

Digestive Endoscopy and Therapeutics

Code: 102899
ECTS Credits: 3

Degree	Type	Year	Semester
2502442 Medicine	OT	4	0
2502442 Medicine	OT	5	0
2502442 Medicine	OT	6	0

Contact

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Use of Languages

Principal working language: catalan (cat)
Some groups entirely in English: No
Some groups entirely in Catalan: Yes
Some groups entirely in Spanish: No

Teachers

Salvador Navarro Soto
Josep Ramon Armengol Miro
Juan Dot Bach
Rafael Campo Fernández de los Rios

Prerequisites

In order to take this subject is recommended students have previously have studies basic knowledge of pathophysiology, pathological anatomy and medical-surgical pathology of the digestive tract

Objectives and Contextualisation

This subject offers a basic overview of digestive endoscopy, its indications and technical possibilities in diagnosis, and therapeutics for the diseases of the digestive tract.

Competences

- Medicine
- Communicate clearly and effectively, orally and in writing, with patients, family-members and accompanying persons, to facilitate decision-making, informed consent and compliance with instructions.
- Demonstrate sufficient supervised clinical experience in hospitals or other healthcare centres, and familiarity with patient-centred care management and the correct use of tests, medicines and other resources of the healthcare system.
- Demonstrate understanding of the manifestations of the illness in the structure and function of the human body.

- Engage in professional practice with respect for patients' autonomy, beliefs and culture, and for other healthcare professionals, showing an aptitude for teamwork.
- Indicate the most suitable treatment for the most prevalent acute and chronic processes, and for the terminally ill.
- Maintain and sharpen one's professional competence, in particular by independently learning new material and techniques and by focusing on quality.
- Obtain and prepare a patient record that contains all important information and is structured and patient-centred, taking into account all age and gender groups and cultural, social and ethnic factors.
- Recognise the role of complexity, uncertainty and probability in decision-making in medical practice.
- Recognize one's role in multi-professional teams, assuming leadership where appropriate, both for healthcare provision and for promoting health.
- Write patient records and other medical documents that can be understood by third parties.

Learning Outcomes

1. Adapt the therapy procedure and the surgical technique, if appropriate, in accordance with the available data.
2. Anticipate and compare information for good decision-making.
3. Back decision-making with the best scientific evidence.
4. Build diagnostic and therapeutic algorithms based on the best scientific evidence, taking into account the facilities available.
5. Choose a therapy option in accordance with available information and patient preference.
6. Distinguish the implications of different interventions regarding functional and morphological changes.
7. Establish rapport as the first important step in all medical procedures, both in elective and emergent situations and leave a written record of the information transmitted and the wishes of the patient.
8. Estimate the risks and benefits of the various therapy options.
9. Justify decisions taken based on the information obtained.
10. Maintain and sharpen one's professional competence, in particular by independently learning new material and techniques and by focusing on quality.
11. Provide clear, comprehensible information on the therapy options to patients and their families.
12. Provide the bases for preparing clinical guides and constructing diagnostic and therapeutic algorithms.
13. Transmit information clearly and accurately, leaving no room for possible misunderstandings.

Content

Theory / Clinical care practice (15 hours)

At each hospital, each teaching unit will adjust the distribution between teaching directed typologies by theory and clinical care practice according to its particularities.

Topics

- 1 Basic principles of digestive endoscopy
- 2 Esophagoscopy
- 2 Gastroscopy
- 3 Duodenoscopy
- 4 Endoscopy of the postoperative stomach and duodenum
- 5 Recto-colonoscopy
- 6 Endoscopic Retrograde Cholangio-Pancreatography (ERCP)
7. Endoscopic ultrasound

8 Endoscopic capsule

9 Therapeutic digestive endoscopy

10 Endoscopic techniques. Indications. Results. Complications and treatment.

Care practicum without guidelines (15h)

Clinical care practices at the service of Digestive Endoscopy (optional)

Methodology

Directed

Typology	Hours	ECTSs
Theory lecture	0-7	0-0,28
Clinical care practice	8-15	0,32-0,6
Autonomous	41,25	1,65

Supervised

Care practicum without guidelines	15	0,6
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Activities

Title	Hours	ECTS	Learning Outcomes
Type: Directed			
Clinical care practices	8	0.32	1, 2, 3, 4, 6, 5, 7, 8, 9, 10, 11, 12, 13
Theory	7	0.28	1, 2, 3, 4, 6, 5, 7, 8, 9, 10, 11, 12, 13
Type: Supervised			
Care practicum without guidelines	15	0.6	5, 7, 12, 13
Type: Autonomous			
Preparation of written works/self-study/reading articles/reports of interest	41.25	1.65	10

Assessment

Evaluation activities

Assesment activity	Weight
Clinical practice	90%
Open and descriptive records and / or closed records; Narrative records. Seminars and / or problems and / or clinical cases:	
Clinical practice	10%
Written work.	

Assessment Activities

Title	Weighting	Hours	ECTS	Learning Outcomes
On job evaluation (clinical care practices and classroom)	90%	3.75	0.15	1, 2, 3, 4, 6, 5, 7, 8, 9, 10, 11, 12, 13
Written evaluation: objectives tests. Written works	10%	0	0	10

Bibliography

Digestive endoscopy: Terminology with definitions and classifications of diagnosis and therapy

Ed J Wayne, Z Maratka, JR Armengol Miró, B Homburg

Normed Verlag, Germany, 5th Edition, 2012