

CURRICULUM

The MD curriculum portion of the Queen's Lakeridge Health MD Family Medicine Program occurs in the first four years of this program. Years 1 and 2 are the pre-clinical years, and then in Year 3 students begin their clinical clerkship, completed by April of Year 4, which will be designed to facilitate their transition to a family medicine residency program. This program is designed to prepare students to be highly skilled family physicians prepared to care for patients of all ages in a range of settings including the community and the hospital. Successful completion of this curriculum will allow students to satisfy the requirements for a Queen's MD and be well prepared to enter a residency in family medicine. They will also be prepared to write the Medical Council of Canada Part 1 exam.

Year 1

THE FIRST YEAR WILL BE ORGANIZED AROUND THE LIFE CYCLE OF HUMANS.

Students will learn in small-group tutorials with expert family physician tutors, with a mix of large-group interactive sessions. Learning will be anchored around intentionally created clinical cases, students will work through these rich cases in their learning teams, supported by their tutors. They will have access to asynchronous resources, including virtual and in-person educational offerings by Queen's faculty members from many departments, and engagement from other members of the health care team, patients, families, caregivers, community members, and other subject-matter experts.

Students will experience three community placements in year 1. Each student will participate in longitudinal halfday placements with local family physicians throughout the academic year. They will attend a "Community Week" in January where they will be placed in a smaller community with family physicians. Finally, they will have a 4-week culminating community placement in a smaller community at the end of the academic year. These placements are part of the curriculum and will be used as opportunities to consolidate and apply what has been learned in class in clinical settings.

Assessment of student learning will come from a mix of direct observation by tutors, written assessments, examinations, practical assessments, and other assessment strategies.

Year 2

THE SECOND YEAR WILL BE ORGANIZED AROUND MORE ADVANCED PRESENTATIONS IN ALL ORGAN SYSTEMS, WITH DELIBERATE REVISITING OF CLINICAL PRESENTATIONS

TAUGHT IN YEAR 1 WITH INCREASING DEPTH AND COMPLEXITY.

Students will have year-long courses in Clinical and Communication Skills, with more procedural skills teaching. They will progress to the Integration of Physician Roles course with more sophisticated exploration of the roles of a physician. Students will take the Critical Enguiry course, where, supported by experienced physician researchers, they will learn how to design research and make a research proposal.

Students will continue with longitudinal placements with family physicians and will have more placements in communities with family physicians to build on their experience from Year 1.

Year 3 & 4*

IN THE THIRD AND FOURTH YEAR STUDENTS WILL START THEIR CLINICAL CLERKSHIP.

*New Clerkship model to take place for 2025-2026

Students will begin this with an "Introduction to clerkship" unit to prepare them for the transition to the role of junior members of health care team in different clinical settings. Students will complete at least 18 weeks in a longitudinal integrated clerkship (LIC) in a community setting. The remainder of the clerkship clinical placements will take place in a block-based model where they are immersed in one discipline for several weeks in a row. By the end of clerkship, students will have completed clinical placements in family medicine, psychiatry, internal medicine (and related specialities), surgery (and related specialties), pediatrics, obstetrics & gynecology, emergency medicine, and anaesthesia.

In addition to completing these core requirements, students will also complete clinical electives to enhance and supplement their learning. These electives will be scheduled to enhance student learning as the timing will not be dependent on the deadlines related to applying for residency positions.

Periodically, students will be brought "back to class" to review higher level concepts in classroom and simulation settings, including at the end of clerkship when they return to class for a 'readiness for residency' curriculum, designed to facilitate their transition to their postgraduate education in Family Medicine.

Graduates of the MD portion of this program will be well prepared to enter Family Medicine Residency. Transition to



Family Medicine training occurs under the authority and recommendation of the Queen's Family Medicine Residency Program Committee once postgraduate entry requirements are met, including being eligible for educational license as per the CPSO. Students will receive an offer from the Post Graduate Family Medicine Training program in year 3 conditional on successfully completing the MD Program. Once that offer is accepted students will be able to transition into Queen's Family Medicine Residency without entering the CaRMS matching process. Durham region is home to The Queen's-Bowmanville-Oshawa-Lakeridge (QBOL) Family Medicine Residency which is one of four sites of the highly acclaimed Queen's University Family Medicine Postgraduate Programs (https://familymedicine.queensu.ca/academics/ core-residency/welcome/) (the others being Kingston and the Thousand Islands, Belleville- Quinte, Peterborough-Kawartha).