-S71
- tribute to G. Gayle Stephens, 29(4): S12-S14
- Double-blind method, levofloxacin in males with a UTI, 29(6):654-

# Early detection of cancer

- basal cell blanche, 29(3):408-410 FIT for colon cancer screening, 29(6):672-681
- multiple myeloma and diagnostic delay, 29(6):702-709
- Eating, almond "appetizer" effect on GTT results, 29(6):759–766
- Editorial Office News and Notes, Peer Reviewers for the Journal of the American Board of Family Medicine in 2015, 29(2):173-176
- Editorials, clinical practice guidelines—is "regulation" the answer?, 29(6):642–643

## **Editor's Notes**

Bread and Butter of Family Medicine: Guidelines, Population

- Screening, Diagnostic Evaluations, and Practice Models, 29(6):639-641
- Family Medicine Research That Provides Compelling, Urgent Data to Improve Patient Care, 29(1):
- Outcomes of Health System Structures, Highly Pertinent Clinical Information, Idea Stimulators, Clinical Reviews, and Prediction Tools: JABFM Exemplified, 29(2):171-172
- Research in Family Medicine by Family Physicians for the Practice of Family Medicine, 29(4): 427-429
- Social Determinants of Health and Beyond: Information to Help Family Physicians Improve Patient Care, 29(3):295-296

#### Education

- family medicine residents and educational debt, 29(2):180-181
- impact of debt on young family physicians, 29(2):177-179
- referrals for diabetes education in a medical home, 29(3):377-384

# Elderly

- exercising, avoiding myalgia with statins, 29(6):727-740
- frail, reducing functional decline, 29(2):209-217
- Electronic cigarettes, use, physician advice for, 29(6):741-747

## Electronic health records (EHRs)

- communicating delays in diagnostic evaluation, 29(4):469-473
- electronic messaging and number of incoming telephone calls, 29(5): 613-619
- electronic portal use among vulnerable patients, 29(5):592-603
- multiple myeloma and diagnostic delay, 29(6):702-709
- patient portals and blood pressure control, 29(4):452-459
- simulation of ICD-9 to ICD-10-CM transition, 29(1):29-36
- strategies for stakeholders to improve EHRs, 29(1):126-134
- technology-based patient engagement strategies within PBRNs, 29(5): 581-591
- Electronic mail, communicating delays in diagnostic evaluation, 29(4): 469-473

# **Emergency departments**

- C-reactive protein level as marker in febrile children, 29(4):460-468
- continuity of care and reducing emergency department visits, 29(2):201-208
- PCMH impact on chronically ill patients' utilization, 29(4):482-495
- Empathy, PCMH recognition and chronic pain management, 29(4): 474-481
- Energy intake, almond "appetizer" effect on GTT results, 29(6): 759-766

- **Epidemiology** 
  - reducing health inequities using sociodemographic data, 29(3):348 – 355
  - social determinants of health and primary care, 29(3):297–300
- Erythema, nonbacterial causes of lymphangitis, 29(6):808–812
- Ethnic groups, participation in weight loss programs, 29(5):572–580
- Evidence-based medicine
  - decision-to-implement worksheet, 29(5):553-562
  - distal radius fracture treatment, 29(2):218–225
- participation in weight loss programs, 29(5):572–580
- Exercise, avoiding myalgia with statins, 29(6):727–740
- Family medicine
  - care coordinator prevalence in practices and PCMHs, 29(6):652–653
  - complexity of "place" in primary care, 29(4):S24–S27
  - countercultural heritage of, 29(4): S45–S48
  - as a disruptive innovation, 29(4):S60 S63
  - federal research funding, 29(5):531–532
  - holding on and letting go, 29(4):S32-
  - impact of time and timing, 29(4): S28–S31
  - people are primary, 29(4):S40–S44 provider diversity on the family medicine team, 29(1):8–9
  - recharging, 29(4):S15–S18
  - reflections: bridge to life, 29(1):161-164
  - relationships in tomorrow's health system, 29(4):S54–S59
  - research, limited NIH funding for, 29(5):528-530
  - residents and educational debt, 29(2): 180–181
  - seeking relationships in primary care, 29(4):S19-S23
  - 29(4):S19–S23 social justice and, 29(4):S69–S71 team, provider diversity on, 29(1):
- tribute to G. Gayle Stephens, 29(4): S12–S14
- Family physicians
  - complexity of "place" in primary care, 29(4):S24–S27
- Generation III, 29(4):S49–S53 holding on and letting go, 29(4):S32– S39
- impact of time and timing, 29(4): S28-S31
- institutions with fewer residencies produce more physicians, 29(3): 301–302
- people are primary, 29(4):S40–S44 personal doctoring manifesto, 29(4): S64–S68
- physician attitudes toward diabetes prevention, 29(6):663–671

- Pisacano scholars' reflections from the Starfield Summit, 29(6):793– 804
- primary care panel size, 29(4):444–451
- reimagining relationships with patients, 29(4):S1–S11
- relationships in tomorrow's health system, 29(4):S54–S59
- seeking relationships in primary care, 29(4):S19–S23
- telehealth as useful tool, 29(4):430-431
- triage amalgamated dermoscopic algorithm, 29(6):694–701
- use of low-value clinical services, 29(6):785–792
- use of point-of-care tests, 29(3):371–376
- use of telehealth in primary care, 29(4):432–433
- young, impact of debt on, 29(2):177-
- Family planning
  - fertility apps marketed to avoid pregnancy, 29(4):508-511
- IUD use based on who initiated discussion of placement, 29(1): 24–28
- **Fasting,** almond "appetizer" effect on GTT results, 29(6):759–766
- Fecal immunochemical test (FIT), for colon cancer screening, 29(6):672–681
- **Fertility**, apps marketed to avoid pregnancy, 29(4):508–511
- Fever
  - C-reactive protein level as marker in febrile children, 29(4):460–468 self-diagnosis of cotton fever by IV drug users, 29(2):276–279
- Focus groups
  - academic detailing intervention for cancer screening, 29(5):533-542
  - kiosk technology for blood pressure, 29(5):620–629
- medical home implementation in small practices, 29(6):767–774
- Follow-up studies
  - C-reactive protein level as marker in febrile children, 29(4):460–468 childhood obesity intervention, 29(4):
  - 434-443
  - communicating delays in diagnostic evaluation, 29(4):469–473
- patient portals and blood pressure control, 29(4):452–459
- watchful waiting and diagnostic testing, 29(6):710–717
- **Food habits**, almond "appetizer" effect on GTT results, 29(6):759–766
- Food supply, childhood obesity intervention, 29(4):434–443
- **Forecasting,** Pisacano scholars' reflections from the Starfield Summit, 29(6):793–804
- **Frail elderly,** reducing functional decline, 29(2):209–217
- Gay persons, improving patient-centered "LGBTQ" primary care, 29(1):156–160

- **Genetics,** vanished twins and misdiagnosed sex, 29(3):411–413
- **Geriatrics,** reducing functional decline in frail elderly, 29(2):209–217
- Glucose tolerance test, results, almond "appetizer" effect on, 29(6):759–766
- **Glycated hemoglobins,** primary care continuity improves diabetic health, 29(3):318–324
- Grants
- federal research funding for family medicine, 29(5):531–532
- limited NIH funding for family medicine research, 29(5):528–530
- **Grip strength,** low, prediabetes and, 29(2):280–282
- Guideline adherence, physician use of low-value clinical services, 29(6): 785–792
- **Hand strength,** low grip strength and prediabetes, 29(2):280–282
- Health care delivery
- complexity of "place" in primary care, 29(4):S24–S27
- countercultural heritage of family medicine, 29(4):S45–S48
- family medicine as a disruptive innovation, 29(4):S60–S63
- Generation III family physicians, 29(4):S49–S53
- holding on and letting go, 29(4):S32–S39
- impact of time and timing, 29(4): S28–S31
- people are primary, 29(4):S40–S44 personal doctoring manifesto, 29(4): S64–S68
- recharging family medicine, 29(4): S15–S18
- reimagining relationships with patients, 29(4):S1–S11
- relationships in tomorrow's health system, 29(4):S54–S59
- seeking relationships in primary care, 29(4):S19–S23
- social justice and family medicine, 29(4):S69–S71
- tribute to G. Gayle Stephens, 29(4): S12–S14
- Health care disparities
- community engagement in impoverished communities, 29(3):325– 338
- doula support during pregnancy, 29(3):308–317
- reducing health inequities using sociodemographic data, 29(3):348– 355
- school-based health centers, 29(3): 339–347
- social determinants of health and primary care, 29(3):297–300
- Health care economics and organizations, effects of PCMH transformation on child patient experience, 29(1):60–68
- **Health care reform,** underuse of primary care in China, 29(2):240–247

- Health care systems, choosing words wisely in the PCMH, 29(2):248-
- Health care team, teamlets in primary care, 29(1):135-138
- Health literacy, toolkit, to improve medication review, 29(1):18-23

# Health maintenance organizations

- multiple myeloma and diagnostic delay, 29(6):702-709
- telehealth as useful tool, 29(4):430-
- use of telehealth in primary care, 29(4):432-433

#### Health personnel

- electronic messaging and number of incoming telephone calls, 29(5):
- self-report of alcohol treatment referrals, 29(6):682-687
- Health planning guidelines, improving patient-centered "LGBTQ" primary care, 29(1):156-160

## Health policy

- bridging communities, funders, and policymakers for PBRNs, 29(5): 630-635
- family medicine residents and educational debt, 29(2):180-181
- impact of debt on young family physicians, 29(2):177-179
- institutions with fewer residencies produce more physicians, 29(3): 301 - 302
- provider diversity on the family medicine team, 29(1):8-9
- Health resources, providers' perspectives on palliative care, 29(6): 748-758

#### Health services

- access to care associated with lower obesity rates, 29(2):182-190
- care coordinator prevalence in practices and PCMHs, 29(6):652-
- Health services research, technologybased patient engagement strategies within PBRNs, 29(5):581-

# Hearing loss

- hearing loss health care for older adults, 29(3):394-403
- pediatric auditory brainstem implant for habilitation, 29(2):286-288

## Hemoglobins

- clinical decision support for chronic kidney disease, 29(5):604-612
- FIT for colon cancer screening, 29(6):672-681
- primary care continuity improves diabetic health, 29(3):318-324
- Hispanic Americans, electronic portal use among vulnerable patients, 29(5):592-603
- HIV infections, same- vs. opppositesex-partnered patients' medical diagnoses, 29(6):688-693
- Homelessness, community engagement in impoverished communities, 29(3):325-338

## Homosexuality

- improving patient-centered "LG-BTQ" primary care, 29(1):156-
- same- vs. oppposite-sex-partnered patients' medical diagnoses, 29(6):688-693
- Hospital readmission, risk, prediction by admission data, 29(1):50-59
- Hospital records, C-reactive protein level as marker in febrile children, 29(4):460-468
- Human immunodeficiency virus (HIV), prevention, preexposure prophylaxis for, 29(1):143–151

## Humans

- C-reactive protein level as marker in febrile children, 29(4):460-468 communicating delays in diagnostic
- evaluation, 29(4):469-473 PCMH recognition and chronic pain management, 29(4):474-481
- Hydroxymethylglutaryl-CoA reductase inhibitors, avoiding myalgia with statins in exercising adults, 29(6):727-740
- Hyperglycemia, almond "appetizer" effect on GTT results, 29(6): 759-766
- Hyperlactation, diagnosis and management, 29(1):139-142

#### Hypertension

- clinical decision support for chronic kidney disease, 29(5):604-612
- kiosk technology for blood pressure, 29(5):620-629
- patient portals and blood pressure control, 29(4):452-459
- stakeholder engagement in patientreported outcomes measure implementation, 29(1):102-115
- Hysterectomy, physician use of lowvalue clinical services, 29(6):785-
- Iatrogenic disease, nonbacterial causes of lymphangitis, 29(6):808-812
- Industry, researchers' experience with data sharing, 29(6):805-807
- Infectious arthritis, antibiotic prophylaxis and total joint replacement, 29(4):500-507
- Infectious diseases, preexposure prophylaxis for HIV prevention, 29(1):143–151
- Information services, electronic portal use among vulnerable patients, 29(5):592-603

# Information systems

- electronic messaging and number of incoming telephone calls, 29(5): 613 - 619
- strategies for stakeholders to improve EHRs, 29(1):126-134
- Inpatient care, PCMH impact on chronically ill patients' utilization, 29(4):482-495
- **Insects**, nonbacterial causes of lymphangitis, 29(6):808-812
- Insurance, patients with diabetes served by safety-net centers, 29(3):356-370

#### Insurance coverage

- participation in weight loss programs, 29(5):572-580
- PCMH impact on chronically ill patients' utilization, 29(4):482-495
- Interdisciplinary health team, reducing functional decline in frail elderly, 29(2):209-217

#### Internet

- care coordination in PCMHs, 29(1): 90-101
- electronic messaging and number of incoming telephone calls, 29(5): 613-619
- patient portals and blood pressure control, 29(4):452-459
- Intrauterine devices, use based on who initiated discussion of placement, 29(1):24-28
- Intravenous drug abuse, cotton fever self-diagnosis, 29(2):276-279
- Journal of the American Board of Family Medicine (JABFM), peer reviewers for, 29(2):173-176
- Kidney disease, chronic
  - clinical decision support, 29(5):604-
  - local learning collaboratives, 29(5): 543-552
- Lactation disorders, breast milk oversupply, 29(1):139-142
- Leadership, Pisacano scholars' reflections from the Starfield Summit, 29(6):793-804
- Learning, collaboratives, local, for chronic kidney disease, 29(5): 543-552
- Lesbians, improving patient-centered "LGBTQ" primary care, 29(1): 156-160
- Levofloxacin, in males with a UTI, 29(6):654-662

# Life style

- childhood obesity intervention, 29(4): 434-443
- physician attitudes toward diabetes prevention, 29(6):663-671
- Loneliness, same- vs. oppposite-sexpartnered patients' medical diagnoses, 29(6):688-693
- Long-term care, continuity of care and reducing emergency department visits, 29(2):201-208
- Lung cancer, screening guidelines, 29(1):152-155
- Lymphangitis, nonbacterial causes, 29(6):808-812
- Mass screening, FIT for colon cancer screening, 29(6):672-681
- Maternal health, treatment of acne in pregnancy, 29(2):254-262
- Medical assistance, electronic portal use among vulnerable patients, 29(5):592-603

Medical errors, using a health literacy toolkit to improve medication review, 29(1):18–23

# Medical home

- case mix severity impact on quality improvement in a PCMH, 29(1): 116–125
- cost for level 3 medical home recognition, 29(1):69-77
- PCMH increased colorectal cancer screening, 29(2):191–200
- referrals for diabetes education in a medical home, 29(3):377–384
- school-based health centers, 29(3): 339–347
- time to remission for depression with CCM, 29(1):10-17
- Medical informatics, simulation of ICD-9 to ICD-10-CM transition, 29(1):29–36
- Medical records, same- vs. opppositesex-partnered patients' medical diagnoses, 29(6):688–693
- Medical societies, evaluating Choosing Wisely TM using SORT, 29(4):512–515
- **Medically uninsured,** electronic portal use among vulnerable patients, 29(5):592–603

#### Medication

- pretreatment use and drinking goal in alcohol treatment, 29(1): 37–49
- review, improving, using a health literacy toolkit, 29(1):18–23
- Medication adherence, stakeholder engagement in patient-reported outcomes measure implementation, 29(1):102–115
- **Medicine,** researchers' experience with data sharing, 29(6):805–807
- **MEDLINE,** nonbacterial causes of lymphangitis, 29(6):808–812
- Menstrual cycle, fertility apps marketed to avoid pregnancy, 29(4): 508–511

## Mental health

- family medicine: bridge to life, 29(1): 161–164
- patient portals and blood pressure control, 29(4):452-459
- self-report of alcohol treatment referrals, 29(6):682–687
- **Metformin,** physician attitudes toward diabetes prevention, 29(6):663–671
- Minnesota, PCMH impact on chronically ill patients' utilization, 29(4):482–495

# Minority health

- improving patient-centered "LG-BTQ" primary care, 29(1):156–160
- vitamin D deficiency by body weight and race/ethnicity, 29(2):226– 232

#### Motivation

- electronic messaging and number of incoming telephone calls, 29(5): 613–619
- physician attitudes toward diabetes prevention, 29(6):663–671

- Multicultural practices, improving patient-centered "LGBTQ" primary care, 29(1):156–160
- Multiple myeloma, diagnostic delay and, 29(6):702–709
- Muscles, avoiding myalgia with statins in exercising adults, 29(6):727–740
- **Muscular diseases,** avoiding myalgia with statins in exercising adults, 29(6):727–740
- Musculoskeletal pain, PCMH recognition and chronic pain management, 29(4):474–481
- **Myalgia,** avoiding, with statins, in exercising adults, 29(6):727–740
- Mycoses, nonbacterial causes of lymphangitis, 29(6):808–812
- Natural family planning, fertility apps marketed to avoid pregnancy, 29(4):508-511
- Neoplasms, communicating delays in diagnostic evaluation, 29(4):469–473
- Nurse practitioners, medical home implementation in small practices, 29(6):767–774
- Nutritional sciences, vitamin D deficiency by body weight and race/ ethnicity, 29(2):226–232

#### Obesity

- childhood obesity intervention, 29(4): 434–443
- participation in weight loss programs, 29(5):572–580
- patient portals and blood pressure control, 29(4):452-459
- rates, lower, association with access to care, 29(2):182–190
- same- vs. oppposite-sex-partnered patients' medical diagnoses, 29(6):688-693

## **Obstetrics**

- doula support during pregnancy, 29(3):308-317
- vanished twins and misdiagnosed sex, 29(3):411-413
- Obstructive sleep apnea, perioperative care, 29(2):263–275
- Office visits, participation in weight loss programs, 29(5):572–580

# Opioid analgesics

- PCMH recognition and chronic pain management, 29(4):474–481 problem drug-related behavior, 29(6): 718–726
- **Opioid-related disorders,** problem drug-related behavior, 29(6): 718–726
- **Opioids,** perioperative care of obstructive sleep apnea, 29(2):263–275
- Oregon, electronic portal use among vulnerable patients, 29(5):592–603
- Orthopedics, insufficiency fractures and bisphosphonate therapy, 29(3):404–407

## Osteoporosis

clinical risk tools for predicting, 29(2):233–239

- physician use of low-value clinical services, 29(6):785–792
- Otolaryngology, hearing loss health care for older adults, 29(3):394–403

#### Outcome assessment

C-reactive protein level as marker in febrile children, 29(4):460–468 childhood obesity intervention, 29(4): 434–443

## Outpatients

- levofloxacin in males with a UTI, 29(6):654–662
- PCMH impact on chronically ill patients' utilization, 29(4):482–495
- Palliative care, providers' perspectives on, 29(6):748–758
- **Palpation,** triage amalgamated dermoscopic algorithm, 29(6):694–701
- Papanicolaou test, physician use of low-value clinical services, 29(6): 785–792
- **Parents,** opinions about concepts of partnership, 29(5):563–571
- Patient advisory councils, patientcentered care and, 29(6):775–784

#### Patient care

patient portals and blood pressure control, 29(4):452–459 primary care panel size, 29(4):444– 451

#### Patient-centered care

- advisory councils and, 29(6):775–784 cost for level 3 medical home recognition, 29(1):69–77
- improving patient-centered "LG-BTQ" primary care, 29(1):156–160
- lung cancer screening guidelines, 29(1):152–155
- medical home implementation in small practices, 29(6):767–774
- parents' and pediatricians' views of partnership, 29(5):563–571
- provider diversity on the family medicine team, 29(1):8–9
- school-based health centers, 29(3): 339–347
- telehealth as useful tool, 29(4):430-431
- use of telehealth in primary care, 29(4):432–433

# Patient-centered medical homes (PCMHs)

- care coordination in, 29(1):90–101 care coordinator prevalence, 29(6): 652–653
- case mix severity impact on quality improvement, 29(1):116–125
- choosing words wisely in, 29(2):248–253
- impact on chronically ill patients' utilization, 29(4):482–495
- implementation in small practices, 29(6):767–774
- increased colorectal cancer screening, 29(2):191–200 recognition and chronic pain man-
- agement, 29(4):474–481 transformation, effects on child patient experience, 29(1):60–68

831

- vs primary care, learning more about, 29(1):4-7
- Patient-centered outcomes research stakeholder engagement in a patientreported outcomes measure implementation, 29(1):102-115
  - stakeholder engagement in patientreported outcomes measure implementation, 29(1):102-115
  - time to remission for depression with CCM, 29(1):10-17
- Patient compliance, FIT for colon cancer screening, 29(6):672-681

## Patient education

- referrals for diabetes education in a medical home, 29(3):377-384
- using a health literacy toolkit to improve medication review, 29(1): 18-23
- Patient engagement, advisory councils and patient-centered care, 29(6): 775-784
- Patient navigators, to improve diabetes outcome, 29(1):78-89
- Patient outcome assessment, stakeholder engagement in patientreported outcomes measure implementation, 29(1):102-115

# Patient participation

- kiosk technology for blood pressure, 29(5):620-629
- technology-based patient engagement strategies within PBRNs, 29(5): 581-591
- Patient satisfaction, primary care panel size, 29(4):444-451

# **Pediatrics**

- C-reactive protein level as marker in febrile children, 29(4):460-468
- childhood obesity intervention, 29(4): 434-443
- effects of PCMH transformation on child patient experience, 29(1): 60 - 68
- pediatric auditory brainstem implant for habilitation, 29(2):286-288
- pediatricians' opinions about concepts of partnership, 29(5):563-571
- perioperative care of obstructive sleep apnea, 29(2):263-275
- Perception, providers' perspectives on palliative care, 29(6):748-758
- Personal health records, patient portals and blood pressure control, 29(4):452-459

## Personal physicians

- complexity of "place" in primary care, 29(4):S24-S27
- countercultural heritage of family medicine, 29(4):S45-S48
- family medicine as a disruptive innovation, 29(4):S60-S63
- Generation III family physicians, 29(4):S49-S53
- holding on and letting go, 29(4):S32-S39
- impact of time and timing, 29(4): S28-S31
- people are primary, 29(4):S40-S44 personal doctoring manifesto, 29(4): S64-S68

- recharging family medicine, 29(4): S15-S18
- reimagining relationships with patients, 29(4):S1-S11
- relationships in tomorrow's health system, 29(4):S54-S59
- seeking relationships in primary care, 29(4):S19-S23
- social justice and family medicine, 29(4):S69-S71
- tribute to G. Gayle Stephens, 29(4): S12-S14
- Personal satisfaction, Pisacano scholars' reflections from the Starfield Summit, 29(6):793-804
- Pharmacotherapy, preexposure prophylaxis for HIV prevention, 29(1):143–151
- Physical examination, watchful waiting and diagnostic testing, 29(6): 710-717

## Physician-patient relations

- family medicine: bridge to life, 29(1): 161 - 164
- IUD use based on who initiated discussion of placement, 29(1): 24 - 28

# **Physicians**

- advice for e-cigarette use, 29(6):741-
- institutions with fewer residencies produce more physicians, 29(3):
- pediatricians' views of partnership, 29(5):563-571
- physician attitudes toward diabetes prevention, 29(6):663-671
- triage amalgamated dermoscopic algorithm, 29(6):694-701
- use of point-of-care tests, 29(3):371-
- Pilot projects, childhood obesity intervention, 29(4):434-443

## Point-of-care systems

C-reactive protein level as marker in febrile children, 29(4):460-468 use of point-of-care tests by primary care physicians, 29(3):371–376

# **Polypharmacy**

- admission data predict hospital readmission risk, 29(1):50-59
- using a health literacy toolkit to improve medication review, 29(1): 18-23
- Population characteristics, taking the community pulse while caring for patients, 29(3):419-422

#### Population health

- complexity of "place" in primary care, 29(4):S24–S27
- countercultural heritage of family medicine, 29(4):S45-S48
- family medicine as a disruptive innovation, 29(4):S60-S63
- Generation III family physicians, 29(4):S49-S53
- holding on and letting go, 29(4):S32-S39
- impact of time and timing, 29(4): S28-S31
- people are primary, 29(4):S40-S44 personal doctoring manifesto, 29(4): S64-S68

- recharging family medicine, 29(4): S15-S18
- reimagining relationships with patients, 29(4):S1-S11
- relationships in tomorrow's health system, 29(4):S54-S59
- seeking relationships in primary care, 29(4):S19-S23
- social justice and family medicine, 29(4):S69-S71
- tribute to G. Gayle Stephens, 29(4): S12-S14
- Postal service, FIT for colon cancer screening, 29(6):672-681
- Poverty, electronic portal use among vulnerable patients, 29(5):592-

#### Practice-based research

- bridging communities, funders, and policymakers for PBRNs, 29(5): 630-635
- case mix severity impact on quality improvement in a PCMH, 29(1): 116-125
- clinical decision support for chronic kidney disease, 29(5):604-612
- decision-to-implement worksheet, 29(5):553-562
- electronic portal use among vulnerable patients, 29(5):592-603
- kiosk technology for blood pressure, 29(5):620-629
- local learning collaboratives for chronic kidney disease, 29(5): 543-552
- participation in weight loss programs, 29(5):572-580
- stakeholder engagement in patientreported outcomes measure implementation, 29(1):102-115
- technology-based patient engagement strategies within PBRNs, 29(5): 581-591
- using patient navigators to improve diabetes outcome, 29(1):78-89
- Practice improvement, advisory councils and patient-centered care, 29(6):775-784
- Practice management, cost for level 3 medical home recognition, 29(1):69-77

#### Prediabetes

- almond "appetizer" effect on GTT results, 29(6):759-766
- low grip strength and prediabetes, 29(2):280-282
- physician attitudes toward diabetes prevention, 29(6):663-671
- prediabetes diagnosis and treatment, 29(2):283-285

# Pregnancy

- doula support during, 29(3):308-317 fertility apps marketed to avoid, 29(4):508-511 treatment of acne during, 29(2):254-
- 262 Prenatal care, vanished twins and mis-
- diagnosed sex, 29(3):411-413

#### Prevalence

care coordinator prevalence in practices and PCMHs, 29(6):652-

- problem drug-related behavior, 29(6): 718-726
- same- vs. oppposite-sex-partnered patients' medical diagnoses, 29(6):688-693
- Prevention and control, preexposure prophylaxis for HIV prevention, 29(1):143–151
- Preventive medicine, vitamin D deficiency by body weight and race/ ethnicity, 29(2):226-232

# Primary care physicians

- communicating delays in diagnostic evaluation, 29(4):469-473
- medical home implementation in small practices, 29(6):767-774
- panel size, 29(4):496-499 use of low-value clinical services,
- 29(6):785-792 watchful waiting and diagnostic test-
- ing, 29(6):710-717

# Primary health care

- academic detailing intervention for cancer screening, 29(5):533-542
- access to care associated with lower obesity rates, 29(2):182-190
- bridging communities, funders, and policymakers for PBRNs, 29(5): 630-635
- care coordination in PCMHs, 29(1): 90 - 101
- childhood obesity intervention, 29(4): 434-443
- choosing words wisely in the PCMH, 29(2):248-253
- clinical decision support for chronic kidney disease, 29(5):604–612 complexity of "place" in, 29(4):S24–
- S27
- continuity of care and reducing emergency department visits, 29(2):201–208
- countercultural heritage of family medicine, 29(4):S45-S48
- decision-to-implement worksheet, 29(5):553-562
- evaluating Choosing Wisely  $^{\mathrm{TM}}$  using SORT, 29(4):512-515
- family medicine as a disruptive innovation, 29(4):S60-S63
- federal research funding for family medicine, 29(5):531-532
- Generation III family physicians, 29(4):S49-S53
- holding on and letting go, 29(4):S32-
- impact of time and timing, 29(4): S28-S31
- improving patient-centered "LG-BTQ <sup>2</sup> primary care, 29(1):156–
- institutions with fewer residencies produce more physicians, 29(3): 301-302
- integrating behavioral health using lean workflow analysis, 29(3): 385-393
- kiosk technology for blood pressure, 29(5):620-629
- limited NIH funding for family medicine research, 29(5):528-530

- local learning collaboratives for chronic kidney disease, 29(5): 543-552
- multiple myeloma and diagnostic delay, 29(6):702-709
- participation in weight loss programs, 29(5):572-580
- patient-centered "LGBTQ" care, 29(1):156-160
- patient portals and blood pressure control, 29(4):452-459
- PCMH recognition and chronic pain management, 29(4):474-481
- people are primary, 29(4):S40-S44 personal doctoring manifesto, 29(4): S64-S68
- Pisacano scholars' reflections from the Starfield Summit, 29(6):793-
- prediabetes diagnosis and treatment, 29(2):283–285
- preexposure prophylaxis for HIV prevention, 29(1):143–151
- primary care panel size, 29(4):444-451, 29(4):496-499
- problem drug-related behavior, 29(6): 718 - 726
- providers' perspectives on palliative care, 29(6):748-758
- recharging family medicine, 29(4): S15–S18
- reducing functional decline in frail elderly, 29(2):209-217
- reimagining relationships with patients, 29(4):S1-S11
- relationships in tomorrow's health system, 29(4):S54-S59
- same- vs. oppposite-sex-partnered patients' medical diagnoses, 29(6):688–693
- screening for adverse childhood experiences, 29(3):303-307
- seeking relationships in, 29(4):S19-S23
- self-report of alcohol treatment referrals, 29(6):682-687
- social determinants of health and, 29(3):297-300
- social determinants of health in a clinic setting, 29(3):414-418
- social justice and family medicine, 29(4):S69-S71
- strategies for stakeholders to improve EHRs, 29(1):126-134
- teamlets in primary care, 29(1):135-
- time to remission for depression with CCM, 29(1):10-17
- tribute to G. Gayle Stephens, 29(4): S12-S14
- underuse of primary care in China, 29(2):240-247
- vs PCMHs, learning more about, 29(1):4-7
- Privacy, technology-based patient engagement strategies within PBRNs, 29(5):581–591
- Private practice, parents' and pediatricians' views of partnership, 29(5):563-571

## **Probability**

C-reactive protein level as marker in febrile children, 29(4):460-468

watchful waiting and diagnostic testing, 29(6):710-717

## Professionalism

- complexity of "place" in primary care, 29(4):S24-S27
- countercultural heritage of family medicine, 29(4):S45-S48
- family medicine as a disruptive innovation, 29(4):S60-S63
- Generation III family physicians, 29(4):S49-S53
- holding on and letting go, 29(4):S32-
- impact of time and timing, 29(4): S28-S31
- people are primary, 29(4):S40-S44 personal doctoring manifesto, 29(4): S64-S68
- recharging family medicine, 29(4): S15-S18
- reimagining relationships with patients, 29(4):S1-S11
- relationships in tomorrow's health system, 29(4):S54-S59
- seeking relationships in primary care, 29(4):S19-S23
- social justice and family medicine, 29(4):S69-S71
- tribute to G. Gayle Stephens, 29(4): S12-S14
- Prognosis, multiple myeloma and diagnostic delay, 29(6):702-709
- Proportional hazards model, patient portals and blood pressure control, 29(4):452-459
- Prospective studies, C-reactive protein level as marker in febrile children, 29(4):460-468
- Prunus dulcis, almond "appetizer" effect on GTT results, 29(6):759-

# Public health

- access to care associated with lower obesity rates, 29(2):182-190
- taking the community pulse while caring for patients, 29(3):419-

#### PubMed

avoiding myalgia with statins in exercising adults, 29(6):727-740 nonbacterial causes of lymphangitis, 29(6):808-812

# Qualitative research

- academic detailing intervention for cancer screening, 29(5):533-542 care coordination in PCMHs, 29(1): 90 - 101
- choosing words wisely in the PCMH, 29(2):248-253
- medical home implementation in small practices, 29(6):767-774
- providers' perspectives on palliative care, 29(6):748-758
- strategies for stakeholders to improve EHRs, 29(1):126-134

## **Quality** improvement

academic detailing intervention for cancer screening, 29(5):533-542 advisory councils and patient-centered care, 29(6):775-784

833

- integrating behavioral health using lean workflow analysis, 29(3): 385-393
- medical home implementation in small practices, 29(6):767-774

#### Quality of health care

- case mix severity impact on quality improvement in a PCMH, 29(1): 116-125
- family medicine: bridge to life, 29(1): 161-164
- Quality of life, avoiding myalgia with statins in exercising adults, 29(6):727-740
- Radiology, insufficiency fractures and bisphosphonate therapy, 29(3): 404-407
- Randomized controlled trials as topic, patient portals and blood pressure control, 29(4):452-459

## Referral and consultation

C-reactive protein level as marker in febrile children, 29(4):460-468 triage amalgamated dermoscopic algorithm, 29(6):694-701

## Registries

- patient portals and blood pressure control, 29(4):452-459 problem drug-related behavior, 29(6):
- 718-726
- technology-based patient engagement strategies within PBRNs, 29(5): 581-591
- Regression analysis, primary care panel size, 29(4):444-451
- Reminder systems, academic detailing intervention for cancer screening, 29(5):533-542
- Renal insufficiency, local learning collaboratives for chronic kidney disease, 29(5):543-552
- Replacement arthroplasty, antibiotic prophylaxis and total joint replacement, 29(4):500-507

# Research

- evaluating Choosing Wisely<sup>TM</sup> using SORT, 29(4):512-515
- federal research funding for family medicine, 29(5):531–532
- limited NIH funding for family medicine research, 29(5):528-530 primary care panel size, 29(4):496-499
- researchers' experience with data sharing, 29(6):805-807
- Research design, PCMH impact on chronically ill patients' utilization, 29(4):482-495

# Research personnel

- experience with data sharing, 29(6): 805 - 807
- Pisacano scholars' reflections from the Starfield Summit, 29(6):793-
- Research support as topic, bridging communities, funders, and policymakers for PBRNs, 29(5): 630-635

## Residence characteristics

providers' perspectives on palliative care, 29(6):748-758

taking the community pulse while caring for patients, 29(3):419-422

#### Residencies

- institutions with fewer residencies produce more physicians, 29(3):
- PCMH recognition and chronic pain management, 29(4):474-481
- Respiratory failure, perioperative care of obstructive sleep apnea, 29(2): 263-275
- Respiratory tract diseases, perioperative care of obstructive sleep apnea, 29(2):263-275

#### Retrospective studies

- electronic messaging and number of incoming telephone calls, 29(5): 613-619
- electronic portal use among vulnerable patients, 29(5):592-603
- FIT for colon cancer screening, 29(6):672-681
- multiple myeloma and diagnostic delay, 29(6):702-709
- primary care panel size, 29(4):444-451
- Review, systematic, diagnosis and management of breast milk oversupply, 29(1):139-142

## Risk

- hospital readmission, admission data predict, 29(1):50-59
- watchful waiting and diagnostic testing, 29(6):710-717

## Risk assessment

- clinical decision support for chronic kidney disease, 29(5):604-612
- technology-based patient engagement strategies within PBRNs, 29(5): 581-591
- Routine care, watchful waiting and diagnostic testing, 29(6):710-717
- Rural communities, improving patient-centered "LGBTQ" primary care, 29(1):156-160

# Safety-net providers

718 - 726

- patients with diabetes served by safety-net centers, 29(3):356-370 problem drug-related behavior, 29(6):
- telehealth as useful tool, 29(4):430-431
- use of telehealth in primary care, 29(4):432-433
- School health services, "expanded medical home," 29(3):339-347

# Screening

- academic detailing intervention for cancer screening, 29(5):533-542
- for adverse childhood experiences, 29(3):303-307
- clinical risk tools for predicting osteoporosis, 29(2):233-239
- lung cancer screening guidelines, 29(1):152-155
- perioperative care of obstructive sleep apnea, 29(2):263-275

Seasons, FIT for colon cancer screening, 29(6):672-681

#### Self-care

- almond "appetizer" effect on GTT results, 29(6):759-766
- using patient navigators to improve diabetes outcome, 29(1):78-89

# Self-report

- alcohol treatment referrals, 29(6): 682 - 687
- participation in weight loss programs, 29(5):572-580
- physician use of low-value clinical services, 29(6):785-792
- same- vs. oppposite-sex-partnered patients' medical diagnoses, 29(6):688-693
- Sensitivity and specificity, triage amalgamated dermoscopic algorithm, 29(6):694-701
- Sexual partners, same- vs. opppositesex-partnered patients' medical diagnoses, 29(6):688-693
- Sinusitis, physician use of low-value clinical services, 29(6):785-792
- Skin, nonbacterial causes of lymphangitis, 29(6):808-812

### Skin cancer

- basal cell blanche, 29(3):408-410 triage amalgamated dermoscopic algorithm, 29(6):694-701
- Sleep disorders, perioperative care of obstructive sleep apnea, 29(2): 263-275

## Smoking

- patient portals and blood pressure control, 29(4):452-459
- physician advice for e-cigarette use, 29(6):741-747
- same- vs. oppposite-sex-partnered patients' medical diagnoses, 29(6):688-693
- Smoking cessation, physician advice for e-cigarette use, 29(6):741-
- Snoring, perioperative care of obstructive sleep apnea, 29(2):263-275
- Social class, patient portals and blood pressure control, 29(4):452-459

# Social determinants of health

- in a clinic setting, 29(3):414-418 community engagement in impoverished communities, 29(3):325-338
- doula support during pregnancy, 29(3):308-317
- patients with diabetes served by safety-net centers, 29(3):356-370
- primary care continuity improves diabetic health, 29(3):318-324
- reducing health inequities using sociodemographic data, 29(3):348-355
- school-based health centers, 29(3): 339-347
- screening for adverse childhood experiences, 29(3):303-307
- social determinants of health and primary care, 29(3):297-300
- taking the community pulse while caring for patients, 29(3):419-422

## Social justice

complexity of "place" in primary care, 29(4):S24-S27

- countercultural heritage of family medicine, 29(4):S45–S48
- family medicine as a disruptive innovation, 29(4):S60-S63
- Generation III family physicians, 29(4):S49–S53
- holding on and letting go, 29(4):S32-S39
- impact of time and timing, 29(4): S28–S31
- people are primary, 29(4):S40–S44 personal doctoring manifesto, 29(4): S64–S68
- recharging family medicine, 29(4): S15–S18
- reimagining relationships with patients, 29(4):S1–S11
- relationships in tomorrow's health system, 29(4):S54–S59
- seeking relationships in primary care, 29(4):S19–S23
- social justice and family medicine, 29(4):S69–S71
- tribute to G. Gayle Stephens, 29(4): S12–S14
- Social networks, IUD use based on who initiated discussion of placement, 29(1):24–28
- Social stigma, same- vs. oppposite-sexpartnered patients' medical diagnoses, 29(6):688-693

# Special communications

- "A Paradox Persists When the Paradigm Is Wrong": Pisacano Scholars' Reflections from the Inaugural Starfield Summit, 29(6):793–804
- A Primary Care Panel Size of 2500 Is neither Accurate nor Reasonable, 29(4):496–499
- Researchers' Experience with Clinical Data Sharing, 29(6):805–807
- Strategies for Primary Care Stakeholders to Improve Electronic Health Records (EHRs), 29(1): 126–134
- Teamlets in Primary Care: Enhancing Patient and Clinician Experience, 29(1):135–138
- **Spider bites,** nonbacterial causes of lymphangitis, 29(6):808–812
- **Statins,** avoiding myalgia with, in exercising adults, 29(6):727–740
- Substance abuse detection, problem drug-related behavior, 29(6): 718–726

# Substance-related disorders

- PCMH recognition and chronic pain management, 29(4):474–481 problem drug-related behavior, 29(6): 718–726
- same- vs. oppposite-sex-partnered patients' medical diagnoses, 29(6):688–693
- **Subtrochanteric fractures,** bisphosphonate therapy and, 29(3):404–407

- **Suicide,** family medicine: bridge to life, 29(1):161–164
- **Surgery,** perioperative care of obstructive sleep apnea, 29(2):263–275

# Surveys and questionnaires

- academic detailing intervention for cancer screening, 29(5):533–542
- kiosk technology for blood pressure, 29(5):620-629
- parents' and pediatricians' views of partnership, 29(5):563–571
- physician advice for e-cigarette use, 29(6):741–747
- physician attitudes toward diabetes prevention, 29(6):663–671
- physician use of low-value clinical services, 29(6):785–792
- technology-based patient engagement strategies within PBRNs, 29(5): 581–591
- use of telehealth in primary care, 29(4):432-433

# Telemedicine

use in primary care, 29(4):432–433 as useful tool, 29(4):430–431

#### Telephone

- communicating delays in diagnostic evaluation, 29(4):469–473
- electronic messaging and number of incoming telephone calls, 29(5): 613–619
- providers' perspectives on palliative care, 29(6):748–758 self-report of alcohol treatment re-
- self-report of alcohol treatment referrals, 29(6):682–687
- **Temperature,** FIT for colon cancer screening, 29(6):672–681
- **Tobacco products,** physician advice for e-cigarette use, 29(6):741–747
- **Tobacco use disorder**, physician advice for e-cigarette use, 29(6): 741–747
- **Total joint replacement,** patients with, antibiotic prophylaxis for, 29(4):500–507
- Transgender persons, improving patient-centered "LGBTQ" primary care, 29(1):156–160
- **Translational medical research**, decision-to-implement worksheet, 29(5):553–562
- **Transportation,** FIT for colon cancer screening, 29(6):672–681
- **Triage,** triage amalgamated dermoscopic algorithm, 29(6):694–701

# Underserved populations

- community engagement in impoverished communities, 29(3):325– 338
- doula support during pregnancy, 29(3):308-317
- primary care continuity improves diabetic health, 29(3):318–324

## **United States**

- childhood obesity intervention, 29(4): 434–443
- evaluating Choosing Wisely<sup>TM</sup> using SORT, 29(4):512–515
- Urinary tract infections, levofloxacin in males with, 29(6):654–662
- U.S. Agency for Healthcare Research and Quality, technology-based patient engagement strategies within PBRNs, 29(5):581–591
- Vitamin D, deficiency by body weight and race/ethnicity, 29(2):226– 232
- **Vulnerable populations,** electronic portal use among, 29(5):592–603
- Watchful waiting, diagnostic testing and, 29(6):710–717

## Weight loss

- multiple myeloma and diagnostic delay, 29(6):702–709
- programs, participation in, 29(5): 572–580

## Women's health

- clinical risk tools for predicting osteoporosis, 29(2):233–239
- diagnosis and management of breast milk oversupply, 29(1):139–142
- doula support during pregnancy, 29(3):308–317
- fertility apps marketed to avoid pregnancy, 29(4):508-511
- IUD use based on who initiated discussion of placement, 29(1): 24–28
- treatment of acne in pregnancy, 29(2):254–262
- Work, use of telehealth in primary care, 29(4):432–433

## Workflow

- academic detailing intervention for cancer screening, 29(5):533–542
- clinical decision support for chronic kidney disease, 29(5):604–612
- kiosk technology for blood pressure, 29(5):620-629

# Workforce

family medicine residents and educational debt, 29(2):180–181 impact of debt on young family physicians, 29(2):177–179

# Workload

- electronic messaging and number of incoming telephone calls, 29(5): 613–619
- primary care panel size, 29(4):496–499
- technology-based patient engagement strategies within PBRNs, 29(5): 581–591
- Writing, Pisacano scholars' reflections from the Starfield Summit, 29(6):793–804