

In-depth knowledge and insight in Family Medicine I (D012959)

Course size (nominal values; actual values may depend on programme)
Credits 14.0 Study time 420 h Contact hrs 150.0 h

Course offerings in academic year 2018-2019

A (year) Dutch

Lecturers in academic year 2018-2019

De Sutter, An GE39 lecturer-in-charge

Offered in the following programmes in 2018-2019 crdts offering

[Master of Medicine in Family Medicine](#) 14 A

Teaching languages

Dutch

Keywords

Position of the course

Contents

You will learn to perform following tasks in a simulation setting, and can justify diagnostic and therapeutic choices based on the underlying theoretical frameworks :

1. With respect to gender-related care:

- Providing guidance to patients in making an informed decision about temporary or permanent contraception;
- Conducting an preconceptive consultation including indication of the possibilities and limitations of genetic counseling;
- Accompanying a normally evolving pregnancy in its various dimensions (provided support);
- Recognize urgent situations;
- Accompanying the patient (and partner) and providing expert advice in case of unwanted pregnancy (provided support);
- Providing guidance to the mother in the postpartum period (provided support);
- Diagnosing and treating STI's and gynaecological infections and providing information on this, with particular attention to risk groups;
- History taking and clinical examination in menopausal complaints, explaining and offering guidance in menopausal complaints;
- Interpreting the results of a cervico-vaginal smear preparation;
- Taking a sexual history and making it possible to discuss sexual problems;
- Diagnosing and treating Lower Urinary Tract Symptoms (LUTS) and sexual problems;
- Giving information to the patient regarding the targeted detection of prostate cancer;
- Performing and interpreting following: a gynaecological examination, a pregnancy examination, placing an intra-uterine device (IUD), taking a cervico-vaginal smear, PPA (palpitation per anum).

2. With respect to chronic care:

- Treating, monitoring and organizing care for patients with chronic diseases (diabetes, cardiovascular disease, oncological problems and asthma / COPD);
- Registering and sharing data with other care givers and adjusting management;
- Marking the moment that a chronic disease is present that needs treatment and monitoring.

3. With respect to urgent care:

- Determining the condition of the patient with an acute clinical picture (ABCDE) and performing the necessary actions;
- Doing the triage of consultations and visits according to urgency;
- Recording findings, diagnosis and management, and handing it over in a clear way.

4. With respect to short episode care:

- Assessing the request for help and determining the type of contact (by telephone, consultation, home visit) (in consultation with the patient and the reception) (based on knowledge of epidemiology and disease scripts/ disease patterns);
- Clarifying the request for help (Ideas, Concerns, Expectations), history taking (targeted to diagnostic landscape), and conducting a clinical examination, working towards a diagnosis or 'working hypothesis';
- Deciding if additional diagnostics are needed (what, where), performing or requesting them in a motivated way (evidence-based and cost-conscious) or rather going to treatment and management;
- Starting treatment and management (shared decision making), informing (in a clear way) and advising (prognosis and therapy, self-care) on it;
- Registering and encoding in the EHR (ICPC, problem list) to improve continuity of care, making information available for research, statistics and to evaluate the delivered care;
- Going through an episode (evaluation therapy/management, discussing additional examinations, evaluation non pharmacological advice, discuss prognosis and expectations) and ending it.

5. With respect to practice management:

- Having a personal and practice-related opinion on GP care and developing collaboration in practice;
- Drawing up and implementing improvement plans;
- Observing, supervising and communicating with practice collaborators in performing reserved actions;
- Contributing to patient safety by reporting, analyzing and handling patient safety problems;
- Understanding the financial aspects and the management of a GP practice, knowing the health insurance nomenclature and other systems for declaring or refunding medical acts, and advising patients on the financial consequences of medical treatment/ diagnostics;
- Representing the practice in a multidisciplinary consultation and in consultation with external parties;
- Tailoring the medical practice and the information to the needs of the patient population.

6. With respect to prevention:

- Recognizing intervention options for prevention;
- Exploring on indication the lifestyle of a patient and discussing the possibilities for change;
- Giving advice on various preventive activities;
- Selecting persons and patients at increased health risk;
- Collaborating in programmatic prevention;
- Determining the role of the GP in population research and assessing the role of environmental factors, social factors and living conditions on prevention and disease;
- Taking part in population research as agreed by the professional group with the government;
- Mapping a hereditary disease in a patient's family and discussing whether screening or diagnostics are relevant, and deciding to subsequent referral if appropriate;
- Knowing who are the other caregivers who can play a role in prevention and working with them.

7. With respect to palliative care (provided support):

- Dealing with advance care planning and patient's will;
- Having a near end-of-life conversation at the appropriate moment;
- Addressing specific problems in the palliative/ terminal phase;
- Providing personal continuity of care or contribute to the continuity of care in the GP practice.

8. With respect to care for the child:

- Conducting a consultation with an acute sick child (0-12 years);
- Prescribing medication for children and determining the appropriate dosage and administration mode;
- Accompanying the newborn and his parents (providing support);

- Adequately determining when a consultation should be conducted with the child alone and when, or in what way, the parents should be involved;
- Dealing adequately with the legal rights of the child and the parents, also in special situations (divorce, co-parenthood, newly-assembled families, etc.).

9. With respect to care for the elderly:

- Determining whether there are complex issues and taking them into account in the management;
- Discussing early the choices in additional diagnostics and/ or treatment, taking into account the personal wishes and life expectancy of the older person;
- Improving and monitoring the safety of the elderly care, including periodic medication reviews and fall prevention programs.

10. With respect to mental health care and somatic unexplained physical complaints:

- Providing guidance to a patient with anxiety and mood complaints/ disorders;
 - Starting the necessary treatment in a patient with anxiety and mood complaints/ disorders;
 - Estimating, in case of suicidality, the danger for the patient and his environment and deploying the necessary assistance;
 - Signaling personality traits and disorders, defining its consequences for care and giving advice to the patient to find suitable guidance if necessary;
 - Setting a working hypothesis of somatic unexplained physical complaints, explaining and treating it step by step;
 - Making use of the complaint registration to detect patterns in complaints and detecting influencing factors;
 - Having a referral conversation with a patient with somatic unexplained physical complaints;
 - Discussing the consequences of complaints for labour participation in case of (impending) long-term incapacity for work;
- Providing long-term guidance and keeping under control patients with severe somatic unexplained physical complaints.

Throughout this learning activity, attention is paid to the following generic aspects:

- pharmacology,
- clinical decision-making and evidence-based medicine,
- consultation and communication skills,
- ethics.

Initial competences

Final competences

- 1 Perform following tasks in a simulation setting within the topics of:
 1. Gender-related care
 2. Chronic care
 3. Urgent care
 4. Short episode care
 5. Practice management
 6. Prevention
 7. Palliative care
 8. Care for the child
 9. Care for the elderly
 10. mental health care and somatic unexplained physical complaints
- 2 Justify diagnostic and therapeutic choices based on the underlying theoretical frameworks within the topics of:
 1. Gender-related care
 2. Chronic care
 3. Urgent care
 4. Short episode care
 5. Practice management
 6. Prevention
 7. Palliative care
 8. Care for the child
 9. Care for the elderly

mental health care and somatic unexplained physical complaints

Conditions for credit contract

This course unit cannot be taken via a credit contract

Conditions for exam contract

This course unit cannot be taken via an exam contract

Teaching methods

Lecture, self-reliant study activities

Learning materials and price

The study material is made available through an online learning environment and is obligatory.

References

Course content-related study coaching

Evaluation methods

continuous assessment

Examination methods in case of periodic evaluation during the first examination period

Examination methods in case of periodic evaluation during the second examination period

Examination methods in case of permanent evaluation

Written examination, oral examination

Possibilities of retake in case of permanent evaluation

examination during the second examination period is possible in modified form

Extra information on the examination methods

The student is required to complete 3 formative test modules during the academic year. Failure to comply with this requirement means that the student cannot participate in the integrated (summative) test, and subsequently achieves 0/20 for this course.

The practical exam (integrated test) consists of three key components:

- a knowledge test (counts for 40% of the final score) composed of multiple choice questions based on family practice casuistics. No correction for guessing is applied.
- a multiple-station test (*) (counts for 40% of the final score);
- assignments in the electronic health record (EHR) (*) based on the scenarios of the multiple-station test (counts for 20% of the final score).

(*) The multiple-station test and assignments in the EHR consist of real-life consultation tasks with 'patients'. These situations are offered virtually in interactive electronic modules and in a real-life setting with simulation patients in standardized conditions. The test is not limited to clinical situations, but also assesses the skills in practice management, consultation, collaboration, referral, follow-up, evidence-based medicine and the use of the electronic health record.

Second examination opportunity consists of 2 parts:

- a knowledge test (counts for 30% of the final score) composed of multiple choice questions based on family practice casuistics. No correction for guessing is applied.
- evaluation of 5 video consultations and a comprehensive reflection report (both counting for 70% of the final score). Failure to submit all 5 video consultations on the deadline results in a 0/20 for this component.

Calculation of the examination mark