

## **FAMILY MEDICINE COURSE – STUDENT ORIENTATION**

Dear student,

We, the members of the Family Medicine Department, would like to welcome you to the family medicine course at the Medical Faculty at University of Ljubljana. The family medicine course first started at the Medical Faculty in Ljubljana in the school year 1995/1996, 20 years ago. For many years, we have received Erasmus exchange students, but this is the first year we offer an English-speaking rotation, with the course, lectures and seminars presented in English language.

These instructions should cover the essential information about the course and student participation we expect. Do not hesitate to turn to the course assistant or other faculty members for help or if you need any additional information.

### **ABOUT THE COURSE**

The course takes five weeks. Our primary focus is on the work in the family medicine practice, where you should be involved with practical work with patients and use and integrate the knowledge and skills you have acquired in medical school up to now. In the practice, your main teacher is going to be your mentor, the family medicine physician who works in the practice.

Once weekly, plus the first and the last day of the course, you attend small group work at the Department of Family Medicine, where we discuss challenges you may have met in your practical work and work on understanding special aspects of family medicine. For group work, there are weekly assignments that are a requirement for successful completion of the course.

### **WHAT DO YOU NEED FOR WORKING IN FAMILY MEDICINE PRACTICE**

You will be given contact information of the family physician who will be your mentor in their practice for the duration of the course.

For the work in the practice, you require white coat, stethoscope and something for making notes.

### **SMALL GROUP SESSIONS AT THE FAMILY MEDICINE DEPARTMENT**

#### **1. HOW TO PREPARE FOR INTRODUCTORY SESSION**

Introductory session begins on Monday morning. First you will attend the introductory lecture, then you will join your course assistant for small group work.

During the first day, we talk about the course and hand out weekly assignments (patient presentation, role-play). We will also try out the role-play teaching method and practice after-play analysis.

### About sessions

Each week, our group session is devoted to a certain theme. Usually this entails a clinical theme covering the most common clinical problems in family medicine practice. This is connected to the weekly homework, patient cases and role play. Our goal is to help you fill in your existing knowledge and build it into an effective whole you will be able to use in your own clinical practice.

Even if it is not your week for the group patient presentation, you have to do the homework and study a patient with the relevant clinical problem, otherwise you will be unable to participate in the discussion in the group.

One of the assignments is a »Family report«. It is recommended that you visit the family as soon as possible, so that you will have time enough to write the report, even though officially this is the fourth week homework. Your mentor will help you find the appropriate family among their patients.

### Rules of conduct

1. **We expect an active participation in discussion.** Group work offers a chance for discussion, questioning, group searching for answers, which is a more effective mode of teaching than lectures. You are not being graded, so do not be afraid to ask or try to answer, even if you are not sure about correct answers.
2. **We expect you to prepare for the sessions.** This means we expect you to complete your homework during the week and study the theme we will discuss during the next group work session. Please read the instructions for the weekly sessions immediately after the previous session, not only the day before, otherwise you will not have enough time for the homework and assignments you should do.
3. In medicine, often there are no right or wrong answers, or sometimes »right« answers have a limited validity. Particularly in the area of communication sometimes there are as many paths to the desired result as there are doctor-patient pairs. **We hope that you would seek and defend your point of view and ideas**, even when they differ from those of your colleagues or the course assistant of your group.
4. Regardless of differing opinions, beliefs and viewpoints, we expect you to **bear in mind basic politeness and courtesy in conversation.** Even when the discussion grows heated, only one person should talk at a time. If you would like to comment, wait for your turn and tell it to all of us, not only to the colleague sitting next to you while somebody else talk. Chatting among students during discussion or presentations makes it difficult for others to listen, and indicates lack of respect for colleagues and lack of interest in the subject. .

5. **Presence is required on all group sessions and seminars.** In special cases it is possible to arrange for an absence in advance, but it has to be made up for by an additional assignment your course assistant will give you. You can ask for absence at the department email [kdrmed@mf.uni-lj.si](mailto:kdrmed@mf.uni-lj.si). The department will discuss it on the next department meeting. You will be informed of the decision. If you fall sick, inform your course assistant or the department on their respective e-mails as soon as possible. If you have been absent more than once, regardless of the reason, you will have to repeat the course.
6. **Work in the practice:** We are confident that you are aware that, as always in patient involvement, you are bound by professional confidentiality, and we expect from you professional conduct. Come to the practice on time. Be polite and courteous with coworkers and patients alike. Be active; try to learn about all aspects of office work, from the nurse to the physician. Mentors expect your help in simple tasks and problems. Once you become familiar with the work, ask your mentor for a more active role – see the patient alone and try to finish the appointment by yourself.
7. We are always grateful for feedback about course quality and possible improvements, and all comments and suggestions are discussed at department meetings. If you have problems with mentor or one of the course assistants, or if you are in dissatisfied with any aspect of the course, please inform your course assistant or head of the department.

## 2. PREPARATION FOR 2<sup>ND</sup> SESSION (FIRST TUESDAY)

Before you start working in the family practice, we want you to understand the role of communication in medicine. We also want to prepare you for the practice work, partially with some practical skills, and partially by discussing dilemmas you may meet in practice.

Clinical theme will be the most common infections in family medicine.

Ethical dilemmas: together with course assistant you will discuss dilemmas we face in every day practice work. We will talk about confidentiality, patient autonomy, principles of »first do no harm«. Think about ethical issues you have encountered up to now during study or hospital rotations. Discuss them in the group and consider possible solutions

Skills: we will look into filling out prescriptions, referrals and other paperwork inevitably present in any medical practice. We will also discuss the SOAP documentation system. Accurate and thorough documentation is essential on all health care system levels. The SOAP system is simple and practical, because it takes into account the special features of family medicine practice.

## 3. PREPARATION FOR 3<sup>RD</sup> SESSION (SECOND TUESDAY)

Clinical theme will be the muscle-skeletal problems. During this week, pay attention to people with orthopaedic problems, which are a staple in our practices. Choose a patient and make a short note of their clinical problem, so that you can discuss it in the group. Consider diagnostics and treatment in your clinical case.

### ***HOMEWORK:***

Prepare 20 case notes according to SOAP principle. The goal of the homework is practicing documenting cases according to SOAP principle, teaching about preparing a management plan, and understanding variety of clinical problems in family practice. Consider whether this way of documenting seems useful to you.

We suggest that you prepare the notes during the office work. The notes should be concise and readable, but you do not have to prepare clean rewritings or type them in – the point is to write them the way you would during your own office work.

What does SOAP mean?

S – subjective: what the patient tells us, preferably in their own words

O – objective: findings during the appointment, including already performed tests or lab results.

A – assessment: what is going on? This can be a diagnosis, several differential diagnoses, notes on whether the patient condition is improving or worsening, possible etiology etc.

P – plan: what are we going to do? This includes plan for diagnostics, possible referrals, course of treatment, prescribed drugs, control appointments.

## **4. PREPARATION FOR 4TH SESSION (THIRD TUESDAY)**

Clinical theme is cardiovascular diseases. Choose a patient and make a short note of their clinical problem, so that you can discuss it in the group. Consider diagnostics and treatment in your clinical case.

During the session, we will discuss arterial hypertension, which we normally diagnose and manage in family practice office. Make note of your mentor's management of arterial hypertension.

### **HOMEWORK:**

Prepare AT MOST three powerpoint slides with an explanation of the healthcare system in your own country. Cover the way the healthcare is funded. Where do physicians' wages come from? Who pays for different portions of services patient receives? How is healthcare insured? Are preventative services in any way covered by government? In what way? Do patients pay/co-pay for services, medications or hospital treatment? How do physicians work/communicate with insurance companies? Can workers in your country take sick leave?

For how long and under which circumstances, and is a family physician in any way involved? Which community services (like community nurse) does health insurance or governmental services offer in your country?

## 5. PREPARATION FOR 5TH SESSION (FOURTH TUESDAY)

Clinical theme for this week is multimorbidity. Choose a patient with multiple illnesses; to make discussion easier, one of them should be diabetes. Make a short note of their clinical problem, so that you can discuss it in the group. Consider diagnostics and treatment in your clinical case. Use the same patient for the weekly assignment.

Homework:

- On the case of your patient with diabetes and comorbidities present the principles of management of a multimorbid patient.
- Pay special attention to following points:
  1. Which diseases most often occur with diabetes?
  2. How can common comorbidities, for example obesity, osteoarthritis and depression, make diabetes management more difficult for the physician, and life with diabetes harder for the patient?
  3. Find interactions between the patient's medication. Use an interaction checking program:  
[www.drugs.com](http://www.drugs.com)  
<http://reference.medscape.com/drug-interactionchecker>  
<http://si.draagle.com>
  4. You can give a general presentation of guidelines relevant to the patient's diseases. Consider the relevance of guidelines given the patient's realistic condition.
  5. Suggest a plan for further management for the patient.

Useful references:

1. Predavanja za modul Multimorbidnost (objavljeno na <http://www.mf.uni-lj.si/kdm/predpisovanje-zdravil-in-multimorbidnost>)
2. Učbenik Družinska medicina (2012)
3. <http://www.bmj.com/content/345/bmj.e6341?view=long&pmid=23036829>

## 6. PREPARATION FOR 6TH SESSION (FIFTH TUESDAY)

Clinical themes this week are alcoholism and depression. Choose a patient and make a short note of their clinical problem, so that you can discuss it in the group. Consider diagnostics and treatment in your clinical case. Consider particularly patient agreement to treatment and patients' view of treatment in these diseases.

We will also talk about prevention.

## HOMEWORK:

In the first week you have already received the instructions for family visit. If you hadn't already made the visit, this week is the last week for that. We will discuss the planning and making the visit, and experiences you encountered. We will also discuss home visit, which is an important part of patient management in family medicine, while you generally do not encounter it in other specialities. On home visit we meet the patients in their natural environment and get to know his family and his home circumstances much better than we can ever do in the office.

Present the basic types of home visits and describe how a home visit goes.

## 7. PREPARATION FOR 7TH SESSION (SIXTH TUESDAY)

Clinical theme this week is fragile elderly patient. Pay attention to visits and management of elderly patients, especially if your mentor has one he or she treats at home. Choose a patient and make a short note of their clinical problem, so that you can discuss it in the group. Consider diagnostics and treatment in your clinical case. Consider how treatment and management of a fragile elderly patient differs from management of other patients.

We will also discuss paliative management and dying and share experiences about encountering dying patient.

## HOMEWORK:

This week it is the time to finish and hand in the family report. You can find instructions in the file »Family Report« on the website. Handing the report in in time is a prerequisite for the exam. The report should be sent to the email address [kdrmed@mf.uni-lj.si](mailto:kdrmed@mf.uni-lj.si) no later than Monday midnight.

## 8. PREPARATION FOR 8TH SESSION (FRIDAY)

Clinical theme are medically unexplained symptoms. Choose a patient and make a short note of their clinical problem, so that you can discuss it in the group. Consider how you could help the patient or how you could prevent their condition from worsening.

## HOMEWORK:

Discuss the complaints managing system in the health care organisation where you work with your mentor or the person responsible for dealing with complaints. Find out what the complaints tend to be about.

Choose a complaint and write a report about the complaint and its result.  
The report should contain:

- Description of the complaint
- Evaluate whether there had been a deviation from expected quality of work.
- What had been in question – improper attitude, medical error, negligence, failure to offer emergency medical help...
- The procedure of dealing with the complaint: who and how did the deal with the complaint?
- The result of the complaint: The complaint could have been solved after discussing it with the patient on the level of the institution involved; there could have been an internal professional supervision; the complaint could have been referred to the Medical Chamber (with an external supervision following it); the patient could sue.
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In analysing the complaint it is necessary to keep neutrality and judge objectively.

Useful references:

<http://www.mf.uni-lj.si/dokumenti/77a1e69037493bde732aea07ead34b9.pdf>

This day is also the last day of the course, so bring with you your mentor's evaluation and the list of performed procedures. Both evaluation and the list of procedures can be found in the file »Mentor's evaluation« on the website.

**You have to bring the mentor's evaluation, the list of procedures and the evidence sheet with you to the oral exam.**

At the conclusion of the course we wish you proficiency at the exam and happiness and satisfaction in your professional career. Good luck!

The Family Medicine Department