

Plastic and Reconstructive Surgery

Code: 103600 ECTS Credits: 3

| Degree | Туре | Year | Semester |
|------------------|------|------|----------|
| 2502442 Medicine | OT | 4 | 0 |
| 2502442 Medicine | ОТ | 5 | 0 |
| 2502442 Medicine | ОТ | 6 | 0 |

Contact

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Use of Languages

Principal working language: catalan (cat) Some groups entirely in English: Yes Some groups entirely in Catalan: Yes Some groups entirely in Spanish: Yes

2022/2023

Other comments on languages

UD Sant Pau

Prerequisites

It is necessary and an indispensable prerequisite for the student to have gained advanced knowledge in anatomy and basic competencies in Medicine (General Pathology), as well as sufficient training on the basis of the disease, pathological anatomy, microbiology, general treatment of the surgical patient, treatment of the traumatic patient and general support of the patient in physiological stress (critical illness). However, a knowledge of the physiological bases of tissue repair is necessary.

"The student will acquire the commitment to preserve the confidentiality and professional secrecy of the data that can be accessed due to the learning of health care services. Also by maintaining an attitude of professional ethics in all its actions. "

Objectives and Contextualisation

This subject will be taught at the UDH Vall d'Hebron, Responsible Dr. Joan-Pere Barret, JuanPedro.Barret@uab.cat; UDHSant Pau (Responsible: Jaume Masià: jmasia@santpau.cat), UDGermans Trias i Pujol (Responsible: Eva Castellà: ecastella.germanstrias@gencat.cat). Approximately 12 seats are offered for each UD, Vall d'Hebron 24 seats

Its general objective are is to adquire the knowledge of:

- the foundations of Plastic and Reconstructive Surgery, as well as their interactions with other surgical specialties.

- the diagnosis and treatment of pathologies that require a morphological and / or functional reconstruction of both acquired and congenital origin.

- Head and neck surgery, breast surgery, burns, congenital malformations, genitourinary malformations, facial traumatisms, oncological breast surgery and soft tissues.

- Regenerative Medicine and Surgery

- Composite Tissue Transplantation and plastic surgery linked to aging, including aesthetic surgery

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.
- Convey knowledge and techniques to professionals working in other fields.
- 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.
- Recognize one's role in multi-professional teams, assuming leadership where appropriate, both for healthcare provision and for promoting health.

Learning Outcomes

- 1. Anticipate and compare information for good decision-making.
- 2. Back decision-making with the best scientific evidence.
- 3. Convey knowledge and techniques to professionals working in other fields.
- 4. Distinguish the implications of different interventions regarding functional and morphological changes.
- 5. Enumerate the alarm signs that require urgent attention to the patient.
- 6. 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.
- 7. Estimate the risks and benefits of the various therapy options.
- 8. Identify emergency situations and establish an order of priorities.
- 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. Manage the information available and set levels of discussion in multidisciplinary groups.
- 12. Participate in the whole process of patient-care, from diagnosis to aftercare.

Content

Theoretical classes (15 hours)

- 1. History of plastic surgery
- 2. Basic principles of tissue transfer. Regenerative Medicine
- 3. Principles of restorative microsurgery. Vascularised Composite AlloTransplantation (VCA)
- 4. Burn Injury and Burn Reconstruction
- 5. Skin and soft tissue tumours
- 6. Facial reconstruction and facial paralysis
- 7. Facial trauma
- 8. Head and Neck Reconstyruction. Vascular malformations
- 9. Body contouring surgery
- 10. Breast reconstruction

- 11. Pediatric plastic surgery
- 12. Surgery of the hand and reimplantation
- 13. Reconstruction of lower extremities
- 14. Genitourinary plastic surgery and limfoedema surgical treatment
- 15. Introduction to aesthetic surgery and surgery of ageing

Methodology

This Guide describes the framework, contents, methodology and general norms of the subject, in accordance with the current curriculum. The final organization of the subject with regard to the number and size of groups, distribution in the calendar and dates of examinations, specific criteria of evaluation and review of exams, will be specified in each one of the Hospital Teaching Units (UDH), which will be explained through their web pages and the first day of class of each subject, through the teachers responsible for the subject at UDH. For the current course, the professors appointed by the Departments as responsible for the level subject of the Faculty and the UDH are:

| UDHSP | UDHVH | UDGTiP |
|--|--|--|
| Jaume Masià jmasia@santpau.cat (30 students) | Juan Pedro Barret JuanPedro.Barret@uab.cat (30 students) | Eva Castellà: ecastella.germanstrias@gencat.cat |
| | | (30 students) |

In the current exceptional circumstances, at the discretion of the teachers and also depending on the resources available and the public health situation, some of the theoretical classes, practicals and seminars organized by the Teaching Units may be taught either in person or virtually.

Annotation: Within the schedule set by the centre or degree programme, 15 minutes of one class will be reserved for students to evaluate their lecturers and their courses or modules through questionnaires.

Activities

| Title | Hours | ECTS | Learning Outcomes |
|--|-------|------|--|
| Type: Directed | | | |
| THEORY (TE) | 15 | 0.6 | 1, 2, 4, 3, 5, 6, 7, 11, 8, 9, 10, 12 |
| Type: Supervised | | | |
| CLINICAL PRACTICE WITHOUT GUIDELINES (PEXT) | 15 | 0.6 | 4, 5, 6, 7, 8, 9, 12 |
| Type: Autonomous | | | |
| PERSONAL WORK ASSAY / PERSONAL STUDY / READING OF ARTICLES / INTEREST REPORTS | 41.25 | 1.65 | 1, 2, 4, 3, 7, 11 |

Assessment

1. Assessment of theoretical knowledge:

Problem solving in the classroom (50% of the final grade)

Multi-answer test (30% of the final grade)

A multi-answer test of basic knowledge is performed. The syllabus is the one taught in class. The review of the exam will be done within 15 business days after the date of the exam (the student will request the revision of the exam via email and the professor undertakes to find a date).

2. Evaluation of the presentation of the work (20% of the final grade)

Structure, communication of the information, relevance of the chosen subject, originality, bibliographical resources, adequate presentation, compliance with the stipulated deadlines

Evaluation criteria

To be able to evaluate the theory, the student must have attended at least 80% of theoretical teaching. The maximum number of absences allowed not justified in order to evaluate the competences acquired during clinical practice is 2, any other absence must be justified.

3. Final grade:

Weighted sum of:

50% Attendance and active participation in class and seminars. Problem solving in the classroom

30% Written assessment through objective tests: multiple choice items

20% narrative registries

Expression: Numeric note with a decimal, from 0 to 10.I

Qualification: D, C, B, A, A+

Individual cases will be treated individually between the student and the teacher.

The subject contemplates a system sit for a second exam for students who have not passed the contents of the same, with a format to be determined.

Assessment Activities

| Title | Weighting | Hours | ECTS | Learning Outcomes |
|---|-----------|-------|------|--|
| Assist theoretical classes and active participation in class and seminars | 50% | 1 | 0.04 | 10 |
| Narrative assay | 20% | 1 | 0.04 | 4, 6, 7, 10 |
| Written evaluation through objective tests: multiple choice items | 30% | 1.75 | 0.07 | 1, 2, 4, 3, 5, 6, 7, 11, 8, 9, 10, 12 |

Bibliography

Specific Bibliography:

- 1. Plastic Surgery. Grabb's and Smith, Lippincott
- 2. Essentials of Plastic Surgery. Edited by Jeffrey E. Janis, MD. Quality Medical Publishing
- 3. Color Atlas Of Burn care. Elsevier. Juan P. Barret, DN Herndon
- 4. Principles and Practice of Burn Surgery, Marcel Dekker, Juan P. barret, DN herndon
- 5. Face Transplantation. Springer. Juan P. barret, V Tomasello
- 6. Flaps and Reconstructive Surgery. Wei Mardini, Elsevier
- 7. Aesthetic Plastic Surgery. Sherrell J Aston. Elsevier

Internet resorces:

www.secpre.org

www.euraps.org

www.asps.org

Software

Specific software is not necessary