

Información del Plan Docente

Academic Year 2016/17

Academic center 104 - Facultad de Medicina

Degree 304 - Degree in Medicine

ECTS 10.0

Course 5

Period First semester

Subject Type Compulsory

Module ---

- 1.Basic info
- 1.1.Recommendations to take this course
- 1.2. Activities and key dates for the course
- 2.Initiation
- 2.1.Learning outcomes that define the subject
- 2.2.Introduction
- 3.Context and competences
- 3.1.Goals
- 3.2. Context and meaning of the subject in the degree
- 3.3.Competences
- 3.4.Importance of learning outcomes
- 4.Evaluation
- 5. Activities and resources
- 5.1.General methodological presentation

OBSTETRICS AND GYNAECOLOGY

It includes the following educational activities required for their development 7 ECTS (175 hours).

Face-to-face teaching



Face teaching of Obstetrics and Gynaecology represents 45% of teaching (3.15 equivalent to 78.15 hours ECTS) and is based on the study and student activities conducted with teachers of the subject.

- Large groups (45%) with 1.42 ECTS allocation equivalent to 35.44 hours.
- o Master classes: Lectures assisted with appropriate audio-visuals media (blackboard, computer, projector, etc.).
- Small groups (45%) with 1.42 ECTS allocation equivalent to 35.44 hours distributed in the following activities:
- o **Seminars** (30%): Face teaching based on common clinical situations in routine practice as a starting point for the study of the proposed topics (see program with specific content) with allocation 0,43 ECTS equivalent to 10.63 hours.
- o **Workshops** (20%):Classroom activities teacher and student groups aimed at teaching based on learning clinical skills to perform obstetric and gynecological examinations, their interpretation and their usefulness for diagnosis using simulators (see program with specific content) with allocation 0.28 ECTS equivalent to 7.09 hours.
- o **Resolution of clinical cases** (20%):Presentation of clinical scenarios formulation of diagnostic and therapeutic guidance based on acquired knowledge, with the allocation of 0.28 ECTS equivalent to 7.09 hours.
- o **Directed work and / or revision** (20%): Conducting research and / or review by small groups of students under the tutorship of teachers, with the allocation of 0.28 ECTS equivalent to 7.09 hours.
- o **Tutorials** (10%): Personal interview and / or e-mail consultations with the tutor (academic guidance, information and guidance skills to be acquired), with the allocation of 0.14 ECTS equivalent to 3.54 hours ECTS.
- Evaluation (10%) Performance of tests described at the beginning of the course with respect to the objectives and evaluation criteria and the weight that the various activities will have on the final mark for verification of the acquisition of theoretical knowledge, practical and other skills with the allocation of 0.32 ECTS equivalent to 7.88 hours.

Not face teaching

The non-contact teaching of Obstetrics and Gynaecology represents 55% of teaching (3.85 ECTS equivalent to 96.25 hours) and is based on the study and the activities undertaken by the student based on different sources of information and the individual work.

FAMILY MEDICINE

It includes the following educational activities required for their development 3 ECTS (75 hours):

Classroom teaching

Face teaching of family medicine represents 45% of teaching (1.35 ECTS equivalent to 15.19 hours) and is based on the study and student activities carried out together with the teachers of the subject:

- Large groups: (45%) with 0.61 allocation equivalent to 15.19 hours ECTS. Lectures assisted with audiovisual media Suitable (blackboard, computer, projector, etc.).
- Small groups: (45%) with 0,61 ECTS allocation equivalent to 15.19 hours distributed in the following activities:
 - o **Seminars** (30%): Classroom Teaching based on common clinical situations in common practice as a starting point for the study of the proposed topics. It values ​​the participation and responses to the questions posed by the teacher. We use methodologies that encourage student's participation. Using media to know and record the response and participation of students. We review and update groups specific pathologies. It costs 0.18 allocation equivalent to 4.56 hours ECTS.
 - Workshops: (20%) face meetings teacher and student groups aimed at based teaching learning clinical skills to perform the specific clinical examinations, pathological data collection, interpretation and make a correct diagnosis. Work experience in clinical skills center simulation. It costs 0.12 allocation equivalent to 3.04 hours FCTS
 - o Resolution of clinical cases (20%): diagnostic formulation based on their prior knowledge of semiotics.



- logical therapeutic orientations according the formulated diagnostics. It costs 0.12 allocation equivalent to 3.04 hours ECTS.
- o **Directed and / or review work** (20%):Making individual and / or work in a group. subsequent public presentation of the work and / or revisions made. The Employment of computer simulators in which students individually diagnose illnesses from data provided by teachers. It costs 0.12 allocation equivalent to ECTS 3.04 hours.
- o **Tutorials:** (10%): Personal interview and / or telematics with the teacher / tutor (orientation academic, information and guidance skills to be acquired). 0.14 allocation ECTS equivalent to 3.38 hours.
- Evaluation. (10%): 0.45 ECTS (11.25 hours). Conduct of the various tests described in start of the course with respect to the objectives and evaluation criteria, and the weight that various activities will have on the final mark for verification of the acquisition of theoretical, practical skills and other skills. It costs 0.45 allocation equivalent to ECTS 11.25 hours.

Not face teaching

Non-contact teaching Family Medicine represents 55% of teaching (1.65 ECTS equivalent to 41.25 hours) and is based on the study and the activities undertaken by the student based on different sources of information and the individual work.

5.2.Learning activities

OBSTETRICS AND GYNAECOLOGY

Master classes

Synthetic presentation, sequential and motivating of the key aspects of the course content through oral exposure
with or without audio-visual support form. Its objectives are: the transmission of knowledge, offering a critical
approach of Obstetrics and Gynaecology leading students to reflect and discover relationships between the various
concepts, form a critical mindset in the way of dealing with problems and existence one method.

Clinical simulation workshops

• The main aim of the workshops is clinical skills that students acquire the ability to perform routine physical examinations in clinical practice in Obstetrics and Gynaecology in the context of a clinical scenario presented by the teacher at the beginning of the workshop. To this end anatomical models and simulators are used to perform clinical examination during pregnancy, childbirth, female genital exploration and breast examination.

Clinical case resolutions

• Designed to improve knowledge and clinical skills of the student by posing and solving practical cases promoting collaborative work and shared responsibility, as well as the public presentation of the tasks performed.

Directed works

Students will conduct a scientific review paper, critical analysis of a scientific or original publication related to the
content of Obstetrics and Gynaecology subject. The work will be done by a group of students whose composition is
free, but must consist of a minimum of 3 and a maximum of 5 students. Students will develop the activity under the
supervision, monitoring and correction of a tutor assigned at the beginning of teaching. The choice of topic is free. If
there is no subject proposed by students will be assigned by teachers.

Seminars

 Presentation, reflection and open discussion with faculty on common clinical problems in clinical practice of Obstetrics and Gynaecology.

All students perform practical activities in which personal or medical history patient data are handled, is obliged to keep



the confidentiality thereof.

FAMILY MEDICINE

Lectures

Synthetic presentation, sequential and motivating of the key aspects of the course content through oral exposure
with or without audiovisual support form. Its objectives are: the transmission of knowledge, offering a practical and
critical approach of Family Medicine leading students to reflect and discover relationships between the various
concepts, form a critical mindset in the way of dealing with problems and the existence of a method.

Clinical skills workshops

• The main aim of the workshops is clinical skills that students acquire the ability to perform routine physical examinations in clinical practice in Family Medicine, in the context of a clinical scenario presented by the teacher at the beginning of the workshop.

Workshops clinical scenarios

• Designed to improve knowledge and clinical skills of the student by posing and solving practical cases promoting collaborative work and shared responsibility, as well as the public presentation of the tasks performed.

Directed works

• Students will complete work documentation, review, critical analysis of a scientific or original publication related to the content of the subject

The work will be done by a group of students whose composition is free. Students will develop the activity under the supervision, monitoring and correction of a tutor to be assigned at the beginning of teaching.

Seminars

 Presentation, reflection and open discussion with faculty on common clinical problems in clinical practice of Family Medicine.

All students perform practical activities in which personal or medical history patient data are handled, is obliged to keep the confidentiality thereof

5.3.Program

OBSTETRICS AND GYNAECOLOGY

The teaching program of Obstetrics and Gynaecology has the following content:

Master classes program

Obstetrics: Pregnancy, childbirth, normal and pathological postpartum.

- 1. Preconception and reproductive counselling.
- 2. Normal Pregnancy (1): Diagnosis of gestation and maternal physiological changes during pregnancy.
- 3. Normal Pregnancy (2): prenatal visit.
- 4. Normal pregnancy (3): prenatal diagnosis.



- 5. Normal Pregnancy (4): Physiology of the placenta and foetus. Foetal assessment tests state. Alterations of foetal well-being during pregnancy and childbirth.
- 6. Labour and delivery (1): Causes, elements and mechanism of normal labour.
- 7. Labour and delivery (2): Clinical care of labour and delivery, postpartum and lactation.
- 8. First half of pregnancy haemorrhage: Miscarriage, ectopic pregnancy and gestational trophoblastic disease.
- 9. Second half of pregnancy haemorrhage: placenta previa. placental abruption, placental accretism.
- 10. Multiple pregnancy.
- 11. Disturbances of foetal growth: Intrauterine growth restriction. Foetal macrosomia.
- 12. Alterations of the duration of pregnancy: preterm birth, premature rupture of amniotic membranes, amniotic infection, prolonged pregnancy.
- 13. Haemolytic perinatal disease.
- 14. Pregnancy complications (1): high blood pressure during pregnancy.
- 15. Pregnancy complications (2): Gestational diabetes. Diabetes mellitus and pregnancy. Other endocrine diseases
- 16. Pregnancy complications (3): hematologic, cardiovascular, digestive, neurological, respiratory, immune and urological diseases.
- 17. Pregnancy complications (4): Infections of perinatal transmission.
- 18. Labour and delivery dystocia: Pelvic and foetal dystocia. Breech presentation and transvers situation.
- 19. Obstetric complications: uterine rupture. Umbilical cord complications (prolapsed umbilical cord). Amniotic fluid volume disturbances. Amniotic fluid embolism.
- 20. Tocurgia: Forceps. Vacuum. Spatulas. Caesarean section.
- 21. Haemorrhage of the third stage of delivery. Puerperal infection. Puerperal depression.

Gynaecology: Gynaecological pathology.

- 1. Gynaecological anamnesis. Genital and breast examination. Investigations: cytology, colposcopy, biopsy, ultrasound, radiology, hysteroscopy and laparoscopy.
- 2. Gynaecology of childhood and adolescence. Climacteric gynaecology.
- 3. Abnormal menstrual bleeding: amenorrhoea. Dysfunctional uterine bleeding. Dysmenorrhea. Premenstrual syndrome
- 4. Polycystic Ovary Syndrome. Hiperandrogenism.
- 5. Sterility and infertility.
- 6. Contraception.
- 7. Pelvic inflammatory disease. Endometriosis.
- 8. Genital prolapse. Urinary incontinence. Genital fistulas.
- 9. Programs of prevention and early diagnosis of genital and breast cancer.
- 10. Vulva and vagina diseases: vulvovaginitis, vulvar benign diseases, cancer vulva and vagina.
- 11. Cervical diseases: benign pathology and cervical cancer.
- 12. Diseases of the uterine body: endometrial polyp, uterine myoma, endometrial adenocarcinoma and uterine sarcoma.
- 13. Ovarian diseases: benign and malignant ovarian neoplasms.
- 14. Breast diseases: fibrocystic breast disease, breast fibroadenoma and breast cancer.

Seminars (10 hours)

- 1. Pregnant woman consulting for potential exposure to a teratogen.
- 2. Woman consultation genital bleeding in pregnancy
- 3. Evaluation of the foetal well-being.
- 4. Pregnant woman consulting because labour has begun.
- 5. Women with abnormal genital bleeding.
- 6. Women with vaginal discharge, itching and burning of the vulva.
- 7. Women requesting emergency contraception.
- 8. Woman consulting for a breast tumour.

Clinical simulation workshops (8 hours)

- 1. Clinical examination in pregnancy.
- 2. Clinical examination in delivery.
- 3. Genital examination.
- 4. Breast examination.



Clinical case resolution (8 hours)

- 1. Pregnancy diagnosis.
- 2. Hyperemesis gravidarum.
- 3. Anaemia and pregnancy.
- 4. Urinary tract infection.
- 5. Itching and vaginal discharge.
- 6. Acute abdominal pain (pelvic inflammatory disease)
- 7. Emergency contraception
- 8. Genital urinary incontinence.
- Others.

Tutorials

- The tutorials will mainly face, requesting day and time with the teacher and the teaching hours (8-15 hours).
- Its main objective is to achieve adequate academic orientation of the student.

FAMILY MEDICINE

The teaching program of Family Medicine has the following content:

Program of lectures: Lecture (16 hours).

- 1. Introduction to primary health care and family medicine and community. Background and historical development. Care relationship and bio-psycho-social. Family doctor profile. Health system and primary care. Primary Care team: composition, functions, activities and organization. Preventive activities and preventive medicine clinic. medical and health advice.
- 2. Activities of prevention and health promotion in primary care consultations. Education health in the process of changes in lifestyle. Family physician's role in addressing smoking, alcoholism and drug addiction.
- 3. Family care. Family structure: classification and types. The family life cycle. The function and family dysfunction.
- 4. Attention to the stages of life (1): The child and adolescent. most frequent pathologies diagnosis and management in primary care. Influence of family environment, school and time Free on your health.
- 5. Attention to the stages of life (2): The woman. Features family physician attention to women. The most frequent pathologies woman diagnostic and control in primary care.

 Attention to women victims of gender violence.
- 6. Attention to the stages of life (3): The adult. Acute and chronic adult diseases more frequent diagnostic and control in primary care.
- 7. Attention to the stages of life (4): The elder. Aging process. Geriatric assessment integral. Health problems most common in the elderly. latrogenic. Preventive activities. The dependence. Ill-treatment in the elderly.
- 8. Patient terminal. Palliative care. Chronic diseases amenable to palliative care. family approach. Addressing duel.
- 9. Addressing the most common acute pathology in primary care.
- 10. Using the test and diagnostic procedures in primary care.
- 11. Clinical reasoning in primary care. The management of uncertainty.
- 12. Health and immigration.
- 13. Therapeutics in primary care. Non pharmacological measures. Minor surgery. Rational use of drugs in primary care. Pharmacology and therapeutic risk. Rational use of medicine. Control of the prolonged treatment. Adverse reactions (Yellow Card). Oral anticoagulation. Compliance. Economics in clinical practice.
- 14. Mental health in primary care. Mental health problems. Prevailed, detection, diagnosis and treatment of the most common psychopathological disorders. The duel.
- 15. Multimorbid patient approach. The complex chronic patients.social determinants of health.
- 16. Community Health.

Seminars (4 hours)



Diagnostic and therapeutic procedures in primary care.

- Sutures.
- · Bandages.
- · Spirometry.
- · Basic ECG.
- Clinical examination.
- Primary Care Models in Europe.
- Polypharmacy.
- · Comorbidity.
- · Palliative care in primary care.

Resolution of clinical cases (3 hours)

- Clinical reasoning.
- · Preventive activities.
- Pharmacovigilance.

Tutorials

- · Personal tutorials will be attending classes, requesting day and time with the chosen teacher,
- Teachers develop during working hours (8-15 hours).
- Its main objective is to achieve adequate academic orientation of the student.

5.4. Planning and scheduling

OBSTETRICS AND GYNAECOLOGY

All groups of identical develop theory and practical training activities.

Master classes

- The lectures will be taught in the school calendar for the academic year 2016-2017 approved by the University of Zaragoza, beginning on September 19, 2016, from 9 to 10 hours on Mondays, Wednesdays and Fridays in both groups.
- The same teacher in both teaching groups will teach each topic on alternate day.

Clinical skills workshops and resolution of clinical cases

- They will be held at 12 sections made up of about 25 students in accordance with the distribution of students proposed by the coordinator of the semester.
- As of September 22 are held for the next 12 weeks according to the distribution of sections, Monday through Thursday 2-3 hour sessions in the range of 12 to 15 hours.
- The specific timetable allocation nominal students will be published in the ADD.

Direct works

- The work will be directed by a group of three to five five students and directed by a tutor.
- The working groups of students can form whatever group or administrative section forming part.
- If there is no proposal subject by the student group, you will be assigned by teachers.
- During the first 2 weeks of the academic year (from September 19 to October 3, 2016) students organize their own
 working groups, whose relationship will be delivered to the secretariat of the Department of Surgery, Obstetrics and
 Gynaecology to 3 October 2016.
- As of October 17 will be assigned the task forces teachers-tutors to organize the work to be performed under the supervision and correction.
- The final acceptance of the composition of the group, subject and tutor will be published in the ADD.



The work will be delivered at the end of the semester (before December 19) for evaluation, according to the
procedure to be unveiled in the ADD.

Seminars

- Friday of each week seminars are held on schedule from 12 to 14 hours (2 seminars of about 50 minutes each).
- The assignment of students to seminars according to the distribution of students proposed by the coordinator of the semester will be held.

FAMILY MEDICINE

Teaching in large groups (lectures):

- 1 lecture / school group during scheduled teaching period and in each subject.
- Hours: 9:00 to 10:00 hours in the morning. Duration: 1 hour.
- The lectures begin in two groups according to the official teaching schedule. Initially they will begin the week of 15 to 19 September 2014 and end on January 13, 2015.

Teaching in small groups:

- The 12 groups or sections of 25 students each component will be provided.
- The overall duration of teaching small groups is 2.45 hours / day.
- Teaching in small groups will begin the week of September 22 for 12 consecutive weeks.
- The duration of the seminars, workshops and simulation sessions resolution of clinical cases will be 1 hour lectiva.

5.5.Bibliography and recomended resources

OBSTETRICS AND GYNAECOLOGY

Basic bibliography

- González Merlo J, Lailla Vicens J, Fabre González E, González Bosquet E. Obstetricia (6ª edición). Amsterdam, Barcelona, Madrid: Elsevier Masson, 2013.
- González Merlo J, González Bosquet E. Ginecología (9ª edición). Amsterdam, Barcelona, Madrid: Elsevier Masson, 2014.
- Speroff L, Fritz MA. Endocrinología ginecológica clínica y esterilidad. Edición española de la 8ª ed. de la obra original en lengua inglesa Barcelona : Wolters Kluwer/Lippincott Williams & Wilkins, cop. 2011

FAMILY MEDICINE

Basic bibliography

- Serrano Martínez M, Casado Vicente V, Bonal Pitz P (coordinadores). Medicina de Familia. guía para estudiantes.
 1ª ed. Barcelona: Ariel: Sociedad Española de Medicina de Familia y Comunitaria, 2005
- Martín Zurro A, Cano Pérez JF; equipo de colaboradores editoriales, R. Ciurana Misol ... [et al.] Atención primaria : conceptos, organización y práctica clínica. 6ª ed. Madrid [etc.] : Elsevier, 2008
- Casado Vicente, V. Tratado de medicina de familia y comunitaria. 2ª ed. Madrid.
- Martín Zurro A. Atención primaria. Problemas de Salud en la Consulta de Medicina de Familia. 7º ed. Elsevier España 2014
- Gofin J. Salud Comunitaria Global. Masson 2013