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27 – Family Medicine Core Curriculum: Review in Mexico

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Facing the increase of medical knowledge in all its professional fields, the progress of diagnostic and therapeutic technology of diseases and the requirement of the society to receive quality services during their health problems attention, the School of Medicine of the National Autonomous University of Mexico (UNAM) has assumed its responsibility to ensure their plans and graduate studies programs that remain in force respond to new educational demands.

The Graduate Studies of the School of Medicine has permanent processes of evaluation of the Unique Curriculum of Medical Specialties (PUEM) allowing the identification of its scope and limitations, via a chartered analysis of structural and operational conditions of the curriculum, involving teachers who are part of the academic subcommittees of medical specialties. The members of the subcommittees are Mexican medicine leaders from various health institutions of the country. The recommendations proposed are subject to consideration by the Committee and once approved, are reported to institutional publications for their functionality.¹

Family Medicine has its own knowledge base and techniques, which comes mainly from Internal Medicine, Paediatrics, Surgery, OB / GYN and Mental Health; combines behaviour sciences with biological and clinical traditional sciences; this combination allows the specialist in Family Medicine to identify and propose solutions to main health problems of individuals and their family, according to the morbidity and mortality of their region and institution. These features, together, cannot be handled by other traditional specialists since they have a vertical knowledge in their areas of work and study; it requires, as a consequence, that academic programs in the training of resident physicians in family medicine, have sufficient elements to make their professional competence (knowledge, abilities, skills and attitudes) to be of excellence.²

The PUEM in Family Medicine includes three important professional functions for specialist training:

- the provision of health care,
- the development of research and
- the work of education of teachers and students

The function of health care is met through the development of the Health Care Work and Health Care Seminar subjects; the first refers to the theoretical development of the program, while the second provides training in the skills and abilities of clinical practice.

The Research Seminar helps the resident to apply the basic concepts of the scientific methodology for the completion of their end-of-course research project (Protocol). Finally, the Education Seminar includes the fundamental concepts of the teaching-learning process in health sciences, and its relevance in the vocational training of the specialist physician.

Although Family Medicine has the PUEM with defined academic content, these are numerous, hindering its full use by the future professional. Therefore it was decided to develop a CORE CURRICULUM, understanding this as the set of contents of mandatory education, common and essential to all students for the practice of family medicine.

This core curriculum allows both health and educational institutions to accomplish the formation of human resources capable of preventing and solving health problems of Mexican people in a comprehensive way. It also makes the activity of teachers and students easy, because it prioritizes the content that must be taught and learnt to provide this medical care.

The purposes of working with an academic program based on a core curriculum are ³:

Implement the teaching learning process based on essential knowledge and abilities/skills that all Family physicians should strictly manage.

Ensure the viability of teaching contents in the studies period of time allocated to the specialty.

Homogenize the formation of Family physicians and apply the same criteria for evaluation of learning.

For the development of the core curriculum it was considered that the content of the academic program of the Medical Care Seminar should contain, as well as selection criteria based on the national epidemiology, causes of local and institutional morbidity and mortality, also expert Family physicians' opinions in practice, teachers of the specialty, medical residents and other experts in various specialties that nourish the body of knowledge of Family Medicine.

Collegiate meetings with all the above mentioned experts were conducted, who recommended an academic program with more than 190 topics to be developed during the process of teaching-learning of the three years of the course of specialization in Family Medicine.

As part of this process of the Core Curriculum, agreements were taken with educational and institutional authorities to implement it as of the 2016-2017 academic year ⁴.

It is expected, with this core curriculum, to achieve a link between the academic content, educational goals, and the needs of health locally and nationally detected. The congruence between these elements will strengthen the training process of Family physicians and will allow them to develop an efficient medical practice and the possibility to continuously learning.

This core curriculum must be monitored in its application to know the results in the solution of the major health problems of Mexican population. This requires a permanent evaluation process to be aware of its benefits and room for improvement and thus have the necessary elements for making decisions affecting a curriculum developed for future generations of students. ⁵

The current research seminar is in analysis of its content and application to achieve not only the initial purpose of a degree thesis, but that, but that graduates from the courses and professors from different offices learn and carry out high quality research.

Finally, within the development of the Education Seminar, this academic year will begin a training course through the graduate teacher professionalisation for professors of courses in order to learn how to teach and raise the educational level of graduates according to curriculum.

Take Home Message

- Family Medicine has its own knowledge and techniques, which comes mainly from Internal Medicine, Paediatrics, Surgery, OB / GYN and Mental Health; combines behaviour sciences with biological and clinical traditional sciences
- Implements the teaching learning process based on essential knowledge and abilities/skills that all Family physicians should strictly manage.
- It is expected, with this CORE CURRICULUM, to achieve a link between the academic content, educational goals, and detect the needs of health locally and nationally
- Therefore it was decided to develop a CORE CURRICULUM, understanding this as the set of contents of mandatory education, common and essential to all students for the practice of family medicine.
- This CORE CURRICULUM requires a permanent evaluation process to be aware of its benefits and room for improvement and thus have the necessary elements for making decisions affecting a curriculum developed for future generations of students.

Original Abstract

<http://www.woncaeurope.org/content/certification-and-recertification-family-doctors-mexico>

References

1. Programa Único de Especialidades Médicas (PUEM), Facultad de Medicina, División de Estudios de Posgrado, UNAM, Consejo Universitario, 21 de abril de 1994, México, D.F.
2. Cervantes M. El mérito Intelectual de la Medicina Familiar. Rev. Fac. Med. Mex.1998, 18-20.
3. Edward J, FriedlandJ, Bing-you R, Editors. Residents' Teaching Skill. New York: Springer, 2002.
4. Nothnagle M. et al. Required Procedural Training I Family Medicine Residency: A Consensus Statement. Fam Med 2008; 40(4): 248-52.
5. The European Definition of General Practice/Family Medicine. Short Version EURACT. 2005. Available:
6. <http://www.woncaeurope.org/sites/default/files/documents/Definition%203rd%20ed%202011%20with%20revised%20wonca%20tree.pdf>