

Degree	Type	Year
Medicine	OB	3

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Teaching groups languages

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Prerequisites

It is recommended that the student has achieved basic competencies in cell biology, biochemistry and molecular biology.

It is also convenient to have enough knowledge on the basis of psychological states of health and disease, as well as an adequate level of knowledge in interpersonal communication.

It is recommended to have acquired sufficient knowledge in:

General and specific anatomy of the different organs and systems

General and specific physiology of the different organs and systems

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

Objectives and Contextualisation

The subject is programmed in the third year of the Degree of Medicine, which corresponds to the beginning of the clinical period, once the basic knowledge about the structure and function of the human body has been obtained and before entering the study of the different medical and surgical pathologies and in clinical practice.

Its general objective is the study of the patient and, therefore, involves the knowledge of the general and basic aspects of the illness. In any case, it constitutes the first contact of the student with the clinic and must offer a global and systematized vision of the patient.

Knowledge of general physiopathology, semiology and clinical propaedeutic will allow students to face the clinical cycle of their training knowing previously what is the patient, the relationship that the doctor establishes with the patient, the technique of obtaining the subjective data that afflict it, the methods and techniques of obtaining the objective data that provide the physical examination and the elementary complementary examinations, finally, to group the fundamental signs and symptoms, making abstraction from what is superfluous, and to shape the great internal medicine syndromes.

The objectives and contents of the subject are complemented with the subjects of the module of diagnostic and therapeutic procedures (bases of clinical surgery, microbiology and parasitology, medical radiology, structural and molecular pathology and general pharmacology) also scheduled in the third year.

Competences

- Demonstrate basic research skills.
- Demonstrate, in professional activity, a perspective that is critical, creative and research-oriented.
- Demonstrate understanding of the causal agents and the risk factors that determine states of health and the progression of illnesses.
- Demonstrate understanding of the manifestations of the illness in the structure and function of the human body.
- 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.
- 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.
- 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.

Learning Outcomes

1. a complete physical examination general and the respiratory, circulatory and digestive systems, blood and hematopoietic organs, nervous system, musculoskeletal system, genitourinary system, metabolism and endocrine system.
2. Demonstrate basic research skills.
3. Demonstrate, in professional activity, a perspective that is critical, creative and research-oriented.
4. Describe the organ and system involvement and forms of presentation of diseases of the respiratory, circulatory and digestive systems, blood and hematopoietic organs, nervous system, musculoskeletal system, genitourinary system, metabolism and endocrine system.
5. Describe the relationship between constitution and disease as well as the food habits and drug use, and the physical, chemical, environmental, psychological, social and occupational and carcinogenic factors that determine the development of the disease.
6. Explain the mechanisms by which the disease affects the respiratory, circulatory and digestive systems, blood and hematopoietic organs, nervous system, musculoskeletal system, genitourinary system, metabolism and endocrine system.
7. Explain the mechanisms of ageing, geriatric syndromes and the general assessment of the geriatric patient.
8. Formulate hypotheses and compile and critically assess information for problem-solving, using the scientific method.
9. Indicate the basic complementary examinations for interpreting the manifestations of the illness in the different organs and systems of the human body.

10. Make a record that includes the personal, physiological and pathological antecedents of the illness, as well as the main symptoms of diseases of the respiratory, circulatory and digestive systems, blood and hematopoietic organs, nervous system, musculoskeletal system, genitourinary system, metabolism and endocrine system.

Content

Contents

Development of general medical semiology and propaedeutic and for apparatus and systems. General aetiology of diseases. Pathophysiology and organic syndromes: respiratory, cardio-circulatory and digestive tract, blood and haematopoietic organs, nervous system, locomotor system, metabolism, genitourinary system and the endocrine system.

Distributive blocks and teaching typologies

A. Introduction.

B. Aetiology and general pathophysiology

C. Manifestations of diseases and special pathophysiology for apparatus and systems

D. Semiology and clinical propaedeutic

I. Theory classes (TE typology, 1h sessions, enrolment group)

A. INTRODUCTION

1. Introduction to General Pathology

2. Medical patient-doctor relationship

B. ETIOLOGY AND GENERAL PHYSIOPATHOLOGY

3. Physiopathology of the thermoregulation. Febrile syndrome

4. Pathophysiology of pain

5. Constitutional syndrome / affecting the general state syndrome.

6. Physical agents as the cause of illness. Chemical agents as a cause of disease. Poisoning

Concept of constitution. Constitution and illness. Endogenous risk factors.

7. Environmental factors as a cause of illness. Climate changed related diseases

8. Biological agents as a cause of disease. Infectious syndrome.

9. Immune response and inflammation. Autoinflammatory and autoimmune diseases.

10. General pathology of neoplasms. Carcinogenesis. Effects of the tumor on the host. Paraneoplastic syndromes

11. The disease in the elderly. Geriatric syndromes.

C. MANIFESTATIONS OF SPECIAL DISEASES AND SPECIAL PHYSIOPATHOLOGY

Respiratory track

12. Main signs and symptoms of the respiratory system
13. Respiratory insufficiency and respiratory distress of the adult
14. Obstructive pulmonary syndromes
15. Restrictive pulmonary syndromes. Pulmonary cavitation
16. Pleural syndromes
17. Pathophysiology of diaphragm and mediastin. Mediastinic syndromes

Circulatory system

18. Main signs and symptoms of the circulatory system
19. Heart failure
20. Pathophysiology of valvular lesions. Stenosis and regurgitation
21. Pathophysiology of pericardium. Pericardial syndromes
22. Pathophysiology of coronary circulation. Coronary syndrome
23. Physiopathology of the minor circuit
24. Physiopathology of the major circuit. Arterial hypertension. Arterial hypotension
25. Pathophysiology of shock. Mechanisms and types of shock

Digestive system

26. General semiology of the digestive tract. Abdominal pain Digestive Haemorrhage
27. Disorders of intestinal transit. Diarrhoea and constipation. Rectal syndrome
28. Malabsorption and bad digestion syndrome. Pathophysiology and causes
29. Icteric syndrome. Pathophysiology. Classification
30. Portal hypertension. Ascites
31. Hepatic insufficiency. Hepatic encephalopathy

Blood and Hematopoietic Organs

32. Pathophysiology of the erythrocyte. Anaemic general syndrome. Poliglobuliuc syndrome General exploration of the hematopoietic system
33. Alterations of the leucocytes
34. Pathophysiology of haemostasis disorders
35. Hipofunction and hiperfunction of the bone marrow.
36. Adenomegalies and splenomegaly

Neurology

37. General semiotics of the nervous system. Main signs and symptoms.
38. Pathology of the motor function. Pyramidal syndrome Pathophysiology. Exploration of pyramidal paralysis.

Previous horn syndrome. Motor nerve alterations. Neuromuscular transmission disorders

39. Extrapyramidal syndromes. Hypocynesis Hyperkinesis.

Muscle tone disorders

40. Medullary, radicular and peripheral nerves syndromes. Segmental medulla syndromes. Cordon of syndromes Complete acute spinal cordonal syndrome. Medullary hemisection syndrome. Levels of medullary alteration. Radicular and peripheral nerves syndromes: semiology

41. Vestibular syndrome and cerebellar syndrome. Pathophysiology and semiology

42. Meningeal syndrome and endocranially hypertension syndrome. Pathophysiology and semiology

43. General pathology of the wake and sleep states. Coma

44. Cerebral topographical syndromes. Dementias

Locomotive apparatus

45. Semiology and general pathophysiology of the locomotor apparatus

46. General pathophysiology of bone metabolism

Metabolism

47. Disorders of hydrocarbon metabolism. Hypoglycaemia. Hyperglycemia

48. Disorders of metabolism of lipids. Hypolipoproteinemias. Hyperlipoproteinemias

49. Protein metabolism disorders. Purines metabolism disorders: pathophysiology of the proteins.

uric acid disorders

50. Pathophysiology of water and electrolytes. Disorders of water balance. Sodium balance disorders.

51. Acid-base balance disorders. Potassium Balance Disorders.

Genitourinary Apparatus

52. Semiology and general exploration of the genitourinary system. Nefrourological pain Urination disorders.

Polyuria, oliguria and anuria. Alterations of the appearance and composition of the urine. Disorders of the genital system

53. Renal syndromes. Glomerular, tubular-interstitial and vasculorenal syndrome

54. Renal insufficiency. Type Pathophysiology and semiology

Endocrine system

55. Hipotalamohipofisari system. Hypothalamic syndromes Hypofunction and hyperfunction pituitary syndromes.

56. Thyroid. Pathophysiology of simple goiter. Hypothyroid syndrome Hyperthyroid syndrome Parathyroids: Hypofunction and hyperfunction syndromes

57. Adrenals glands. Hypofunction and hyperfinction adrenal cortex. Hyperfunction of the adrenal medulla

58. General pathophysiology of gonads

D. SEMIOLOGY AND CLINICAL PROPERTIES

II. General seminars (SCC typology, 1 hour sessions, 10-12 students)

Communication with the patient, the family, the healthcare team and the environment. Factors that facilitate communication patient-doctor: overcoming cultural and religious barriers. Relationship with specific subgroups of patients

(children, adolescents, old, incapacitated, psychiatric) Relations with relatives. Relations with other components of the healthcare team. Confidentiality and informed consent.

Clinical history and anamnesis: General principles. Pathological and personal history. Family history. Anamnesis of pain.

Clinical history and anamnesis: anamnesis for apparatus and systems.

Clinical history and anamnesis: Clinical history problem-oriented. Course of the disease.

Epicrise

The doctor and the laboratory.

Reading and interpretation of ECG

III. Laboratory of clinical abilities (PLAB typology, 1 hour sessions, groups of 10-12 students)

The general exploration of the patient. General principles

Clinical interpretation of the measurement of AP and of the arterial pulse. Frequency and rhythm anomalies heartbeats

Heart sounds. Added heart sounds. Heart murmurs.

Semiology of the most frequent respiratory diseases. Respiratory auscultation.

Exploration of the abdomen. Genitourinary and ano-rectal exploration

Semiology and general exploration of the locomotor apparatus

General exploration of the nervous system. Exploration of motility and sensitivity

Exploration of the reflexes. Exploration of the cranial pairs. Meningeal syndrome

Other explorations.

IV. Discussion of clinical cases (SCC typology, sessions of 2 h, groups of 10-12 students)

V. Clinical practices (30 hours: 3h x 5 days 1st semester and 3h x 5 days second semester, groups of 2 students).

VI. Simulation (PSCA typology, 3 h sessions, 12 students)

Rotation for the hospitalization room with the objectives of completing 5 complete clinical histories and obtaining experience in exploration of the main clinical syndromes:

Anamnesis first semester practice

Clinical history nº 1.

Clinical history nº 2.

Clinical history nº 3.

Clinical history nº 4.

Clinical history nº 5.

Physical examination practices during the semester:

Exploration of respiratory syndromes (exploration of respiratory insufficiency, exploration of pulmonary condensation syndrome, exploration of pleural syndromes).

Exploration of cardio circulatory syndromes (exploration of pressure and arterial pulses, exploration of heart failure, exploration of cardiovascular failure).

Exploration of digestive syndromes (exploration of ascitical syndrome, exploration of the syndrome icteric, exploration of liver failure).

Exploration of the nephrourological syndromes (exploration of the urinary syndrome, semiology of oedema).
Exploration of hematologic syndromes (general exploration and evaluation of anaemic syndrome, exploration of the spleen and ganglionic regions).

Exploration of neurological syndromes (awareness, strength and muscular tone, reflexes, sensitivity, coordination and balance, walking, meningeal syndrome).

Activities and Methodology

Title	Hours	ECTS	Learning Outcomes
Type: Directed			
ADVANCED CLINICAL SIMULATION PRACTICE (IN HUMANS) (PSCA)	3	0.12	3, 2, 5, 4, 7, 6, 8, 9, 1, 10
CLINICAL CASES SEMINARS (SCC)	24	0.96	3, 2, 5, 4, 7, 6, 8, 9, 1, 10
CLINICAL PRACTICES (PCAh)	30	1.2	4, 8, 9, 1, 10
PRACTICE OF ADVANCED CLINICAL SKILLS (IN HUMANS) (PHCA)	9	0.36	3, 2, 4, 8, 9, 1, 10
THEORY (TE)	58	2.32	3, 2, 5, 4, 7, 6, 8, 9, 1, 10
Type: Autonomous			
Self studies	137	5.48	3, 2, 5, 4, 7, 6, 8, 9, 1, 10

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 examinations, will be specified in each one of the Hospital Teaching Units, that will explain it through their WEB pages and the first day of class of each subject, through the teachers responsible for the subject at UDH. If the tutors consider appropriate, and depending on the resources available at each Teaching Unit, some of the contents of the theory classes may be taught and evaluated in the simulation classes using the corresponding methodology.

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

Department responsible: Medicine

Responsible of Faculty: Albert Selva O'Callaghan

Responsible UDH:

UD Vall d'Hebron: Albert Selva O'Callaghan

UD Germans Trias i Pujol: Robert Muga

UD Sant Pau: Jordi Casademont Pou

UD Parc Taulí: Abel Mujal Martínez

General teaching methodology:

Theory classes (typology TE), Scheduled sessions 58 (1h per session), group: group of enrolment. The student acquires the theory knowledge of the subject attending the lectures and complementing them with the personal study of the topics explained. The master classes are conceived as an essentially expositive method, which transmits the teacher's knowledge to the student.

General semiology seminars (SCC typology). Scheduled sessions 7 (1 h per session), in small groups (10-12 students). In each seminar, a selected subject will be treated in accordance with the established programming, through the exchange of information and the subsequent debate.

Discussion seminars on clinical cases (SCC typology). Scheduled sessions 10 (2 hours per session), in small groups (10-12 students). The students will discuss type clinical cases, under the direction of a tutor. Some of these seminars will serve as a basis and tutorial in the presentations of the clinical histories that the student will have

To perform and deliver as a part of the clinical evaluation.

Laboratory practices (PHCA typology). Scheduled sessions 9 (1 h per session), in small groups (10-12 students) in the classroom of abilities. The activities carried out within a scheduled timetable are aimed at the acquisition of clinical skills.

Clinical Assistance Practices (PCA). Scheduled hours 30 (3h x 10 days). They will be done in a group of 2 students. The students will attend the hospitalization room facilities: 10 days, 3 hours a day, with the objectives of completing 5 complete clinical histories and obtaining experience in exploration of the main syndromes. The clinical histories carried out will be the basis of the deliveries that the student will have to carry out and that will be evaluated as part of the clinical evaluation.

Human advanced simulation practices (PSCA). 3 h, 2 professors, a technician, for 12 students

Autonomous (total 137 hours). Comprehensive reading of texts and articles, study and realization of diagrams, summarization and conceptual assimilation of the contents. Preparation of presentations and written works.

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.

For this course, the use of Artificial Intelligence (AI) technologies is permitted exclusively for support tasks, such as bibliographic or information searches, text correction, translations or other specific situations deemed appropriate. The student must clearly identify which parts have been generated using such technology, specify the tools used, and include a critical reflection on how these have influenced the process and the final outcome of the activity.

Failure to disclose the use of AI in this graded activity will be considered a breach of academic integrity and may result in partial or total penalization of the activity grade, or more severe sanctions in serious cases.

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

Continuous Assessment Activities

Title	Weighting	Hours	ECTS	Learning Outcomes
Clinical practice evaluation	30%	7	0.28	3, 2, 5, 4, 7, 6, 8, 9
Theory evaluation: multiple choice	70% (35% 1st partial + 35% 2n partial)	7	0.28	8, 9, 1, 10

Evaluation

An evaluation of the knowledge of the theory contents of the subject and the attitudes, aptitudes and clinical competence will be carried out. The relative weight of the theory examination and the clinical evaluation is 70% and 30% respectively (maximum 7 and 3 points out of 10).

Assessment of theory knowledge

Final theory exam : The final exam includes all the subject matter and the content of the seminars. In test-type test models, questions will be included that will have 5 possible answers and a single right choice.

The wrong answers take away 0.25 points.

Partial theory examinations. There will be two partial exams. The first will include the topics and the corresponding content of the seminars. The second part will include the subjects and contents of the remaining seminars.

The final grade of theory will be obtained from the average of the marks obtained in the two partial exams. In order to be able to do this, the minimum score of any one of the partials must be 5. The student must submit to the final exam of any partial not passed.

Examples:

(1er quadre)

1st part 2nd part Average Final exam theory and mark

* The mark is joint and unique, not differentiated in 1st part and 2nd partial.

If the mark of this final exam of theory is less than 5, the subject is failed and the remaining mark corresponds to the final exam (1st part, 2nd partial or Not evaluated).

Example:

(2ºn quadre)

1st part 2nd part Final exam theory and mark

Final mark Qualification

Students who pass any of the partial exams may submit to the final exam in order to get a better qualification, previously renouncing the mark obtained in the partial ones.

Clinical Evaluation

Comprises the practical evaluation and presentation of clinical works and histories. Attendance is mandatory. Any absence must justify it to the tutor and retrieve it if necessary for the student to be evaluated.

Final grade

Weighted average of theoretical knowledge (70%) and clinical evaluation (30%). Attendance to class will be evaluated positively. The average between the theoretical evaluation and the clinical evaluation can not be made if a minimum score of 5/10 is not obtained in both tests. In the case of not being able to do the average, the final grade will correspond to the lowest quantitative value of those obtained in theoretical and clinical evaluations.

Examples:

(3er quadre)

Final theory Final clinic Average provisional final grade Final exam T + C

Quantitative rating: numerical note with a decimal, from 0 to 10 (0-4.9 Fail, 5-6.9 Pass, 7-8.9 Good, 9-10 Merit).

Qualification: Fail, Pass, Good, Merit, Honour Distinction.

Exams review system

The review of the exams will be done individually with the student, upon written request within the established deadlines.

Students who do not perform both theoretical nor practical evaluation tests will be considered as Not evaluated by exhausting the rights to the matriculation of the subject.

Evaluation activities

Practical type assessments: Objective and structured clinical evaluation 30%

Written Evaluation: Objective tests: Elements of multiple choice

This subject does not provide for a single assessment system.

Bibliography

Bibliografia

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Laso FJ. Introducción a la Medicina Clínica: Fisiopatología y Semiología. 4ª ed. Elsevier España SL., Barcelona 2020.

Pérez Arellano JL. Sisinio de Castro, Manual de Patología General. 8ª ed. Elsevier-Masson, Barcelona 2019.

García-Conde J, Merino Sánchez J, González Macías J. Patología General: Introducción a la Medicina Clínica. 3ª edición. Marban Libros, Madrid 2015.

B) SEMIOLOGIA

McLeod. Exploración clínica. 13ª edición. Elsevier, Barcelona 2014

Prieto Valtueña J & Argemí Ballbé JM. Noguer-Balcells: Exploración clínica práctica. 29ª edición. Elsevier-Masson, Barcelona 2022

Plataform JoVE Clinical skills (Videos) (JoVE.com)

C) FISIOPATOLOGIA

Sheila Grossman: Porth: Fisiopatología. Alteraciones de la salud. Conceptos básicos. 9ª Ed. Walters-Kluwer, Barcelona 2014

Hammer i McPhee: Lange. Fisiopatología de la Enfermedad. 7ª Ed. McGraw Hill, Madrid 2015

D) MEDICINA INTERNA

Medicina Interna. Farreras-Rozman. 20ª ed. Elsevier, Barcelona 2024

Harrison's PRINCIPLES OF INTERNAL MEDICINE. 21st Edition. New York 2022. McGraw-Hill.

Software

No software required

Groups and Languages

Please note that this information is provisional until 30 November 2025. You can check it through this [link](#). To consult the language you will need to enter the CODE of the subject.