Course Title	General Practice and Geriatric Medicine						
Course Code	MED-606						
Course Type	Required						
Level	Undergraduate						
Year / Semester	Year 6/ Semester 12 (Spring)						
Teacher's Name	Course Leads: Dr Stylianos Orphanides Dr Irene Cotter						
ECTS	10 Lectures / 4 Laboratories / 0 Clinical Practice 36						
Course Purpose and Objectives	<ul> <li>The objectives of the course are:</li> <li>To provide the student with a basic understanding of general practice and geriatric medicine.</li> <li>To understand the role played by the General Practitioner (GP) in the community.</li> <li>To understand the limitations of the GP and the need to refer to a secondary care centre when appropriate.</li> <li>To use the wealth of experience in General Practice to aid in the transition from senior student to house officer.</li> <li>To enhance history-taking, information giving, physical examination and procedural skills through practice with a wide range of patients.</li> <li>To illustrate doctors' and other health professionals' roles working across primary and secondary care.</li> <li>To understand the importance of teamwork in the primary health care team.</li> <li>To understand the importance of taking a holistic overview of elderly patients, as in geriatric medicine, rather than an isolated systems view of the elderly by individual specialists who may not communicate adequately enough with their colleagues in other specialities to identify health patterns.</li> </ul>						
Learning Outcomes	<ol> <li>After the completion of the course the students should be able to:</li> <li>Outline the nature of the physician-patient relationship and its impact upon the management of the patient's illness.</li> <li>Assess patients and their families in the context of the biopsychosocial model.</li> <li>Consider patient problems in a community and family context.</li> <li>Develop long term treatment plans and goals for individual patients with chronic illness.</li> <li>Formulate differential diagnoses and treatment plans based on the limited information gathered in a typical GP office visit and evaluate a given treatment plan on the basis</li> </ol>						

- of outcome for the patient, likelihood of being implemented successfully, and the cost effectiveness of the treatment.
- 6. Describe the importance of follow-up visits in terms of gaining further information, clarifying diagnoses, and evaluating treatment.
- 7. Recognise how interpersonal relationships, social characteristics, and cultural norms can alter the presentation and management of an illness and explain how a patient's problem may present differently or be interpreted differently if that patient is from a different cultural/religious background than the physician.
- 8. Develop problem solving skills with outpatients/ambulatory patients who have undifferentiated, early-disease state problems.
- 9. Refine time management skills by classifying tasks according to their importance, resource cost, time cost, and potential benefits.
- 10. Manage the most common problems seen in ambulatory practice.
- 11. Maintain good patient records
- 12. Perform procedures commonly carried out by GPs, including: urinalysis, venepuncture, throat culture, intramuscular and subcutaneous injections, ECGs, skin testing, spirometry, tympanometry, suturing, incision and drainage, casting and splinting, stool for occult blood.
- 13. Value the basic core concepts of General Practice/Family Medicine including:
  - Continuity of care throughout a patient's life
  - Treating the whole person
  - Comprehensive care
  - Prevention/lifetime health monitoring
  - Anticipatory guidance
  - Use of community resources
  - Patient advocacy
  - Cost-effective medicine
  - Primary/ambulatory care
  - Compliance/health belief model
  - Developmental stages of life
  - Use of consultation/coordination of care
  - Lifestyle/community involvement
- 14. Interact in a positive, productive manner with other professionals and support staff.
- 15. Display professional values and attitudes.
- 16. Develop a caring and empathic attitude towards all patients, regardless of their background, age, skin colour, gender, sexual preference, culture, religion or social status
- 17. Assess the patient and the family in the context of the biopsychosocial model.
- 18. Recognise how interpersonal relationships, social characteristics and cultural norms can alter the presentation and/or management of an illness.

- 19. Describe the concept of prevention and generalise the concept of prevention/ lifetime health monitoring and developing long-term treatment plans and goals
- 20. Outline patients' problems in a community and family context.
- 21. Analyse the nature of the physician/patient relationship and the impact on the management of the patient's illness, and develop long-term treatment plans and goals for health maintenance.
- 22. Recognize the impact of interpersonal relationships, social characteristics, cultural norms and religious/spiritual beliefs and practices on the presentation and the management of an illness and compliance.
- 23. Predict how financial factors can influence disease management.
- 24. Demonstrate the use of community resources/patient education in managing an illness.
- 25. Illustrate the concept of continuity of care and patient responsibility throughout a patient's life and through the natural course of disease process.
- 26. Be able to take a history from an older person, including information of functional ability and social support.
- 27. Demonstrate how to interview a confused older patient and demonstrate an ability to collect information from appropriate collateral sources in the process.
- 28. Demonstrate the ability to perform a full physical examination of elderly people including systems often affected by illness in old age (locomotor, nervous and cardio-respiratory systems).
- 29. Explain the need to respect older patients' rights regardless of their age, background, culture, lifestyle, beliefs, race, gender, sexuality, disability, social or economic status.
- 30. Communicate clearly and effectively with older patients, their relatives and colleagues from a variety of health and social care professions
- 31. Discuss the balance between prolongation and quality of life
- 32. Describe the assessment, investigation and management of an elderly patient with falls in order to establish the cause
- 33. Outline the investigation and management of an elderly person with delirium
- 34. Describe the assessment, investigation and treatment of a patient with suspected dementia
- 35. Describe the assessment, management and investigation of a patient with reduced mobility to establish the cause
- 36. Describe the assessment, investigation and management of an elderly patient with urinary and/or faecal incontinence
- 37. Discuss how the breakdown of an older person's social circumstances may be the atypical presentation of an underlying pathology and identify ways in which the notion of social dependency influences the attitudes and treatment of the older patient
- 38. Describe the process and principles of rehabilitation in hospital and community settings, the importance of functional assessment and what may realistically be achieved, the importance of goal setting, and the influence of socio-economic factors.
- 39. Describe indications for referral of an elderly person to a residential or nursing home and explain how placement is organised

	40. Outline the many roles played by a wide range of health professionals in caring for elderly patients								
	41. Discuss the ethical and legal issues relating to older people including: consent to treatment, capacity to make decisions, safe-guarding finances, withdrawing and withholding treatment, elder abuse and cardio-pulmonary resuscitation decisions.								
Prerequisites	None	Required	None						
Course Content	<ul> <li>Measuring BP</li> <li>Examining ears and</li> <li>Examining children</li> <li>Heart examination</li> <li>Respiratory examin systems and nebuli</li> <li>Vaginal examination</li> <li>Contraceptive meth</li> <li>Breast examination</li> <li>Joint examination a</li> <li>Neurological examin</li> <li>Mental state examin</li> <li>Measuring blood gle</li> <li>Urinalysis</li> <li>Common symptoms p</li> <li>Colds, influenza and</li> <li>Aches and pains</li> <li>Cough and fever</li> <li>Rash or spots</li> <li>Abdominal pain</li> <li>Bleeding PR</li> <li>Backache</li> <li>Earache</li> <li>Headache</li> <li>Tension or anxiety</li> <li>Depression</li> <li>Tiredness</li> </ul>	Discuss the ethical and legal issues relating to older people including: consent it treatment, capacity to make decisions, safe-guarding finances, withdrawing an withholding treatment, elder abuse and cardio-pulmonary resuscitation decisions.  The Required None  Required None  Required None  Required None  Common skills encountered in General Practice  Measuring BP  Examining ears and eyes  Examining children  Heart examination  Respiratory examination including using a peak flow meter, asthma drug deliver systems and nebuliser  Vaginal examination, taking cervical smears and high vaginal swabs  Contraceptive methods  Breast examination  Joint examination and back examination  Neurological examination  Abdominal examination and rectal examination  Measuring blood glucose  Urinalysis  Common symptoms presenting in General Practice  Colds, influenza and throat conditions  Aches and pains  Cough and fever  Rash or spots  Abdominal pain  Bleeding PR  Backache  Earache  Headache  Tension or anxiety  Depression							

- Chest pain
- Breathlessness
- Dizziness
- Menstrual disorders
- Vaginal discharge
- Urinary symptoms
- Diabetes
- Disability/handicap
- Vaccination
- Leg ulcers
- Breaking bad news
- Dealing with one's own emotions as a doctor
- Dealing with ethical issues
- Referral letters and hospital discharge letters
- Sickness certification

## Common disease presentations in general practice

- Coronary heart disease, hypertension, plasma lipids
- Diabetes
- Asthma and COPD
- Emergency care and pain management
- Minor illnesses, including epistaxis, hearing loss, tinnitus and vertigo, laryngitis, epiglottitis, otitis
- Obstetric care, contraception, cervical smears, menopause
- Child development, the sick child, childhood illnesses, infectious diseases and immunisations
- Alcohol and drug abuse, anxiety disorders, mood disorders, cognitive problems, schizophrenia, psychosis
- Smoking cessation

## Geriatric Medicine

- Geriatric medicine as a specialty
- Dealing with elderly patients
- Issues affecting the elderly
- Falls in the elderly
- Incontinence
- Delirium
- Dementia
- Confusion

Teaching Methodology Bibliography	<ul> <li>Reduced mobility</li> <li>Rehabilitation</li> <li>Residential care</li> <li>Multiprofessional healthcare team</li> <li>Ethical and legal issues</li> </ul> The course is delivered by clinical placements, lectures, tutorials, case studies and theatre attendance.							
Dibilography	Authors	red Textbooks/Reading:		Publisher	Year	ISBN		
	Stephenson, Anne. (ed.)	A textbook of general practice		Hodder Arnold	2011	9781444120646		
	Woodford, Henry.	Essential geria	Essential geriatrics		2010	9781846194269		
	Timiras, Paola S.	Physiological basis of agi and geriatrics	basis of aging		2007	9780849373053		
	Recommended Textbooks/Reading:							
	Authors	Title	Publ	isher	Year	ISBN		
	Howard	Brocklehurst's textbook of geriatric medicine and gerontology 7th ed.	Saunders/Elsevier		2010	9781416062318		
Assessment	Final year exam and final year OSCE.							
Language	English							