FAMILY MEDICINE

FM

Department of Family Medicine College of Human Medicine

501 Preceptorship Training

Fall, Spring, Summer. 1 to 8 credits. A student may earn a maximum of 24 credits in all enrollments for this course. Interdepartmental with Human Medicine. Administered by Human Medicine. RB: One year of graduate-professional program in College of Human Medicine.

Field experience in primary care.

580 Special Topics in Family Medicine

Fall, Spring, Summer. 1 to 3 credits. A student may earn a maximum of 6 credits in all enrollments for this course. R: Open to graduate-professional students in the College of Osteopathic Medicine or in the College of Human Medicine.

Exploration of special aspects of family practice. Examples include ethnicity and aging, clinical nutrition, sports medicine, death and dying, health care of women, research methods in primary care.

608 Family Practice Clerkship

Fall, Spring, Summer. 6 to 18 credits. A student may earn a maximum of 36 credits in all enrollments for this course. R: Open to graduate-professional students in the College of Human Medicine.

Clinical experience in primary care in family physicians offices and in hospitals.

610 Elective Clerkship in Family Practice

Fall, Spring, Summer. 6 to 12 credits. A student may earn a maximum of 18 credits in all enrollments for this course. RB: third or fourth year student. R: Open to graduate-professional students in the College of Human Medicine.

Experience in family practice in diverse settings. Primary, continuing and comprehensive care.

611 Family Practice Geriatric Clerkship

Fall, Spring, Summer. 6 credits. A student may earn a maximum of 12 credits in all enrollments for this course. P: FM 608 or MED 608

Clerkship in the primary medical care of older adults.

612 Inpatient Clerkship in Family Practice

Fall, Spring, Summer. 6 to 12 credits. A student may earn a maximum of 12 credits in all enrollments for this course. R: Open to graduate-professional students in the College of Human Medicine.

Demonstration of the role of the family physician in hospital settings. Management of consultations and referrals.

613 Clinical Research in Family Practice

Fall, Spring, Summer. 6 to 12 credits. A student may earn a maximum of 12 credits in all enrollments for this course. RB: FM 608 and MED 608 and PED 600 and SUR 608 and PSC 608 and OGR 608 R: Open to graduate-professional students in the College of Human Medicine.

Investigation of clinical research topics in family practice. Application of survey and epidemiologic research methods. Use of clinical data.

616 Rural Family Practice Elective

Fall, Spring, Summer. 6 to 12 credits. A student may earn a maximum of 12 credits in all enrollments for this course. RB: (FM 608) and at least 3 years of medical training in the College of Human Medicine. R: Open to graduate-professional students in the College of Human Medicine.

Clerkship in the unique issues and medical care of residents in rural communities. Emphasis of the clerkship is on patient care management by the family physician.

617 Sports Medicine Clerkship

Fall, Spring, Summer. 6 to 12 credits. A student may earn a maximum of 12 credits in all enrollments for this course. R: Open to graduate-professional students in the College of Human Medicine.

Primary care aspects of sports medicine. Care of acute and chronic sports injuries, mostly of college level athletes.

618 Palliative Care/End of Life

Fall, Spring, Summer. 6(40-0) P: FM 608 and PHD 600 and MED 608 and PSC 608 and OGR 608 and SUR 608 R: Open to graduate-professional students in the College of Human Medicine.

Basic knowledge and skills necessary to manage patients and families faced with end of life illnesses.

620 Family Practice Subinternship

Fall, Spring, Summer. 6 credits. A student may earn a maximum of 12 credits in all enrollments for this course. P: FM 608 and PHD 600 and MED 608 and PSC 608 and OGR 608 and SUR 608 R: Approval of department.

Care and management of patients in a family physician's office in a medically underserved community. Required project on integration of population based medicine into routine clinical care.