

Family medicine clinical skills in the First cycle studies at the Faculty of Medicine in Banja Luka

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The skills that students should master in the subject Family Medicine during the XI semester are as follows: Family doctor as „a gatekeeper“; Difference between disease and illness; Patient oriented medical record („SOAP“ model); Patient oriented clinical method; Communication skills and breaking bad news; Rational use of medications; The physical examination of head and neck, cardiovascular system, respiratory system and abdomen; Neurological examination; The assessment of mental status, depressiveness and suicid risk; Physical examination of a child; Assessment of risk for falls in elderly and polypharmacy; Clinical guidelines implementation in family medicine practice; Palliative care; Diagnostic findings interpretation; Smoking cessation; Screening for alcohol and drug abuse; Breast and gynaecological examination, digitorectal examination of prostate, examination of the ear; primary surgical treatment of a wound and basic cardiopulmonal resuscitation.

Competencies to be adopted in the Residency during XII semester are the following: Family doctor as „a gatekeeper“; Family medicine team work; Difference between disease and illness; Family medicine medical documentation; Patient oriented clinical method; BATHE and SOFTEN communication techniques and breaking bad news; Rational use of medications; Evidence based medicine; Medical equipment and family doctor's bag; Preparing of annual plans for prevention activities in family medicine practice, based on the Program for prevention of the most common non-communicable diseases in the Republic of Srpska; Antropometric measuring; The breast examination; Digitorectal examination of prostate; Smoking cessation procedures; Palliative care (dosing of analgesics according to pain rating scale in family medicine practice); Assessment of vital signs; The physical examination of head and neck; Examination of the ear; The physical examination of cardiovascular system; Measuring techniques of blood pressure; The use of SCORE cardiovascular risk chart; Interpretation of ECG and other diagnostic findings; Basic cardiopulmonal resuscitation of a man, woman and child; The physical examination of respiratory system; Use of peak flow meter, metered dose inhaler, discus, volumatic, babyhaler; Preparing and applying of inhalation therapy in family medicine practice; The physical examination of abdomen; Gynaecological examination (MODEL); The physical examination of musculoskeletal system; Examination of knee, ankle and foot (Ottawa rules); Primary surgical treatment of a wound; Making a choice of diagnostic procedures in family medicine; Diabetic foot examination (palpation of periferal pulses, reflex testing, use of the tuning fork for vibratory sensation and „Semmes – Weinstein“ monofilament for pressure sensation); Use of a blood glucose meter and test strips (determining of the capilar blood glucose); Use of insulin pen, insulin application; Neurological examination; Dix-Hallpike test, Epley maneuver, Brandt-Daroff exercises; The assessment of mental status, depressiveness and suicid risk; Screening for alcohol and drug abuse; Sequences of the physical examination of a child; Assessment of the neurological status, examination of the

mouth and the ear in a child; Assessment of child nutritional status using a centile chart; Modified Centor score for rapid estimation of pharyngitis etiology; Implementation of Beers, STOPP, START criteria and assessment of risk for falls in elderly.