

## Definitions

### Family Medicine

The medical specialty within primary care that provides continuing and comprehensive care for individuals and families across all ages, genders, diseases and parts of the body. Family medicine emphasizes a holistic approach to patient care and embraces the bio-psycho-social model. Family physicians deliver a range of acute, chronic and preventative medical services – their care is truly “cradle to grave” and many family physicians continue to practice in the hospital setting, or to provide prenatal care and deliver babies. To become a family medicine specialist, physicians must successfully complete a three-year residency training program following medical school. Residency training in family medicine is focused on outpatient care for all ages, but also includes some hospital work for all ages and including critical settings, as well as rotations in obstetrics, gynecology, psychiatry, dermatology and orthopaedic/sports medicine.

### Internal Medicine

The medical specialty focused on the prevention, diagnosis and treatment of diseases in adults **only** (normally >18 years old). Internal medicine emphasizes the management of adults with undifferentiated or multi-system disease processes, and they may provide care in both hospital and ambulatory settings. Some internal medicine physicians practice primary care, while others choose to subspecialize via fellowship training (and then are no longer primary care physicians and fellowship training is not a consideration for this program). To become a primary care internal medicine specialist, physicians must successfully complete a three-year residency training program following medical school. Residency training in internal medicine is typically 50% hospital work including critical care medicine with the remaining time divided amongst specialty medical rotations and ambulatory clinic.

### Internal Medicine-Pediatrics (“Med-Peds”)

This medical specialty prepares doctors to be board certified in **both** internal medicine and pediatrics. Like family medicine, med-peds doctors can take care of patients across all ages, genders and diseases. Like internal medicine doctors, much of their training focuses on the care of hospitalized patients such that they are skilled in the management of both children and adults with complex disease processes. While some med-peds doctors practice primary care, others may choose to subspecialize (and then they are no longer primary care physicians and fellowship training is not a consideration for this program), or to limit their care to only children or only adults (as an Abigail Geisinger Scholar, the practice will include both adults and children). To become a primary care med-peds specialist, physicians must successfully complete a four-year residency training program following medical school. Residency training in med-peds is split equally between internal medicine and pediatric rotations, and like internal medicine approximately 50% is focused on hospital work including critical care medicine with the remaining time divided amongst specialty medical rotations and ambulatory clinic.