

## INFERMIERISTICA CLINICA IN AREA MEDICA (ITO212)

### 1. language

Italian.

### 2. contenuti/course contents

*Coordinator: Prof.ssa Alessia D'ORAZIO*

*Year of the course: II*

*Semester: 1*

*UFC: 6*

*Modules and lecturers:*

- Medicina Interna ITO04B (MED/09) (2 CFU): Prof.ssa SCALABRINO Elisa
- Cardiologia ITO05B (MED/11) (1CFU): Prof. PALLISCO Ottavio
- Infermieristica clinica medica ITO06B (MED/45) (3CFU): Prof.ssa D'ORAZIO Alessia

### 3. bibliography

#### Internal medicine:

Brunner Suddarth. Nursing Medico Chirurgico. Milano: Ambrosiana; quinta edizione 2017.

Rugarli C. Medicina interna sistematica. 8 edizione. Elsevier; 2021.

#### Cardiology:

Walsh R.A, Fang J.C, Fuster V. Hurst il cuore. Il manuale (edizione italiana a cura di Giuseppe Mercurio). McGraw-Hill; 2016 (13 edizione).

Linee Guida della Società Europea di Cardiologia per la diagnosi e il trattamento di STEMI, NSTEMI, pericardite, valvulopatie.

#### Clinical medical nursing:

Brunner Suddarth, Nursing Medico Chirurgico. Milano: Ambrosiana; quinta edizione 2017.

Dubin D. Interpretazione dell'ECG. Milano: Monduzzi; sesta edizione 2018.

Linee Guida GOLD (Global Initiative on Obstructive Lung Diseases) Revisione del 2021 a cura di Progetto mondiale Broncopneumopatia Cronico Ostruttiva. <https://goldcopd.it/> ; <https://www.guidelines.co.uk/respiratory/gold-copd-2022-strategy>

Standard Italiani per la cura del Diabete Mellito. Revisione 2021 e successive integrazioni a cura di Associazione Medici Diabetologi (AMD) e Società Italiana Diabetologia (SID).

Linee guida GINA (Global Initiative on Asthma) Revisione del 2022 <https://ginasthma.org>

#### Optional bibliography:

Linee Guida per il trattamento della dipendenza da tabacco. Revisione del 2020 a cura di Società Italiana di Tabaccologia (SITAB). [http://www.tabaccologia.it/PDF/2020\\_italian%20guidelines.pdf](http://www.tabaccologia.it/PDF/2020_italian%20guidelines.pdf)

During the course of the lessons, further bibliographic material may be provided by the teachers on the basis of the needs that have emerged and the topics covered.

### 4. learning objectives

### **Conoscenza e capacità di comprensione - Knowledge and understanding (Dublino 1)**

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

- a) etiology, pathophysiology, symptoms, complications, prognosis of the person with internal medicine pathology and with main pathologies and/or disabilities of cardiological interest;
- b) diagnostic-therapeutic-assistance path in people with internal medicine and cardiological pathologies;
- c) electrocardiography and blood gas analysis.

### **Conoscenza e capacità di comprensione applicate – Applying knowledge and understanding (Dublino 2)**

At the end of the course the student will be able, on the basis of appropriate knowledge, to interpret data and information, connected to problematic situations, relating to:

- a) elements that define the clinical stability of the assisted persons who find themselves in critical internal and cardiological situations;
- b) results of values of the hemodynamic and cardiological monitoring and evaluation systems, in the different pathological frameworks in the internal medicine and cardiology area;
- c) reading and first interpretation of the electrocardiogram (ECG) and blood gas analysis (EGA).

### **Autonomia di giudizio - Making judgements (Dublino 3)**

At the end of the course the student will be able to analyze and evaluate, following an appropriate reasoning, problematic topics and situations with particular reference to:

- a) situations that characterize the professional exercise of a nurse in terms of clinical-deontological responsibility in the internal medicine and cardiology area;
- b) application of diagnostic reasoning in planning a standard care path or planning a personalized care path, aimed at the person affected by the main pathologies of internal medicine and cardiology, referring to the latest scientific evidence and the needs of the assisted person.

### **Abilità comunicative– Communication skills (Dublino 4)**

- a) At the end of the course the student will be able to answer specific questions and discuss emblematic topics:
- b) a) using the correct terminology and syntax, both in written and oral form
- c) b) expressing himself in a clear, understandable way adapted to the type of interlocutor and his receptive and interpretative abilities

### **Capacità di apprendere– Learning skills (Dublino 5)**

- a) At the end of the course the student will be able to self-assess his/her learning skills in relation to the teaching topics:
- b) a) identifying, on the basis of his intellectual performance and the feedback provided by the teachers, any need for cognitive or methodological compensation/integration;
- c) b) autonomously using the information sources available to address these needs.

## **5. PREREQUISITES**

They are defined in the Student Guide and refer to the study plan.

## **6. Teaching methods**

- a) interactive frontal lessons through the use of slide shows, images and videos;
- b) discussion and analysis of emblematic clinical-assistance cases, group work (which favors the development of critical thinking, decision-making, self-learning skills and group cooperation). For these activities, remote consultancy from the teacher is provided (if requested by the student);
- c) use of technology for learning: learning module and wiki;
- d) reading and interpretation exercises of the most common ECG findings through work in small groups and self-evaluation cases
- e) reading and interpretation exercises of the most common EGA findings through work in small groups and self-assessment cases

Teaching is conducted through the use of an institutional platform.

## 7. other informations

In relation to the objectives and contents of the modules, the field of "cardiopulmonary resuscitation" is deepened with the teaching "Professional Laboratories" (ITOLB2 discipline -1CFU/12hours/year), in particular in the "BLSD" laboratory (6hours/student ) (2nd year-2nd semester).

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 exam. Students with an evaluation equal to or higher than 18/30 for each single module will be admitted to the oral exam. Students with one or two slight failings (16 or 17/30) may be admitted to the oral exam sub condizione (Passing the exam is conditioned by the positive outcome of the oral exam). Students with one or more failing marks ( 15/30) will not be admitted to the oral exam. Passing the oral test is mandatory for all admitted students. The final evaluation of the exam will be expressed out of thirty. Passing the exam requires a minimum grade of 18/30. The student will be able to obtain the maximum grade of 30/30 if the weighted average is at least 29.5/30.

The exam will be conducted in presence and through the use of an institutional platform.

## 9. program

**Internal Medicine.** Semeiotics and methodology: hints of clinical method (objective examination, medical history); general concepts on diagnostic procedures (colonoscopy, rectoscopy, gastroscopy). Signs and symptoms of internal medicine pathologies (in particular on thoracic and abdominal pathologies). Kidney and urinary tract diseases: renal syndromes, acute and chronic renal failure, urinary tract infections. Fluid and electrolyte disturbances. Diseases of the cardiovascular system: arterial hypertension, venous thromboembolic disease (deep vein thrombosis and pulmonary thromboembolism), shock. Diseases of the respiratory system: acute and chronic respiratory failure, obstructive diseases (chronic obstructive pulmonary disease and asthma); restrictive diseases; diseases of the pleura. Acid-base balance; blood gas analysis; hints of oxygen therapy. Diseases of the digestive system: gastrointestinal bleeding; acute and chronic liver failure; complications of liver cirrhosis. Metabolic diseases: Type 1 and type 2 diabetes mellitus. Acute (diabetic ketoacidosis, hyperosmolar coma) and chronic complications of diabetes mellitus. Dyslipidemias. Interrelationships between organs.

**Cardiology.** hints of clinical method (physical examination, cardiological history); symptoms of cardiac origin (with particular attention to chest pain and cardiac dyspnoea). Instrumental examinations of cardiological interest (ECG, chest x-ray, echocardiography, ergometric test, coronarography). Cardiovascular risk factors. Stable ischemic heart disease. ACS. Complications of heart attack. Heart failure. Arrhythmias and heart blocks. Mitral valve disease. Aortic valve disease. Aortic dissection. Endocarditis. Myocarditis. Pericarditis. Main drugs for cardiological use.

**Medical clinic nursing.** Clinical, technical, relational, educational aspects of the care pathway of the person affected by ACS, heart rhythm disorders, heart failure, arterial hypertension, thromboembolic disease, COPD, bronchial asthma, renal failure, liver failure, type 1 and type 2 diabetes mellitus; specifically, the following will be considered: assessment of care priorities in relation to clinical stability/instability and the diagnostic-therapeutic path; monitoring aimed at preventing complications, nutritional aspects. Assistance procedures and protocols relating to: cardioversion and electrical defibrillation, pacemaker implantation (temporary, definitive, implantable defibrillator); exploratory puncture (paracentesis, thoracentesis, pericardiocentesis, liver biopsy, renal biopsy). Therapeutic education in chronicity and in smoking addiction: compliance, adherence and empowerment. Importance of supporting the assisted person's capacity for self-care and self-determination in the management of chronicity, involving the Caregiver in the care pathway.

Facilitate the use of clinical judgment in taking care of assisted persons in order to enable them to deal with their health problem, maintaining or improving their quality of life as far as possible, until death.

Adherence detection methods and analysis of related factors. Educational diagnosis: principles, methods and tools.