

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):718–726
- Analysis 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):474–481
- Arthritis**, infectious, antibiotic prophylaxis and total joint replacement, 29(4):500–507
- Asthma**, same- vs. opposite-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 patient-centered “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):434–443
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 blanché, 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 blanché, 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 medicine 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 low-value 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. opposite-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 safety-net 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 WiselyTM 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 WiselyTM, 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):652–653
 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):682–687

Depression
 community engagement in impoverished communities, 29(3):325–338
 family medicine: bridge to life, 29(1): 161–164
 same- vs. opposite-sex-partnered patients' medical diagnoses, 29(6):688–693
 time to remission with CCM in primary care, 29(1):10–17

Dermatology
 basal cell blanch, 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 toward, 29(6):663–671
 primary care continuity improves diabetic health, 29(3):318–324
 primary care panel size, 29(4):444–451
 referrals for diabetes education in a medical home, 29(3):377–384
 same- vs. opposite-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. opposite-sex-partnered 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–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

Double-blind method, levofloxacin in males with a UTI, 29(6):654–662

Early detection of cancer
 basal cell blanch, 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): 1–3

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–S39
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
social justice and, 29(4):S69–S71
team, provider diversity on, 29(1):8–9
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):177–179
- 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):248–253
- 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):430–431
use of telehealth in primary care, 29(4):432–433
- Health personnel**
electronic messaging and number of incoming telephone calls, 29(5):613–619
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):652–653
- Health services research**, technology-based patient engagement strategies within PBRNs, 29(5):581–591
- 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. opposite-sex-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):156–160
same- vs. opposite-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 patient-reported outcomes measure implementation, 29(1):102–115
- Hysterectomy**, physician use of low-value clinical services, 29(6):785–792
- 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):604–612
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. opposite-sex-partnered 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. opposite-sex-partnered patients' medical diagnoses, 29(6):688–693
- Medical societies**, evaluating Choosing WiselyTM 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. opposite-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**, patient-centered 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 management, 29(4):474–481
transformation, effects on child patient experience, 29(1):60–68

- vs primary care, learning more about, 29(1):4–7
- Patient-centered outcomes research**
 - stakeholder engagement in a patient-reported outcomes measure implementation, 29(1):102–115
 - stakeholder engagement in patient-reported 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 patient-reported 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):741–747
 - institutions with fewer residencies produce more physicians, 29(3):301–302
 - 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):371–376
- 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):592–603
- 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 patient-reported 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 misdiagnosed sex, 29(3):411–413
- Prevalence**
 - care coordinator prevalence in practices and PCMHs, 29(6):652–653

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

same- vs. opposite-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 testing, 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™ using SORT, 29(4):S12–S15

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–S39

impact of time and timing, 29(4):S28–S31

improving patient-centered “LGBTQ” primary care, 29(1):156–160

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):793–804

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. opposite-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):135–138

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–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

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):759–766

Public health

access to care associated with lower obesity rates, 29(2):182–190

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

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

- 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™ 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):793–804
- 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):301–302
- 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**
patients with diabetes served by safety-net centers, 29(3):356–370
- problem drug-related behavior, 29(6):718–726
- 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. opposite-sex-partnered patients' medical diagnoses, 29(6):688–693
- Sensitivity and specificity**, triage amalgamated dermoscopic algorithm, 29(6):694–701
- Sexual partners**, same- vs. opposite-sex-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 blancher, 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. opposite-sex-partnered patients' medical diagnoses, 29(6):688–693
- Smoking cessation**, physician advice for e-cigarette use, 29(6):741–747
- 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. opposite-sex-partnered 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. opposite-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 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 dermatoscopic 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™ 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