

# The Primary Care–Population Medicine Program: A Combined MD-ScM Program



## THE PRIMARY CARE-POPULATION MEDICINE PROGRAM

The Primary Care–Population Medicine (PC-PM) Program is an innovative 4-year curriculum focused on students interested in a future career in primary care. This program provides comprehensive training in population medicine while preparing them for a career in medicine.

Changes in health care have increased the need for leaders in community-based care to effectively coordinate efforts to improve the health of Americans. The best care will come from doctors who are trained to understand and improve the community health context of their patients.

The program will prepare medical students for leadership roles in health care on the local, state, or national level in areas ranging from primary care clinical service to research, education, and health policy.

This four-year program, the first of its kind in the United States, results in the awarding of both a Doctor of Medicine and a Master of Science in Population Medicine.



The Primary Care-Population Medicine Program meets a need in society for medical professionals who are trained in a scholarly way. It focuses on producing physician leaders who are expertly trained to take care of patients and populations.

## MASTER OF SCIENCE IN POPULATION MEDICINE

The Master of Science in Population Medicine degree will provide medical students with the knowledge, skills, and attitudes necessary for effectively managing patients and populations in the 21st-century health care system. This unique four-year curriculum is integrated into the Medical School coursework, creating powerful synergies.

## COURSES AND CURRICULUM

The Master of Science in Population Medicine consists of courses in the following areas:

**Health Systems Science:** These courses, offered in Years 1 and 2, will focus on health care systems in the United States and abroad, providing a context to illness, health, and the practice of medicine.

**Research Methods:** This course, offered during Year 1, prepares students to develop and demonstrate the necessary research skills to formulate a population medicine research question and then design and conduct an investigational study culminating in a manuscript to satisfy thesis requirements of the ScM degree.

**Independent Study - Population Medicine Thesis Research:** This course, offered in the summer between Years 1 and 2, gives students the opportunity to begin their thesis research after they have worked with program leadership to choose a thesis topic.

Quantitative Methods: This course, offered in the summer between Years 1 and 2, focuses on biostatics and epidemiology. Taught online format and complemented by instructor office hours, the course focuses on the principles of epidemiology, study design, hypothesis testing, parametric and non-parametric tests and the integration of these concepts into clinical care.

**Leadership in Healthcare**: *Leadership in Healthcare* is uniquely designed to produce physician-leaders in clinical care, research, health policy or health professions education. The course of study emphasizes practical application of leadership skills through interactive classroom sessions. Students will explore fundamental leadership concepts and interact with a variety of Rhode Island's healthcare leaders.

**Health Systems Science III - Population and Clinical Medicine:** These courses, woven into the Longitudinal Integrated Clerkship in Year 3, will focus on the intersection of population medicine and clinical care of individuals and populations.

**Health Systems Science IV:** Themes of leadership and working in interprofessional teams will be woven across each of the aforementioned courses. These senior seminar courses, offered in Year 4, will build upon these themes.

In addition to this coursework, students will perform scholarly work and write a thesis. Students will choose a mentor and begin their research project between Years 1 and 2. Available projects will be diverse and students will be encouraged to choose topics they are passionate about.

#### YEARS 1 AND 2

In addition to the Master of Science in Population Medicine courses, the other curricular elements in the first two years at Alpert Medical School include the following:

**Doctoring.** Introduces students to the practice of medicine by teaching clinical skills such as doctor-patient communication and physical examination.

**Integrated Basic Science Curriculum.** Anatomy, histology, genetics, physiology, pathophysiology, pathology, and pharmacology are seamlessly integrated with each other and with population medicine.

**Patient navigation.** Students will be paired with individuals from vulnerable populations and assist in navigating these individuals through a complex health care system.

**Research.** This will begin during the summer between Years 1 and 2 in an area such as population science, medical education, behavioral science, social science, or the humanities.



#### YEAR 3

Rather than switching from rotation to rotation every six weeks, the majority of Year3 will be spent in a Longitudinal Integrated Clerkship (LIC). The LIC involves one half-day per week with a mentor in family medicine, internal medicine, obstetrics and gynecology, pediatrics, psychiatry/neurology, and surgery over the course of one year. Students will also spend time in the emergency department, where students will be the first provider to see, diagnose, and propose treatment plans for patients.

In addition, students will cultivate their own patient panel of approximately 20 to 30 patients. Students will follow these patients to health care settings such as the operating room, labor and delivery floor, primary care office visits, rehabilitation, and home care.

Students will also participate in the following:

- Weekly didactic and small group sessions covering core clerkship topics
- Weekly didactic and small group sessions covering core population medicine topics
- Continued work on thesis research in an area such as population science, medical education, behavioral science, social science, or the humanities

#### YEAR 4

Students will participate in the usual elective rotations offered at Alpert Medical School and will also complete a sub-internship. At the same time, students will complete their thesis research under the guidance of a faculty member.

## FREQUENTLY ASKED QUESTIONS

- Q. How is the Master of Science in Population Medicine different from a Master of Public Health?
- A. In a rapidly changing health care environment, physicians will be responsible for the care of communities and populations. The Master of Science in Population Medicine will focus on providing the knowledge, attitudes, and skills for dealing with these important areas of health care. The PC-PM Program aims to improve health outcomes and reduce health disparities using multimodal and multi-sectoral approaches. Unlike MPH programs, students will apply the knowledge and skills they learn in the classroom directly to the care of patients and communities throughout the four years of medical school.

## Q. Why pursue the MD-ScM degree rather than only an MD degree?

A. The combined-degree program is designed to provide medical students with training in competencies such as interprofessional teamwork, epidemiology, and quality improvement. The program prepares medical students for leadership roles in health care on the local, state, or national level.

## Q. How many years will it take to complete the program?

A. The program is uniquely designed to integrate the master's coursework throughout the four-year Medical School curriculum. It is anticipated that most students will complete the coursework and graduate in four years. There is, however, an option to take an additional year.

## Q. I'm interested in population medicine but not in primary care. Can I still enroll in this program?

A.This program is intended for students who are seriously thinking about a career in primary care. We understand that students' interests change over time, and you will not be put at a disadvantage if you decide to apply to a specialty field other than primary care. Health care clearly needs physicians trained in population medicine in all specialty areas.

# Q. What is a Longitudinal Integrated Clerkship (LIC)?

A. The Longitudinal Integrated Clerkship (LIC) is an essential component of the PC-PM Program. The LIC model for core clinical education in medical schools was first introduced in the 1970s but became more prevalent in medical education beginning in the 2000s. This model provides students with an understanding of the continuum of health and disease and transitions in care by participating in the care of patients wherever it is delivered—from the outpatient setting to the hospital, rehabilitation, and care in the home. Students in the LIC will follow a panel of approximately 20-30 patients over the course of one year, including newborns, geriatric patients, and pregnant patients. Students serve as advocates and navigators for their patients throughout the clerkship year and attend physician visits, surgical procedures, and deliveries with patients from their panel. In addition, students spend one half-day per week over the course of a year with physicians in internal medicine, family medicine, pediatrics, psychiatry/neurology, obstetrics and gynecology, and surgery. Focused in-patient experiences are also included.



## How to Apply:

- 1. On AMCAS application, select the "Regular MD" program of The Warren Alpert Medical School of Brown University.
- 2. On Alpert Medical School secondary application, select the "MD-ScM Combined" program option.

For more information: brown.edu/population-medicine MD-ScM-Admissions@brown.edu (401) 863-5164





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