MINISTRY OF EDUCATION AND SCIENCE OF UKRAINE

SUMY STATE UNIVERSITY

Academic and Research Medical Institute

Кафедра внутрішньої та сімейної медицини

GENERAL PRACTICE (FAMILY MEDICINE)

Higher education level	The Second
Major: study programme	222 Medicine: Medicine

Approved by Quality Council HHMI

Chairman of the Quality Council HHMI
Petrashenko Viktoriia Oleksandrivna

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DATA ON APPROVAL

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SYLLABUS

1. General information on the course

Full course name	General Practice (Family Medicine)
Full official name of a higher education institution	Sumy State University
Full name of a structural unit	Academic and Research Medical Institute. Кафедра внутрішньої та сімейної медицини
Author(s)	Bokova Svitlana , Orlovskyi Oleksandr Viktorovych
Cycle/higher education level	The Second Level Of Higher Education, National Qualifications Framework Of Ukraine – The 7th Level, QF-LLL – The 7th Level, FQ-EHEA – The Second Cycle
Duration	one semester
Workload	3 ECTS, 90 hours. For full-time course 54 hours are working hours with the lecturer (54 hours of seminars), 36 hours of the individual study.
Language(s)	English

2. Place in the study programme

Relation to curriculum	Compulsory course available for study programme "Medicine"
Prerequisites	Krok-1, a discipline is based on the study by students of disciplines: latin and medical terminology, basics of bioethics and safety, first aid, hygiene and ecology, pathomorphology, pathophysiology, pharmacology, general surgery, internal medicine propaedeutics, pediatrics propaedeutics, radiology, patient care, nursing practice.
Additional requirements	There are no specific requirements
Restrictions	There are no specific restrictions

3. Aims of the course

The goal of the academic discipline is for students to achieve modern knowledge, the foundations of professional competence, and clinical thinking in family medicine based on: acquiring knowledge, skills, and abilities in the field of diagnostics, treatment, rehabilitation, prevention, and organization of care for the most common diseases.

4. Contents

Module 1. Characteristics of the discipline and key competencies of a family doctor

Topic 1 Fundamentals of Family Medicine. The interrelation between core competencies and essential characteristics of applied value: the WONCA Tree. The WONCA Tree. Core competencies.
Topic 2 Key competencies of a family doctor: person-centered care Piker's pyramid of principles. The concept and notions of person-centeredness. The advantages of a person-centered model of medical care.
Topic 3 Key competencies of a family doctor: a comprehensive approach A comprehensive approach in family medicine.
Topic 4 Key competencies of a family doctor: a comprehensive approach Quarter prevention. Rehabilitation in the practice of a family doctor.
Topic 5 Key competencies of a family doctor: a comprehensive approach - palliative care. Palliative care. Care, rules for handling narcotic drugs, psychotropic substances and precursors. Visual analogue scale for assessing the effectiveness of pain. Steps of pain relief. Principles of treating chronic pain. Adjuvant therapy.
Topic 6 Key competencies of a family doctor: a comprehensive approach - palliative care. Pain management. Steps of pain relief in chronic pain syndrome.
Topic 7 Key competencies of a family doctor: a holistic approach. Content of a holistic approach. Biopsychosocial model.
Topic 8 Key competencies of a family doctor: a holistic approach A holistic model of assessing human health.
Topic 9 Key competencies of a family doctor: special skills in problem solving. Special tools of a family doctor: "red flags", telephone consultation, triage or medical sorting, calculators most often used by a family doctor.
Topic 10 Key competencies of a family doctor: special skills in problem solving. Understanding uncertainty, unspecified medical conditions - organizing patient management.
Topic 11 Key competencies of a family doctor: special skills in problem solving - working with all age categories. Features of working with patients of different ages, from 0 to death. Sequence of diagnosis of death: the role and rights of a family doctor - humanity, legal and ethical aspects.
Topic 12 Key competencies of a family doctor: special skills in problem solving - working with all age categories. Actions in the event of a patient's death: the role of the doctor.
Topic 13 Key competencies of a family doctor: management in primary health care. care. Soft skills are the main element in the work of a family doctor. Interaction between doctors in the provision of medical care. "Red flags" in PMC. Patient-centered home with neighbors.

Topic 14 Key competencies of a family doctor: management in primary care. Working with an electronic health system.
Topic 15 Key competencies of a family doctor: community orientation. Diagnosis and analysis of the community. "Health indicators". Health indicators.
Topic 16 Aspects of attitude, science and context to the practice of a family doctor. Aspect of context. An aspect of attitude/worldview. An aspect of science. Quality control of the work of a family doctor. Medical professionalism.
Module 2. Soft and organizational skills in the work of a family doctor
Topic 17 Communication in family medicine. Empathy in the work of a family doctor. NURSE mnemonic technique for identifying empathy.
Topic 18 Consultation management according to the Calgary-Cambridge model. Consultation management and basic communication models. Calgary-Cambridge model of consultation, its components.
Topic 19 Consultation management according to the Calgary-Cambridge model. Explanation and planning of actions according to the CCM of consultation, joint decision-making.
Topic 20 Special and conflict situations in the practice of a family doctor. The concept of bad news in a medical context. Reporting bad news (SPIKES protocol). The concept of conflict. Empathetic response according to the NURSE, EVE protocols. Peculiarities of counseling an anxious, aggressive, hypochondriac, depressed, suspicious, talkative patient.
Topic 21 Communication in the collective. The importance of teamwork in family medicine. The role of paramedical staff and auxiliary services. Effective communication in the team. ISBAR communication system.
Module 3. Features of clinical practice in family medicine
Topic 22 ICPC-2: structure and coding principles. Main advantages of using ICPC-2 in primary care. ICPC-2 structure.
Topic 23 ICPC-2: structure and coding principles. Concept of visit and episode of medical care. Coding of visit: reason for referral, diagnosis, processes.
Topic 24 Consulting a child with a fever Practical skill practice: "Consulting a child with a fever".
Topic 25 Consulting a person with dementia. Practical skill practice: "Consulting a person with dementia".

Topic 26 Final control: Grading test. Answering theoretical questions, demonstrating practical skills.
Topic 27 Final control: Grading test. Answering theoretical questions, demonstrating practical skills.

5. Intended learning outcomes of the course

After successful study of the course, the student will be able to:

LO1	Carry out professional activities by updating and integrating knowledge and understand responsibility for professional development.
LO2	Critically consider problems in the field of general practice - family medicine and related interdisciplinary problems on the basis of specialized conceptual knowledge, including scientific achievements.
LO3	Establish a preliminary clinical diagnosis of the disease based on the identification of leading symptoms and syndromes and preliminary data from subjective and physical examination.
LO4	Substantiate the final clinical diagnosis through logical analysis of the obtained subjective and objective data of the clinical examination, as well as additional examinations
LO5	Collect complaints, life and disease history, assess the patient's psychomotor and physical development, and the condition of the organs and systems of the cause.
LO6	Determine the main clinical syndrome, the cause of the severity of the patient's condition by making an informed decision and assessing the person's condition
LO7	Assign and interpret the results of laboratory and instrumental studies
LO8	Determine the nature and principles of patient treatment
LO9	Determine the necessary work, rest and nutrition regime based on the final clinical diagnosis
LO10	Determine tactics and provide emergency medical care in emergency situations in a time-limited environment in accordance with existing clinical protocols and treatment standards
LO11	Perform medical procedures based on a previous clinical diagnosis
LO12	Plan and implement a system of anti-epidemic and preventive measures regarding the occurrence and spread of diseases among the population.
LO13	Work with professional literature, analyze and use the information obtained
LO14	Assess the impact of the environment on the health of the population
LO15	Determine the functional status of a person's vital activities and the limitations and duration of disability by preparing relevant documents in a healthcare facility.

6. Role of the course in the achievement of programme learning outcomes

Programme learning outcomes achieved by the course.
For 222 Medicine:

PO1	Possess comprehensive knowledge of the structure of professional activity. Perform professional activities that require the continuous updating and integration of knowledge. Assume responsibility for professional development and demonstrate the capacity for further independent professional learning with a high level of autonomy.
PO3	Possess specialized conceptual knowledge, incorporating scientific advancements in healthcare, that serves as a foundation for research; critically reflect on medical issues and related multidisciplinary problems, including the early intervention system.
PO4	Isolate and identify primary clinical symptoms and syndromes (according to List 1); establish a provisional clinical diagnosis of a disease (according to List 2) using standard methodologies, based on preliminary patient history, physical examination findings, and knowledge of human anatomy, organs, and systems.
PO5	Collect patient complaints, medical and life history; assess the patient's psychomotor and physical development, as well as the state of bodily organs and systems; evaluate diagnostic information based on laboratory and instrumental findings (according to List 4), accounting for the patient's age.
PO6	Establish a definitive clinical diagnosis by making informed decisions and analysing subjective and objective data obtained from clinical and supplementary examinations; perform differential diagnosis while adhering to relevant ethical and legal standards, under the supervision of a supervising physician within a healthcare facility setting (according to List 2).
PO7	Prescribe and analyse supplementary (mandatory and elective) diagnostic methods (laboratory, functional, and/or instrumental) (according to List 4) for patients with diseases of organs and bodily systems to perform differential diagnosis (according to List 2).
PO8	Determine the primary clinical syndrome or the underlying cause of a casualty's/affected individual's critical condition (according to List 3) by making informed decisions and assessing the individual's condition under any circumstances (inside or outside a healthcare facility), including emergency situations, combat operations, field settings, and environments with limited time and information.
PO9	Determine the nature and principles of patient treatment (conservative, surgical) for diseases (according to List 2), accounting for the patient's age, within a healthcare facility, outside it, and at stages of medical evacuation (including field conditions); formulate this based on a provisional clinical diagnosis, adhering to relevant ethical and legal standards, by making informed decisions using existing algorithms and standard regimens; justify personalized recommendations if an extension of the standard regimen is required, under the supervision of a supervising physician in a medical institution.
PO10	Determine the required regimen of work, rest, and nutrition based on the definitive clinical diagnosis, adhering to relevant ethical and legal standards, by making informed decisions according to established algorithms and standard protocols.
PO14	Determine management tactics and deliver emergency medical care for urgent conditions (according to List 3) under time-sensitive constraints, in compliance with existing clinical protocols and standards of care.

PO17	Perform medical procedures and manipulations (according to List 5) in a hospital, home, or occupational environment based on a provisional clinical diagnosis and/or patient status indicators, making informed decisions and adhering to relevant ethical and legal standards.
PO18	Assess an individual's functional status, disabilities, and the duration of temporary incapacity for work, issuing the relevant documentation within a healthcare facility based on disease data, clinical course, and occupational characteristics; maintain patient and population-level medical documentation in compliance with regulatory frameworks.
PO19	Plan and implement a system of antiepidemic and prophylactic measures to prevent the onset and spread of diseases among the population.
PO21	Retrieve required information from professional literature, databases, and other sources; analyse, evaluate, and apply this information.
PO23	Evaluate environmental impacts on human health to assess population morbidity patterns.

7. The role of the course in the development of program competencies

Program competencies addressed by the course:
For 222 Medicine:

PC1	GC 1. Ability to think abstractly, analyse, and synthesize.
PC2	GC 2. Ability to learn and master modern knowledge.
PC3	GC 3. Ability to apply knowledge in practical situations.
PC4	GC 4. Knowledge and understanding of the subject area and understanding of the professional activity.
PC5	GC 5. Ability to adapt and act in a new situation.
PC6	GC 6. Ability to make informed decisions.
PC7	GC 7. Ability to work in a team.
PC8	GC 8. Ability to engage in interpersonal interaction.
PC9	GC 10. Ability to use information and communication technologies.
PC10	GC 11. Ability to search, process, and analyse information from various sources.
PC11	GC 12. Determination and persistence concerning tasks and responsibilities undertaken.
PC12	SC 1. Ability to gather patient medical history and analyse clinical data.
PC13	SC 2. Ability to determine the required scope of laboratory and instrumental investigations and evaluate their results.
PC14	SC 3. Ability to establish provisional and clinical diagnoses of diseases.
PC15	SC 4. Ability to determine the appropriate work and rest regimen for the treatment and prevention of diseases.

PC16	SC 5. Ability to determine dietary patterns for the treatment and prevention of diseases.
PC17	SC 6. Ability to determine the principles and nature of disease treatment and prevention.
PC18	SC 7. Ability to diagnose medical emergencies.
PC19	SC 8. Ability to determine management strategies and provide emergency medical care.
PC20	SC 9. Ability to execute medical evacuation and triage measures.
PC21	SC 10. Ability to perform medical procedures and manipulations.
PC22	SC 11. Ability to solve medical problems in new or unfamiliar environments amidst incomplete or limited information, incorporating aspects of social and ethical responsibility, including the early intervention system.
PC23	SC 13. Ability to implement sanitary, hygienic, and preventive measures.
PC24	SC 15. Ability to perform medical assessments of work capacity.
PC25	SC 16. Ability to maintain medical records, including electronic health records.
PC26	SC 17. Ability to assess the impact of environmental, socioeconomic, and biological determinants on the health status of individuals, families, and populations.
PC27	SC 21. Ability to communicate knowledge, conclusions, and reasoning regarding healthcare issues and related matters clearly and unambiguously to both specialists and non-specialists, including learners.
PC28	SC 24. Adherence to ethical principles when working with patients and laboratory animals.

8. Teaching and learning activities

Topic 1. Fundamentals of Family Medicine. The interrelation between core competencies and essential characteristics of applied value: the WONCA Tree.
pr.tr.1 "Fundamentals of Family Medicine. The interrelation between core competencies and essential characteristics of applied value: the WONCA Tree." (full-time course) The WONCA Tree. Core competencies. Organization of the work of a family doctor. Features of work in various formats (municipal non-profit enterprise, individual entrepreneur, in the city, in rural areas. Studying this topic involves theoretical work in the classroom using the following teaching methods: brainstorming, case studies).
Topic 2. Key competencies of a family doctor: person-centered care
pr.tr.2 "Key competencies of a family doctor: person-centered care"." (full-time course) List of actions at the level of the institution and the doctor / PMD team in ensuring Picker's principles. The concept and concepts of person-centeredness. Advantages of a person-centered model of providing medical care. Studying this topic involves theoretical work in the classroom using the following teaching methods: brainstorming, case, testing.

Topic 3. Key competencies of a family doctor: a comprehensive approach

pr.tr.3 "Key competencies of a family doctor: a comprehensive approach." (full-time course)

Comprehensive care in family medicine. Outpatient reception. The concept of multi- and polymorbidity diseases. Preventive work. Promotion of a healthy lifestyle. Consultation on healthy nutrition. Rehabilitation in the practice of a family doctor. Quarter prevention. Rehabilitation in the practice of a family doctor. Studying this topic involves theoretical work in the classroom using the following teaching methods: testing, brainstorming, and case.

Topic 4. Key competencies of a family doctor: a comprehensive approach

pr.tr.4 "Core competencies of a family doctor: a comprehensive approach." (full-time course)

Quaternary prevention - concepts, examples of application. Rehabilitation in the practice of a family doctor. The study of this topic involves theoretical work in the classroom using the following teaching methods: testing, role-playing, and interpretation of the results of additional examination methods.

Topic 5. Key competencies of a family doctor: a comprehensive approach - palliative care.

pr.tr.5 "Core competencies of a family doctor: a comprehensive approach - palliative care." (full-time course)

Palliative care. Care, rules for handling narcotic drugs, psychotropic substances and precursors. Visual analogue scale for assessing the effectiveness of pain. Steps of pain relief. Principles of treating chronic pain. Adjuvant therapy. Pain management. Steps of pain relief in chronic pain syndrome. The study of this topic involves theoretical work in the classroom using the following teaching methods: testing, brainstorming, case studies.

Topic 6. Key competencies of a family doctor: a comprehensive approach - palliative care.

pr.tr.6 "Key competencies of a family doctor: a comprehensive approach - palliative care." (full-time course)

Pain management. Steps of pain relief in chronic pain syndrome. The study of this topic involves theoretical work in the classroom using the following teaching methods: testing, brainstorming, and case studies.

Topic 7. Key competencies of a family doctor: a holistic approach.

pr.tr.7 "Key competencies of a family doctor: a holistic approach." (full-time course)

Content of a holistic approach. Biopsychosocial model. Comparison of biomedical and biopsychosocial models of disease occurrence. Holistic model of assessing human health. The study of this topic involves theoretical work in the classroom using the following teaching methods: testing, case studies, and role-playing.

Topic 8. Key competencies of a family doctor: a holistic approach

pr.tr.8 "Key competencies of a family doctor: a holistic approach." (full-time course)

A holistic, integrated model of human health assessment. The study of this topic involves theoretical work in the classroom using the following teaching methods: testing, case, and role-playing.

Topic 9. Key competencies of a family doctor: special skills in problem solving.

pr.tr.9 "Key competencies of a family doctor: special skills in problem solving." (full-time course)

Special tools of family doctors. Telephone consultation. Triage of complaints. Expectant, observational tactics. Delayed prescription of drugs. The concept of uncertainty, unspecified medical conditions - organization of patient management. Decision-making in family medicine. Studying this topic involves theoretical work in the training room using the following teaching methods: testing, role-playing, interpretation of the results of additional examination methods. If possible, work with the patient in the specialized department of the health care institution (in accordance with the cooperation agreement between the medical institution and the university).

Topic 10. Key competencies of a family doctor: special skills in problem solving.

pr.tr.10 "Key competencies of a family doctor: special skills in problem solving." (full-time course)

The concept of uncertainty, unspecified medical conditions - organization of patient management. Decision-making in family medicine. Studying this topic involves theoretical work in the classroom using the following teaching methods: testing, role-playing, interpretation of the results of additional examination methods. If possible, work with the patient in the specialized department of a health care institution (in accordance with the cooperation agreement between the medical institution and the university).

Topic 11. Key competencies of a family doctor: special skills in problem solving - working with all age categories.

pr.tr.11 "Key competencies of a family doctor: special skills in problem solving - working with all age categories." (full-time course)

Organization of the work of a family doctor with children: from the patronage of newborns to work with adolescents. Management of a normal pregnancy. Providing assistance to patients at home, home visits. The role of a nurse. Studying this topic involves theoretical work in the training room using the following teaching methods: testing, brainstorming, case, and multimedia presentation. If possible, work with the patient in a specialized department of a healthcare institution (in accordance with the cooperation agreement between the medical institution and the university).

Topic 12. Key competencies of a family doctor: special skills in problem solving - working with all age categories.

pr.tr.12 "Key competencies of a family doctor: special skills in problem solving - working with all age categories." (full-time course)

Actions in the event of a patient's death: the role of a doctor (ethics of communication with relatives, legislation). Studying this topic involves theoretical work in the classroom using the following teaching methods: testing, brainstorming, and case studies.

Topic 13. Key competencies of a family doctor: management in primary health care.

pr.tr.13 "Key competencies of a family doctor: management in primary health care." (full-time course)

First contact, gatekeeping. The concept of "red flags". Levels of medical care. Interaction between PMD doctors, other specialist doctors, social service providers. Studying this topic involves theoretical work in the training room using the following teaching methods: testing, role-playing, practicing practical skills in a simulation center, and interpreting the results of additional examination methods. If possible, working with the patient in a specialized department of a healthcare institution (in accordance with the cooperation agreement between the medical institution and the university).

Topic 14. Key competencies of a family doctor: management in primary care.

pr.tr.14 "Key competencies of a family doctor: management in primary care." (full-time course)

Electronic data transmission systems. Studying this topic involves theoretical work in the classroom using the following teaching methods: testing, brainstorming, case studies, and watching videos on the topic of the lesson with subsequent discussion.

Topic 15. Key competencies of a family doctor: community orientation.

pr.tr.15 "Key competencies of a family doctor: community orientation." (full-time course)

Determining community health care needs. Types of communities. Features more common in urban and rural communities. The concept of community diagnosis. Characteristics of family medicine in rural areas: advantages for the family doctor. Studying this topic involves theoretical work in the classroom using the following teaching methods: testing, brainstorming, and case studies.

Topic 16. Aspects of attitude, science and context to the practice of a family doctor.

pr.tr.16 "Aspects of attitude, science and context to the practice of a family doctor." (full-time course)

Evidence-based medicine. Shared decision-making with the patient based on the principles of evidence-based medicine. The concept of medical error. Quality control of the work of a family doctor. Medical professionalism. The study of this topic involves theoretical work in the classroom using the following teaching methods: testing, role-playing, and case.

Topic 17. Communication in family medicine.

pr.tr.17 "Communication in family medicine." (full-time course)

Empathy in the work of a family doctor. NURSE mnemonic technique for identifying empathy. The study of this topic involves theoretical work in the classroom using the following teaching methods: testing, working in small groups, watching videos.

Topic 18. Consultation management according to the Calgary-Cambridge model.

pr.tr.18 "Consultation management according to the Calgary-Cambridge model." (full-time course)

Consultation management and basic communication models. Calgary-Cambridge model of consultation, its components. The study of this topic involves theoretical work in the classroom using the following teaching methods: testing, brainstorming, reflection.

Topic 19. Consultation management according to the Calgary-Cambridge model.

pr.tr.19 "Consultation management according to the Calgary-Cambridge model." (full-time course)

Explanation and planning of actions according to the CCM of consultation, joint decision-making. The study of this topic involves theoretical work in the classroom using the following teaching methods: testing, brainstorming, reflection.

Topic 20. Special and conflict situations in the practice of a family doctor.

pr.tr.20 "Special and conflict situations in the practice of a family doctor." (full-time course)

The concept of bad news in a medical context. Reporting bad news (SPIKES protocol). The concept of conflict. Empathetic response according to the NURSE, EVE protocols. Peculiarities of counseling an anxious, aggressive, hypochondriac, depressed, suspicious, talkative patient. The study of this topic involves theoretical work in the classroom using the following teaching methods: testing, video viewing, brainstorming, role-playing.

Topic 21. Communication in the collective.

pr.tr.21 "Communication in the collective." (full-time course)

The importance of teamwork in family medicine. The role of paramedical staff and auxiliary services. Effective communication in the team. ISBAR communication system. The study of this topic involves theoretical work in the classroom using the following teaching methods: testing, video viewing, brainstorming, role-playing.

Topic 22. ICPC-2: structure and coding principles.

pr.tr.22 "ICPC-2: structure and coding principles." (full-time course)

The main advantages of using ICPC-2 in primary care. ICPC-2 structure. The study of this topic involves theoretical work in the classroom using the following teaching methods: testing, video viewing, brainstorming, role-playing.

Topic 23. ICPC-2: structure and coding principles.

pr.tr.23 "ICPC-2: structure and coding principles." (full-time course)

Concept of visit and episode of medical care. Coding of visit: reason for referral, diagnosis, processes. The study of this topic involves theoretical work in the classroom using the following teaching methods: video viewing, brainstorming, role-playing.

Topic 24. Consulting a child with a fever

pr.tr.24 "Consultation of a child with fever." (full-time course)

Training of the practical skill "Consultation of a child with fever". Studying this topic involves theoretical work in the classroom using the following teaching methods: teacher instructions, role-playing, and practice of practical skills in a simulation center. If possible, work with a patient in a specialized department of a healthcare institution (in accordance with the cooperation agreement between the medical institution and the university).

Topic 25. Consulting a person with dementia.

pr.tr.25 "Consultation of a person with dementia." (full-time course) Training of the practical skill "Consultation of a person with dementia". Studying this topic involves theoretical work in the classroom using the following teaching methods: teacher instructions, role-playing, and practice of practical skills in the simulation center. If possible, work with a patient in a specialized department of a healthcare institution (in accordance with the cooperation agreement between the medical institution and the university).
Topic 26. Final control: Grading test.
pr.tr.26 "Final control: Grading test." (full-time course) Answering theoretical questions, demonstrating practical skills.
Topic 27. Final control: Grading test.
pr.tr.27 "Final control: Grading test." (full-time course) Answering theoretical questions, demonstrating practical skills.

9. Teaching methods

9.1 Teaching methods

Course involves learning through:

TM1	Case-based learning
TM2	Team Based Learning
TM3	Electronic learning
TM4	Practical training
TM5	Research Based Learning

The modern teaching methods (CBL, TBL, RBL) use in taught of discipline. It is contribute to the development of professional abilities and stimulate creative thinking.

9.2 Learning activities

LA1	Group practical task
LA2	Performing situational exercises
LA3	E-learning in systems (the list is specified by the teacher, for example, Mix, Google Meet, Zoom and in the format of a YouTube channel)
LA4	Analysis and discussion of cases (educational/practical/research)
LA5	The individual research project

10. Methods and criteria for assessment

10.1. Assessment criteria

Definition	National scale	Rating scale

10.2 Formative assessment

	Description	Deadline, weeks	Feedback
FA1 Express testing	A method of effective verification of the level of mastery of knowledge, skills and abilities in each topic of the academic discipline. Testing allows you to check the mastery of educational material in each topic.	Throughout the entire period of studying the discipline	According to the data obtained on the test results, based on their analysis, it is proposed to determine the overall grade for the lesson as an indicator of the achievements of the students' educational activities.
FA2 Focus group discussions	The method allows all participants to be involved in the process of discussing and justifying their own opinions through multilateral communication, to develop the ability to conduct a professional discussion, to cultivate respect for colleagues and the ability to generate alternative ideas and proposals.	Throughout the entire period of studying the discipline	According to the data obtained on the test results, based on their analysis, it is proposed to determine the overall grade for the lesson as an indicator of the achievements of the students' educational activities.
FA3 The teacher advises during the preparation of an individual research project (speech at a conference, a competition of scientific papers)	Involvement in research activities contributes to the formation of a scientific worldview, diligence, work capacity, initiative, etc.	Throughout the entire period of studying the discipline	Oral comments from the teacher. The student is given additional incentive points (from 5 to 10), depending on the type of research project.

FA4 The teacher's instructions in the process of performing practical tasks.	The instructions reveal methods of pedagogical control over the professional activities of applicants. Efficiency is determined by compliance with all stages of performing practical tasks. The effectiveness of the formation of the necessary practical skills and abilities depends on the level of formation of practical competence.	Throughout the entire period of studying the discipline	Consulting students in their work, direct and indirect observation of the work of applicants.
FA5 Solving situational tasks	Assessment of acquired knowledge on the subject of the discipline. It is carried out at each practical lesson in accordance with the specific goals of each topic based on a comprehensive assessment of the student's activity.	Throughout the entire period of studying the discipline	Feedback is aimed at supporting students' independent work, identifying shortcomings and assessing the level of acquired knowledge

10.3 Summative assessment

	Description	**Deadline, weeks**	**Feedback**
SA1 Current assessment of the level of theoretical and practical training	Includes oral questioning, assessment of situational tasks and clinical cases, brainstorming, role-playing, objective structured clinical examination of the patient, testing. Students involved in research activities have the opportunity to present the results of their own research at conferences, student research paper competitions, etc. (encouragement activities, additional points).	During the entire period of studying the discipline	Conducted at each lesson. A student can receive a maximum of 120 points, a minimum of 72 points. Additional incentive points for preparing a research project (from 5 to 10), depending on the type of project.
SA2 Final control: differential test	Taking a differential test. Applicants who have fulfilled the requirements of the curriculum and successfully mastered the material in the discipline are allowed to take the test.	According to the schedule at the end of the semester	A candidate can receive 80 points for the test. The minimum number of points that a student must receive is 48 points.

Form of assessment:

	Points	Можливість перескладання з метою підвищення оцінки
The first semester of teaching	**200 scores**	
SA1. Current assessment of the level of theoretical and practical training	**120**	
Oral interview, assessment of situational tasks, clinical cases, role play, brainstorming, objective structured clinical examination of the patient, testing.	120	No
SA2. Final control: differential test	**80**	
Answer to theoretical questions	50	No
Demonstration of practical skills	30	No

The student is assigned a maximum of 5 points for each practical lesson (the grade is given in the traditional 4-point grading system). At the end of the academic year, the arithmetic average of the student's performance is calculated. The maximum number of points that a student can receive in practical lessons during the academic year is 120. Grading assessment (final module control) is carried out according to the schedule at the end of the semester. The grade for the final module is given in the traditional 4-point grading system with subsequent conversion into points, while, in general, the grade "5" corresponds to 80 points, "4" - 64 points, "3" - 48 points, "2" - 0 points. Among these points, the score for practical and theoretical training is 50% of the total score of the control. The final control is credited to the student if they scored at least 48 points out of 80. The overall grade for the discipline consists of the sum of the points scored for current performance and passing the final module control. Incentive points are added to the grade for the discipline for the implementation of an individual research project (defense of student scientific work -10 points, speech at a conference, poster presentation at a conference, abstracts of reports - 5 points). The possibility of re-crediting the points obtained by the system of non-formal education in accordance with the Regulation is provided. The total score for the discipline cannot exceed 200 points.

11. Learning resources

11.1 Material and technical support

MTS1	Information and communication systems
MTS2	Library funds, archive of radiographs, spirograms, electrocardiograms, computed tomograms, results of laboratory examination methods.
MTS3	Models and dummies (of organisms and individual organs, technical installations and structures, etc.)
MTS4	Modern diagnostic, therapeutic and other devices, objects and instruments for professional medical activities
MTS5	Software (to support distance learning, Internet surveys, virtual laboratories, virtual patients, to create computer graphics, modeling, etc., etc.)

MTS6	Multimedia, video and sound reproduction, projection equipment (video cameras, projectors, screens, smartboards, etc.)

11.2 Information and methodical support

Essential Reading	
1	Harrison's Principles of Internal Medicine [Електронний ресурс]. Vol.1. — 21st ed. — New York : McGraw Hill, 2022. — 3855 p.
Supplemental Reading	
1	A Definition of Family Medicine and General Practice. M Jawad Hashim. J Coll Physicians Surg Pak. 2018 Jan;28(1):76-77. doi: 10.29271/jcpsp.2018.01.76.
2	Clinical Methods in Medical Family Therapy [Електронний ресурс] / edited by Tai Mendenhall, Angela Lamson, Jennifer Hodgson, Macaran Baird. — 1st ed. 2018. — Cham : Springer International Publishing, 2018. — (Focused Issues in Family Therapy).
3	Family Medicine [Текст] : textbook: in 3 b. B.2 : Symptoms and syndromes in clinical course of internal diseases / L. S. Babinets, O. M. Barna, S. V. Biletskyi etc. ; ed.: O.M. Hyrina, L.M. Pasiyeshvili. — K. : Medicine Publishing, 2018. — 376 p.
4	Acute coronary syndrome [Текст] : study guide / O. S. Pogorielova. — Sumy : Sumy State University, 2021. — 73 p.
5	Koteliukh M.Y., Bokova S.I., Demikhova N.V., Lantukhova N.D. A PREDICTION MODEL FOR CHRONIC HEART FAILURE IN PATIENTS WITH TYPE 2 DIABETES MELLITUS. Clinical and Preventive Medicine. 2025. 2025 (2). C. 105-111 DOI:10.31612/2616-4868.2.2025.13
Web-based and electronic resources	
1	THE EUROPEAN DEFINITION OF GENERAL PRACTICE / FAMILY MEDICINE, WONCA EUROPE, 2023 Edition. Режим доступу: https://www.woncaeurope.org/file/41f61fb9-47d5-4721-884e-603f4afa6588/WONCA_European_Definitions_2_v7.pdf
2	https://www.woncaeurope.org
3	https://mix.sumdu.edu.ua/info/nmk/997fc8fe-5eb9-4a03-8f92-cbf6988a4254
4	https://www.uptodate.com/contents/search
5	https://www.bmj.com/
6	https://www.medscape.com/
7	https://e-medjournal.com/index.php/psp/index
8	https://www.icpcn.org/

COURSE DESCRIPTOR

№	Course Bescriptor	Total hours	Classroom work, hours				Independent work of students, hours						
			Total hours	Lectures	Workshops (seminars)	Labs	Total hours	Self-study of the material	Preparation for workshops (seminars)	Preparation for labs	Preparation for assesment	Independent extracurricular tasks	
1	2		3	4	5	6	7	8	9	10	11	12	13
full-time course													
Module 1. Characteristics of the discipline and key competencies of a family doctor													
1	Fundamentals of Family Medicine. The interrelation between core competencies and essential characteristics of applied value: the WONCA Tree.	2.5	2	0	2	0	0.5	0	0.5	0	0	0	
2	Key competencies of a family doctor: person-centered care	2.5	2	0	2	0	0.5	0	0.5	0	0	0	
3	Key competencies of a family doctor: a comprehensive approach	2.5	2	0	2	0	0.5	0	0.5	0	0	0	
4	Key competencies of a family doctor: a comprehensive approach	2.5	2	0	2	0	0.5	0	0.5	0	0	0	
5	Key competencies of a family doctor: a comprehensive approach - palliative care.	2.5	2	0	2	0	0.5	0	0.5	0	0	0	
6	Key competencies of a family doctor: a comprehensive approach - palliative care.	2.5	2	0	2	0	0.5	0	0.5	0	0	0	
7	Key competencies of a family doctor: a holistic approach.	2.5	2	0	2	0	0.5	0	0.5	0	0	0	
8	Key competencies of a family doctor: a holistic approach	2.5	2	0	2	0	0.5	0	0.5	0	0	0	
9	Key competencies of a family doctor: special skills in problem solving.	2.5	2	0	2	0	0.5	0	0.5	0	0	0	
10	Key competencies of a family doctor: special skills in problem solving.	2.5	2	0	2	0	0.5	0	0.5	0	0	0	
11	Key competencies of a family doctor: special skills in problem solving - working with all age categories.	2.5	2	0	2	0	0.5	0	0.5	0	0	0	
12	Key competencies of a family doctor: special skills in problem solving - working with all age categories.	2.5	2	0	2	0	0.5	0	0.5	0	0	0	

1	2	3	4	5	6	7	8	9	10	11	12	13
13	Key competencies of a family doctor: management in primary health care.	2.5	2	0	2	0	0.5	0	0.5	0	0	0
14	Key competencies of a family doctor: management in primary care.	2.5	2	0	2	0	0.5	0	0.5	0	0	0
15	Key competencies of a family doctor: community orientation.	2.5	2	0	2	0	0.5	0	0.5	0	0	0
16	Aspects of attitude, science and context to the practice of a family doctor.	2.5	2	0	2	0	0.5	0	0.5	0	0	0
Module 2. Soft and organizational skills in the work of a family doctor												
1	Communication in family medicine.	2.5	2	0	2	0	0.5	0	0.5	0	0	0
2	Consultation management according to the Calgary-Cambridge model.	2.5	2	0	2	0	0.5	0	0.5	0	0	0
3	Consultation management according to the Calgary-Cambridge model.	2.5	2	0	2	0	0.5	0	0.5	0	0	0
4	Special and conflict situations in the practice of a family doctor.	2.5	2	0	2	0	0.5	0	0.5	0	0	0
5	Communication in the collective.	2.5	2	0	2	0	0.5	0	0.5	0	0	0
Module 3. Features of clinical practice in family medicine												
1	ICPC-2: structure and coding principles.	2.5	2	0	2	0	0.5	0	0.5	0	0	0
2	ICPC-2: structure and coding principles.	2.5	2	0	2	0	0.5	0	0.5	0	0	0
3	Consulting a child with a fever	2.5	2	0	2	0	0.5	0	0.5	0	0	0
4	Consulting a person with dementia.	2.5	2	0	2	0	0.5	0	0.5	0	0	0
5	Final control: Grading test.	2.5	2	0	2	0	0.5	0	0.5	0	0	0
6	Final control: Grading test.	2.5	2	0	2	0	0.5	0	0.5	0	0	0
Assesment												
1	Graded Credit	6	0	0	0	0	6	0	0	0	6	0
Independent extracurricular tasks												
1	extracurricular tasks	16.5	0	0	0	0	16.5	0	0	0	0	16.5
Total (full-time course)		*90*	*54*	*0*	*54*	*0*	*36*	*0*	*13.5*	*0*	*6*	*16.5*

	UNIVERISTY POLICIES FOR THE COURSE «General Practice (Family Medicine)» **Higher education level** The Second Level Of Higher Education, National Qualifications Framework Of Ukraine – The 7th Level, QF-LLL – The 7th Level, FQ-EHEA – The Second Cycle **Major: Educational programme** 222 Medicine: Medicine **Form of study** full-time course **Language of instruction** English
Teacher(s)	Bokova Svitlana , Orlovskyi Oleksandr Viktorovych
Contact	Svitlana Bokova: s.bokova@med.sumdu.edu.ua Орловський О.В. o.orlovsky@med.sumdu.edu.ua
Time and room for giving consultations	City Children's Clinical Hospital No. 2, classroom No. 3 (4th floor) (Sumy, 3 Ivana Sirka St.), meet.google.com/yfn-pwuh-cxv. According to the approved schedule of teacher consultations.
Links to online educational platforms	The link is Indicated in the schedule of classes (Personal office of Sumy State University). https://mix.sumdu.edu.ua/info/nmk/997fc8fe-5eb9-4a03-8f92-cbf6988a4254
Link to the syllabus in the course catalogue	https://pg.cabinet.sumdu.edu.ua/report/course/244fced9a4a0404434b4da8f2853fe0f6149887
Communication tools	s.bokova@med.sumdu.edu.ua, o.orlovsky@med.sumdu.edu.ua, WhatsApp

POLICIES

Academic integrity policy

All assignments specified in the syllabus must be completed by the student independently. Cheating during any type of assessment is prohibited. The work of a higher education student must not contain plagiarism, fabrication, falsification, or cheating. All written assignments are subject to a plagiarism check, followed by the instructor's analysis of the results in order to determine the correctness of references to textual and illustrative sources.

During the study of the course, other manifestations of academic dishonesty, as defined by the University Code of Academic Integrity, are also unacceptable.

In case of violations of academic integrity by a higher education student during the study of the course, the instructor has the right to take one of the following actions:

- reduce by up to 40% the number of points earned for a practical assignment;
- provide recommendations for revising a compulsory homework assignment with a reduction of the final score by up to 25%;
- not accept a compulsory homework assignment without granting the right to resubmit it;
- assign a retake of a written module or final assessment with a reduction of the final score by up to 15%;
- refuse to grant a retake of a written module or final assessment.

Policy on the use of artificial intelligence tools

The policy on the use of artificial intelligence tools is announced by the instructor at the beginning of the course.

Artificial intelligence tools is permitted to use to prepare assignments specified in the curriculum of the academic discipline, to search for information resources. The fact of using artificial intelligence tools must

be noted in the assignment.

Несанкціоноване використання інструментів штучного інтелекту є порушенням академічної доброчесності.

Policy on the use of open access resources

When utilizing materials from open-access sources in the preparation of assignments specified in the syllabus, students must strictly adhere to the terms of the applicable Creative Commons licenses and ensure proper attribution in accordance with copyright regulations.

Attendance policy

Class attendance is mandatory. Under justified circumstances (e.g., illness, participation in academic mobility programs), studies may be conducted according to an individual schedule.

Policy on deadlines and retakes

Missed classes may be made up according to the consultation schedule. In the case where the applicant during the semester control received an "unsatisfactory" grade with a score of 70-119 inclusive, they have the right to a two-time retake of the final grade for the academic discipline: the first retake by the teacher, the second retake by the commission created by the director of the institute. If during the semester control, the applicant received an "unsatisfactory" grade with a score of up to 69 inclusive, they have the right to a one-time retake of the final grade for the academic discipline by the commission created by the director of the institute.

If the total number of points obtained as a result of all assessments corresponds to a passing grade (subject to the mandatory requirement of fulfilling all conditions specified in the syllabus and regulations), it is considered final; a passing grade may not be retaken for the purpose of improvement.

The elimination of academic debt is carried out in accordance with the Regulations on the Organization of the Educational Process of Sumy State University, taking into account the established deadlines, forms of assessment, and procedures for retaking assessment activities.

Policy on appealing assessment results

Appeals and consideration of applications from higher education students regarding the assessment of learning outcomes are carried out in accordance with the Regulations on the Organization of the Educational Process of Sumy State University.

Assessment criteria