MED 2006 - Neuro-Psychiatric Disorders

Course Name	Code	Semester	Type of course	Theory (hours)	Work in Group (hours)	ECTS
Neuro-Psychiatric Disorders	MED 2006	IV	Mandatory	25	46	5

Faculty, the educational program and education level	Medical Faculty, one-cycle Educational Program "Medicine"
Author (s)	**Nino Naneisvili** –invited teacher, Doctor of Medicine mob.tel: 599370007 e-mail: naneish@yahoo.com Consultation day – individually, according to the agreement
Educational course format	Lecture Work in Group
Educational course Loading	**Total:** 150 hours **Contact hours:** 75 h, among them 1. Lecture – 25 h 2. Team work – 46 h 3. Midterms – 2 h 4. Final exam -2 h **Independent work** – 75 h
Prerequisites	MED 1001, MED 1006
The purpose (s) of tutorial course/modules	The aim of the learning course is to study central and periphery nervous system main diseases and mental health pathophysiology, clinical basis of therapeutic and rehabilitation methods and approaches to these disorders.
Teaching and learning methods	**Lecture - Face-to-Face;** Lecture notes and readings (power point slides for the lecture) **Demonstration** –anatomical atlases, models, illustrations, slides and other visual aids; **Discussion** – questions and answers, answers analysis supported with visual aids; **Work in group** on the clinic base : human body neuro-psychiatric disorders clinical picture, diagnosing and treatment methods; **Brief-inquire** -in order to confirm the studied material after completion of each theoretical stage use short questions and answers.
Assessment criteria	**Maximum score- 100:**

Midterm assessment -60

    Attendance -**10 scores** (0.4X25=10 scores);

    Activity in group – **10 scores**

    Discussions – **10 scores**

    Brief-inquire (10 X 1 =10 **scores**);

Midterm Exam – 20 scores

Group Work Assessment Based on the Following Criteria (maximum 10 point)

10 scores - Student has been able to present complete and thorough knowledge of the subject, a substantial amount of detailed and relevant information. Demonstrate considerable depth of understanding of the studied main and additional literature. Bring forward a balanced view of the main arguments on the issues.

9 scores - Student has been able to bring forward a consistent number of deductions on most of the topics tackled. make very good comments on the different perspectives on most of the issues. Demonstrates knowledge of the main readers.

8 scores - Student has been able to bring forward a consistent knowledge, Has properly developed terminology. Demonstrates knowledge of the main readers.

7 scores - Student has been able to present some factual information sufficiently linked with the topic. demonstrate a good understanding of the topics selected. make a good attempt to bring forward a balanced view of some arguments on the issues. Terminology is partially developed.

6 scores - Student has been able to make some good comments on the different perspectives on some of the issues. Make poor deductions on most of the topics tackled. analyse some causes and results of human interactivity related to the issues.

5 scores - Student has been able to demonstrate inconsistent comments on the different perspectives on some of the issues. Terminology is partially developed. Present mediocre level of knowledge. Make poor deductions.

4 scores - Student demonstrates general overview of the topics. Terminology is not developed. Information sufficiently linked with the topic. Demonstrate irrelevant understanding of the literature.

3 scores – Student demonstrates general/superficial and inconsistent knowledge of the subject. No sufficient knowledge of the literature.

2 scores - Student demonstrates general comments, no knowledge of the terminology, no consistency.

1 score – Student demonstrates insufficient answer, not terminology awareness, chronologic manner of the answer, mostly wrong, no knowledge of literature.

0 scores: Student demonstrates not even elementary knowledge of the topics.

Discussion – grading criteria (maximum 10 scores)

- Critical thinking- 2 sc;
- Culture of debates - 2 sc;
- Argumentativeness - 2 sc;
- Time management - 2 sc;
- Academic and visual side of the presented material - 2 sc.

Brief –inquire – grading criteria (maximum 1 score)

  -1 sc – gives full and argumentive answers;

	-0,5 sc – gives incomplete answers; -0 sc – gives no answers. **Midterm Exam** is held in combined form: the written test – 15 questions, each question is rated as 1 score – max. 15 scores; verbal – 5 questions, each question is rated as 1 score. Minimal score of midterm assessment (for final exam) – is 11; to take in account that student will receive the maximum score at the final exam. **Final Exam -40** Is held in the written test form (test consists of 80 questions, each question is rated as 0.5 scores). Students have to score equal or more than 70% from final exam maximum score (40X70/100=28 maximum 28 scores from the overall 40) to pass the final examination. Credit will be given to the student if he has collected at minimum 51 scores out of 100. The students' assessment has to be done in the following way: Positive rate: • (A) Excellent- 91 or more scores; • (B) Very Good- 81-90 scores ; • (C) Good- 71-80 scores; • (D) Satisfactory- 61-70 scores ; • (E) Enough- 51-60 scores; Negative rate: • (FX) Failure - 41-50 scores, which means that a student needs to work more and an independent and considerable further work is required to pass the exam once again to be re-awarded; • (F) Fail - 40 scores or less, which means that the student's diligence is not sufficient and student has to learn the subject all over again. The student can pass the additional exam during the same semester. The time interval between the final and the additional exams should be not less than 10 days.
The basic literature	1. Edited by: Robert B.Daroff, Gerald M.Fenichel, Joseph Jancovic, John C.Mazziotta **Bradley's Neurology in Clinical Practice** (Volume I-II) Principles of Diagnosis and Management, Elsevier Saunders, 2012
The auxiliary literature	**Neurology/Psychiatry** 1. Paul Harrison, John Gedde, Michael Sharpe – Lecture. Notes. Psychiatry. Blackwell Publisher. IX. 2055 2. Edited by: Stephen L. Hauser Harrison's Neurology in Clinical Medicine McGrawHill MedicalPublishers Division, 2006 3. Edited by:Allan Tasman, Jerald Kay, Jeffrey A.Lieberman, Michael B.First, Mario Maj Psychiatry Volume I, Volume II. Willey. 2008 **Anatomy** 1. Keith L.Moore, Arthur F.Dalley. Anne M.R.Agur -Clinically Oriented Anatomy, Wolters Cluwer Health Lippincott Williams&Wilkins, 2008; (nervous system structure) (p.46-57) 2. Michail Schuenke, Erik Schulte, Udo Schumacher -Atlas of Anatomy (Neck and Internal Organs), Thieme, 2006 3. Richard S. Snell - Clinical Anatomy (An Illustrated review with Questions and explanations, Lippincott Williams&Wilkins, 2003; Chapter

	4. Richard L.Drake, A.Wayne Vogl, Adam W.M.Mitchel, Richard Tibbitts, Paul Richardson-Cray's Atlas of Anatomy, Churchill Livingstone Elsevier, 2008

The tutorial/training course content

№	Subjects	Lecture (hour)	Work in group (hour)
1	Basic pathology of CNS, CNS pharmacology, basics of neuroradiology and imaging techniques, pathophysiology, clinical features and management of pain and headache, physical neuro-rehabilitation, neurological aspects of common eye, ear-nose-throat disease	5	10
2	Clinical features of psychiatric disorders and pharmacology of drugs used in these disorders, disorders of cognition and epileptic disorders of childhood and adults and pharmacological basis of their treatment	5	10
3	Pathology, pathophysiology, radiology and clinical basis of infectious, vascular, toxic-metabolic, traumatic, demyelinating, developmental, degenerative and neoplastic diseases of the nervous system; medical and surgical approaches to these disorders	5	8
	Midterm Exam		2
4	Central and peripheral organization, clinics, phenomenology, pharmacology and treatment of motor disorders, clinical, radiological, pathological aspects of rheumatologic disorders, medical pharmacology of anti-inflammatory drugs	5	10
5	Clinical aspects and medical and surgical treatments of orthopaedic and traumatological disorders (motor) disorders) of musculoskeletal system with radiology, pharmacology and principles of physical rehabilitation of these disorders	5	8
	Final Exam		2

Learning Outcomes

Criteria	Competences
Knowledge and Understanding	After the completion of the learning course the students will have a deep and systematic knowledge in the field of pathophysiology of nervous system disorders and treatment methods. Students will be able to: • describe the basic pathophysiological mechanisms of neurological disorders and interpret sign and symptoms related with these disorders; • identify the macroscopic and microscopic characteristics of central and

	peripheral nervous system disorders, • describe the symptoms and signs of cognitive and psychiatric disorders; • explain the pharmacological characteristics and clinical indications of drugs used in neurological and psychiatric disorders; • explain the principles of clinical and radiological diagnosis, differential diagnosis, and basic therapeutic approaches; • name the microorganisms that affect the nervous system; describe pathology of nervous system infections; • describe prevention of nervous system disorders
Applying knowledge	Student will be able to apply theoretical knowledge in practice and diagnose neuromotor and psychiatric mental problems. Student will be able to: • assess the risk factors of nervous diseases; • define the macroscopic and microscopic characteristics of central and peripheral nervous system; • define the basic pathophysiological mechanisms of neurological disorders (cerebrovascular disorders, epilepsy, demyelinating disorders, muscle disorders, neuromuscular junction disorders, headache and pain syndromes extrapyramidal system disorders) and explain the signs and symptoms of their clinical presentations; • describe the symptoms and signs of cognitive and psychiatric disorders, and diagnostic such as anxiety and mood disorders as depression, somatoform disorders and schizophrenia; • clinical and radiology diagnostic; • describe and evaluate the results obtained by CT, MRT, UZI, X-Ray methods; • plan and provide the preventive methods; • develop therapeutic and rehabilitation approaches.
Making Judgments	On the base of clinical and diagnostic data to set the initial and final diagnosis, estimate status of the diseases and chose the proper treatment course.
Communication Skills	Student will have clinical way of thinking, critical analyze of the incomplete and contradictory evidence information, provide evidence-based diagnose. Students will have proper communication with colleges of this and relative specialty.
Learning skills	Student will be able to use the full range of learning and information resources, manage and organize their own learning process, time ranges, chose the proper priorities, to work to deadlines and to perform work. Student will be able to search for and find the needed information from the difference informational sources.