

Degree	Type	Year
2502442 Medicine	OB	5

Contact

Name: Carlos Rodrigo Gonzalo De Liria

Email: carlos.rodrigo@uab.cat

Teachers

Maria Jesus Mendez Hernandez

Alfonso Macaya Ruiz

Susana Boronat Guerrero

Raquel Corripio Collado

Teaching groups languages

You can view this information at the [end](#) of this document.

Prerequisites

The student has had to acquire basic skills in all preclinical subjects.

The student will acquire the commitment to preserve the confidentiality and professional secrecy of the data to which he / she may have access as a consequence of the learning in the assistance services. He will also maintain an attitude of professional ethics in all his actions.

Objectives and Contextualisation

This subject is programmed in the 5th year of the Degree in Medicine when the student has already acquired the basic knowledge about the structure and function of the human body, on the physiopathological bases of health and disease and has also known certain aspects of the pathology of the human body. adult in its medical and surgical aspects, particularly those related to obstetrics.

The general objective is to know the development and the nutritional, affective and social needs of the child from birth to adulthood, emphasizing the different stages of evolution: newborn, lactating, school and adolescent.

The specific objectives are to know the physical examination of the child as well as the incidence of the various pathologies, forms of clinical presentation and treatment in each of the stages discussed above.

Competences

- Accept one's role in actions to prevent or protect against diseases, injuries or accidents and to maintain and promote health, on both personal and community-wide levels.
- 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.
- Demonstrate understanding of the structure and function of the human organism in illness, at different stages in life and in both sexes.
- Empathise and establish efficient interpersonal communication with patients, family-members, accompanying persons, doctors and other healthcare professionals.
- Establish a diagnostic approach and a well thought-out strategy for action, taking account of the results of the anamnesis and the physical examination, and the results of the appropriate complementary tests carried out subsequently.
- Formulate hypotheses and compile and critically assess information for problem-solving, using the scientific method.
- Indicate the basic diagnosis techniques and procedures and analyse and interpret the results so as to better pinpoint the nature of the problems.
- 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.
- Organise and plan time and workload in professional activity.
- Perform a general and a system-by-system physical examination appropriate to the patient's age and sex, in complete and systematic way, and a mental evaluation.
- Recognise the effects of growth, development and ageing on individuals and their social environment.
- Use information and communication technologies in professional practice.

Learning Outcomes

1. Convey knowledge and techniques to professionals working in other fields.
2. Convey medical information appropriately.
3. Differential diagnosis of major diseases affecting children in each of the different stages of development: newborn (premature and term), breastfeeding, childhood, puberty and adolescence.
4. Distinguish specific clinical manifestations of the most common diseases in each of the different stages of development: newborn (premature and term), breastfeeding, childhood, puberty and adolescence.
5. Explain the diagnostic and therapeutic procedures of the most common diseases in each of the different stages of development: newborn (premature and term), breastfeeding, childhood, puberty and adolescence.
6. Formulate hypotheses and compile and critically assess information for problem-solving, using the scientific method.
7. Identify normal patterns of growth and development from birth to adulthood.
8. Identify the main actors and insults causing disease in each of the different stages of development: newborn (premature and term), breastfeeding, childhood, puberty and adolescence.
9. Identify the preventive aspects of the most common diseases in each of the different stages of development: newborn (premature and term), breastfeeding, childhood, puberty and adolescence.
10. Maintain and sharpen one's professional competence, in particular by independently learning new material and techniques and by focusing on quality.
11. Make medical history and diagnostic orientation of the major diseases affecting children in each of the different stages of development: newborn (premature and term), breastfeeding, childhood, puberty and adolescence.
12. Organise and plan time and workload in professional activity.

13. Organize nutrition and child dietary.
14. Perform physical examination and diagnostic orientation of the major diseases affecting children in each of the different stages of development: newborn (premature and term), breastfeeding, childhood, puberty and adolescence.
15. Perform physical examination of the healthy child in each of the different stages of development: newborn (premature and term), breastfeeding, childhood, puberty and adolescence.
16. Perform well-child medical history in each of the different stages of development: newborn (premature and term), breastfeeding, childhood, puberty and adolescence.
17. Use information and communication technologies in professional practice.

Content

A. Growth and development, Nutrition, Social Pediatrics

1. Presentation of the subject. Growth in several stages. Pubertal development
2. Psychomotor development.
3. Nutritional needs during pediatric age. Food intolerances and allergies.
4. Accidents and poisonings. Sudden death.
5. Child abuse and abuse.

B. Neonatology, Metabolopathies, Genetics

6. Assessment of the newborn. Prematurity. Intrauterine growth retardation. Post-term. Cardio-respiratory adaptation to extrauterine life.
7. Neonatal infection.
8. Digestive obstruction of the NN. Necrotizing enterocolitis. Hirschprung's disease.
9. Maternal diseases during pregnancy with influence on perinatal health. Secondary injuries in childbirth.
10. Neonatal respiratory distress.
11. Neonatal jaundice. Newborn metabolic disorders.
12. Developmental and family-focused neonatal care. Strategies to ensure the safety of the newborn.
13. Introduction to pediatric minority diseases. Hereditary metabolic diseases. Early neonatal diagnosis.
14. .. Chromosomal and genetic alterations. Genetic counseling. Congenital malformations.

C. Immunity, Infections, Rheumatology

15. Congenital and acquired immunodeficiencies
16. Vertically transmitted infections
17. Exanthematous viral infections; herpesvirus infections; enterovirus infections. Encephalitis.
18. Meningitis. Sepsis and septic shock. Toxic shock
19. Mycobacterial infections. Osteoarticular infections
20. Pediatric rheumatic diseases. Juvenile idiopathic arthritis.
21. Rheumatic fever. Kawasaki disease. Other rheumatic diseases.

D. Cardiology, Digestive, Respiratory, Nephro-Urology, Hematology and Oncology, Neurology, Endocrinology

22. Generalities of congenital heart diseases. Heart failure. Functional buff.
23. Congenital heart diseases with cyanosis and without cyanosis.
24. Cardiomyopathies. Pericarditis. Endocarditis. Arrhythmias and driving disorders.
25. Nutritional disorders. Malnutrition and malnutrition.
26. Obesity.
27. Prolonged diarrhea. Celiac disease. Chronic inflammatory bowel disease in childhood.
28. Vomiting. Gastroesophageal reflux. Pyloric stenosis.
29. Acute gastroenteritis. Dehydration.
30. Acute and chronic liver diseases. Bile duct pathology.
31. Upper respiratory tract infections.
32. Infections of the lower respiratory tract (bronchiolitis, pneumonia). Lung malformations
33. Chronic pneumonia. Cystic fibrosis.
34. Bronchial asthma.
35. Urinary tract infection. Congenital pathology of the kidney and urinary tract.
36. Glomerulopathies. Nephrotic syndrome and nephritic syndrome.
37. Renal tubular alterations. High blood pressure.
38. Acute and chronic renal failure. Hemolytic-uremic syndrome.
39. Anemic syndrome. Causes of anemia. Iron deficiency anemia in childhood.

40. Neutropenia.
41. Coagulopathies and platelet alterations.
42. Leukemias in childhood. Transplantation of hematopoietic progenitors.
43. Lymphomas. Diseases of the monocytic-macrophage system.
44. Infantile solid tumors.
45. Epilepsy and paroxysmal neurological disorders.
46. Malformations of the central nervous system. Neurocutaneous diseases. Neurodevelopmental disorders. Intellectual disability. Autism.
47. Acquired brain damage. Static encephalopathy. Endocranial hypertension. Coma.
48. Genetically based neurological and neurodegenerative minority diseases.
49. Neuromuscular diseases.
50. Growth problems. Pituitary pathology.
51. Early puberty. Pubertal delay.
52. Hypoglycemia. Diabetes.
53. Sexual differentiation disorders. Problems related to gender identity.
54. Thyroid pathology in childhood.
55. Congenital adrenal hyperplasia. Adrenal insufficiency. Hypercortisolisms.

Specialized seminars (SESP typology) Scheduled sessions: 10 sessions of 1 hour

1. Healthy Child Health Reviews. Food in childhood.
2. Identification, stabilization and initial treatment of the child in serious condition. Pediatric life support
3. Neonatal cyanosis
4. Acute respiratory failure.
5. Abdominal pain. Acute abdomen. Digestive hemorrhage.
6. Immunizations in pediatrics
7. Acute febrile syndrome.
8. Febrile recurrence syndrome. Prolonged febrile syndrome.
9. Main infectious syndromes and use of antibiotics.
10. Weight and stature retardation.

Clinical practices

1. Clinical care practices. They will be done in groups of 2 students. Total: 54,75 hours spread over 4 weeks. The students will go to the facilities of the pediatric hospitalization rooms, outpatient area, neonatology, emergency and critical care units.

Week 1: Department of Pediatrics

0.75 hours: presentation

13,5 hours: Pediatric hospitalization wards, outpatient area, neonatology, emergency or critical care units

Week 2: Department of Pediatrics

13,5 hours: Pediatric hospitalization, outpatient area, neonatology, emergency or critical care units

Week 3: Department of Pediatrics

13,5 hours: Pediatric hospitalization, outpatient area, neonatology, emergency and critical care units.

Week 4: Department of Pediatric

13,5 hours: Pediatric hospitalization, outpatient area, neonatology, emergency or critical care units.

2. Advanced clinical simulation practices (PSCA).

They will be done in groups of 14-16 students, with 2 professors-supervisors. Total: 4 hours per student.

AUTONOMOUS ACTIVITIES

Comprehensive reading of texts and articles, study and realization of schemes, summary and conceptual assimilation of the contents. 100 hours

Preparation of seminars and clinical cases. 37.5 hours

Activities and Methodology

Title	Hours	ECTS	Learning Outcomes
Type: Directed			
ADVANCED CLINICAL SIMULATION PRACTICES (ACSP)	4	0.16	2, 4, 1, 5, 14, 3
CLINICAL CARE PRACTICES IN HUMANS (CCPh)	54.75	2.19	4, 9, 7, 8, 15, 14, 16, 11, 3
SPECIALIZED SEMINARS	10	0.4	
THEORY	55	2.2	
Type: Autonomous			
WORK PREPARATION / PERSONAL STUDY	137.5	5.5	

This Guide describes the framework, contents, methodology and general rules of the subject, in accordance with the current curriculum. The final organization of the subject in terms of the number and size of the groups, distribution in the calendar and dates of examinations, specific evaluation criteria and review of exams, will be specified in each of the Hospital Teaching Units (UDH), which they will make explicit through their web pages and the first day of class of each subject through the professors responsible for the subject at the UDH.

For this course, the professors appointed by the Departments as responsible for the subject at the Faculty and the UDH level are:

Department responsible: Departament of Pediatrics, Obstetrics and Gynecology, Preventive Medicine and Public Health

Faculty responsible: carlos Rodrigo Gonzalo de Liria carlos.rodrigo@uab.cat

Responsible UDH

Responsible UDHGTP: Carlos Rodrigo Gonzalo de Liria (carlos.rodrigo@uab.cat) i crodrigo.germanstrias@gencat.cat) i Maria Méndez Hernández (mjmendez.germanstrias@gencat.cat)

Responsible UDHVH: Alfons Macaya Ruiz (alfons.macaya@vallhebron.cat)

Responsible UDHSP: Susana Boronat Guerrero (sboronat@santpau.cat)

Responsible UDHPT: Raquel Corripio Collado (rcorripio@tauli.cat)

General teaching methodology:

Subject credits: 11 ECTS= 275 hours

TYPE OF ACTIVITY	ACTIVITY	HOURS
Directed (45%)		
19,97%	Theory (TE)	55
3,63%	Seminars	10
20%	Clinical care practices (CCP)	54
1,4%	Prácticas de simulación clínica avanzada (PSCA)	4
autonomous work		
(50%=137,5 hours)	Comprehensive reading of texts and articles and conceptual assimilation of the contents	100
	Seminars and clinical cases preparation	37,5

In certain 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.

Assessment

Continous Assessment Activities

Title	Weighting	Hours	ECTS	Learning Outcomes
Assessments written through objective tests: Multiple choice items	70%	9.65	0.39	4, 5, 6, 9, 7, 8,

and/or short or medium questions					13, 3
Practical type evaluations: Objective and structured clinical evaluation	30%	4.1	0.16	2, 1, 6, 10, 12, 15, 14, 16, 11, 3, 17	

The relative weight of the practical and theoretical evaluation is 30% and 70% respectively

1. - Evaluation of the practices. It includes:

- a) Elaboration of the clinical history
- b) physical examination
- c) complementary explorations
- d) interpretation of clinical cases

Any absence must be justified in order to evaluate the competences acquired during practical teaching.

2.- Evaluation of the theory and seminars. It includes:

- a) Theoretical knowledge: short questions and / or test type
- b) In the partial exams to be released, 60% or more of the grade will be required.

Any absence must be justified in order to evaluate the competences acquired during seminars teaching.

There will be two partial exams, each of which will represent 50% of the final grade.

3.- Final qualification

Weighted sum of the practical evaluation (30%) and the theoretical knowledge (70%)

Students who have not passed the course through the continuous assessment may be submitted to a recovery exam.

4.- Examination review system

The review of the exams will be done individually with the student in the established terms.

5.- The students who do not perform the theoretical and practical assessment tests will be considered as not evaluable, exhausting the rights to the registration of the subject

This subject does not provide the single assessment system

Bibliography

- Nelson Textbook of Pediatrics. 22 ed. Elsevier Science 2024
- Nelson Tratado de Pediatría, 21 ed. Elsevier 2020

- Nelson Essentials of Pediatrics 9th ed. 2023

- Illustrated Textbook of Pediatrics. Tom Lissauer, Will Carroll. 6th ed. Elsevier 2021

Internet

- <http://www.aeped.es/protocolos/index.htm>
- <http://www.ncbi.nlm.nih.gov/omim/> (base de dades de malalties genètiques)

Software

No requiered

Language list

Information on the teaching languages can be checked on the CONTENTS section of the guide.