

# Family Practice

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Family medicine is comprehensive, continuous medical care for all ages, genders, and affected organ systems. Encompassing the preventive, acute, and chronic aspects of health care, and involving both medical and surgical skills, family medicine cares for the patient in the context of their family and community. Treatment of the whole person is a hallmark of family medicine.

## **FAPR 900. Rural Preceptorship. 4 Credits.**

Since 1951 all medical students have completed, as a requirement of graduation, a rural preceptorship of at least four weeks with a practicing physician in the state of Kansas. The emphasis of the preceptorship is rural primary care (family medicine, general internal medicine and general pediatrics). Rural placements are made by the Course Administrator. The preceptor or site will provide housing while the student is on this rotation. The preceptor will expect the student to participate in all phases of professional life as a rural physician. Most sites have the student work in ambulatory clinic, hospital care, ER, nursing home, house calls, and night call. Students also are expected to participate in the civic, administrative and social activities of their preceptor. The preceptor will evaluate student performance based on school of medicine criteria. At the completion of the course the student will have: a working knowledge of the rural health care system, an understanding of the function of a physician in the context of community and an appreciation for the support systems needed for practice in rural Kansas. Offered in Modules I-XII. Prerequisite: Completion of year 3 clinical clerkships.

## **FAPR 901. Subinternship in Family Medicine. 4 Credits.**

This sub-internship is designed to prepare students for residency and enrolled students will assume the role of an intern under supervision. The family medicine approach to patient care is emphasized to include caring for patients in the context of their family environment and community, addressing structural and social determinants of health, and providing longitudinal care for patients throughout their lifetimes. Students will be assigned to patient care experiences in the hospital, ambulatory, and maternity-care settings. The student will be expected to participate in teaching and learning experiences available to residents. Students will be evaluated by their clinical supervisors in the areas of oral presentation, encounter documentation, differential building, plan formation, patient interview and physical exam skills, interpersonal and communication skills, systems knowledge, self-assessment, and goal-setting skills, and professionalism. Prerequisite: Completed third year.

## **FAPR 905. Summer Training Option of Rural Medicine. 4 Credits.**

This elective is offered to students between the first and second years of medical school. This course is designed to provide students the opportunity to observe a rural primary care physician in the daily practice of medicine and to participate in rural-related research. Students will spend two summer months on-site in their assigned rural community. At the beginning of the two-month on-site experience, students will attend a clinical skills orientation. Prerequisite: Permission of the instructor.

## **FAPR 906. Summer Training Option of Rural Medicine, 4-week option. 2 Credits.**

This elective is offered to students between the first and second years of medical school. This course is designed to provide students the opportunity to observe a rural primary care physician in the daily practice of medicine and to participate in rural-related research. Students will spend one summer month on-site in their assigned rural community. At the beginning of the month on-site experience, students will attend a clinical skills orientation.

## **FAPR 910. Family Medicine Elective. 4 Credits.**

This clinical elective is offered to students in their fourth year of medical school. This course mimics the structure and content of the required sub-internship in the fourth year (but does not count for required sub-internship credit) and is an opportunity to build on the skills and knowledge required for residency. The student spends time in inpatient, outpatient, and FM-obstetric settings and will practice working independently under the supervision of residents and faculty. Prerequisite: Completed third year.

## **FAPR 915. Medicine and the Family. 2 Credits.**

This elective course on medicine and the family teaches students about family dynamics as they relate to the practice of medicine. Specifically, the course focuses on the family life cycle, normal and dysfunctional families, marriage, "normal" sexual behavior, and sexual dysfunction. These concepts will be applied to an understanding of such common medical issues as: family planning, disability, health screening, risk factors, death and dying, and child safety. Students will also be encouraged to learn about their own families by completing genograms, "family circles," etc. Students will be graded via two examinations, one completed written project, and class attendance. Prerequisite: Permission of instructor.

## **FAPR 920. Research in Family Medicine. 2-8 Credits.**

For this course, students interested in basic research experience in the context of Family Medicine may seek the sponsorship of a Family Medicine faculty member and with them develop a written plan for the elective. The elective may vary in length from two weeks to three months and counts for one credit hour for each sixty hours spent actively on the elective. Elective not available during July.

## **FAPR 925. Interdisciplinary Community Partnership. 4 Credits.**

This course is designed as an interdisciplinary team approach to developing strategies for community health assessment and intervention. Students will work with a team that includes at least three other health professional students and at least one community "lay health advisor" to assess the health needs of a local neighborhood and develop and implement an appropriate intervention. The course will explore community needs and resources, assess and barriers to care, and culturally appropriate interventions. No courses currently exist which involve an equal partnership with medicine, allied health, social work and nursing. This course is designed to give students the opportunity to learn to work as a team member with a variety of health care professionals, and to understand the valuable contribution of each group. Research has shown that students who are involved in the community during medical school continue to be actively involved in their chosen communities. This course is developed in concert with KU's Schools of Nursing, Allied Health and Social Welfare. This first year, two interdisciplinary teams will be assembled, working with 2 neighborhoods in the vicinity of KUMC. If this pilot is successful, more communities and teams will be assembled in future years. This is a year-long course that will span both fall and spring semesters.

## **FAPR 926. AIDS Care in the Community. 4 Credits.**

This elective is a concentrated experience in AIDS medical care provided in a family practice setting. The focus is on diagnosis, treatment and psycho-social issues for men, women and children with HIV disease (including gynecologic, prenatal and delivery of infected women). Care throughout the spectrum of disease is emphasized. The course is an additional elective to be made available to clinical medical students in the fourth year of training.

## **FAPR 927. Palliative Care in a Community Setting. 4 Credits.**

This elective is an end-of-life medical care experience including identification and treatment of medical problems associated with cancer, CHF, COPD, AIDS, and other life-shortening diseases. The course focus

is on symptom management and psycho-social issues associated with dying. This course is an additional elective to be made available to clinical medicine students in the fourth year of training.

**FAPR 930. LGBTQ+ Health. 4 Credits.**

Four-week clinical elective in LGBTQ+ health with a focus on primary healthcare needs of and health disparities faced by the LGBTQ+ population across the lifespan. Students will have dedicated clinical time with Dr Jackson in the family medicine LGBT Primary Care Clinic and Gender Diversity clinic, with providers at the Wyandotte Health Department STI clinic and with Dr. Nishamura in the Psychology department. Additional clinical experiences can be arranged depending on the students' goals and preceptor availability. Non-clinical time will be spent on reading foundational texts in queer studies and LGBTQ+ health, completing online modules from the National LGBTQIA+ Health Education Center and participating in discussions on this material. Individual projects and focus can be tailored to students depending on their goals. Prerequisite: Completed third year.

**FAPR 935. Primary Care Sports Medicine. 4 Credits.**

This course is intended for highly motivated students who have a strong interest in pursuing a career in sports medicine or orthopedics, as well as students who plan on going into a primary care discipline and would like to broaden their knowledge base before starting residency. The 4th year medical student will gain a hands-on experience working with Primary Care Sports Medicine physicians. The goal of the rotation is for students to practice the basic knowledge and skills to evaluate, diagnose, and manage common disorders seen in sports medicine. As part of the rotation the student will also spend a half day per week observing a sports medicine physical therapist. Each week the student will be expected to make a short, informal 5-minute oral presentation on a sports medicine topic selected by faculty. Depending on the time of year, the student may have the opportunity to assist a faculty member in providing coverage during a high school or other sporting event. Prerequisite: Students must have completed all required third-year clerkships to participate in this elective.

**FAPR 955. Family Medicine Clerkship. 0-8 Credits.**

The Family Medicine (FM) clerkship will introduce third-year medical students to the principles and practice of family medicine and community health. Students will learn about the breadth and diversity of family medicine through direct patient care, simulation, case-based learning, workshops, flipped classrooms, and more. Two options for the patient care portion of the FM clerkship are available: rural placement and Kansas City placement. For the rural placement, the student is immersed in a rural community under the close tutelage of a rural family physician. Students who choose the rural placement will have opportunities to learn in various settings, likely to include outpatient clinic, hospital, emergency department, and community settings. For the Kansas City option, the student is assigned to the KU Interprofessional Teaching Clinic, the University Hospital, and outpatient settings within the academic center and greater community. Student evaluation is based on assessment by clinical supervisors, the NBME Family Medicine Subject Exam, an Objective Structured Clinical Examination (OSCE), presentation of a written assignment, and participation in all required clerkship activities. Prerequisite: Completion of Phase I (Years 1 and 2).

**FAPR 961. Community Based Geriatrics. 4 Credits.**

Students on this rotation will have the opportunity to learn the principles of caring for older patients. The rotation will be based at the Landon Center of Aging and will include educational experiences in outpatient clinic, long-term care facilities, assisted living facilities and with hospice. This elective experience will build on the Year 3 Geriatrics clerkship by allowing the student to further develop their understanding and management skills in

the care of older adults across the health care continuum. Students are invited to individualize their experience through a focus on a particular care setting or aspect of older adult care by arrangement with the clerkship director.

**FAPR 962. Advanced Clinical Reasoning Skills. 2 Credits.**

Clinical reasoning is a critical, often-underdeveloped skill in practicing physicians. Diagnostic errors are common among physicians and residents. In this course, you will learn to recognize common clinical reasoning errors, develop practice habits to help you improve your clinical reasoning, and develop reflective habits that help you determine why an error was made. You will learn how specific history, physical examination, and ancillary testing items make certain diagnoses more or less likely. This course will meet 10 times for 2 hours during a semester with course work between meetings. PREREQUISITE: Satisfactory completion of 6 months (4 six-week or 3 eight-week) of clinical clerkships. Concurrent clinical rotations for a minimum of 8 weeks over the semester.

**FAPR 963. Cross-cultural Health Leadership Module I: Didactic. 1 Credits.**

Cross-culturally competent care refers to physicians' "ability to communicate effectively and provide quality health care to patients from diverse sociocultural backgrounds." This course will train medical students in cross-cultural communication (C3) skills via interactive sessions in a student-based "learning community". In Module 1, students learn and practice Association of American Medical Colleges (AAMC)-defined core topics for cross-culturally competent knowledge, attitude and skills. These are: 1) the definition of cultural competence, and providers' self-assessment of own relevant cultural experiences; 2) key aspects of cultural competence, including patients' healing traditions and systems, institutional cultural issues, and how these patients' explanatory illness narratives; 3) understanding how stereotyping and bias influence medical care; 4) the epidemiology of social determinants of health care disparities and collaboration with communities to address these; and 5) clinical communication skills to engage patients with different values, culture and beliefs than one's own, i.e. working with interpreters, and diagnostic, negotiating and problem-solving skills. In Module 1, we will use interactive faculty-facilitated didactic discussions, role play, case-studies, volunteer standardized patient interactions and out-of-class reading. Students will also conduct an in-depth case study with one cross-cultural patient and prepare a detailed patient narrative report describing both the patient's illness narrative and relevant cultural and social determinants of health impacting their health experience. Prerequisite: KUMC School of Medicine student.

**FAPR 964. Cross-cultural Health Leadership Module 2: Service Learning Projects. 1 Credits.**

Cross-culturally competent care refers to physicians' "ability to communicate effectively and provide quality health care to patients from diverse sociocultural backgrounds." This advanced course will train and mentor medical students in cross-cultural communication (C3) skills via participant-conducted service learning projects in voluntary clinical settings within a student-based "learning community". In Module 2, students will practice skills taught in Module 1, namely Association of American Medical Colleges (AAMC)-defined core topics for cross-culturally competent knowledge, attitude and skills (See Module 1 description). Participating students will collaborate to conduct service learning, quality improvement (Q1) projects to improve cross-culturally competent care in cross-cultural clinical settings in which they or their colleagues participate, e.g. (for M1/M2 students) Jaydoc, Bulldoc school-based health center, or clinical settings with permission of clinical faculty in those settings. Module 2 service learning projects will include 2 clinic-based "whole system events" to which participating students invite clinic faculty, staff and other student colleagues from students' practice settings.

At the first event, students will present and discuss their proposed project to improve cross-culturally competent health care with clinic faculty and staff from the proposed setting. At the second event (at the end of the course), students will present the results of their project to their clinic faculty and student colleagues. Projects must address cross-cultural elements of clinical practice or cross-cultural communication skills; and be appropriate to the students' developmental stage of training (e.g. M1 students might conduct projects to improve M1 student skills using interpreters). Module 2 students will also participate in interactive sessions with faculty and other student participants, during which they will learn and discuss methodological approaches; and discuss challenging issues arising in their projects. Prerequisite: Prior participation in "Cross-cultural Health Leadership Module 1: Didactic" or Permission of Instructor

**FAPR 970. Virtual International Educational Experience. 2-3 Credits.**

Child Family Health International (CFHI) is a United Nations-recognized non-profit organization based in San Francisco who is a recognized leader in providing experiential learning in global health. This Virtual Global Health Elective offers 4th year medical students a unique opportunity to build competencies in Global Health, interprofessionalism and cross-cultural care including those relevant to low resource clinical care, population health, interdisciplinary collaboration, global burden of disease, evidence-based community health, social determinants of health and cross-cultural effectiveness. The elective blends the competency aims of medical education with those of global health. This elective will draw on faculty from around the globe to provide diverse perspective, expertise and content, combining synchronous and asynchronous components. This elective is intended for students who are engaging full time over a 4-week period (40 hours per week). The elective will be pass/fail and grades will be reported within 2 weeks of completion.

**FAPR 975. Rural Elective. 2 Credits.**

This advanced elective in a rural setting will allow the student to further explore the practice of medicine in rural communities. Designed to complement FAPR900 rural preceptorship, the student will be expected to exercise an advanced level of autonomy and decision-making at the discretion of their rural faculty. Students will be encouraged to explore the rural healthcare system and its interdependence with the community. Students will also advance their clinical and procedural skills. Students may also be involved in local research activities. The elective is designed to allow flexibility based on a student's educational needs and rural faculty/community resources. Prior to the course, the student will meet with the course director to design specific goals. Prerequisite: FAPR900: Rural Preceptorship or permission of course director.

**FAPR 977. Medical Spanish-Level 1. 2 Credits.**

This course is an entry-level Medical Spanish course for students with minimal or no Spanish language education. Students completing this course will acquire the language skills necessary to interact at a basic level in a medical context. Students will learn how to introduce themselves, greet patients, obtain personal information, ask about symptoms, and describe medical conditions. In addition, students will be able to hold basic conversations with patients about pain, diabetes, diet, trauma, cardiac issues, depression, and anxiety. Students will also be able to use and recognize basic cultural practices such as forms of address, family structure, beliefs about medicine as well as how to work with an interpreter. Prerequisite: Minimal to no knowledge of Spanish language and approval from the Dean of Student Affairs.

**FAPR 978. Medical Spanish-Level 2. 2 Credits.**

This course is an intermediate-low level Medical Spanish class. In Medical Spanish Level 2, students build on what they have learned in the Level 1 course. They expand their vocabulary skills to include medical

specialties and procedures, as well as their ability to describe medical conditions. Students practice asking about and expressing past actions and conditions. They also learn to give specific advice and directions to medical personnel and patients. By the end of the course, students will be able to hold conversations on STIs and reproduction, MI symptoms and anatomy, respiratory concerns, pregnancy and prenatal-care, drug and alcohol abuse, strokes, surgery procedures, pharmacy and drugs, and eldercare. Students will also be able to understand culturally specific approaches such as the meaning of death, modern medicine, and fatalism among others.

**FAPR 979. Spanish for Health Care Workers. 2 Credits.**

This is an advanced Medical Spanish course for students with prior Spanish language experience. The class requires students to conduct medical encounters in Spanish, and thus, only those at a set proficiency level will be invited to enroll. Completion of Medical Spanish I and II (or equivalent) and a score of at least "Approaching Proficiency" on the Clinician Cultural and Linguistic Assessment (CCLA) are prerequisites for enrollment. Students completing this course will have acquired the language skills necessary to successfully conduct the most common patient encounters in a clinical setting. Students will also be able to use, recognize, and appreciate basic cultural practices such as forms of address, family structure, and beliefs about medicine and illnesses. Prerequisite: Permission of the instructor required; completion of Medical Spanish I and II (or equivalent) and a score of at least "Approaching Proficiency" on the Clinician Cultural and Linguistic Assessment (CCLA).

**FAPR 980. Integrative Medicine. 4 Credits.**

Course objectives are to expose medical students to other healing fields through readings, lectures and seminars, field observations, performing an independent review, and presenting a paper at the conclusion of the course. The students are expected to evaluate the claims of various practices critically and be rigorous in their questioning of all forms of human healing including practices currently considered mainstream. The students are expected to become aware of various practices that patients may be using so that they can be better informed physicians and be more comfortable in discussing these areas with patients whom may be interested in using them or are already doing so. The students should also learn to communicate effectively with practitioners of complementary and alternative medicine therapies.