

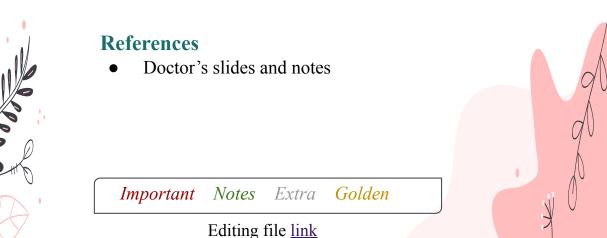
Objectives:

MFD437

- To be aware of the history of Family Medicine.
- To understand the concepts of Family Medicine, including its definition.
- To be familiar with the desirable qualities of a Family Physician.

Done by:

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The history of family medicine:



- 17th and 18th centuries, Relatively few physicians were available.
- 19th Century, Most physicians were "General Practitioners"
- A growing shift towards specialization took place throughout the 1920s & 1930s "General Practitioners" declined from 83% to 18.
- Many people felt like the trend toward specialization had fragmented patient care & weakened the patient-physician relationship.
- 1940s, Generalist began to initiate steps to elevate general practice to "specialty" status.

• 1960s, WHO (1963) report: **"Training of Physicians for Family Practice"** which recommended a postgraduate study program specifically designed to meet the needs of the General Practitioner.

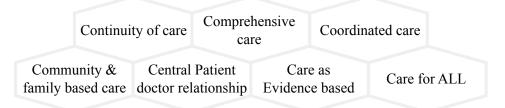
Definition of Family Medicine:

• Family medicine is the **medical specialty** which **provides continuing**, **comprehensive** health care for the **individual** and **family**.

• It is a specialty in breadth that integrates the biological, clinical and behavioral sciences

• The scope of family medicine encompasses ALL ages, both sexes, each organ system and every disease entity.

Principles of Family Medicine:



How does Family Physicians differ from other physicians:

- The first contact and gate of health care system.
- Provide continuity of care.
- Provides comprehensive care.
- Use holistic approach.
- Shared care.
- Patient centred approach.

The core competencies of the family physician:

• The definition of the discipline of family medicine and of the specialist family doctor must lead directly the core competencies of the family doctor.

• Core means essential to the discipline, irrespective of the health care system in which they are applied.

(1) Primary Care Management

- to manage primary contact with patients, dealing with unselected problems.
- to cover the full range of health conditions.
- to co-ordinate care with other professionals in primary care & with other specialists.
- to master effective and appropriate care provision and health service utilization.
- to make available to the patient the appropriate services within the healthcare system.

• to act as advocate for the patient - to continuously monitor, asses and improve quality and safety of care.

(2) Person-centred Care

• to adopt a person-centred approach in dealing with patients and problems in the context of patient's circumstances;

- to develop and apply the general practice consultation to bring about an effective doctor-patient relationship, with respect for the patient's autonomy;
- to communicate, set priorities and act in partnership;
- to promote the goals of patient empowerment;

• to provide longitudinal continuity of care as determined by the needs of the patient, referring to continuing and co-ordinated care management.

(3) Specific Problem Solving Skills

• to relate specific decision making processes to the prevalence and incidence of illness in the community.

• to selectively gather and interpret information from history-taking, physical examination, and investigations and apply it to an appropriate management plan in collaboration with the patient.

• to manage conditions which may present early and in an undifferentiated way.

• to make effective and efficient use of diagnostic and therapeutic interventions.

(4) Comprehensive Approach

• To manage simultaneously multiple complaints and pathologies, both acute and chronic health problems in the individual. To promote health and well being by applying health promotion and disease prevention strategies appropriately

(5) Community Orientation

• to reconcile the health needs of individual patients and the health needs of the community in which they live in balance with available resources.

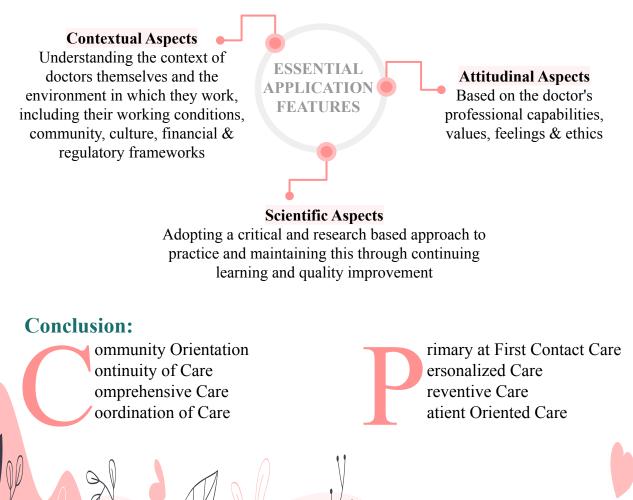
(6) Holistic Approach

• to use a bio-psycho-social model taking into account cultural and existential dimensions.



- The competencies represent an ideal to which all family doctors can aspire.
- Some of the elements in this definition are not unique to family doctors but are generally applicable to the profession as a whole.

Essential application features:



QUESTIONS



(1) The scope of family medicine <u>encompasses</u>:

- A) Old females only
- B) Sick males only
- C) All ages & both sex they don't have any disease
- D) ALL ages, both sexes, each organ system and every disease entity

(2) What is the benefit of <u>Person-centred Care</u> in health care system?

A) to adopt a person centred approach in dealing with patients and problems in the context of patient's circumstances

B) to use a biopsychosocial model taking into account cultural & existential dimensions

C) to make effective and efficient use of diagnostic and therapeutic interventions

D) To promote health and well being by applying health promotion and disease prevention strategies appropriately

(3) What is the benefit of <u>Specific Problem Solving Skills</u> in health care system?

A) to adopt a person centred approach in dealing with patients and problems in the context of patient's circumstances

B) to use a biopsychosocial model taking into account cultural & existential dimensions

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1 - D 2 - A 3- C 4 - B