

The Hebrew University of Jerusalem

Syllabus

Medical Humanities - "Adam & Refuah" - Part A - 96119

Last update 18-10-2021

HU Credits: 4

<u>Degree/Cycle:</u> 1st degree (Bachelor)

Responsible Department: Medicine

Academic year: 0

<u>Semester:</u> Yearly

<u>Teaching Languages:</u> Hebrew

Campus: Ein Karem Ein Karem

<u>Course/Module Coordinator:</u> Drorit Attias and Mici Philiips

<u>Coordinator Email: droritas@gmaill.com</u>

Coordinator Office Hours: Wednesday mornings

Teaching Staff:

Dr. Mici Phillips,

Dr. dorit attias,

Ms. Hannah Kedar,

Dr. Boaz Nachmias,

Dr. Adi Finkelstein,

Ms. Fink Dani,

Mr. Yisrael Laks,

Dr. Rachel Marans,

Ms. Malka Meshorer,

Dr. Ehud Lebel,

Ms. Gilly Biderman,

Dr. Ohad Avny,

Dr. Betina Steiner Birmanns,

Dr. Sahul Hannan,

Ms. Moria Shmeeda,

Dr. Neomi Weizer polak,

Ms. Rivka Harel,

Dr. more dalhia,

Prof Michael Mayer,

Dr. Flescher Diana.

Dr. Assaf Gefen.

Dr. MATAN GROSS,

Dr. Misgav Rutenstreich,

Dr. Avihai Eshel.

Ms. Dotan Irit.

Dr. Gilad Spigel,

Dr. Ehud Even Or.

Mr. Guy Tavory,

Dr. Rivka Laster,

Dr. Avigail Mayani,

Ms. Orly Kuzin,

Dr. Sameul Levy

Course/Module description:

Medical Humanities is an academic field that combines issues from the social sciences and the humanities with the intention of emphasizing the human aspects of the doctor's work. The far-reaching scientific and technological developments that characterize modern medicine highlight the need for a move toward the humanities and social sciences to advance the renewed challenges of: patient-patient communication, medical ethics with patients and families exposed to a wealth of information and choice, multicultural values, and values of quality, Respect for the patient, suffering from suffering and the ability to develop compassion.

The evolution of science and the abundance of medical information have sometimes caused the physician to lose the "human touch" that patients are thirsty for. On the

other hand, physicians suffer from persistent burnout and frustration, given the increased share of bureaucratic roles in their work, the race for knowledge and competition in the academic world.

Medical-humanistic education produces physicians who are able to appreciate history, literature and art and therefore also life stories and differences between personal and cultural. The doctor who is the product of such an education knew his patients as people, and knew how to provide caring and compassionate care. In the program we will study introductions to physician-patient communication, medical ethics, cultural competence, and professionalism. At the end of the course we will know the person in the patient and the person in the future - the doctors. Below is the first year curriculum.

Human and Medical A Course

general

- 1. The course is designed for first-year medical students.
- 2. Scope of the course: 4 credits.
- 3. Course structure: The course is combined with a variety of teaching methods, including a few frontal lectures, small group exercises and study tours in and out of hospitals.

Course / Module Content: In semester one, physician communication - patient, ethics and professionalism, clinical skills beginning: observation. Semester 2: Cultural Competence, Clinical Skills: Writing the Patient Count. All exercises will be conducted in small groups under the guidance of two instructors, usually physicians from different disciplines, as well as instructors from medical professions such as social work, medical anthropology, and more.

- 5. Coordinator: Dr. Drorit Attias
- 6. There is a duty to attend lectures in practice and visits to departments.
- 7. Annual assignments Semester 1: Reflective writing, preparation of research papers on cultural competence.

In second semester:

Introducing cultural competency jobs

Chronic patient escort work, feedback on mock patient films, reflective writing.

8. Course grade: Annual. Based on a cultural competency test score, self-feedback score of interviewing a mock patient, score on working with a chronic patient / elderly patient, or "companies" project and mentor evaluation.

Course/Module aims:

Objectives of the program

Upon graduation, the graduating student will be able to graduate

- 1. Use the knowledge and perceptions derived from the social sciences, the humanities and the behavioral sciences to deal with the health problems of patients and their families.
- 2. Communicate effectively with patients and their families, based on principles of effective communication.

- 3. Consider cultural factors affecting the patient (cultural competence).
- 4. Identify and analyze ethical issues in the context of basic health care
- 5. Recognize and internalize Professional Behavior, expected from a physician practicing in the medical profession in Israel

<u>Learning outcomes - On successful completion of this module, students should be</u> able to:

At the end of the course the students will be able to conduct a medical interview according to the principles of the Calgary Cambridge model they have studied, and will be able to interview patients with an emphasis on background and cultural influences on their medical condition as well as analyze issues in medical ethics according to the models taught in the course.

Attendance requirements(%):

Attendance requirements for clinical exercises and visits

Teaching arrangement and method of instruction: Teaching methods:

- 1. Frontal lectures
- 2. Small group exercises
- 3. Clinical visits to departments
- 4. Cultural competence tour
- 5. Self-learning

Course/Module Content:

1. Course Topics in Semester A: Block I: Physician-Patient Communication, Ethics and Professionalism at the Basic Level. II: Starting clinical skills
Semester II: Block III: Cultural Competence

Required Reading:

the biopsychosocial model 25 years later. francescBorrell-Carrio.

Ann. Fam. Med 2004:576-582

patients' perspective of GP non-verbal communication . Ludmila Marcinowicz.

British journal of GP. Feb. 2010

The impact of patient centered care on outcome. Moira Stewart.

The journal of family practice Sep. 2000

פרק 5 מתוך ספרו של ד"ר בנימין מוזס- אדם חסר פנים, משבר הזהות של הרפואה המודרנית. משוניס, ג'. (1999). סוציולוגיה. תל אביב: האוניברסיטה הפתוחה. פרק 4 (תרבות) עמ' 58 – 85 נובל, א. (2007). תיווך לשוני ותרבותי של שירותים חברתיים: כשירות תרבותית בשירות הבריאות. הד האולפן החדש, 91, 18 – 28.

Additional Reading Material:

Course/Module evaluation:
End of year written/oral examination 0 %
Presentation 0 %
Participation in Tutorials 10 %
Project work 45 %
Assignments 0 %
Reports 0 %
Research project 0 %
Quizzes 0 %
Other 45 %
Accompanying work for a chronically ill or el

Additional information: