

[Medicinski fakultet u Rijeci]

Curriculum 2022/2023

[Za kolegij]

Family Medicine

Study programme: **Medical Studies in English (R)**
[Sveučilišni integrirani prijediplomski i diplomski studij]
Department: **[Katedra za obiteljsku medicinu]**
Course coordinator: **izv.prof.dr. sc. Popović Branislava**

Year of study: **6**
ECTS: **6**
Incentive ECTS: **0 (0.00%)**
Foreign language: **Possibility of teaching in a foreign language**

Course information:

Family Medicine is a compulsory course in the 6th year of the Integrated undergraduate and graduate university study in Medicine, which takes place in the 12th semester. It consists of 30 hours of lectures, 30 hours of seminars and 100 hours of practicals, a total of 160 hours (6 ECTS). The aim of the course is to enable students to familiarize with the concept of integrated health care in practice through active independent work. After completing the course, the student will be able to understand and adopt the specific role, tasks, organization, working conditions and methods of family physicians in the health system, who provides comprehensive primary and continuous healthcare to individuals, families and the community. The specific learning objectives relate to the student's ability to distinguish the specificity of family medicine from other medical disciplines (the particularity of health problems in outpatient care, methods of recognizing and solving them and making clinical decisions, the relationship patient-family-family physician, home treatment and patient monitoring, prescribing medicines, medical records management, cooperation with consultants, teamwork and community work, legislation and financing).

Course content:

Specific role of family medicine in the health system, its peculiarities and scope of action. In order to achieve this, students are introduced to the organization of the health system, as well as the position and organization of family medicine within the health system. The starting point is the determination of health needs and the way to meet them in family medicine, with special reference to prevention, standards and norms in primary health care, legislation and the importance of medical documentation. In addition to common diseases and conditions such as low back pain, anemia, sleep disorders, dyspepsia, urinary infections, chronic diseases and their connection with determinants of health, the environment and risk factors regarding their treatment and follow-up in family medicine are specially addressed. Among chronic diseases are arterial hypertension, diabetes, stroke, chronic respiratory diseases, malignant diseases and mental health care. The specifics of family medicine are a separate chapter and imply communication between a physician and patient, recognition of disease symptoms in the family medicine office, home visits as a unique way of health care in the patient's home, health care for the elderly, preschool, school and adolescent populations in modern conditions, care for terminally ill patients and treatment of chronic pain, characteristics of pharmacotherapy, prescribing drugs and writing prescriptions.

LEARNING OUTCOMES:

I. COGNITIVE DOMAIN - KNOWLEDGE

Students will be familiar with the standards and norms of primary health care as well as contracting and financing in primary health care. They will be able to recognize emergency conditions in family medicine and to list and explain work methods in family medicine.

II. PSYCHOMOTOR DOMAIN - SKILLS

Students will recognize the symptoms of the most common diseases in family medicine and will be able to plan further therapy. They will learn communication with patients and make home visits to check the patient with a biopsychosocial approach and report to the physician. Students will be able to provide all forms of therapy.

Class organization: Teaching is conducted in the form of lectures, seminars, and practicals. Lectures and seminars are held in the premises of the Faculty of Medicine and online. Practicals are held in specialist family medicine clinics of the Health Center of Primorje-Gorski Kotar County, health centers of Istria and in private specialist family medicine offices. Students are obligated to attend all forms of teaching: lectures, seminars and practicals. Attendance at classes is regularly monitored and recorded and is one of the prerequisites for obtaining the final grade.

The student is obligated to prepare the material that is discussed: to participate in the active problem solving of cases during seminar classes, to keep a logbook and to prepare an answer to a clinical question using the PEARLS method.

The teacher evaluates the student's participation in the seminar work (demonstrated knowledge, understanding, ability to pose problems, reasoning, etc.). The seminar topics are dealt with individually or in smaller groups. During the seminar, students will solve a health problem based on the presented case and present the case and its solution to the group of students. Students are required to prepare for the topic of the seminar and to answer during the seminar the theoretical questions posed by the teacher. Attendance and activity at seminars are prerequisites for the final grade.

The student's other activities are also evaluated at practicals in family medicine clinics. The student's obligation is to bring a white coat and a stethoscope, fill in the Clinical Skills Booklet and the logbook signed by the family physician.

Each student is obligated to prepare one written clinical report using the PEARLS method (Practical Evidence About Real Life Situations), search and write EB answers to questions arising from cases in daily work. The questions are related to patient case studies presented on practicals. It is necessary to find the best evidence/answer for the patient. The answer to the clinical question (Appendix 1) is submitted in written form at the end of the practicals to the teacher, who convinces it and in electronic form has to be sent to assistant's e-mail. Acquired clinical skills and clinical presentations are collocated orally with

the coordinator of the practicals.

List of assigned reading:

1. Katić M, Švab I et al. Family Medicine, Zagreb; Alfa, 2013.
2. Bergman Marković B, Diminić Lisica I, Katić M et al. Smjernice u praksi obiteljskog liječnika (Guidelines in the practice of a family doctor), Zagreb, Medicinska naklada, University of Rijeka, 2020. (translated chapters)

List of optional reading:

1. Selected articles from relevant journals and books available on the internet

Curriculum:

Exercises list (with titles and explanation):

SM P1 Organization and program of measures in the School Medicine Service

- 1) Systematic reviews**
- 2) Dedicated reviews**
- 3) Research**

SM P2 Examination of children for enrollment in the 1st grade of primary school

- 1) Examination to determine the state of health and ability to teach physical education and health and determine the appropriate program**
- 2) Vaccination of students**
- 3) Chek -ups when an infectious disease appears in the school and undertaking anti-epidemic interventions**

SM P3 Counseling work

- 1) Counseling work for students, parents, teachers and professors**
- 2) Health education and health promotion**
- 3) Tours of schools and school kitchens**
- 4) Work in committees to determine the appropriate form of education**
- 5) Attending parents' meetings, teachers' council and individual contacts with school staff**
- 6) Examination of children for enrollment in the first grade of primary school**
- 7) Pediatric, family and social history-taking, child's somatic status, child's psychophysical preparedness for school, counseling work with families**
- 8) Consulting**
- 9) Health education of young people is aimed not only at increasing their knowledge but also at providing support and developing social skills necessary for avoiding risky behavior, preventing sexually transmitted diseases and unwanted pregnancies. Active participation of young people in prevention programs contributes to the development of self-esteem and responsible sexual behavior**

SM P4 Health promotion

Health promotion means improving health and creating the potential for good health before a health problem or health threat occurs. Health promotion is defined as a process that enables young people to improve their health and train them to control their own health. With this goal, public health activities are organized, educational material is created and distributed, and health information is provided to the public through various media.

SM P5 . Independent presentation of one thematic unit from health education

- 1) Oral hygiene**
- 2) Invisible calories**
- 3) Structure of the human body**
- 4) Puberty - hygiene**
- 5) Sexuality - STD**

6) Sexuality – contraception

FM P1 The role of the family physician and his team in protecting the health of the family (organization of work)

to describe the organization of work and the specific role of the family medicine team

FM P2 Clinical examination skills in family medicine

to perform the first examination of a patient in a family medicine practice with supervision.

FM P3 Diagnostic procedures (sampling, otoscopy, rhinoscopy, dermatoscopy, electrocardiography, spirometry, ultrasound)

to perform a venepuncture and draw a blood sample for laboratory analysis. To perform certain procedures essential in the diagnosis and monitoring of chronic diseases.

FM P4 Parenteral drug administration

to administer drugs parenterally (intramuscularly, intravenously)

FM P5 To perform ear irrigation, treating the wound

to explain the rules of wound treatment. To dress the wound independently. To perform ear irrigation dependently

FM P6. Prescribing drugs

to independently prescribe medications needed for treatment

FM P7 Prescribing devices

to differentiate prescription method of orthopedic and other aids

FM P8 Home visit and medical examination at home

to visit the patient at home

FM P9 Cooperation with the visiting nurse and health care at home

to visit the patient as part of the outpatient service.

FM P10 Writing the logbook and the Clinical Skills Booklet and midterm exam with the mentor

to fill out the logbook and present it to the teacher. To answer theoretical questions and perform practical tasks on the example of a patient.

Student obligations:

Students are obligated to regularly attend and actively participate in all forms of classes

Exam (exam taking, description of the written/oral/practical part of the exam, point distribution, grading criteria):

Assessment (ECTS credits):

The assessment of students is carried out in accordance with the current University of Rijeka Study Regulations and Ordinance on Student Assessment and Evaluation at the Faculty of Medicine in Rijeka (adopted by the Faculty Council of the Faculty of Medicine in Rijeka). The students are evaluated during classes and on the final exam (a total of 100 grade points). Of a total of 100 grade points, the student can acquire 50 grade points during classes and 50 grade points on the final exam.

I. During the class, the following is evaluated (maximum 50 grade points):

Out of the maximum of 50 grade points that can be obtained during classes, the student must achieve a minimum of 25 grade points to take the final exam. A student who achieves 24.9 or less grade points (F grade category) must re-enroll in the course. The student acquires grade points through active participation in classes: attending lectures and seminars and completing a seminar paper with an oral midterm exam. During the practicals, the students' activity and written clinical presentation are evaluated. At the end of the lectures, a midterm exam is written to assess students' acquired knowledge during the course.

Activity at the seminars: The seminars are designed according to the principle of case presentation. Students must prepare for seminars AND participate in case discussions.

- I. insufficient (1) 0
- II. sufficient (2) 5
- III. good (3) 6
- IV. very good (4) 8
- V. excellent (5) 10

The assessment of the exercise results from the activities in the exercises (maximum 10 points) and the answer to the clinical question (maximum 10 points).

Activity in the practicals:

- I. insufficient (1) 0
- II. sufficient (2) 5
- III. good (3) 6
- IV. very good (4) 8
- V. excellent 10

Clinical question:

- I. insufficient (1) 0
- II. sufficient (2) 5
- III. good (3) 6
- IV. very good (4) 8
- V. excellent 10

Mandatory written midterm exam: The written midterm exam consists of 50 questions and carries a maximum of 20 grade points (range of 10–20). The criterion for obtaining grade points is 25 correctly solved questions, i.e. 50% of all questions must be solved. The minimum number of grade points is 10 in case of 25–26 correctly solved questions. Attending the written midterm exam is mandatory. Any absence must be justified in writing, after which the student can retake the midterm exam. The midterm exam will take place. The points obtained on the written midterm exam are converted into grade points as follows:

- a. 25–26 10
- b. 27–28 11
- c. 29–30 12
- d. 31–32 13
- e. 33–34 14
- f. 35–36 15
- g. 37–38 16
- h. 39–41 17
- i. 42–44 18
- j. 45–47 19
- k. 48–50 20

Students must obtain a minimum of 25 grade points (prerequisite for taking the final exam) and a maximum of 50 grade

points on lectures, seminars, practicals and the written midterm exam.

- a. Activity at the seminars minimum 5 maximum 10
- b. Activity at the practicals minimum 5 maximum 10
- c. Clinical question minimum 5 maximum 10
- d. Written midterm exam minimum 10 maximum 20

Which gives a total of minimum 25 and a maximum of 50.

II. Final exam (up to 50 grade points)

The final exam consists of a practical and an oral part and carries a maximum of 50 grade points.

- I. insufficient (1) Practical part 0 Oral part 0
- II. sufficient (2) Practical part 12.5 Oral part 12.5
- III. good (3) Practical part 17 Oral part 17
- IV. very good (4) Practical part 21 Oral part 21
- V. excellent (5) Practical part 25 Oral part 25

Who can take the final exam:

A student who has attended classes and does not have a greater number of absences (excused) than allowed according to the Study Regulations.

Who can not take the final exam:

A student who has achieved 0 to 24.9 grade points during classes or who has 30% or more absences from classes. Such a student is unsuccessful (1) / F and cannot take the final exam, i.e. they must re-enroll in the course in the following academic year.

III. The final grade is the sum of the grade points obtained during classes and on the final exam:

- I. A (90-100%) excellent (5)
- II. B (75-89.9%) very good (4)
- III. C (60-74.9%) good (3)
- IV. D (50-59.9%) sufficient (2)
- V. F (students who achieved less than 25 grade points during classes or who scored under 50% on the final exam) insufficient (1)

Other notes (related to the course) important for students:

Teaching content and all information related to the course can be found on the SharePoint portal intranet of the Department of Family Medicine

COURSE HOURS 2022/2023

Family Medicine

Exercises

(Place and time or group)

List of lectures, seminars and practicals:

EXERCISES (TOPIC)	Number of hours	Location
SM P1 Organization and program of measures in the School Medicine Service	7	
SM P2 Examination of children for enrollment in the 1st grade of primary school	7	
SM P3 Counseling work	7	
SM P4 Health promotion	7	
SM P5 . Independent presentation of one thematic unit from health education	7	

FM P1 The role of the family physician and his team in protecting the health of the family (organization of work)	7	
FM P2 Clinical examination skills in family medicine	7	
FM P3 Diagnostic procedures (sampling, otoscopy, rhinoscopy, dermatoscopy, electrocardiography, spirometry, ultrasound)	7	
FM P4 Parenteral drug administration	7	
FM P5 To perform ear irrigation, treating the wound	7	
FM P6. Prescribing drugs	7	
FM P7 Prescribing devices	7	
FM P8 Home visit and medical examination at home	7	
FM P9 Cooperation with the visiting nurse and health care at home	7	
FM P10 Writing the logbook and the Clinical Skills Booklet and midterm exam with the mentor	7	

EXAM DATES (final exam):
