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, dual-degree curriculum that focuses on preparing students for a career in medicine while providing comprehensive, longitudinal training in population medicine.

Changes in health care policy 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 nine courses:

Health Systems and Policy I and II: 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.

Quantitative Methods I, II, and III: These courses, offered in Years 1 and 2, will focus on biostatistics and epidemiology and will also include qualitative and mixed methods—tools needed for practice at the community and population levels.

Population and Clinical Medicine I and II: 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.

Senior Seminar in Population Medicine I and II: 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 Year 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. Students will be placed in primary care practice sites that have the patient-centered medical home (PCMH) distinction.

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

**A Focus on Active Learning.** Rather than relying on lectures alone, there will be abundant small and large group discussions, interactive workshops, and online modules.

**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 humanities.
YEAR 3

Rather than switching from rotation to rotation every six weeks, the majority of Year 3 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 be assigned their own patient panel of approximately 75–100 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.
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 multisectoral 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. Yes. Although our goal is to graduate more primary care physicians, we understand that students’ interests change over time. Health care will need physicians trained in population medicine in all specialty areas. Enrolling in this program will not put students at a disadvantage if they decide to apply to specialty fields other than primary care.
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 75–100 patients over the course of one year, including newborns, geriatric patients, and pregnant women. 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 “Combined MD-ScM” program option.

For more information:
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