

Clinical Care Practice IV

Code: 104073
ECTS Credits: 33

Degree	Type	Year	Semester
2502442 Medicine	OB	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

Prerequisites

It is advisable that students do not have any subject of previous courses pending to pass. In the case of the medical specialty, the student will have to choose one of the ones with the approved core subject.

Objectives and Contextualisation

The subject corresponds to the last year of the Degree in Medicine (6th year), once the student already knows the scientific foundations of medicine and the different medical and surgical pathologies.

The general objective is for the student to consolidate the previous knowledge and reach the skills clinical, communication and search and management of relevant scientific information to be able to:

- 1.- Recognize basic health problems and make reasoned proposals for the solution of themselves, using the appropriate sources of clinical and biomedical information, interpreting in a scientific results.
- 2.- Communicate with other health professionals, with patients and their families, in a clear and effective.
- 3.- Update knowledge autonomously.

That is why you will have to know:

- 1.- Prepare a structured medical history
- 2.- Do a completed physical examination
- 3.- Prepare a reasoned differential diagnosis
- 4.- Formulate a diagnostic hypothesis
- 5.- Justify the laboratory, image or other diagnostic tests that have to be ordered
- 5.- Interpret correctly the results obtained with the same
- 6.- Propose an adequate treatment
- 7.- Inform the patient and relatives
- 8.- Write an explanatory report
- 9.- Use ICTs to access the clinical and biomedical databases, obtain the information relevant and communicate

Competences

- Be able to work in an international context.

- 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.
- Communicate clearly, orally and in writing, with other professionals and the media.
- Critically assess and use clinical and biomedical information sources to obtain, organise, interpret and present information on science and health.
- Demonstrate knowledge of the national and international health organisations and the factors and circumstances affecting other healthcare systems.
- 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.
- Empathise and establish efficient interpersonal communication with patients, family-members, accompanying persons, doctors and other healthcare professionals.
- Engage in professional practice with respect for patients' autonomy, beliefs and culture, and for other healthcare professionals, showing an aptitude for teamwork.
- Listen carefully, obtain and synthesise relevant information on patients' problems, and understand this information.
- Maintain and sharpen one's professional competence, in particular by independently learning new material and techniques and by focusing on quality.
- Maintain and use patient records for further study, ensuring the confidentiality of the data.
- Use information and communication technologies in professional practice.

Learning Outcomes

1. Access the healthcare protocols for the different components of the pathology.
2. Analyse patient records systematically.
3. Analyse the limitations to the interpretation of behaviour from non-verbal communication.
4. Apply the basic elements of bioethics (patients' rights, doctors' obligations).
5. Apply the theoretical knowledge of the pathology acquired during the bachelor's degree to clinical practice.
6. Be able to work in an international context.
7. Collaborate on simple clinical and surgical manoeuvres after supervised practice on simulators.
8. Communicate appropriately with patients and their family-members.
9. Communicate clearly, orally and in writing, with other professionals and the media.
10. Consult patient records appropriately and keep them in order.
11. Correctly describe the criteria for hospitalisation.
12. Describe the communication process and its effect on the professional caregiver-patient relationship.
13. Detect emotions through non-verbal communication in a context of patient-health professional relationship.
14. Detect how verbal and non-verbal behaviour can be linked in a context of patient-health professional relationship.
15. Draft medical instructions, reports on consultations and treatment, official reports and certificates.
16. Explain the elements to be considered when assessing patients' role in decision-making on their health and on the medical attention they receive at their primary healthcare centres.
17. Identify basic emotions in primary healthcare patients through the interaction between the different non-verbal components.
18. Identify the basic elements of the face-to-face doctor-patient interview in a context of high accessibility and longitudinal care.
19. Identify the basic rules of pharmacotherapy in adults and children.
20. Identify the different components of non-verbal communication in a context of patient-health professional relationship.
21. Identify the presentation forms of the different pathological processes.
22. Identify the role of primary care in the healthcare system.
23. Identify the structure, organisation and resources of primary healthcare and the different components of primary healthcare teams.
24. Involve patients in decisions on the health-illness process.
25. Know the basic elements of the communication of clinical research results.

26. Maintain and sharpen one's professional competence, in particular by independently learning new material and techniques and by focusing on quality.
27. Observe the therapeutic approach, the clinical course and its prevention in cases where this is possible.
28. Participate in discussions to solve the clinical problems being faced.
29. Perform an anamnesis and a complete physical examination by systems on adults and children.
30. Prepare a complete patient record systematically.
31. Take an active part in care tasks: preparing patient records, requesting complementary studies (laboratory, imaging techniques) when needed and helping to focus the patient record.
32. Use information and communication technologies in professional practice.
33. Use the genogram as a tool in family care.

Content

Distributive blocks

- 1.- Rotations for medical services (Internal Medicine and Medical specialty) and hospital surgical (preferably by Traumatology and General Surgery) and by Primary Care centers
- 2.- Classroom of medical and surgical skills
- 3.- Guards
- 4.- Continuing education ACOEs
- 5.- Hospital sessions
- 6.- Computer Classroom
- 7.- Conferences

As part of the rotation, and in variable distributions depending on the possibilities and needs of the rotation, the student would have to participate in:

- 1.- The classroom of medical and surgical skills
- 2.- Medical and surgical equipment, do H. clinics, income notes, establish a Patient's problems and raise a differential diagnosis
- 3.- The solution of clinical, diagnostic and therapeutic problems (specific block)
- 4.- Basic rules of pharmacotherapy (specific block)
- 5.- The search for clinical and biomedical information (cross block)
- 6.- Develop communication skills (transversal block)

Methodology

Credits subject: 33 ECTS = 825 hours (33 credits x 25 hours)

Hospital Medicine: M.Interna (MI) + Medical Specialty (ME)

DIRECTED ACTIVITIES 192.5 H

ME (96.25 h) + ME (96.25 h)

AUTONOMOUS ACTIVITIES 68.75h

Rotations (PCA) MI (75 h) + ME (75 h)

5 h x 5d x 3 sem each area

Preparation of theoretical content ACOEs 26 h

Hospital sessions (PCA) 6 h

Preparation of practical content ACOEs 26 h

Learning workshops (PAUL) 14 h

Preparation of clinical case M. Internal 12.3 h

CONTENT OF THE DIRECTED ACTIVITIES

Rotations (PCA): students rotate by Internal Medicine and Medical Specialty 5 hours a day for 5 days working and for 3 weeks in each area and for Primary Care 6 hours a day for 5 working days and for 6 weeks. In the case of Surgery, students will rotate students 6 hours during 5 working days and for 3 weeks in each area (General Surgery and Surgical Specialty). These rotations will be made preferably in the morning. The rotation

for Primary will include the student's attendance at 6 hours clinical sessions

Clinical sessions (PCA): Students will be required to attend a total of 6 hours of clinical sessions during the rotation for Internal Medicine and / or E. Medica.

Preparation by the ACOEs (PAUL): The person in charge of the subject (Practical Assistance IV) of each teaching unit will organize classroom practices (scenarios, simulations ...). In particular 14 h during the rotation by Hospital Medicine.

Computer Classroom (PAUL) to receive learning sessions for "Bibliographic Search" in front of a better preparation and presentation of clinical cases (4,5h).

Learning with simulators in the classroom of skills (PLAB): students will learn the skills Surgical and medical in the classroom of skills with simulators. This dedication will preferably be done in afternoon hours and will be counted 9 hours by the Hospital Medicine part and 12.5 by the part of Surgery.

Guards (PCA): students will make a total of 7 hours of medical guards throughout their rotation by M. Internal and E. Medical and 2.08 h weekly during the rotation by Primary.

Basic Norms Pharmacotherapy (SESP): will consist of 2 hours, will be done in the hospital, will be given pharmacologists and the content will include basic rules of pharmacotherapy in the hospital prescription and the Primary

CONTENTS AUTONOMOUS ACTIVITIES

Preparation of theoretical content ACOEs (MI / Primary / General Surgery / COT)

Preparation Practical content ACOEs (MI / Primary / General Surgery / COT)

Preparation of clinical cases (MI / Primary / General Surgery)

Reading Assistance Protocols (MI / MS / Primary / Surgery)

Recommended bibliographic reference Multimedia (A. Primary)

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			
Classroom practices	18.5	0.74	5, 4, 8, 12, 13, 14, 20, 17, 16, 29, 18, 21, 26, 32
Clinical practices	535.5	21.42	1, 2, 3, 5, 4, 7, 8, 9, 10, 25, 11, 12, 13, 14, 20, 17, 16, 29, 22, 18, 23, 21, 19, 26, 27, 31, 28, 15, 30, 24, 6, 33, 32
Directed	2	0.08	9, 19
Lab practices	21.5	0.86	5, 7, 29, 21
Type: Autonomous			
Elaboration of works	46.91	1.88	5, 9, 25, 11, 29, 21, 26, 27, 31, 28, 30, 33, 32
Personal study	147.8	5.91	1, 2, 3, 5, 4, 7, 8, 9, 10, 25, 11, 12, 13, 14, 20, 17, 16, 29, 22, 18, 23, 21, 19, 26, 27, 31, 28, 15, 30, 24, 6, 33, 32

Assessment

DEFINITIONS OF THE DIFFERENT DIMENSIONS

Attendance and punctuality: it will be valued that the students have attended regularly every day of the rotation and that in case of absence have notified.

Attitude: it will be valued that the student is willing to learn, to know and review the clinical cases, that Ask questions and be positive in learning.

Participation and integration: The responsibility of the student will be assessed in the tasks that the tutor asks for, the ability to work in a team and the opinions that they contribute in a session or in other assistance activities.

Initiative: It will be assessed if the student is curious to learn, read the protocols of the service, the guides of diagnosis and treatment.

Communication: It will be evaluated if the student is able to synthesize and communicate a clinical case to the classmates of the team in a clinical service session

2. Clinical Sessions: During the hospital rotation by the medical area and in the CAP, it will be evaluated specifically the student's attendance at Clinical sessions and / or conferences

3. Computer Room: During the hospital rotation by the medical area, the student's attendance will be evaluated to 3 classroom practices in the computer room to learn how to do a literature search and how to cite a reference*.

4. Guards: During hospital rotation by the medical area and during rotation by primary care will evaluate the student's attendance to the hospital guards and in the CAP, respectively.

5. Mini-ACOE: During the hospital rotation by A. Primary, the student will be evaluated through Mini-ACOE. He define dimensions for the implementation and evaluation of the mini-ACOE

6. Oral Presentation Clinical Cases: clinical case presentation in the rotations will be evaluated by: Internal, Primary and Surgery. Dimensions are defined by the clinical case presentation in Internal Medicine and in Surgery

7. Classroom skills (Medicine, General Surgery and Surgical Specialty): the assistance of the student in the classroom of skills *

8. Specialized Seminars (Hospital Medicine): the student's attendance at the seminars will be evaluated specialized during its rotation by Internal Medicine and Medical Specialty. *

9. Classroom Practices: The student's attendance at Classroom practices will be evaluated *

* These activities will be evaluated only for attendance and for the student to be able to take the exam of the ACOEs. It is mandatory that the student has attended a minimum of 80% of the content of each of these activities or, if this condition is not met, a work on Pharmacotherapy / Computer Science or of another subject in agreement with the person in charge of the Subject.

Below is a table showing the weight of each one of the evaluation activities to the grade final and the time that will be dedicated to each of them and for each area (Hospital Medicine, General Surgery and surgical specialty and Primary Care), taking into account that 40% of the final grade corresponds to the evaluation of the ACOEs. The remaining 60% of the final grade will correspond to 20% of the specific area of Surgery, 20% of the specific area of Primary Care and 20% of the specific area of Medicine.

Students who do not take the assessment tests detailed above in both the Hospital / Primary Care Center as in the ACOES will be considered as not evaluated exhausting the rights to the registration of the subject. Special situations will be assessed individually in a commission that includes those responsible for the different areas involved in this subject.

Assessment Activities

Title	Weighting	Hours	ECTS	Learning Outcomes
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Objective and structured clinical examination (OSCE)	40% of final mark	33.04	1.32	1, 2, 3, 5, 4, 8, 9, 10, 11, 12, 13, 14, 20, 17, 16, 29, 22, 18, 23, 21, 19, 26, 27, 31, 28, 15, 30, 24, 6, 33, 32
Practical evaluation	60% of final mark	8.25	0.33	1, 2, 3, 5, 4, 7, 8, 10, 25, 11, 12, 13, 14, 20, 17, 16, 29, 21, 19, 28, 15, 30, 24, 32

Bibliography

<http://www.fisterra.com/>

<http://www.apaldia.com/>

<http://www.gencat.cat/ics/professionals/guies/>

Asistencia Primaria: 8 seminarios virtuales en el campus virtual de la asignatura

Software

there's no need specific software