[Medicinski fakultet u Rijeci]

Curriculum
2023/2024

[Za kolegij]

Family Medicine

Study program:	**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 thepatient 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 problemsolving 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 theacher. 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:

[Predavanja] list (with titles and explanation):

Lecture 1. Definition, content and work methods in family medicine

Learning outcomes: Identify the aim of the Family Medicine course and explain the European definition of family medicine. Recognize and describe the model of patient care and specific work methods in family medicine: specific decision-making, treatment of patients with comorbidity, cooperation with consultants, home treatment, prescription of medications and emergencies outside institutions. The student will be able to describe the methods of teamwork and the biopsychosocial, holistic and ethnomedical models. Decision-making differs from decision-making in other medical specialities and requires a systematic approach with respect for the special characteristics of a family physician work. This process must be maximally efficient, make diagnosis and treatment as rational as possible, and respect the patient's right to information. With timely and appropriate referral for further treatment, the family physician achieves optimal patient care while avoiding unnecessary, expensive and aggressive diagnostic and therapeutic procedures. The student will understand the role and responsibility of the family physician in applying the principle of rational prescription of drugs with an individual approach to the patient. They will recognize the specific form of work of family medicine physicians – caring for patients at home. As a first-contact practitioner, a family medicine physician also encounters various emergencies. Students will determine and list the methods of treating the most common emergencies in family medicine.

Lecture 2. Patient-oriented care, Family approach

Learning outcomes: To learn that knowing the family in health care is important for the work of a family medicine . The structure of the family and its functioning, diseases of individual members and roles in the family are important for understanding the etiology of health problems and the treatment outcome. Students will recognize and describe the specifics of the relationship between the patient and the family physician. Patient-physician communication is a complex verbal and non-verbal process in which a therapeutic relationship develops, where an empathic approach is very important in which the physician assesses the patient’s individual needs, provides him with the necessary information and gives him the option of choosing treatment and overall care. Students will recognize and describe dealing with various patient personalities and complex medical and social situations. They will learn that good care can only be provided if the physician understands the patient’s personal life context. Even the first meeting is the way to develop a good or bad physician-patient relationship, and all their interactions include expectations from both sides. Students will understand that the long-term relationship between the patient and his family physician is specific and represents the basis for effective and efficient work with good health outcomes.

Lecture 3. Preventive procedures

Learning outcomes:

> Define and describe preventive procedures in family medicine as one of the family physician’s basic tasks according to the definition of family medicine. Learn and describe the terms and content of primary, secondary, tertiary and quaternary prevention. Define and describe the method of opportunistic screening and participation in special prevention programs for the most common public health problems.

Lecture 4. Diagnostic tests in family medicine

Learning outcomes: Define and describe the referral model for diagnostic tests as part of the work of family medicine physicians. Referral for diagnostic tests is one of the stages in the process of treating patients, Therefore, a family medicine physician needs to master this specific discipline in order to take better care of his patients while rationally using all the resources of the health system and avoiding the specific risks that some tests involve with appropriate referrals. In the process of referral for diagnostic tests, the family medicine physician should have good knowledge of the indications and contraindications, the specificity and sensitivity of each diagnostic test, possible complications, patient preparation and the course of the test itself as well as the interpretation of the findings. Also, the physician should have the skills necessary for explaining to the patient the reasons for the referral and what is expected during the preparation for the examination so that the patient cooperates as much as possible. It is also necessary to obtain the patient’s consent to perform the diagnostic examination and to explain to the patient why it is needed.

Lecture 5. Characteristics of pharmacotherapy in family medicine

Learning outcomes:

To learn the features of quality drug prescription (adequate choice of drug, optimal dose with the least risk and rational cost) and the common problems faced by family medicine physicians when prescribing pharmacotherapy. The importance of appropriate patient monitoring when prescribing drugs for the long-term treatment of chronic diseases will be emphasized, as well as the importance of polypharmacy when determining therapy for patients with comorbidities, drug-drug interactions and adverse drug reactions.

Lecture 6. Treatment of patients with multimorbidity in FM

Learning outcomes: The student will understand the specificity of treating patients with multiple simultaneous diseases as one of the fundamental characteristics of the work of family medicine specialist. They will learn that the treatment of patients with several simultaneous diseases is not identical to the sum of the treatment of individual diseases. They will also learn that there is a specific strategy and approach to the treatment of patients with multimorbidity, which includes assessment of the main goal of treatment, assessment of disease interactions, interactions of drugs and medical procedures, and assessment of priorities. It will adopt the foundations of a patient-centered care strategy based on the example of an approach to a patient with multimorbidity that requires respecting the patient's preferences with regard to the set goals.

Lecture 7. Health protection of the elderly

Learning outcomes: Students will learn that the elderly have numerous peculiarities and often suffer from a number of chronic diseases at the same time (comorbidity, multimorbidity), so choosing the appropriate treatment for individual diseases is complex. They will also learn that aging affects the effectiveness of the drug because older people are more often exposed to polypharmacy and the resulting adverse drug reactions. Aging increases the fragility or sensitivity of an individual to various stimuli that can result in unfavorable outcomes. Students will describe the concept of frailty, which was introduced about 30 years ago in order to better understand the changes in the health status of the elderly with the aim of identifying the most vulnerable patients. In geriatrics, frailty is defined as a biological syndrome clinically characterized by slower and/or incomplete recovery from stressors, involving the interaction of biological, psychological and social factors, associated with a higher risk of adverse outcomes, a decline in functional capacity, delirium, falls, institutionalisation, hospitalization and death. Measuring frailty helps to select individual interventions for the individual with the aim of improving outcomes

Lecture 8. Patient with sleep disorder in family medicine

Learning outcomes:

to become familiar with the frequent but insufficiently treated health problem of sleep disorders. Insomnia is characterized by difficulty falling asleep, staying asleep, or the problem of waking up too early. Sleep disorders have in common the difficulty in functioning and the impact on the quality of life, as well as the risks for the onset of numerous inflammatory and chronic diseases. Students will learn to recognize and diagnose in a timely manner sleep disorders as a separate diagnosis and not only as a symptom of other comorbidities.

Lecture 9. Treatment of respiratory diseases in family medicine

Learning outcomes: To recognize risk factors in the onset of respiratory diseases in the light of the biopsychosocial model. Differences and similarities between COPD and bronchial asthma. Smoking and chronic respiratory diseases, the importance of promoting non-smoking. Describe the role of the family physician in the prevention of chronic respiratory diseases and management of COPD. Spirometry in the family physician’s office. GOLD and GINA guidelines in the treatment of chronic respiratory diseases. Define when to refer a patient to a pulmonologist? Proper use of the inhaler, checking patient cooperation. Treatment of COPD exacerbation. Describe the therapy with concentrated oxygen in home conditions

Lecture 10. Patient with arterial hypertension in family medicine

Learning outcomes: To learn the basics of non-pharmacological and pharmacological treatment of arterial hypertension. To recognize the significance of arterial hypertension as a public health problem, as most often a chronic disease, the most significant independent, variable cardiovascular risk factor. The clinical approach of a family physician to a patient with arterial hypertension based on modern guidelines for the treatment of hypertension and prevention of cardiovascular diseases is discussed. Students will learn the importance of patient cooperation in pharmacological and non-pharmacological treatment. Define and describe the specifics of hypertension treatment in patients with concurrent diseases

Lecture 11. Patient with urinary infection in family medicine

Learning outcomes: Learn the content of the guidelines for the treatment of patients with a urinary infection. Urinary tract infections represent a heterogeneous group of clinical syndromes that differ in epidemiology, etiology, localization, severity and frequency. The guidelines provide therapeutic recommendations for the majority of patients with the aim of eliminating the symptoms of the disease, eradicating the causative agent and preventing recurrence. Over 90% of antimicrobial drugs are prescribed at the primary health care level. Students will define and describe the rational use of antimicrobial drugs as a key process in preventing the growth of bacterial resistance. Students will also learn about the prevention of urinary infections, as well as their importance in the presence of comorbidities

Lecture 12. Treatment of patients with diabetes in family medicine

Learning outcomes: To define the role of the family physician in the early detection of diabetes, especially type 2 diabetes, prevention and treatment of diabetes within the biopsychosocial model. Learn and describe non-pharmacological treatment methods (proper diet, physical exercise, not smoking) and learn the principles of pharmacological treatment with oral antidiabetics and indications for treatment with insulin preparations. Define and describe the signs of hypoglycemia. List the complications of diabetes. Describe the role of chronic stress in the onset and development of diabetes and ways to reduce the perception of stress. Describe and define when to refer the patient to a diabetologist

Lecture 13. Polyvascular disease

Learning outcomes: Define and describe polyvascular diseases as the simultaneous presence of clinically relevant atherosclerotic lesions in at least two vascular territories and as a sign of advanced atherosclerosis with a very high health risk. The most common are combinations of coronary disease, cerebrovascular disease and peripheral artery disease, but manifestations in other arteries (renal, mesenteric and aorta) may also be present. Students will learn the features of each component and combination, clinical manifestation, and describe basic treatment procedures. Also, to present the possibilities of early diagnosis in general medicine, which includes the identification of risk factors for atherosclerosis, various tests, and measurements (blood pressure, 24-hour blood pressure monitoring, ECG, ABI, blood glucose tests, lipid profile, glomerular filtration rate) as well as procedures in patient monitoring. Explain the model of rational referral to diagnostic and therapeutic procedures and the model of coordination within the multidisciplinary team of health professionals who care for a patient with comorbidities, all with the aim of reducing the complications of the diseases (amputation, acute myocardial infarction, or cerebrovascular insult) and preserving the quality of life

Lecture 14. Patient with anemia in family medicine

Learning outcomes: To define the criteria for the diagnosis of anemia and the laboratory criteria for the most common types of anemia. To adopt an attitude about anemia as a symptom and to learn the basic algorithms of diagnostic and therapeutic procedures in patients with the most common types of anemia in family medicine. Recognise a proactive approach of the family physician in the early detection of anemia in the population

Lecture 15. Patient with a chronic wound in family medicine

Learning outcomes: To define the term chronic wound, the factors of difficult healing and the incidence of chronic wounds. List the characteristics of the most common types of chronic wounds: venous and arterial lower leg wounds, diabetic foot wounds and decubitus wounds, in contrast to the so-called atypical wounds. Show basic clinical and diagnostic procedures in wound assessment, measurements available in vascular assessment (ankle index) and wound sample collection procedures for diagnostic tests (microbiological, pathohistological). Explain wound complications and treatment and pain management. Describe the basic principles of local wound treatment and, depending on the type of wound, show specific treatment procedures, such as compression therapy for a venous lower leg wound. To present the diagnostic and therapeutic possibilities of a multidisciplinary team in the treatment of patients with chronic wounds and the importance of such an organized team. Learn the basics of adjuvant therapy such as hyperbaric oxygen therapy, negative pressure therapy, etc. Recognize the role of the family medicine physician and his team in chronic wound care, as well as the individualized, patient-oriented approach and the impact of this form of work on the quality of life of the patient and the family.

Lecture 16. Approach to the patient with dyspepsia

Learning outcomes:

To learn the approach to the patient with dyspepsia in family medicine. Dyspepsia is a common symptom in patients in family medicine practice. The prevalence in the adult population is about 40%. The student will get to know and adopt the procedure of clinical evaluation, diagnosis and treatment of patients with dyspepsia, which depends on age, symptoms and *Helicobacter pylori* infection. When approaching a patient with dyspepsia, it is necessary to assess the possible effect of other comorbidities and medications that the patient regularly uses. Prompt or early endoscopy is recommended for patients with alarming symptoms and patients over 50 years of age with new onset dyspepsia. In patients younger than 50, the recommended strategy is "test and treat". In some patients, treatment is carried out by acid suppression.

To adopt the approach to patients with hepatobiliary and pancreas diseases presenting with symptoms of dyspepsia.

To adopt the approach to patients with a mental disorder, the treatment of which can improve the symptoms of dyspepsia.

Lecture 17. Stroke patient

Learning outcomes: To recognise characteristics of stroke as a global public health problem and a disease of the individual, family and community. To define the clinical determinants of stroke and the most important treatment methods. To get acquainted with the role of the family medicine physician in the prevention of stroke as the most important strategy for reducing the consequences of stroke and in the care of stroke patients. To get acquainted with the management of the stroke patient and cooperation with a multidisciplinary team of consultants and associates at the primary level. To emphasize the importance of successful communication and the specific relationship between a physician and patient and family members as the basis for changing lifestyle habits and accepting treatment methods

Lecture 18. Mental health protection – the most common mental disorders in family medicine.

Learning outcomes: To learn the basics of pharmacological and non-pharmacological treatment of the most common mental disorders and diseases. Recognize the problem of mental health as a public health problem. Define the most common mental disorders and diseases and describe the family physician's approach. The family physician's tasks are prevention, early detection and treatment, cooperation with the council psychiatric service in joint treatment and monitoring of reversible and chronic mental illnesses with an emphasis on training the patient for work and inclusion in the community in terms of the biopsychosocial model. Students will get to know the unity of mental and physical pathophysiological processes and the importance of simultaneous diseases as well as the mutual connection and influence of physical diseases on mental diseases and vice versa.

Lecture 19. Approach to an adolescent with mental health problems

Learning outcomes: List and describe the most common mental health problems typical for adolescence. Adopt the basics of communication and intervention with young people who show signs of anxiety, stress, mood disorders, adjustment, behavior disorders as well as experimentation with addictive substances. Learn the content and basics of counseling work with pupils, students, parents, teachers and professors, get to know the methods of conducting health education and health promotion through lectures, group work, forums, parent meetings and teacher and teacher council meetings.

Lecture 20. Chronically ill child in family and school

Learning outcomes: Describe the coping process with a child and family in the event of a chronic illness. Recognize and prevent the occurrence of low self-confidence, difficulties in behavior, social isolation, anxiety and depression. Students will learn about the school physician's work in committees for determining the appropriate form of schooling, all related to the treatment of children with chronic diseases and difficulties that affect the child's schooling and place in the family and society.

Lecture 21. Patient with low back pain

Learning outcomes Back pain is one of the most common reasons for visiting a family medicine physician, about 80% of the population has low back pain during their lifetime. It represents a significant medical and social problem and is the main reason for temporary sick leave in younger people. Students will recognize symptoms ("red flag" signs) and define causes of low back pain (non-specific low back pain, low back pain associated with radiculopathy, inflammatory low back pain, low back pain associated with another specific cause), then determine diagnostic and therapeutic procedures. They will describe how to treat low back pain, prevent recurrence of complaints and possible complications of the disease and when to refer the patient to a consulting physician.

Lecture 22. Patient with a malignant disease

Learning outcomes: Describe the specificities of working with oncology patients in family medicine. We are witnessing an increase in the incidence and prevalence of malignant diseases. The diagnosis of a malignant disease causes an intensive stress reaction in most patients and their families, which results in adjustment disorder, anxiety and depression. The patient is worried about the future, undergoing stages of adaptation The list of seminars with descriptions: to a new life situation. A family physician, who uses a biopsychosocial model and a holistic approach to treatment, is of key importance for the successful adaptation of the patient and his family to the new situation. Students will learn about the importance of empathy in communication with the patient and his family, as well as basic psychotherapeutic interventions in working with oncology patients. Also, students will learn about the basics of palliative care for patients with progressive malignant disease and an infaust prognosis and the role of the family physician in the palliative care team.

Lecture 23. Pain treatment

Learning outcomes: Pain is one of the most common symptoms that bring patients to the family physician. The student will learn about the pathophysiology of pain sensation and the assessment of pain perception through the biopsychosocial approach. In the assessment of pain, in addition to the anamnesis, pain perception scales and questionnaires are important. The differences between acute and chronic pain will be defined, with special reference to malignant pain. There are also characteristics that distinguish nociceptive (somatic and visceral) and neuropathic pain. As a special entity, important in the work of a family physician, psychogenic pain will be treated. Pharmacological treatment of pain and nonpharmacological methods of pain treatment will be presented through the biopsychosocial model. Also, the role of pain perception in determining temporary work incapacity will be presented

Lecture 24. Sexual health

Learning outcomes: To learn about the basics of sexual medicine and gain knowledge about sexual health and sexual disorders as well as the approach to problems from this complex and interdisciplinary field. The field of sexuality includes family medicine physicians, urologists, gynecologists, cardiologists, endocrinologists, psychiatrists, psychologists, psychotherapists, occupational therapists, midwives, rehabilitators and defectologists, and requires teamwork. Issues in the field of sexuality include family medicine physicians since the family medicine physician is the person of first contact, a trusted person who knows family dynamics and is also the person to whom the patient should turn in case of sexual difficulties. Students will learn about communication about "sensitive" content and about connecting experts who deal with solving problems in the field of sexuality. They will learn how sexual health affects the patient’s overall health and see the connection between sexual difficulties and chronic diseases. Chronic diseases and sexual complaints are in a mutual cause-and-effect relationship, given that chronic diseases can affect the occurrence of sexual complaints as well as the therapy needed to treat them, and sexual complaints can affect the progression of chronic diseases. Students will understand the importance of recognizing sexual problems, making a correct diagnosis and using diagnostic procedures. It will determine the basics of the application of therapeutic methods in the treatment of sexual problems.

Lecture 25. Emergencies in family medicine

Learning outcomes: Emergencies require urgent care and stabilization of basic life functions. It is important that health professionals know how to recognize and treat it appropriately. This is especially important to a family medicine physician who encounters a wide range of different conditions in the early stages of the disease in which the clinical presentation is often not yet completely clear. Students will learn skills necessary for independent decision-making on the correct treatment in emergencies, especially in circumstances (home visits) in which they have to make judgments based on a good (hetero) history-taking and clinical status without the possibility to use various diagnostic tests. Students will learn the importance of identifying a vulnerable patient and the importance of the continuity of care provided by the family physician to the patient. In the care and treatment of emergencies, we follow the algorithm for emergency conditions.

[Vježbe] list (with titles and explanation):

Practical 1. The role of the family physician and his team in protecting the health of the family (organization of work) Family Medicine

Learning outcomes: to describe the organization of work and the specific role of the family medicine team.

Practical 2. Clinical examination skills in family medicine- Family Medicine

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

Practical 3. Diagnostic procedures (sampling, otoscopy, rhinoscopy, dermatoscopy, electrocardiography, spirometry, ultrasound) - Family Medicine

Learning outcomes: 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.

Practical 4. Parenteral drug administration- Family Medicine

Learning outcomes: to administer drugs parenterally (intramuscularly, intravenously).

Practical 5. To perform ear irrigation, treating the wound- Family Medicine

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

Practical 6. Prescribing drugs- Family Medicine

Learning outcomes: to independently prescribe medications needed for treatment.

Practical 7. Prescribing devices- Family Medicine

Learning outcomes: to differentiate prescription metod of orthopedic and other aids

Practical 8. Home visit and medical examination at home- Family Medicine

Learning outcomes: to visit the patient at home

Practical 9. Cooperation with the visiting nurse and health care at home- Family Medicine

Learning outcomes: to visit the patient as part of the outpatient service.

Practical 10. Writing the logbook and the Clinical Skills Booklet and midterm exam with the mentor- Family Medicine

Learning outcomes: 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.

Practical 1. Organization and program of measures in the School Medicine Service- School Medicine

Learning outcomes:
1) Systematic reviews
2) Dedicated reviews
3) Research

Practical 2. Examination of children for enrollment in the 1st grade of primary schoo

Learning outcomes:
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

Practical 3. Counseling work- School Medicine

Learning outcomes:
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

Student obligations:
Assessment (exams, description of written/oral/practical exam, the scoring criteria)
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

Practical 4. Health promotion - School Medicine

Learning outcomes: 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.

Practical 5. Independent presentation of one thematic unit from health education - School Medicine

Learning outcomes:
1) Oral hygiene
2) Invisible calories
3) Structure of the human body
4) Puberty – hygiene
5) Sexuality – STD
6) Sexuality – contraception

[Seminari] list (with titles and explanation):

Seminar 1. Disease symptoms in the family medicine office (headache, chest pain, abdominal pain, musculoskeletal pain, shoulder pain, low back pain)

Learning outcomes:
1) Febrile condition. Dyspnoea
2) Headache, syncope, coma
3) Chest pain, abdominal pain. Musculoskeletal pain – pain in the neck, lower back, shoulder, joint
Literature for the seminar:
1) Assigned and optional reading for the exam

Seminar 2. Communication between physician and patient (chronic patient, crying patient, angry patient)

Learning outcomes:
1) Basic concepts from communication – repetition. Motivational interview
2) Patient-physician relationship (transfer-countertransference)
3) Relationship with special groups of patients

Literature for the seminar:
1) Hall K, Gibbie T, Lubman DI. Motivational interviewing techniques. Facilitating behavior change in the general practice setting. AuSTRAlian Family PhysiCiAn 2012;9(41).
2) Miller WR, Rollnick S. Motivational interviewing: preparing people for change. Jastrebarsko, Publication Slap 2013.

Seminar 3. Temporary incapacity for work – sick leave. Cooperation with consultants at the secondary health care level

Learning outcomes:
1) Assessment of determination of work incapacity
2) Factors affecting the implementation of determining work incapacity
3) Duration of work incapacity
4) Treatment and rehabilitation of work incapacity
5) Documentation accompanying the decision on work incapacity

6) Referral to secondary or tertiary health care

7) Basics of cooperation and communication between family doctor and consultant

Literature for the seminar:
1) Rulebook on the longest periods of sick leave. OG 153/09 from 2009
2) Assessment of work ability in health and pension insurance. Srebrenksa Mesić, Nada Turčić, Jadranka Mustejbegović 20017.
3) Jelana Macan, Marija Zavalić. Assessment of work ability in occupational medicine. 2019.

4) Vajd R, Cerovečki Nekić V. Refferals in : Katić M, Švab I et al. Family Medicine, Zagreb; Alfa, 2017. p 289-97.

Seminar 4. Chronic wound

Learning outcomes:
1) Characteristics of the typical wounds: venous and arterial leg ulcer, pressure ulcer, diabetic foot ulcer
2) Wound assessment, complications
3) Local treatment: debridement, wound dressings, compression therapy
4) Principles of home care, cooperation within the family medicine team

Literature for the seminar
1. Sinožić T. Smjernice za liječenje kronične rane. U: Bergman Marković B, Diminić Lisica I, Katić M. Smjernice u praksi obiteljskog liječnika. Zagreb, Medicinska naklada; 2020: 301-17.
2.Harding K. Simplifying venous leg ulcer management. Wounds International 2015, 1-25.
3. World Union of Wound Healing Societies (WUWHS) Position Document. Local management of diabetic foot ulcers: Wounds International 2016, 3-27.

Seminar 5. Presentation of patients with arterial hypertension and comorbidities

Learning outcomes:
1) Assessment of patients with arterial hypertension
2) Treatment of patients with arterial hypertension and chronic heart failure with non-pharmacological and pharmacological measures, prescription of antihypertensive drugs
3) Treatment of patients with arterial hypertension and chronic kidney disease

Literature for the seminar:
1) mandatory and supplementary literature for the exam

Seminar 6. Home visit . Home treatement of patients with multimorbidity

Learning outcomes:
1) Physician’s bag. Home visits and home treatment
2) Patronage work
3) Health care at home

Literature for the seminar:
1) Mandatory and supplementary literature for the exam

Seminar 7. Patient with pain syndrome

Learning outcomes:
1. To learn the diagnosis and differential diagnosis of various types of chronic pain
2. To learn the application of adequate therapeutic procedures for the stated conditions:
-Musculoskeletal pain - pain in the neck, lower back
-Pain in the shoulder, elbow, wrist
-Pain in the knee, ankle joint
3. Learn the etiology and pathophysiology of chronic pain, with special reference to complex regional painsyndrome (CRPS).

Literature for the seminar:
1. Assigned and optional reading for the exam
2. Haller H, Cramer H, Lauche R, Dobos G. Somatoform disorders and medically unexplained symptoms in primary care. Dtsch Arztebl Int. 2015 Apr 17;112(16):279-87
3. Lloyd ECO, Dempsey B, Romero L. Am Fam Physician. 2021 Jul 1;104(1):49-55
4. Kessler A, Yoo M, Calisoff R. Complex regional pain syndrome: An updated comprehensive review. NeuroRehabilitation. 2020;47(3):253-264
5. Urits I, Charipova K, Gress K, Schaaf AL, Gupta S, Kiernan HC, Choi PE, Jung JW, Cornett E, Kaye AD, Viswanath O. Treatment and management of myofascial pain syndrome. Best Pract Res Clin Anaesthesiol. 2020 Sep;34(3):427-448
6. Urits I, Shen AH, Jones MR, Viswanath O, Kaye AD. Complex Regional Pain Syndrome, Current Concepts and Treatment Options. Curr Pain Headache Rep. 2018 Feb 5;22(2):10

Seminar 8. Presentation of patients with mental disorders

Learning outcomes:

1) Anxious and/or depressed patient in a family medicine office (psychological evaluation, drug treatment, psychological counseling, supportive psychotherapy. When should a patient be referred to a psychiatrist?)
2) Psychosomatic diseases. Difference between psychosomatic diseases and somatization/somatoform disorder. The role of stress in the onset and course of psychosomatic diseases. Examples of psychosomatic diseases (arterial hypertension, diabetes, bronchial asthma...)
3) Psychotic patient. Communication with a psychotic patient. Monitoring cooperation in drug treatment. Psychological support

Literature for the seminar:
1) Assigned and optional reading for the exam

Seminar 9. Presentation of patients with diabetes and comorbidities

Learning outcomes:
1. Learn to recognize and monitor risk factors for the development of diabetes and learn to minimize them
2. Learn how to diagnose diabetes, the progression of the disease and the progression of accompanying conditions complication
3. Introduction of therapy and monitoring of the patient (case reports)

Literature for the seminar
1. Assigned and optional reading for the exam
2. Chatterjee S, Khunti K, Davies MJ. Type 2 diabetes. Lancet. 2017 Jun 3;389(10085):2239-2251
3. Zheng Y, Ley SH, Hu FB. Global etiology and epidemiology of type 2 diabetes mellitus and its complications. Nat Rev Endocrinol. 2018 Feb;14(2):88-98
4. Hackett RA, Steptoe A. Type 2 diabetes mellitus and psychological stress - a modifiable risk factor. Nat Rev Endocrinol
5. Ma Q, Li Y, Li P, Wang M, Wang J, Tang Z, Wang T, Luo L, Wang C, Wang T, Zhao B. Research progress in the relationship between type 2 diabetes mellitus and intestinal flora. Biomed Pharmacother. 2019 Sep;117:109138
6. Kolb H, Martin S. Environmental/lifestyle factors in the pathogenesis and prevention of type 2 diabetes. BMC Med. 2017 Jul 19;15(1):131

Seminar 10. Work with school children and adolescents (specificities in communication)

1) Case report: experimenter in the physician’s office (how to get him, who to include...)
2) Case report: suspicion of bullying in a school child (interdisciplinary approach, who to include in the treatment, who to cooperate with...)
3) Case presentation: an obese child in the physician’s office (how to win the child over, who to include...)
4) Debate: sex education YES/NO (two each prepare their point of view and have half the group on their side)
5) Debate: vaccination YES/NO (two students each prepare their point of view and have half the group on their side)
6) Health education for younger school-aged children (lecture on proper nutrition and exercise adapted to nine-year-olds, the rest of the group are "pupils" and behave that way)
7) Health education for high school students (lecture on sexually transmitted diseases adapted to fifteenyear-olds, the rest of the group are "pupils" and behave that way)
8) Health education for high school students (lecture on contraception adapted to sixteen-year-olds, the rest of the group are "pupils" and behave that way)

Literature for the seminar:
2) Assigned and optional reading for the exam

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 2023/2024

Family Medicine

[Predavanja] (Place and time or group)	**[Vježbe]** (Place and time or group)	**[Seminari]** (Place and time or group)
11.03.2024		

Lecture 1. Definition, content and work methods in family medicine:
• [P08] (08:00 - 10:00) [159]
  ○ FM_375
 	
Lecture 2. Patient-oriented care, Family approach:
• [P08] (08:00 - 10:00) [159]
  ○ FM_375
 	
Lecture 6. Treatment of patients with multimorbidity in FM:
• [P08] (10:00 - 11:00) [159]
  ○ FM_375
 	
Lecture 3. Preventive procedures:
• [P08] (11:00 - 13:00) [1941]
  ○ FM_375
 	
Lecture 4. Diagnostic tests in family medicine:
• [P08] (11:00 - 13:00) [1941]
  ○ FM_375
 	
Lecture 21. Patient with low back pain:
• [P08] (13:00 - 14:00) [1941]
  ○ FM_375		

naslovna prof. dr. sc. Diminić-Lisica Ines, dr. med. [159] · naslovni doc. dr. sc. Mahmić - Vučak Jasna, dr. med. [1941]		
12.03.2024		

Lecture 5. Characteristics of pharmacotherapy in family medicine:
• [P01] (09:00 - 11:00) [1188]
  ○ FM_375
 	
Lecture 7. Health protection of the elderly:
• [P01] (11:00 - 12:00) [1188]
  ○ FM_375
 	
Lecture 9. Treatment of respiratory diseases in family medicine:
• [P01] (12:00 - 14:00) [1188]
  ○ FM_375		

izv.prof.dr. sc. Popović Branislava [1188]		
13.03.2024		

Lecture 10. Patient with arterial hypertension in family medicine:
• [P08] (08:00 - 10:00) [159]
  ◦ FM_375
 	
Lecture 25. Emergencies in family medicine:
• [P08] (10:00 - 11:00) [1188]
  ◦ FM_375
 	
Lecture 12. Treatment of patients with diabetes in family medicine:
• [P08] (11:00 - 14:00) [1190]
  ◦ FM_375
 	
Lecture 13. Polyvascular disease:
• [P08] (11:00 - 14:00) [1190]
  ◦ FM_375		

naslovna prof. dr. sc. Diminić-Lisica Ines, dr. med. [159] · izv.prof.dr. sc. Popović Branislava [1188] · naslovni doc. dr. sc. Sinožić Tamara, dr. med. [1190]		
14.03.2024		

Lecture 18. Mental health protection – the most common mental disorders in family medicine.:
• [P08] (08:00 - 10:00) [159]
  ◦ FM_375
 	
Lecture 15. Patient with a chronic wound in family medicine:
• [P08] (10:00 - 11:00) [1190]
  ◦ FM_375
 	
Lecture 14. Patient with anemia in family medicine:
• [P08] (12:00 - 13:00) [1940]
  ◦ FM_375
 	
Lecture 16. Approach to the patient with dyspepsia:
• [P08] (13:00 - 15:00) [1940]
  ◦ FM_375
 	
Lecture 17. Stroke patient:
• [P08] (13:00 - 15:00) [1940]
  ◦ FM_375		

naslovna prof. dr. sc. Diminić-Lisica Ines, dr. med. [159] · naslovna docentica dr. sc. Radošević Quadranti Nives, dr. med. [1940] · naslovni doc. dr. sc. Sinožić Tamara, dr. med. [1190]		
15.03.2024		

Lecture 19. Approach to an adolescent with mental health problems:
• [P08] (08:00 - 10:00) [1187]
  ◦ FM_375
 	
Lecture 20. Chronically ill child in family and school:
• [P08] (08:00 - 10:00) [1187]
  ◦ FM_375
 	
Lecture 8. Patient with sleep disorder in family medicine:
• [P08] (10:00 - 11:00) [1187]
  ◦ FM_375
 	
Lecture 22. Patient with a malignant disease:
• [P08] (11:00 - 13:00) [1189]
  ◦ FM_375
 	
Lecture 23. Pain treatment:
• [P08] (11:00 - 13:00) [1189]
  ◦ FM_375
 	
Lecture 24. Sexual health:
• [P08] (13:00 - 14:00) [1184]
  ◦ FM_375
 	
Lecture 11. Patient with urinary infection in family medicine:
• [P08] (14:00 - 15:00) [1184]
  ◦ FM_375		

naslovni doc. dr. sc. Ljubotina Aleksandar, dr. med. [1189] · naslovni doc. dr. sc. Mozetič Vladimir, dr. med. [1184] · izv.prof. dr. sc. Čulina Tatjana [1187]		
18.03.2024		

		Seminar 1. Disease symptoms in the family medicine office (headache, chest pain, abdominal pain, musculoskeletal pain, shoulder pain, low back pain):
		• [P08] (08:00 - 11:00) [1186]
		  ◦ FM_375
		
		Seminar 6. Home visit . Home treatement of patients with multimorbidity:
		• [P08] (11:00 - 14:00) [1186]
		  ◦ FM_375

doc. dr. sc. Bašić-Marković Nina [1186]		
19.03.2024		

		Seminar 8. Presentation of patients with mental disorders:
		• [P05] (08:00 - 11:00) [1186]
		  ◦ FM_375
		
		Seminar 4. Chronic wound:
		• [P09 - NASTAVA NA ENGLESKOM JEZIKU] (12:00 - 15:00) [1190]
		  ◦ FM_375

doc. dr. sc. Bašić-Marković Nina [1186] · naslovni doc. dr. sc. Sinožić Tamara, dr. med. [1190]		
20.03.2024		
		Seminar 5. Presentation of patients with arterial hypertension and comorbidities: • [P07] (08:00 - 11:00) [1940] ○ FM_375 Seminar 2. Communication between physician and patient (chronic patient, crying patient, angry patient): • [P07] (11:00 - 14:00) [1188] [1189] ○ FM_375
naslovni doc. dr. sc. Ljubotina Aleksandar, dr. med. [1189] · izv.prof.dr. sc. Popović Branislava [1188] · naslovna docentica dr. sc. Radošević Quadranti Nives, dr. med. [1940]		
21.03.2024		
		Seminar 7. Patient with pain syndrome: • [P15 - VIJEĆNICA] (08:00 - 11:00) [1941] ○ FM_375 Seminar 3. Temporary incapacity for work – sick leave. Cooperation with consultants at the secondary health care level: • [P15 - VIJEĆNICA] (11:00 - 14:00) [1188] ○ FM_375
naslovni doc. dr. sc. Mahmić - Vučak Jasna, dr. med. [1941] · izv.prof.dr. sc. Popović Branislava [1188]		
22.03.2024		
		Seminar 9. Presentation of patients with diabetes and comorbidities: • [P08] (08:00 - 11:00) [1940] ○ FM_375 Seminar 10. Work with school children and adolescents (specificities in communication): • [P08] (11:00 - 14:00) [1187] ○ FM_375
naslovna docentica dr. sc. Radošević Quadranti Nives, dr. med. [1940] · izv.prof. dr. sc. Čulina Tatjana [1187]		
02.04.2024		

	Practical 1. Organization and program of measures in the School Medicine Service-School Medicine: • [ONLINE] (12:30 - 13:30) [2280] [159] [1184] [1185] [1187] [1188] [1189] [1190] [1191] [1192] [1193] [1232] [1910] [1941] [1942] [2227] [2228] [2230] [2231] [2232] [2233] [2235] [2236] [2238] [2239] [2240] [2242] [2243] [2266] [2268] [2269] [2270] [2279] [2281] [2283] ○ FM_375 Practical 2. Examination of children for enrollment in the 1st grade of primary schoo: • [ONLINE] (12:30 - 13:30) [2280] [159] [1184] [1185] [1187] [1188] [1189] [1190] [1191] [1192] [1193] [1232] [1910] [1941] [1942] [2227] [2228] [2230] [2231] [2232] [2233] [2235] [2236] [2238] [2239] [2240] [2242] [2243] [2266] [2268] [2269] [2270] [2279] [2281] [2283] ○ FM_375	
naslovna asistentica Bilanović Ćoso Nensi, dr. med. [2227] · naslovni doc. dr. sc. Bukmir Leonardo, dr. med. [1185] · naslovna prof. dr. sc. Diminić-Lisica Ines, dr. med. [159] · naslovna asistentica Dragaš-Zubalj Nataša, dr. med. [2281] · naslovna asistentica Fable Karlić Tamara, dr. med. [1942] · Fišić Martina, dr. med. [1193] · naslovna asistentica Fugošić Lenac Nataša, dr. med. [2283] · asistentica Karlović Eda, dr. med. [2238] · naslovna asistentica Karuza Jadranka, dr. med. [2231] · naslovna asistentica Komadina-Gačić Jadranka, dr. med. [2228] · naslovni asistent Kresina Sandro, dr. med. [2279] · asistentica Lesac Brizić Ana, dr. med. [1232] · naslovni doc. dr. sc. Ljubotina Aleksandar, dr. med. [1189] · naslovna asistentica Mahmić Arifa, dr. med. [2239] · naslovni doc. dr. sc. Mahmić - Vučak Jasna, dr. med. [1941] · naslovna asistentica Marković Roberta, dr. med. [1910] · naslovni doc. dr. sc. Mozetič Vladimir, dr. med. [1184] · izv.prof.dr. sc. Popović Branislava [1188] · Prepelec Ana-Marija, dr. med. [2243] · naslovna asistentica Pripunić Manda, dr. med. [2280] · naslovna asistentica Sablić-Brazzoduro Vedrana, dr. med. [2233] · naslovni doc. dr. sc. Sinožić Tamara, dr. med. [1190] · naslovna asistentica Sironić Hreljanović Jelena, dr. med. [2230] · asistentica Strišković Željana, dr. med. [2235] · naslovni viši asistent dr. sc. Tadin Tomislav, dr. med. [2270] · naslovna asistentica Tomas Adrijana, dr. med. [2236] · naslovna asistentica Tripar Lea, dr. med. [2232] · Tudor Špalj Vedrana, dr. med. [2269] · naslovna asistentica Vlastelić Ivana, dr. med. [2240] · Zavidić Tina, dr. med. [1191] · naslovna asistentica Češkić Spomenka, dr. med. [2242] · naslovna asistentica Čop Koraljka, dr. med. [2266] · izv.prof. dr. sc. Čulina Tatjana [1187] · naslovni asistent Šuke Ramadan, dr. med. [2268] · asistentica Šutić Ivana, dr. med. [1192]		
03.04.2024		
	Practical 3. Counseling work- School Medicine: • [ONLINE] (12:30 - 13:30) [2280] [159] [1184] [1185] [1187] [1188] [1189] [1190] [1191] [1192] [1193] [1232] [1910] [1941] [1942] [2227] [2228] [2230] [2231] [2232] [2233] [2235] [2236] [2238] [2239] [2240] [2242] [2243] [2266] [2268] [2269] [2270] [2279] [2281] [2283] ○ FM_375	
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04.04.2024		

	Practical 4. Health promotion - School Medicine: • [ONLINE] (12:30 - 13:30) [2280] [159] [1184] [1185] [1187] [1188] [1189] [1190] [1191] [1192] [1193] [1232] [1910] [1941] [1942] [2227] [2228] [2230] [2231] [2232] [2233] [2235] [2236] [2238] [2239] [2240] [2242] [2243] [2266] [2268] [2269] [2270] [2279] [2281] [2283] ○ FM_375	

naslovna asistentica Bilanović Ćoso Nensi, dr. med. [2227] · naslovni doc. dr. sc. Bukmir Leonardo, dr. med. [1185] · naslovna prof. dr. sc. Diminić-Lisica Ines, dr. med. [159] · naslovna asistentica Dragaš-Zubalj Nataša, dr. med. [2281] · naslovna asistentica Fable Karlić Tamara, dr. med. [1942] · Fišić Martina, dr. med. [1193] · naslovna asistentica Fugošić Lenac Nataša, dr. med. [2283] · asistentica Karlović Eda, dr. med. [2238] · naslovna asistentica Karuza Jadranka, dr. med. [2231] · naslovna asistentica Komadina-Gačić Jadranka, dr. med. [2228] · naslovni asistent Kresina Sandro, dr. med. [2279] · asistentica Lesac Brizić Ana, dr. med. [1232] · naslovni doc. dr. sc. Ljubotina Aleksandar, dr. med. [1189] · naslovna asistentica Mahmić Arifa, dr. med. [2239] · naslovni doc. dr. sc. Mahmić - Vučak Jasna, dr. med. [1941] · naslovna asistentica Marković Roberta, dr. med. [1910] · naslovni doc. dr. sc. Mozetič Vladimir, dr. med. [1184] · izv.prof.dr. sc. Popović Branislava [1188] · Prepelec Ana-Marija, dr. med. [2243] · naslovna asistentica Pripunić Manda, dr. med. [2280] · naslovna asistentica Sablić-Brazzoduro Vedrana, dr. med. [2233] · naslovni doc. dr. sc. Sinožić Tamara, dr. med. [1190] · naslovna asistentica Sironić Hreljanović Jelena, dr. med. [2230] · asistentica Strišković Željana, dr. med. [2235] · naslovni viši asistent dr. sc. Tadin Tomislav, dr. med. [2270] · naslovna asistentica Tomas Adrijana, dr. med. [2236] · naslovna asistentica Tripar Lea, dr. med. [2232] · Tudor Špalj Vedrana, dr. med. [2269] · naslovna asistentica Vlastelić Ivana, dr. med. [2240] · Zavidić Tina, dr. med. [1191] · naslovna asistentica Češkić Spomenka, dr. med. [2242] · naslovna asistentica Čop Koraljka, dr. med. [2266] · izv.prof. dr. sc. Čulina Tatjana [1187] · naslovni asistent Šuke Ramadan, dr. med. [2268] · asistentica Šutić Ivana, dr. med. [1192]

05.04.2024

	Practical 5. Independent presentation of one thematic unit from health education - School Medicine: • [ONLINE] (12:30 - 13:30) [2280] [159] [1184] [1185] [1187] [1188] [1189] [1190] [1191] [1192] [1193] [1232] [1910] [1941] [1942] [2227] [2228] [2230] [2231] [2232] [2233] [2235] [2236] [2238] [2239] [2240] [2242] [2243] [2266] [2268] [2269] [2270] [2279] [2281] [2283] ○ FM_375	

naslovna asistentica Bilanović Ćoso Nensi, dr. med. [2227] · naslovni doc. dr. sc. Bukmir Leonardo, dr. med. [1185] · naslovna prof. dr. sc. Diminić-Lisica Ines, dr. med. [159] · naslovna asistentica Dragaš-Zubalj Nataša, dr. med. [2281] · naslovna asistentica Fable Karlić Tamara, dr. med. [1942] · Fišić Martina, dr. med. [1193] · naslovna asistentica Fugošić Lenac Nataša, dr. med. [2283] · asistentica Karlović Eda, dr. med. [2238] · naslovna asistentica Karuza Jadranka, dr. med. [2231] · naslovna asistentica Komadina-Gačić Jadranka, dr. med. [2228] · naslovni asistent Kresina Sandro, dr. med. [2279] · asistentica Lesac Brizić Ana, dr. med. [1232] · naslovni doc. dr. sc. Ljubotina Aleksandar, dr. med. [1189] · naslovna asistentica Mahmić Arifa, dr. med. [2239] · naslovni doc. dr. sc. Mahmić - Vučak Jasna, dr. med. [1941] · naslovna asistentica Marković Roberta, dr. med. [1910] · naslovni doc. dr. sc. Mozetič Vladimir, dr. med. [1184] · izv.prof.dr. sc. Popović Branislava [1188] · Prepelec Ana-Marija, dr. med. [2243] · naslovna asistentica Pripunić Manda, dr. med. [2280] · naslovna asistentica Sablić-Brazzoduro Vedrana, dr. med. [2233] · naslovni doc. dr. sc. Sinožić Tamara, dr. med. [1190] · naslovna asistentica Sironić Hreljanović Jelena, dr. med. [2230] · asistentica Strišković Željana, dr. med. [2235] · naslovni viši asistent dr. sc. Tadin Tomislav, dr. med. [2270] · naslovna asistentica Tomas Adrijana, dr. med. [2236] · naslovna asistentica Tripar Lea, dr. med. [2232] · Tudor Špalj Vedrana, dr. med. [2269] · naslovna asistentica Vlastelić Ivana, dr. med. [2240] · Zavidić Tina, dr. med. [1191] · naslovna asistentica Češkić Spomenka, dr. med. [2242] · naslovna asistentica Čop Koraljka, dr. med. [2266] · izv.prof. dr. sc. Čulina Tatjana [1187] · naslovni asistent Šuke Ramadan, dr. med. [2268] · asistentica Šutić Ivana, dr. med. [1192]

08.04.2024

	Practical 1. The role of the family physician and his team in protecting the health of the family (organization of work) Family Medicine: • [ONLINE] (12:30 - 13:30) [159] [1184] [1185] [1186] [1187] [1188] [1189] [1190] [1191] [1192] [1193] [1232] [1910] [1940] [1941] [1942] [2227] [2228] [2230] [2231] [2232] [2233] [2235] [2236] [2238] [2239] [2240] [2242] [2243] [2266] [2268] [2269] [2270] [2279] [2280] [2281] [2283] ○ FM_375	

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09.04.2024		
	Practical 2. Clinical examination skills in family medicine- Family Medicine: • [ONLINE] (12:30 - 13:30) [159] [1184] [1185] [1186] [1187] [1188] [1189] [1190] [1191] [1192] [1193] [1232] [1910] [1940] [1941] [1942] [2227] [2228] [2230] [2231] [2232] [2233] [2235] [2236] [2238] [2239] [2240] [2242] [2243] [2266] [2268] [2269] [2270] [2279] [2280] [2281] [2283] ○ FM_375	
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10.04.2024		
	Practical 3. Diagnostic procedures (sampling, otoscopy, rhinoscopy, dermatoscopy, electrocardiography, spirometry, ultrasound) - Family Medicine: • [ONLINE] (12:30 - 13:30) [159] [1184] [1185] [1186] [1187] [1188] [1189] [1190] [1191] [1192] [1193] [1232] [1910] [1940] [1941] [1942] [2227] [2228] [2230] [2231] [2232] [2233] [2235] [2236] [2238] [2239] [2240] [2242] [2243] [2266] [2268] [2269] [2270] [2279] [2280] [2281] [2283] ○ FM_375	

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11.04.2024		
	Practical 4. Parenteral drug administration- Family Medicine: • [ONLINE] (12:30 - 13:30) [159] [1184] [1185] [1186] [1187] [1188] [1189] [1190] [1191] [1192] [1193] [1232] [1910] [1940] [1941] [1942] [2227] [2228] [2230] [2231] [2232] [2233] [2235] [2236] [2238] [2239] [2240] [2242] [2243] [2266] [2268] [2269] [2270] [2279] [2280] [2281] [2283] ○ FM_375	
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12.04.2024		
	Practical 5. To perform ear irrigation, treating the wound- Family Medicine: • [ONLINE] (12:30 - 13:30) [159] [1184] [1185] [1186] [1187] [1188] [1189] [1190] [1191] [1192] [1193] [1232] [1910] [1940] [1941] [1942] [2227] [2228] [2230] [2231] [2232] [2233] [2235] [2236] [2238] [2239] [2240] [2242] [2243] [2266] [2268] [2269] [2270] [2279] [2280] [2281] [2283] ○ FM_375	

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15.04.2024		
	Practical 6. Prescribing drugs- Family Medicine: • [ONLINE] (12:30 - 13:30) [159] [1184] [1185] [1186] [1187] [1188] [1189] [1190] [1191] [1192] [1193] [1232] [1910] [1940] [1941] [1942] [2227] [2228] [2230] [2231] [2232] [2233] [2235] [2236] [2238] [2239] [2240] [2242] [2243] [2266] [2268] [2269] [2270] [2279] [2280] [2281] [2283] ○ FM_375	
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16.04.2024		
	Practical 7. Prescribing devices- Family Medicine: • [ONLINE] (12:30 - 13:30) [159] [1184] [1185] [1186] [1187] [1188] [1189] [1190] [1191] [1192] [1193] [1232] [1910] [1940] [1941] [1942] [2227] [2228] [2230] [2231] [2232] [2233] [2235] [2236] [2238] [2239] [2240] [2242] [2243] [2266] [2268] [2269] [2270] [2279] [2280] [2281] [2283] ○ FM_375	

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17.04.2024		
	Practical 8. Home visit and medical examination at home- Family Medicine: • [ONLINE] (12:30 - 13:30) [159] [1184] [1185] [1186] [1187] [1188] [1189] [1190] [1191] [1192] [1193] [1232] [1910] [1940] [1941] [1942] [2227] [2228] [2230] [2231] [2232] [2233] [2235] [2236] [2238] [2239] [2240] [2242] [2243] [2266] [2268] [2269] [2270] [2279] [2280] [2281] [2283] ○ FM_375	
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18.04.2024		
	Practical 9. Cooperation with the visiting nurse and health care at home- Family Medicine: • [ONLINE] (12:30 - 13:30) [159] [1184] [1185] [1186] [1187] [1188] [1189] [1190] [1191] [1192] [1193] [1232] [1910] [1940] [1941] [1942] [2227] [2228] [2230] [2231] [2232] [2233] [2235] [2236] [2238] [2239] [2240] [2242] [2243] [2266] [2268] [2269] [2270] [2279] [2280] [2281] [2283] ○ FM_375	

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19.04.2024		
	Practical 10. Writing the logbook and the Clinical Skills Booklet and midterm exam with the mentor- Family Medicine: • [ONLINE] (12:30 - 13:30) [159] [1184] [1185] [1186] [1187] [1188] [1189] [1190] [1191] [1192] [1193] [1232] [1910] [1940] [1941] [1942] [2227] [2228] [2230] [2231] [2232] [2233] [2235] [2236] [2238] [2239] [2240] [2242] [2243] [2266] [2268] [2269] [2270] [2279] [2280] [2281] [2283] ○ FM_375	
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List of lectures, seminars and practicals:

[PREDAVANJA] (TOPIC)	Number of hours	Location
Lecture 1. Definition, content and work methods in family medicine	1	[P08]
Lecture 2. Patient-oriented care, Family approach	1	[P08]
Lecture 3. Preventive procedures	1	[P08]
Lecture 4. Diagnostic tests in family medicine	1	[P08]
Lecture 5. Characteristics of pharmacotherapy in family medicine	2	[P01]
Lecture 6. Treatment of patients with multimorbidity in FM	1	[P08]
Lecture 7. Health protection of the elderly	1	[P01]
Lecture 8. Patient with sleep disorder in family medicine	1	[P08]
Lecture 9. Treatment of respiratory diseases in family medicine	2	[P01]
Lecture 10. Patient with arterial hypertension in family medicine	2	[P08]

Lecture 11. Patient with urinary infection in family medicine	1	[P08]
Lecture 12. Treatment of patients with diabetes in family medicine	2	[P08]
Lecture 13. Polyvascular disease	1	[P08]
Lecture 14. Patient with anemia in family medicine	1	[P08]
Lecture 15. Patient with a chronic wound in family medicine	1	[P08]
Lecture 16. Approach to the patient with dyspepsia	1	[P08]
Lecture 17. Stroke patient	1	[P08]
Lecture 18. Mental health protection – the most common mental disorders in family medicine.	2	[P08]
Lecture 19. Approach to an adolescent with mental health problems	1	[P08]
Lecture 20. Chronically ill child in family and school	1	[P08]
Lecture 21. Patient with low back pain	1	[P08]
Lecture 22. Patient with a malignant disease	1	[P08]
Lecture 23. Pain treatment	1	[P08]
Lecture 24. Sexual health	1	[P08]
Lecture 25. Emergencies in family medicine	1	[P08]

[VJEŽBE] (TOPIC)	Number of hours	Location
Practical 1. The role of the family physician and his team in protecting the health of the family (organization of work) Family Medicine	7	[ONLINE]
Practical 2. Clinical examination skills in family medicine- Family Medicine	7	[ONLINE]
Practical 3. Diagnostic procedures (sampling, otoscopy, rhinoscopy, dermatoscopy, electrocardiography, spirometry, ultrasound) - Family Medicine	7	[ONLINE]
Practical 4. Parenteral drug administration- Family Medicine	7	[ONLINE]
Practical 5. To perform ear irrigation, treating the wound- Family Medicine	7	[ONLINE]
Practical 6. Prescribing drugs- Family Medicine	7	[ONLINE]
Practical 7. Prescribing devices- Family Medicine	7	[ONLINE]
Practical 8. Home visit and medical examination at home- Family Medicine	7	[ONLINE]
Practical 9. Cooperation with the visiting nurse and health care at home- Family Medicine	7	[ONLINE]
Practical 10. Writing the logbook and the Clinical Skills Booklet and midterm exam with the mentor- Family Medicine	7	[ONLINE]
Practical 1. Organization and program of measures in the School Medicine Service- School Medicine	6	[ONLINE]
Practical 2. Examination of children for enrollment in the 1st grade of primary schoo	6	[ONLINE]
Practical 3. Counseling work- School Medicine	6	[ONLINE]
Practical 4. Health promotion - School Medicine	6	[ONLINE]
Practical 5. Independent presentation of one thematic unit from health education - School Medicine	6	[ONLINE]

[SEMINARI] (TOPIC)	Number of hours	Location
Seminar 1. Disease symptoms in the family medicine office (headache, chest pain, abdominal pain, musculoskeletal pain, shoulder pain, low back pain)	3	[P08]
Seminar 2. Communication between physician and patient (chronic patient, crying patient, angry patient)	3	[P07]
Seminar 3. Temporary incapacity for work – sick leave. Cooperation with consultants at the secondary health care level	3	[P15 - VIJEĆNICA]
Seminar 4. Chronic wound	3	[P09 - NASTAVA NA ENGLESKOM JEZIKU]
Seminar 5. Presentation of patients with arterial hypertension and comorbidities	3	[P07]
Seminar 6. Home visit . Home treatement of patients with multimorbidity	3	[P08]
Seminar 7. Patient with pain syndrome	3	[P15 - VIJEĆNICA]
Seminar 8. Presentation of patients with mental disorders	3	[P05]
Seminar 9. Presentation of patients with diabetes and comorbidities	3	[P08]
Seminar 10. Work with school children and adolescents (specificities in communication)	3	[P08]

EXAM DATES (final exam):

1.	02.05.2024.
2.	17.06.2024.
3.	01.07.2024.
4.	10.09.2024.