

## INFERMIERISTICA CLINICA IN AREA CRITICA (ITO010)

### 1. language

Italian.

### 2. course contents

Coordinator: Prof. Bruno Riva

Year Course: 3

Semester: 1

UFC: 6

Modules and lecturers

MEDICINA URGENZA E RIANIMAZIONE ITO052 – 1 CFU – SSD MED/41

Prof. Raffaele Potenza

CHIRURGIA D'URGENZA ITO050 – 1 CFU – SSD MED/18

Prof. Paolo Franzese

INFERMIERISTICA IN AREA CRITICA ITO053– 2 CFU – SSD MED/45

Prof. Bruno Riva

NEUROCHIRURGIA ITO054 – 1 CFU – SSD MED/27

Prof. Gabriele Ronchetti

CHIRURGIA TORACICA ITO051– 1 CFU – SSD MED/21

Prof. Venanzio Porziella

### 3. bibliography

#### **Medicina d'urgenza e rianimazione**

PL. Marino, The ICU book. Terapia intensiva. Seconda Edizione Pocket, Elsevier srl; 2018.

M Chiaranda, Urgenze ed emergenze : istituzioni, Piccin, 2016.

#### **Chirurgia d'urgenza**

AA. VV. Manuale di Medicina d'Emergenza. Milano: McGraw-Hill Editore, 2008.

#### **Infermieristica di area critica**

GFT (Gruppo Formazione Triage). Triage infermieristico. IV Ed, McGraw-Hill Education, 2019.

NAEMT, Phtls - Supporto Delle Funzioni Vitali in Pazienti Traumatizzati in Fase Pre-ospedaliera: di National Association of Emergency Medical Technicians, 2019.

A. Bagnasco, S. Scelsi, A. Silvestro, Infermieristica in area critica: terza edizione McGraw-Hill Education, 2020.

Italian Resuscitation Council. Manuale del corso METal per operatori sanitari. IRC edizioni, 2008.

ALS/ACLS (supporto avanzato delle funzioni vitali) In attesa pubblicazione testi in linea con le nuove linee guida 2020.

### **Neurochirurgia**

- A. Lavano, D. La Torre, Neurochirurgia per infermieri tecnici e riabilitatori. Esculapio, 2022.

### **Chirurgia toracica**

M.Loizzi, A.Oliaro, Malattie dell'apparato respiratorio. Pneumologia e chirurgia toracica, Minerva Medica Editore, 2015.

## **4. learning objectives**

### **Knowledge and understanding - (Dublin 1).**

**At the end of the course, the student will be able to assign appropriate meanings to the teaching contents related to:**

- a) Diagnostic - therapeutic - assistance, pre and intra hospital, in people with surgical, internal and neurological pathology with high clinical instability;
- b) Determination of death by neurological standard and cardiological standard.

### **Applied knowledge and understanding - (Dublin 2).**

**At the end of the course the student will be able to interpret and argue, based on appropriate knowledge and rigorous reasoning, emblematic problem situations related to:**

- a) elements that define the clinical stability of the persons assisted in situations of high internal, neurological and surgical criticality;
- b) results of values of the monitoring systems and hemodynamic and neurological evaluation in the different pathological frameworks in the critical area.

### **Independent judgment - (Dublin 3)**

**At the end of the course the student will be able to critically analyze and evaluate, with rigorous method, with up-to-date knowledge, appropriate information and valid interpretative criteria, topics and problematic situations with particular reference to:**

- a) situations that characterize the professional practice of a nurse in terms of legal, ethical, bioethical and ethical responsibility in the critical area;
- b) situations that characterize the professional exercise of a nurse on the level of legal, ethical, bioethical, deontological responsibility in the request not to oppose the donation of

organs and tissues.

#### **Communication skills - (Dublin 4)**

**At the end of the course the student will be able to answer specific questions and discuss emblematic topics and cases:**

- a) using the correct terminology and syntax in both written and oral form;
- b) expressing itself in a clear, comprehensible and adapted way to the type of interlocutor and his receptive and interpretative abilities.

#### **Ability to Learn - (Dublin 5)**

**At the end of the course, the student will be able to self-evaluate their learning skills in relation to teaching topics:**

- a) identifying, on the basis of its intellectual performance and the feedback provided by the teachers, Any need for cognitive or methodological compensation/integration;
- b) using independently available information sources to address these needs.

### **5. PREREQUISITES**

They are defined in the Student Guide.

### **6. teaching methods**

interactive and dual mode lessons, also through the use of institutional platforms; use of slides, images and videos.

### **7. other informations**

Teachers are available to meet students by appointment.

### **8. methods for verifying learning and for evaluation**

There is a final written exam with multiple choice questions and/or open questions and subsequent oral examination. Students with an assessment equal to or greater than 18/30 for each individual module will be admitted to the oral exam. Students with one or two minor deficiencies (16 or 17/30) may be admitted to the oral exam subject to conditions (the passing of the exam is conditioned by the positivity of the oral exam). Students with one or more deficiencies ( 15/30) will not be admitted to the oral exam. The final assessment of the exam will be expressed in thirtieth; the grade results from the weighted average between the written and oral test. Passing the exam requires a minimum overall vote of 18/30. The student will be able to get the maximum score of 30/30 if the weighted average is at least 29.5/30.

### **9. program**

## **Emergency Medicine and Resuscitation**

Acute respiratory failure: indications and modes of non-invasive and invasive ventilation. Damage from ventilation. Protective ventilation.

Indications and technique of packaging a percutaneous tracheotomy.

Shock: typology, treatments and hemodynamic monitoring.

Cardiac arrest: Targeted temperature management

Alterations of the state of consciousness: definition and scales of assessment.

Death determined by neurological standard and cardiological standard.

### **Emergency surgery**

The person with surgical problems with high clinical instability.

Approach and management of wounds and burns in emergency.

Acute abdomen: syndromic pictures of abdominal pain; pathophysiology of acute processes: diagnosis, treatment, identification of needs.

Trauma: pre- and intrahospital approach and management. Abdominal trauma.

Extremity trauma.

### **Nursing of the Critical Area**

The emergency system, territorial and hospital: aims, organization and routes.

Assistance to the patient at risk/critical and in cardio-circulatory arrest.

Primary and secondary assessment of the patient with medical, surgical or traumatic pathologies.

Management of time dependent pathologies.

Theoretical principles and practical implications of immobilization/mobilization in the traumatized patient.

Nursing triage (intrahospital), general and operational aspects.

The intrahospital emergency and the monitoring system

Invasive and non-invasive ventilation: welfare aspects.

Best practices in intensive care and cycle care.

The management of drugs in emergency and emergency.

The secondary protected transport.

The transmission of information in emergency

### **Neurosurgery**

Overview of macroscopic anatomy and physiology of the central and peripheral nervous system

Hydrocephalus and Endocranial Hypertension Syndrome. Liqueur derivations and their management.

Cranial trauma and surgical complications.

Cerebrovascular diseases.

Elements of brain and spinal neoplastic pathology

The degenerative spinal pathology

Spinal trauma. Management of the patient with acute medullary trauma

## **Thoracic surgery**

Pathophysiology and treatment of pneumothorax. Management of pleural drainage. Pathophysiology and treatment in lung tumors, mediastinum, mediastinal syndrome, pleural mesothelioma, neoplastic pleural effusions, caustic esophagitis, immersed goiters. Combined treatments in thoracic surgery. Minimally invasive techniques. Chest trauma.