

Degree	Type	Year
Medicine	OB	6

Contact

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Teachers

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Teaching groups languages

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

Prerequisites

It is advisable that students do not have any subjects from previous courses pending approval.

It is advisable to have achieved sufficient knowledge in:

- Biostatistics
- Bioethics and communication, Epidemiology
- Physiopathology and clinical semiology
- Surgical pathology
- Medical pathology Clinical pharmacology
- Knowledge of a third language, preferably English.

If the following subjects have not been passed, it should be incompatible: Medical Physiology I and II. Human Anatomy. Medical Psychology. Structural and Molecular Pathology. General Pharmacology. Physiopathology and Clinical Semiology. Epidemiology. Basics of Clinical Surgery.

The student will acquire the commitment to preserve the confidentiality and professional secrecy of the data that he/she may have access to because of the learning in the assistance services. Also in maintaining an attitude of professional ethics in all their actions.

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 that the student consolidate her/his previous knowledge and achieve the clinical, the communicational and the scientific information search and managing skills to be able to:

- Recognize the basic health problems and make reasoned proposals for their solution, using the appropriate clinical and biomedical information sources, scientifically interpreting the results obtained
- Communicate with other health professionals, with patients and their relatives, clearly and effectively
- Update knowledge independently.

For this you will need to know:

- Prepare a clinical history in a structured way.
- Do a complete physical examination
- Elaborate a reasoned differential diagnosis
- Formulate a diagnostic hypothesis
- Justify the laboratory, imaging or other diagnostic tests that must be ordered. Correctly interpret the results obtained with them
- Propose an appropriate treatment
- Inform the patient and relatives
- Write an explanatory report
- Use ICT to access clinical and biomedical databases, obtain relevant information 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 structure, organisation and resources of primary healthcare and the different components of primary healthcare teams.
23. Involve patients in decisions on the health-illness process.
24. Know the basic elements of the communication of clinical research results.
25. Maintain and sharpen one's professional competence, in particular by independently learning new material and techniques and by focusing on quality.
26. Observe the therapeutic approach, the clinical course and its prevention in cases where this is possible.
27. Participate in discussions to solve the clinical problems being faced.
28. Perform an anamnesis and a complete physical examination by systems on adults and children.
29. Prepare a complete patient record systematically.
30. 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.
31. Use information and communication technologies in professional practice.
32. Use the genogram as a tool in family care.

Content

Distributive blocks

- Rotations for hospital surgical services (Surgical specialties (SE))
- As part of the rotation, and in variable distributions depending on the possibilities and needs of the rotation, the student should participate in:
 - o Surgical teams, elaborate clinical history, admission notes, establish a patient's problems and come up with a differential diagnosis
 - o Assistance in the operating room, inpatient clinic, outpatient clinic, emergencies, clinical sessions
 - o The solution of clinical, diagnostic and therapeutic problems (specific block). Basic rules of pharmacotherapy (specific block)
 - o The search for clinical and biomedical information (transversal block). Develop of communication skills (transversal block)

Activities and Methodology

Title	Hours	ECTS	Learning Outcomes
Type: Directed			
Clinical Care Practice	68	2.72	1, 2, 3, 5, 4, 7, 8, 9, 24, 10, 11, 12, 13, 14, 20, 17, 16, 28, 18, 21, 19, 22, 25, 26, 30, 27, 15, 29, 23, 6, 32, 31
Type: Autonomous			
Elaboration of works	10	0.4	5, 9, 24, 11, 28, 21, 25, 26, 30, 27, 29, 32, 31
Personal Study	30	1.2	1, 2, 3, 5, 4, 7, 8, 9, 24, 10, 11, 12, 13, 14, 20, 17, 16, 28, 18, 21, 19, 22, 25, 26, 30, 27, 15, 29, 23, 6, 32, 31
Reading of articles/ Reports of interest	10	0.4	1, 25, 31

Responsible department(s): Surgery

Head of Faculty

Dr. José Antonio Hernández Hermoso (JoseAntonio.Hernandez@uab.cat)

UD Hospital Managers:

UD Hospital Vall d'Hebron

Dr. Ferran Pellisé Urquiza (Ferran.Pellise@uab.cat)

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Methodology

Subject credits: 5 = 125 hours (1 credit x 25 hours)

54.4% DIRECTED ACTIVITIES (68 h)

Rotations (PCAh) for Surgical Specialties (68 h) 4.5h x 5d x 3 sets

Students will rotate 4.5 hours each day through the Surgical Specialties for 5 days x 3 weeks (68 hours).

These rotations will preferably be done in the morning hours. The specific calendars and timetables for each rotation will be established in each teaching unit and will be announced on the corresponding website.

Any absence must be justified. More than 3 absences, regardless of the cause, prevents the student from being assessed.

The rotation may include the student's attendance at clinical sessions, hospital floor, operating room, external consultations, functional testing areas and emergencies.

40% INDEPENDENT ACTIVITIES (50 h)

Comprehensive reading of texts and articles + Study and creation of diagrams

Summary and conceptual assimilation of contents

Preparation of presentations and deliveries

Preparation of clinical cases

Reading care protocols

Recommended multimedia bibliographic consultation

5.6% EVALUATION (7 h)

Continuous evaluation of the rotation 6.5h

Clinical case oral presentation 30 min

Exceptionally and according to the criteria of the responsible teaching staff, the available resources and the current health situation in the different Teaching Units, part of the content corresponding to the theoretical lessons, practicals and seminars may be taught face-to-face 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

Continuous Assessment Activities

Title	Weighting	Hours	ECTS	Learning Outcomes
Practical clinical assessment: structured objective clinical assessment (ACOE's)	40% of the final mark	2	0.08	1, 2, 3, 5, 4, 7, 8, 24, 10, 11, 12, 13, 14, 20, 17, 16, 28, 21, 19, 27, 15, 29, 23, 31
Practical evaluation	60% of the final mark	5	0.2	1, 2, 3, 5, 4, 7, 8, 9, 10, 11, 12, 13, 14, 20, 17, 16, 28, 18, 21, 19, 22, 25, 26, 30, 27, 15, 29, 23, 6, 32, 31

Final mark

Rotation 60%:

Continuous assessment of rotation 36%*

Presentation of a clinical case 24%**

ACOE's 40%:

Practical part 20%

Theoretical part 20%

*Rotation: During the Hospital rotation, clinical histories, admission notes, list of problems, differential diagnoses and other activities that the area manager deems appropriate will be evaluated, such as attendance at clinical sessions/hospital conferences

Rating notes

Attendance and punctuality	1	2	3	4	5
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Attitude	1	2	3	4
Participation and integration	1	2	3	
Initiative	1	2		
Communication	1	2		

The student will be considered Apt if he achieves a score equal to or higher than 11/16

DEFINITION OF THE DIFFERENT DIMENSIONS

- *Attendance and punctuality*: whether the Student has consistently attended every day during the rotation or has given prior notice in case of absence.

- *Attitude*: if the student is willing to learn, is familiar with and reviews clinical cases, asks questions, and demonstrates a positive attitude towards learning

- *Participation and integration*: the students' responsibility in tasks requested by the tutor, ability to work within a team, and the opinions and observations they provide during Clinical Sessions or other clinical activities.

- *Initiative*: curiosity in learning, reading the Service's protocols as well as diagnostic and treatment guidelines

- *Communication*: ability of the student to synthesize and communicate a clinical case to other team members in a Clinical Session

****Presentation Clinical Cases**: presentation of a clinical case followed during the rotation will be evaluated, both the written report/summary and the oral presentation.

Students who do not take the assessment tests detailed above, ACOEs included, will be considered as "Not assessed", exhausting their rights to register for the subject. Special situations will be assessed individually by a committee that includes the people responsible for the different areas involved in this subject.

Expression: numeric note with one decimal, from 0 to 10.

Qualitative grade: Fail, pass, good, excellent, with honors

Examination review system.

The review of the assessment will be done individually with the student after a written request within the established deadlines.

This subject does not provide the single assessment system.

Bibliography

GENERAL:

- The one recommended in all the subjects taken throughout the degree.

SPECIFIC:

- Lo esencial en ECOE en Medicina y Cirugía. Banghu, A. Ed. Elsevier Mosby. Mayo 2010. ISBN: 978-84-8086-668-2
- Netter. Exploración clínica en ortopedia. 4ª Edición. Joshua Cleland & Shane Koppenhaver & Jonathan Su. Ed. Elsevier Mosby. Mayo 2022. ISBN: 9788413821658
https://bibcercador.uab.cat/permalink/34CSUC_UAB/1eqfv2p/alma991010576272306709

- Cirugía Ortopédica y Traumatología. 6ª Edición. A. Delgado. Ed. Panamericana 2024. ISBN: 978 8411063296

Recursos d'internet

- <http://www.fisterra.com/> (not available in the UAB catalog)
- <http://www.gencat.cat/ics/professionals/guies/>

Software

Specific software is not 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.