

MED 5001-Neurology

Course Name	Code	Semester	Type of course	Theory (hours)	Group work (hours)	ECTS
Neurology	MED 5001	IX	Mandatory	20	36	4
Faculty, the educational program and education level	Faculty of Medicine, one-cycle Educational Program "Medicine"					
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Teaching and learning strategy	Lecture Work in Group					
Educational course format	<p>Total: 120 hours Contact hours: 60 h, that includes:</p> <ol style="list-style-type: none"> 1. Lecture – 20 h 2. Team work – 36 h 3. Midterms – 2 h 4. Final exam -2 h <p>Independent work – 60 h</p>					
Prerequisites	MED 2006 - Neuro-Psychiatric Disorders					
The purpose (s) of tutorial course/modules	In the end of this course our students will be able to perform a full neurological examination, to evaluate neurological symptoms and signs, to plan the right treatment approach for the patients and to learn how to use this knowledge for the similar cases.					
Teaching and learning methods	<p>Lecture - Face-to-Face - Direct verbal contact;</p> <p>During work in group will be used "role-playing games" around medical communication, the simulated cases will be played. the important part of this playing games will be devoted to non-verbal communication skills enhancement, including the study of body language and gestures.</p> <p>Brief-inquire -short questions and answers;</p>					
Assessment criteria	<p>Maximum score – 100 scores</p> <ol style="list-style-type: none"> 1. Midterm assessment – 60 scores, that includes: <ol style="list-style-type: none"> 1.1. Attendance – 10 scores; 1.2. Activity – 30 score; 1.2.1. Practical skills – 20 scores; 1.2.2. Brief-inquire - 5 score; 1.2.3. Medical history taking– 5 scores; 					

	<p style="text-align: center;">1.3 Midterm exam – 20 scores</p> <p>Medical History Taking – max 5 scores</p> <p>5 scores - the task is understood properly, medical history component, clinical picture and diagnostics data, diagnosing and the treatment scheme is adequate and all the steps are described in consequential order; list of drugs is appointed properly with correct name and dozes;</p> <p>4 scores - the task is completely understood, medical history component, clinical picture and diagnostics data, diagnosing and the general steps treatment is assembled in consequential order;</p> <p>3 scores -the task is completely understood, but medical history component, clinical picture and diagnostics data, diagnosing and the general steps treatment is assembled in no consequential order;</p> <p>2 scores – the task is not completely understood, medical history component, clinical picture and diagnostics data, diagnosing and the general steps treatment is assembled in no consequential order;</p> <p>1 score – Student demonstrates misunderstanding and no complete skills of medical history taking</p> <p>0 score - Student is not able to complete the task.</p> <p>Brief –inquire – grading criteria (maximum 5 score)</p> <p>-5-4 sc – gives full and argumentive answers;</p> <p>-3-2 sc – gives incomplete answers;</p> <p>-1 -0 sc – gives no answers.</p> <p>1.3. Midterm Exam – 20 scores</p> <p>Written test -20 question, 1 score for each – max. 20);</p> <p>Minimal scores of midterm assessment (for final exam) – is 11.</p> <p>1. Final Exam -40 scores</p> <p>Is held in the written test form (test consists of 40 questions, each question is rated as 1 score). The final exam would accounted as passed in case of maximum 70% or more ($40 \times 70 / 100 = 28$ scores). Credit will be given to the student if he has collected at minimum 51 scores out of 100. Student’s assessment has to be done in the following way: Positive rate:</p> <ul style="list-style-type: none"> • (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; <p>Negative rate:</p> <ul style="list-style-type: none"> • (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. Student can pass the additional exam during the same semester. <p>The time interval between the final and the additional exams should be not less than 10 days.</p>
The basic literature	<p>1. Bradley's Neurology in Clinical Practice (Volume I) Principles of Diagnosis and Management. Edited by: Robert B.Daroff, Gerald M.Fenichel, Joseph Jancovic, John C.Mazziotta. Elsevier Saunders, 6th ed, 2012;</p>

	2. Harrison's Neurology in Clinical Medicine. Edited by: Stephen L. Hauser. McGrawHill MedicalPublishers Division. 2006.
The auxiliary literature	<ol style="list-style-type: none"> 1. Merritt's Neurology, L.P. Rowland, 11th edition, Lippincott Williams & Wilkins, 2005. 2. Neurology and Neurosurgery Illustrated, K.W. Lindsay & I. Bone. 3. Clinical Neurology, Michael J Aminoff, Robert R Simon, David Greenberg Lange Medical Books, sixth edition. 4. Adams and Victor's Principles of Neurology 10th Edition Adams and Vectors Principles of Neurology

The tutorial/training course content

№	Subjects	Lecture (hour)	Work in group (hour)
1	Neurological Examination (Mental Status-, Motor System, Cerebellar & Extrapyrmidal System, Sensorial System, Cranial Nerves),	4	6
2	Visual Loss, Diplopia and Eye Movements, Ataxia	2	4
3	Cerebrovascular Diseases, Language Disorders. Mechanisms of neurological diseases, vertigo	4	6
	Midterm		2
4	Neuromuscular junction disorders, muscular diseases, peripheral neuropathies,	2	6
5	Degenerative diseases of spinal cord, coma, extrapyramidal system disorders, sleep disorders.	2	6
6	Epilepsy, Status epilepticus,	4	4
7	Dementia; Multiple sclerosis and other CNS demyelinating disorders, CNS infections	2	4
	Final Exam		2

Learning Outcomes

Criteria	Competences

Knowledge and understanding	<p>Students will be able:</p> <ul style="list-style-type: none"> - To conduct neurological examination proceedings; make neurological diseases diagnostics, especially in emergencies diagnosis, differential diagnosis and treatment of the basic principles of the study.
Applying knowledge	<p>Qualified students can conduct a neurological examination; Assess patients and prescribe the necessary research plan.</p> <p>Based on the information the student can draw the conclusions.</p>
Making Judgement	<p>Student is able analyze the received information</p>
Life-long learning ability	<p>The student has the ability to independently pursue his studies and to the time management.</p>