

Faculty of Medicine

LÄKS13, The Individual and the Community, 15 credits Individ och samhälle, 15 högskolepoäng Second Cycle / Avancerad nivå

Details of approval

The syllabus was approved by The Medical Degree Programme Board on 2020-04-01 and was last revised on 2023-02-15. The revised syllabus applies from 2023-02-15, spring semester 2023.

General Information

The course is compulsory. It makes up a part of semester 11 of the medical degree programme.

Theoretical teaching components take place in Lund and Malmö, whereas practical elements are located at public healthcare centres mainly in Region Skåne but placements in the whole healthcare region of Southern Sweden may occur.

Language of instruction: Swedish and English

The language of instruction is Swedish or English. Literature in Swedish, Danish and English is used.

Main field of studies Depth of study relative to the degree

requirements

Medicine A1F, Second cycle, has second-cycle

course/s as entry requirements

Learning outcomes

Knowledge and understanding

On completion of the course, the students shall be able to

- explain normal variation in the course of life of individuals and groups from the perspective of health and disease, and discuss pathophysiological mechanisms and how they may appear with regard to social, psychological and global factors
- discuss and propose life style changes and health promotion initiatives at the levels of individuals and society that may have an impact on individuals and groups from a national and global perspective
- explain the common underlying mechanisms of significance for disease and health, taking into account occupational and environmental factors at the levels of individuals and groups
- analyse pharmacological principles, considering the age and other conditions of the individual and in view of initiating, continuing or discontinuing pharmacological treatment, also taking polypharmacy and interactions into account
- describe specific aspects of the care and treatment of common long-term diseases, palliative care and the management of multi-diseased patients
- account for the basic investigation in the process of referral to a clinic of occupational and environmental medicine for a combined assessment of a suspected work-related disease
- account for the treatment of geriatric patients including assessment of the need for palliative treatment
- explain publicly financed healthcare and especially the organisation of primary care with regard to the set-up for managing the care processes for different age groups and conditions, and the functions of different categories of staff and explain and compare the differences between out-patient and in-patient care

Competence and skills

On completion of the course, the students shall be able to-

- independently initiate and follow up treatment and interventions with regard to common disorders in out-patient care including multi-diseased patients
- independently initiate emergency treatment and interventions with regard to common acute disorders in out-patient care and be able to refer patients to appropriate care units
- independently document medical interventions and issue appropriate certificates and other documentation such as obtained informed consent
- apply relevant laws and statutes with regard to the work environment, insurance medicine and health and medical care
- adopt a holistic approach to patients, taking into account all the diseases and conditions of the the patient, such as socio-economic status, cultural background and gender, from the perspectives of both health and disease

- critically review, take a position on and discuss the applicability of scientifically based recommendations for individual patients
- conduct patient consultations according to evidence-based principles, recognising the respective contributions of patient and physician and shared elements
- initiate collaboration with several different professional groups and care providers concerning multi-diseased patients
- conduct a basic pharmacological review for a multi-diseased elderly patient and propose continued treatment based on the review
- apply models and principles of patient safety and lead this work in collaboration with patients, their loved ones and society
- apply legal and ethical aspects for individuals and groups of different ages that can be assessed to be at risk of harm
- identify and perform initial management of individuals and groups that have been exposed to traumatic events
- initiate management and follow up of individuals in cases where there is suspicion of domestic violence or substance abuse
- document injuries and signs of suspected violence from another person as documentation for legal assessment and further processing
- independently manage and document cases of death

Judgement and approach

On completion of the course, the students shall be able to

- approach patients, relatives and colleagues in a professional manner
- analyse and discuss ethical issues of health, disease and treatment, including palliative care and death
- analyse and discuss leadership, collaboration within health and medical care, collaboration with other actors in society of importance for the health and fitness for work of the individual
- analyse their strengths and weaknesses in patient consultations, especially with regard to fields of development and routes towards development
- independently take responsibility for their education by judicious assessment of their expertise and learning process, and reflect on how to achieve further development
- adopt an unbiased position in the role of expert in legal processes concerning the documentation of injuries and assessment of injured parties and suspected

Course content

The course consists of practical and theoretical teaching that develops the students' previously acquired medical knowledge to incorporate the management of multi-diseased patients in out-patient care and practice of the physician's dual role as doctor of individuals and of society.

Course design

The course consists of practical and theoretical learning activities in general medicine, occupational and environmental medicine, forensic medicine, geriatrics, and leadership, organisation and patient safety. The teaching consists of clinically integrated learning at a public healthcare centre and theoretical teaching. Clinically integrated learning comprises approximately 15 days per student including individual supervision and structured feedback. Theoretical teaching and clinically integrated learning are integrated throughout the course. Clinically integrated learning may also take place on evenings and weekends.

The theoretical teaching mostly takes place through case methodology. Practical exercises and other types of group tuition and lectures are also included. Clinically integrated learning, seminars on consultation methodology, the components on leadership and patient safety and collaboration in learning (Utbildning i samverkan, UIS) are all compulsory.

Team and cross-professional work are important theoretical and practical components of clinically integrated learning. Teaching in ethics is integrated in case studies and lectures, and included in clinically integrated learning.

Assessment

The knowledge content of the course is assessed through a written exam (7.5 credits). The exam is in the form of a multiple choice test, requiring the student to select the best answer. A failed test is to be retaken in full.

Practical skills are assessed through the course portfolio (7.5 credits), in which completed components are to be documented. The documentation concerns both oral and written components of the course, including written assignments, covering but not limited to reflections with regard to judgement and approach. It is assessed continuously according to established criteria.

The examiner decides on grading.

The first opportunity for a student to participate in an examination is at the first regular opportunity after registration on the course.

Number of examination opportunities for clinically integrated learning

Students who do not achieve a Pass at the first opportunity will be offered a new opportunity for clinically integrated learning including examination. No more than two opportunities of clinically integrated learning will be offered. Students who fail clinically integrated learning twice is not offered a further opportunity.

Students who for no valid reason interrupt their clinically integrated learning prematurely, i.e. when 40% or more of the total number of hours is completed, shall be awarded a grade (Pass/Fail) and will have used up one opportunity for clinically integrated learning.

The examiner may immediately discontinue the clinically integrated learning or equivalent of a student if he or she, due to serious deficiencies in knowledge, skills or approach, jeopardises patient safety or the patients' trust in the healthcare system. Discontinuation of clinically integrated learning means that the student fails the component and has used up one opportunity for clinically integrated learning. In situations like these, an individual study plan shall be drawn up for the student. The student must have remedied the deficiencies in order to be offered another opportunity for clinically integrated learning.

The examiner, in consultation with Disability Support Services, may deviate from the regular form of examination in order to provide a permanently disabled student with a form of examination equivalent to that of a student without a disability.

The examiner, in consultation with Disability Support Services, may deviate from the regular form of examination in order to provide a permanently disabled student with a form of examination equivalent to that of a student without a disability.

Subcourses that are part of this course can be found in an appendix at the end of this document.

Grades

Marking scale: Fail, Pass.

Entry requirements

To be admitted to the course, students must have passed courses (all assessed components) up to and including semester 9 of the Master of Science programme in Medicine.

Further information

Appendix- clinical situations

The medical degree programme has defined a number of clinical situations that a recently graduated physician will meet and be expected to be able to manage as a house officer. The selection of 19 clinical situations below (of a total of 102 in the entire medical degree programme) is based on their frequency of occurrence in general medicine. The clinical situations are defined primarily in order for the students to know which areas will be assessed. The clinical training at a public healthcare centre is to provide students with opportunities of practical experience of the clinical situations below, as a complement to the theoretical teaching. The students are to be able to describe and explain patient management, investigation procedure, important differential diagnoses, and preventive and therapeutic interventions for these clinical situations.

Clinical situations

- Earache
- •
- Abnormal blood glucose/glucose in urine
- _
- Sore throat
- •
- Painful and/or swollen joint
- •
- Nasal congestion/cold
- •
- Back/neck/shoulder pain
- Headache/facial pain
- •
- Abdominal pain
- Chest pain
- •
- Fatique
- Heart palpitations /abnormal heart rhythm
- •
- Dizziness/balance disorders
- Changes in blood pressure
- Worry/anxiety
- v v Orr y/ arr.
- Respiratory problems
- Affective disorders
- •
- Coughing

- •
- Dependency and abuse
- •
- Urination disorders

Subcourses in LÄKS13, The Individual and the Community

Applies from H20

2001 Written exam, 7,5 hp

Grading scale: Fail, Pass

2002 Portfolio, 7,5 hp

Grading scale: Fail, Pass