

**MED 6007 –Family Medicine**

Course Name	Code	Semester	Type of course	Theory (hours)	Group work (hours)	ECTS
Family Medicine	MED 6007	XI	Mandatory	10	16	2
<b>Faculty, the educational program and education level</b>	Faculty of Medicine, one-cycle Educational Program “Medicine”					
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<b>Teaching and learning format</b>	Lecture Group work					
<b>Educational course loading</b>	<b>Total:</b> 60 hours <b>Contact hours:</b> 30 h, that includes: <ol style="list-style-type: none"> <li>1. Lecture – 10 h</li> <li>2. Team work – 16 h</li> <li>3. Midterms – 2 h</li> <li>4. Final exam -2 h</li> </ol> <b>Independent work</b> – 30 h					
<b>Prerequisites</b>	MED 4002, MED 5010, MED 5014					
<b>The purpose (s) of tutorial course/modules</b>	The course is designed for students with the aim to learn the Family Medicine and to define the role of family doctor for Health Care system.					
<b>Educational course methods</b>	<b>Lectures</b> –Interactive verbal and writing forms explanation, the glue quetions notes-taking; <b>Problem-based study</b> – problem appointment and looking for the ways of problem dicision; <b>Work in group /supervision</b> includes: <b>Discussion</b> – student asks questions, debate the answers and try to prove their mind with factual material; <b>Analyses and synthesis</b> – detailed discussion of new theoretical material of pathological processes on the base of organisms homeostasis conditions assessment; <b>Work with additional literature</b> –independent work with additional literature to deep knowledge about new achievement in this field of area. <b>Consultation</b> –individual support work with students, advises and recommendation for the learning process improvement.					

<p><b>Assessment criteria</b></p>	<p><b>Maximum score- 100;</b></p> <p><b>Midterm assessment -60 score</b>, that includes:</p> <ul style="list-style-type: none"> <li>• Practical activity– 20 scores</li> <li>• Attendance – 5 scores;</li> <li>• Duty in clinic -5 scores (1 duty);</li> <li>• Medical documentation management – 10 scores</li> <li>• <b>Midterm Exam – 20 scores</b></li> </ul> <p><b>Clinical Supervision Activity – 30 scores.</b> The student's current activity will be assessed by the 5-scores system. Each student will be assessed for a third of the total number of classes anyway. At the end of the semester, the activity score is calculated by multiplying the ratio of the average scores (6).</p> <p><b>Activity is Assessed Based on the Following Criteria (maximum 5 scores)</b></p> <p><b>5 scores</b> - Student has been able to present complete and thorough knowledge of the subject, a substantial amount of detailed and relevant information. Demonstrate considerable depth of understanding of the studied main and additional literature. Bring forward a balanced view of the main arguments on the issues.</p> <p><b>4 scores</b> - Student demonstrate a good understanding of the nozological forms of gastrointestinal, cardiavascular, respiratory, endocrine and urogenital systems' of epidemiology, ethiopathogenesis, clinical picture, diagnosing and the general aspects treatment.</p> <p><b>3 scores</b> - Student demonstrates general overview of epidemiology, ethiopathogenesis, clinical picture, diagnosing and the general aspects treatment.</p> <p><b>2 scores</b> - Student demonstrates general knowledge of epidemiology, ethiopathogenesis, clinical picture, diagnosing and the general aspects treatment, can not answer some questions;</p> <p><b>1 scores</b> – Student demonstrates insufficient and superficial knowledge of epidemiology, ethiopathogenesis, clinical picture, diagnosing and treatment;</p> <p><b>0 scores</b> - Student demonstrates not even elementary knowledge of the topics or did not attended lessons;</p> <p><b>Example of Medical Documentation Management and Assessment– max 10 scores</b></p> <p><b>10-9 scores-</b> the task is understood properly, medical history component, clinical picture and diagnostics data, diagnosing and the treatment scheme is adequate and all the steps are described in consequential order; list of drugs is appointed properly with correct name and dozes;</p> <p><b>8-7 scores</b> - the task is completely understood, medical history component, clinical picture and diagnostics data, diagnosing and the general steps treatment is assembled in consequential order;</p> <p><b>6-5 scores</b> -the task is completely understood, but medical history component, clinical picture and diagnostics data, diagnosing and the general steps treatment is assembled in no consequential order;</p> <p><b>4-3 scores</b> – the task is not completely understood, medical history component, clinical picture and diagnostics data, diagnosing and the general steps treatment is assembled in no consequential order;</p> <p><b>2-1 score</b> – Student demonstrates misunderstanding and no complete skills of medical history taking</p> <p><b>0 score-</b> Student is not able to complete the task</p> <p><b>Midterm Exam – 20 scores</b></p> <p>Written test -40 question, 0,5 score for each – max. 20)</p> <p><b>Minimal scores of midterm assessment (for final exam) – is 11.</b></p> <p><b>Final Exam -40 scores</b></p> <p>Is held in the written test form;</p>
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	<ul style="list-style-type: none"> <li>• (test consists of 60 questions, each question is rated as 0,5 score);</li> <li>• Medical history taking – 10 scores</li> </ul> <p>The final exam would be accounted as passed in case of maximum 70% or more (40X70 / 100 = 28 scores).</p> <p>Credit will be given to the student if he has collected at minimum 51 scores out of 100.</p> <p>Student's assessment has to be done in the following way:</p> <p>Positive rate:</p> <ul style="list-style-type: none"> <li>• (A) Excellent- 91 or more scores;</li> <li>• (B) Very Good- 81-90 scores;</li> <li>• (C) Good- 71-80 scores;</li> <li>• (D) Satisfactory- 61-70 scores;</li> <li>• (E) Enough- 51-60 scores;</li> </ul> <p>Negative rate:</p> <ul style="list-style-type: none"> <li>• (FX) Failure - 41-50 scores, which means that a student needs to work more and an independent and considerable further work is required to pass the exam once again to be re-awarded;</li> <li>• (F) Fail – 40 scores or less, which means that the student's diligence is not sufficient and student has to learn the subject all over again.</li> </ul> <p>Student can pass the additional exam during the same semester.</p> <p>The time interval between the final and the additional exams should be not less than 10 days.</p>
<b>The basic literature</b>	<b>TEXTBOOK OF FAMILY MEDICINE.</b> IAN R MC WHINNEY, TH. FREEMAN, 3 ED, 2009
<b>The auxiliary literature</b>	<p>1.The European Definition of General Practice/Family Medicine, European Academy of teachers in General Practice (EURACT) 2005 <a href="http://www.woncaeurope.org">http://www.woncaeurope.org</a></p> <p>2.The European Definition of General Practice/Family Medicine, European Academy of teachers in General Practice (EURACT) 2005 <a href="http://www.woncaeurope.org">http://www.woncaeurope.org</a></p> <p>3.GINA Report, Global Strategy for Asthma Management and Prevention Updated December 2009 <a href="http://www.ginasthma.com/Guidelineitem.asp??i1=2&amp;i2=1&amp;intId=1561">http://www.ginasthma.com/Guidelineitem.asp??i1=2&amp;i2=1&amp;intId=1561</a></p>

#### The tutorial/training course content

Nº	Subjects	Lecture (hour)	Work in group (hour)
1	Primary Health Care. Characteristics of family medicine and family doctor. Organization and management of primary health care services. General definition of family doctor as a central figure of the Health care system. Family doctor's competencies and responsibilities. Communication, consultation models and patient oriented medical approaches.	2	2
2	The family doctor's medical consulting. How to inform patients of bad news? Problematic patients.	1	2
3	Family doctor; medical ethics and the basic principles of the legislation; Physician behavior norms / rules.	1	2

	<b>Midterm</b>		2
4	Diseases' preventive measures in family doctors' practice. General principles of prevention and examples of prevention in family medicine.	1	2
5	Management of common chronic conditions in family medicine practice: Hypertension.	1	2
6	Management of common chronic disorders in family medicine practice: Bronchial Asthma	2	2
7	Management of the most widely distributed disorders: Chest area pain.	1	2
8	Evidence-based medicine and evidence-based practice	1	2
	<b>Final Exam</b>		2

### Learning Outcomes

Criteria	Competences
Knowledge and understanding	The student will have a deep knowledge about Family Medicine, the features of communications with patients; is able to search for clinical informations, investigation methods and practical approaches of treatment tactics toward to the patients.
Applying knowledge	The student will have the ability to apply their theoretical knowledge in practice with the account of patients individual features. Student will be able to assess the arisen medical, social and psychological problems, to manage chronic diseases.
Communication Skills	Student will be able to manage the different form of academic and scientific information from different sources (classic and electronic library, the Internet) to work fast and look for the relevant information effectively. These found materials has to be planned, processed, analyzed, and to make the best use for the report with the proper conclusions as in in writing, as well as in verbal form. Student can working in group, has watching, listening, summarizing, asking and answering questions abilities, will be able to participate in the discussion. During the education process the professional and friendly relationship will be formed with the older (professors / teachers) and younger (this and other groups students) colleagues, communication with any person regardless of their social, cultural, religious or ethnic affiliation.
Values	The student has their own values and is able to correctly assess the overall values.