MED 5018 – Cardiologic Emergency

Course Name	Code	Semester	Type of course	Theory (hours)	Group work (hours)	ECTS		
Cardiologic Emergency	MED 5018	X	Elective	15	26	3		
Faculty, the educational program and education level	Faculty of Medicine, one-cycle Educational Program "Medicine"							
Author (s)	Ismet Dindar –Professor, Doctor of MedicineMob.tel.: 532 2 41 42 66; e-mail: ismetdindar@hotmail.comErgun Demirsoy- Assistent Professor, Doctor of MedicineMob.tel.: 05334268308; e-mail: ergundemirsoy@hotmail.comIoseb Sikharulidze – invited teacherMob.tel.: (995) 577137363; e-mail: iosebii@yahoo.comMarine Mishvelidze – invited teacherMob.tel.: 577 137420; e-mail: m.mishvelidze@gmail.comConsultation day and time - individually							
Educational course format	Lecture Group Work							
Educational course Loading	Total: 90 hours Contact hours: 45 h, that includes: 1. Lecture – 15 h 2. Team work – 26h 3. Midterms – 2 h 4. Final exam -2 h Independent work – 45 h							
Prerequisites	MED 2007							
The purpose (s) of tutorial course/modules	At the end of this committee patients should learn more about the definition, diagnosis and management of cardiac emergencies; first aid measures in cardiology.							
Teaching and learning methods	Lecture-verbal method, Explanation, demonstration: visual presentation of the information (pictures, diagrams, slideshow, video); Curation – will be carried out in the clinical environment. Thematic patients will be demonstrated and theoretical material will be interpreted through the practical cases. Analysis and synthesis – interpretation, classification and evaluation of the data; in order to learn the new material the complex processes will be broken into small components and the realized separately; further they will be presented not as the separated pathologic processes, but as the components comprising the united homeostasis of the organism and perceived in unity. Also, in order to develop the clinical skills the following concrete practical work will be carried out							

	under the supervision of the teacher-to collect anamnesis, examine the patient, take the patient					
	history, duty hours;					
	Asking questions – the students will be evaluated through oral checking of the current theoretical material by asking questions in the frames of the material already covered that will help to					
	develop the skill of linking the covered and the current materials and make proper analysis; Role Play – the students must present the simulated situation by playing the patient-doctor roles;					
	Student's knowledge is assessed based on the 100-score system,out of which 60 scores are addressed					
	to the mid-term evaluations, and 40 scores are allocated for the final exam.					
	Mid-term assessment components:					
	Clinical skills- 10 scores;					
	Medical documentation processing - 10 scores;					
	• Role play - 10 scores;					
	• Duty in clinic - 10 scores;					
	• Mid-term exam - 20 scores;					
	Assessment of clinical skills - max 10 scores					
	1. Relevance of the main clinical skills and theoretical knowledge, surfing the additional					
	information around the topic independently-1 score;					
	2. Accurate consistency of performing manipulation-1 score;					
	3. The skills of interpretation of clinical results-1 score;					
	4. Patient and own security-1 score;					
	5. Kills of communication with the patient-1 score;					
	6. The skills of defending the principles of deontology and ethics-1 score;					
	7. The skills of analytical thinking around the diagnosis. Carrying differential diagnosis.					
	Projecting the relevant plan of treatment-1 score;					
Assessment criteria	8. The skills of quick orientation in the limited time period-1 score;					
	9. The skills of management of the emergency help situation-1 score;					
	10. The skills of receiving the informative consent from the patient and the procedure					
	preparation- 1 score;					
	Evaluation of processing of the medical documentation-max. 10 scores					
	• 9-10 scores-The task is understood and analysed correctly. Anamnesis if collected					
	completely. The history is filled out consistently; all components in it are described in a					
	detailed way with the correct terminology; examination plan is complete; diagnosis					
	formulated correctly, the treatment diagram is adequate and includes the names of the					
	medicines with the correct names and dosages.					
	• 7-8 scores-The task is cunderstood correctly, anamnesis collected, all components					
	consistently presented and described with proper terminology, examination plan is					
	complete, the diagnosis is formulated accurately, treatment plan is adequate, with					
	accurately prescribed medicines.					
	• 5-6 scores-the idea of the task is understood. Anamnesis is complete. The history					
	contains all components, but is inconsistent with incorrect terminology. Examination					
	plan is incomplete; the diagnosis is relevant to the clinical data, but is not completely					
	formulated. Treatment scheme is adequate and includes the complete list of medicines;					
	 3-4 scores – the task is partially understood, the history components are incomplete 					
	and the max is partially understood, the instory components are incomplete					

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	and inconsistent; the diagnosis is in compliance with the symptom complex, but is not	
	supported; treatment plan is adequate, medicine list is not completed;	
	 1-2 scores-the task is understood incorrectly. The history is presented within the scheme; 	
	• 0 score – the task is not fulfilled;	
	Role play with criterion (max 10 scores):	
	1. The accuracy of the imitated situation and the logical chronology of the action during the role	
	play-4 scores;	
	2. The skills of knowledge appliance in practice- 4 scores;	
	3. Time management- 2 scores;	
	Mid-term exam - 20 scores;	
	Mid-term exam is a test, which is comprised of 40 questions each one rates 0.5 scores.	
	The student is allowed to pass the final exam, if he accumulates not less than 11 points for the mid-	
	term evaluations.	
	Final exam - 40 scores	
	Final exam is a combination of tests -30 scores (the test includes 60 closed questions, each one rates	
	0.5 scores) and the evaluation of clinical skills-max. 10 scores.	
	The final exam is considered to be passed if the student accumulates at least 70% or more out of the	
	maximum assessment of the exam (40X70/100=28 scores).	
	Credit will be awarded if the student accumulates at least 51 scores out of 100 scores;	
	Positive assessments:	
	• (A) Excellent - 91scores and more;	
	• (B) Very good - 81-90scores;	
	• (C) Good - 71-80 scores;	
	• (D) Satisfactory - 61-70 scores;	
	• (E) Enough - 51-60 scores;	
	Negative assessments:	
	• (FX) didn't pass - 41-50 scores that means that student needs more work and is allowed to pass one additional exam;	
	• (F) Failed – 40 scores or less that means that the student did not perform enough and has to take the course again.	
	The student has the right to pass an examination in the same semester.	
	The interval between the final and additional exams should not be less than 10 days.	
The basic literature	 Cardiovascular Medicine Practice and Management. Edited by: Richard C. Becker & Joseph S. Alpert. Arnold. 2001; Ince H, Nienaber CA. Diagnosis and management of patients with aortic dissection. Heart. 2007; 3. Thygesen K et al. Third universal definition of myocardial infarction. Eur Heart J. 2012; 	
The auxiliary literature	 Braunwald's Heart Disease, Saunders, 2008; Gallagher S, Jones DA, Anand V, Mohiddin S. Diagnosis and management of patients with acute cardiac symptoms, troponin elevation and culprit-free angiograms. Heart. 2012; Sechtem U, Achenbach S, Friedrich M, Wackers F, Zamorano JL. Non-invasive imaging in acute chest pain syndromes. Eur Heart J Cardiovascular Imaging. 2012; Aikat S, Ghaffari S. A review of pericardial diseases: clinical, ECG and hemodynamic features and management. Cleve Clin J Med. 2000; 	

The tutorial/training course content

Nº	Subjects	Lecture (hour)	Work in group (hour)
1	Cardiac emergencies' definition		4
2	Acute coronary syndromes		3
3	Hypertensive emergencies		3
4	Acute pericardial diseases; diagnosis and treatment	1	3
	Midterm exam		2
5	Acute Aortic syndromes, acute limb ischemia; diagnosis-treatment		3
6	Pulmonary thromboembolism; diagnosis-treatment		3
7	Emergency approach to tachycardia		4
8	Emergency approach to bradycardia	2	3
	Final Exam		2

Learning Outcomes

Criteria	Competences	
Knowledge and Understanding	After completion of the course the student will have a deep and thorough knowledge about cardiologic emergency	
Applying knowledge	 Student is able to : receive patients in the clinic in quick and mobilized manner; perform the non-invasive tests in the diagnosis of cardiac emergencies planning the laboratory and instrumental investigation; working out the treatment tactics; manage the cardiac emergencies' cases 	
Communication Skills	Student can manage the different form of academic and scientific information from different sources (classic and electronic library, the Internet) to work fast and look for the relevant information effectively. These found materials has to be planned, processed, analyzed, and to make the best use for the report with the proper conclusions as in in writing, as well as in verbal form. Student can working in group, has watching, listening, summarizing, asking and answering questions abilities, is able to participate in the discussion. During the education process the professional and friendly relationship has to be formed with the older (professors / teachers) and younger (this and other groups students) colleagues, communication with any person regardless of their social, cultural religious or ethnic affiliation.	