

General Medicine

1. Staffs and Students (April 2009)

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The Department of General Medicine was established in 2000, when Professor Yujiro Tanaka assumed the role of chairman of the department. Since then, our aim has been to coordinate and support a wide range of new innovations introduced in the department of medicine and its affiliated hospital in order to promote advanced medicine in our university. Accordingly, we launched the following projects to meet this prime objective: 1) a postgraduate clinical training program over the network of TMDU affiliated hospitals, 2) a patient support system including social casework, 3) the Center for Cell Therapy, and 4) the reform of undergraduate medical education. In response to the expansion of our activities, we have had some organizational changes. 1) The Center for Postgraduate Education was founded in 2002. The members belonging to this center were Prof. Yujiro Tanaka, Dr. Atsushi Okawa, and Dr. Masanaga Yamawaki. 2) In 2002 the Center for Health and Welfare was also established, and two years later in 2004, it separated from the Department of Medicine when Dr. Masayoshi Shichiri was appointed as the Director of the center. 3) The Center for Cell Therapy, which was first established as a part of the Blood Transfusion Department of the hospital in March, 2001, became an independent department in 2003 and Dr. Tomohiro Morio became the chair of the center. 4) Prof. Tanaka became a member of the Board of Education and worked on the committee for curriculum improvement in the department of medicine. He became the chair of the Education Committee from 2004. In addition to the basic design of the new curriculum, this department has been in charge of early clinical training, PBL implementation, training in medical interview techniques, OSCE (objective structured clinical examination) preparation, and BSL (bedside learning). We have also promoted educational alliances with Harvard University since 2002 and with Imperial College, London since 2003.

As mentioned above, a couple of years after their launch, the Center for Health and Welfare and the Center for Cell Therapy became independent from the Department of General Medicine. On the other hand, new sections were established in the department. The Working Group for Ward Management (Tanaka, Yamawaki) and the Safety Management Committee (Okawa) were set up in 2004. The Department of General Medicine also worked on the development of an evaluation system for the residency training program (EPOC), and later this became a national online evaluation system for postgraduate clinical training.

2. Education

As a division responsible for the education of students and residents, our chief aim is to foster doctors who have both a 'patient-centered perspective as a specialist' and 'up-to-date knowledge as a generalist'. To achieve these aims, we are designing and offering a continuing medical educational (CME) program for clerkship students, with its emphasis put on educational systems that span multiple departments. Since we think it is important to foster a patient-centered perspective in medical professionals, we introduced an early exposure course (MIC: Medical Introductory Course) for the 1st and 2nd year medical students, as well as some medicine oriented English courses, including a special course titled "Language and Philosophy of Western Medicine", which are designed to meet some of the needs of this globalized era of medicine. In addition, we are managing a training course for simulated patients who can contribute to medical education, in cooperation with the International Center for Medical Education at the University of Tokyo. To improve the quality of clinical training, we are also currently working with an evaluation system for tutors and trainers.

Our department has offered postgraduate clinical training since 2004 according to the new national residency system in Japan. We have also played an important role in developing the online evaluation system for postgraduate clinical training (EPOC), which is used in 60% of education hospitals in Japan. Results of the questionnaire in March, 2009 showed the highest satisfaction rate among universities nationwide in the past four years (124 residents in 2006 (full match), 123 in 2007 (full match), 115 in 2008 and 2009 (full match)).

3. Research

In the field of research, we are carrying out projects including:

Research on continuing education in clinical EBM (Tanaka)

Although the theory of EBM (Evidence-Based Medicine) has become common knowledge, there are many practical problems yet to be solved. Research on teaching and assessment techniques for under- and post-graduate clinical training are ongoing.

Research on medical education with SPs (Yamawaki)

We developed a training course based on simulated patients (SPs) through collaboration with the University of Tokyo. In cooperation with SPs, we are performing research on the educational effects of simulation on clinical techniques such as medical interviewing and physical examination, as well as clinical reasoning.

A comprehensive study of dysphagia and inter-professional education (IPE) of its treatment (Yamawaki)

Dysphagia is common worldwide. We are conducting research on educational systems for its treatment for medical professionals in other fields, so-called inter-professional education (IPE), as well as quantitative risk analysis using HAZOP. In addition, clinical research and basic research are carried out in collaboration with domestic and foreign facilities.

Randomized control trial for the surgical treatment of lumbar hernia (Okawa)

Since RCTs for surgery are not easy, the advantages and disadvantages of many surgical techniques remain unclear. In this study, one of three operative procedures was selected randomly for patients with lumbar hernia, who will be followed for 10 years to evaluate outcomes and improve prognosis.

Medical risk education using the HAZOP method - through analyzing basic surgical procedure (Okawa, Takahashi)

Structured risk analysis methods, HAZOP, are applied for medical risk management. We have also developed computer software for risk analysis with HAZOP. As a method of medical education for medical risk as well, HAZOP is a comprehensive method that is effective in reducing medical errors.

Review of clinical training in postgraduate clinical education (Tanaka, Okawa, Yamawaki)

The performance evaluation system using EPOC, which is used in 60% of educational hospitals in Japan, was primarily developed at Tokyo Medical and Dental University. We applied this system to a clerkship program to compare its educational effect with that of a residency program.

General research on medical education (Tanaka, Okawa, Yamawaki, Momohara, Takahashi, Ooka)

We are developing a comprehensive research project about postgraduate medical education, primary care in rural regions, development of clinical competence, and a new PBL system.

4. Clinical Practice

Second Opinion (Okawa, Takahashi)

Our hospital is open to the public who ask for second opinions about their recommended treatments so that we can continue to contribute to the provision of safe and high-quality advanced medical technology. Over 300 consultation cases have been performed for patients coming from hospitals nationwide. The purpose of this section is to assist the patients to exercise their right of self-determination and to be informed of new treatments and diagnostic tests. To provide a qualified second opinion, we have organized a network of specialists in TMDU.

Medical Safety (Okawa, Ooka)

Dr. Okawa is the General Risk Manager of our university hospital, and our department regularly organizes seminars and training courses. In collaboration with other departments (e.g., Skills Laboratory Center, Infectious Control Committee, etc.), we are working for greater safety and quality of healthcare.