2017/2018

Univerza v Mariboru

Medicinska fakulteta

UČNI NAČRT PREDMETA / SUBJECT SPECIFICATION	
Predmet:	Interna medicina s propedevtiko
Subject Title:	Internal Medicine and Propedeutics

Študijski program **Study program**	**Študijska smer** **Study field**	**Letnik** **Year**	**Semester** **Semester**
Splošna medicina – EMŠP General medicine	Splošna medicina General medicine	3.	5,6

Univerzitetna koda predmeta / University subject code:

Predavanja Lectures	Seminarji Seminars	Sem. vaje Tutorials	Klin. vaje Clin. work	Teren. vaje Field. work	Samost. Delo Individ. work	ECTS
60	152		73		315	20

Nosilec predmeta / Lecturer:

Red. prof. dr. Ivan Krajnc
Red. prof. dr. Breda Pečovnik Balon (sonosilka)
Red. prof. dr. Radovan Hojs (sonosilec)

Jeziki / **Languages:**	**Predavanja / Lecture:**	Slovenski / Slovene
	Vaje / Tutorial:	Slovenski / Slovene

Pogoji za vključitev v delo oz. za opravljanje študijskih obveznosti:

Prerequisites:

Vsebina:

V sklopu PROPEDEVTIKE mora študent obvladati:

- Osnovne metode klinične preiskave: inspekcija, palpacija, perkusija, avskultacija.
- Anamnezo: družinska, dosedanje bolezni, sedanja bolezen, socialna anamneza.
- Seznani naj se z diagnostičnimi metodami in razume njihov pomen: arterijska punkcija, UZ, endoskopija, ledvična ali jetrna biopsija, plevralna punkcija, pregled urinskega sedimenta, pregled krvne slike, scintigrafske preiskave, abdominalna punkcija, venepunkcija, RTG pregled, CT pregled, MRI, alergijski testi, bronhoskopija, katetrizacija srca, EKG, obremenilni testi za srce, Holter monitoring, punkcija sklepov, pljučni funkcijski testi, dializa.
- Obvlada naj terapevtske veščine: dajanje insulina, katetrizacija sečnega mehurja, masaža srca, nastavljanje i.v. katetrov, umetno dihanje, vstavljanje nazogastrične sonde, subkutane in intramuskularne injekcije.
- Dijete.
- Priporočila bolnikom o življenjskem stilu.
- Komuniciranje.

V sklopu INTERNE MEDICINE mora študent obvladati

Contents (Syllabus outline):

Within the field of PROPEDEUTICS the student must be fully acquainted with

- Basic methods of clinical examination: inspection, palpation, percussion, auscultation
- History taking: family history, history of past and present disease, social history.
- Diagnostic methods and understanding of their role: arterial puncture, ultrasound, endoscopy, renal or liver biopsy, pleural puncture, examination of urine sediment and peripheral blood, scintigraphy, abdominal puncture, venipuncture, x-ray, CT, MRI, allergy tests, bronchoscopy, cardiac catheterization, ECG, exercise tests, Holter monitoring, joint puncture, pulmonary function tests, dialysis.
- Be able to safely perform therapeutic actions: insulin application, catheterization of urinary bladder, cardiac massage, application of IV catheters, artificial respiration, nasogastric tube insertion, subcutaneous and intramuscular injections.
- Dietary measures.
- Recommendations regarding life style.
- Communication.

Within the field of INTERNAL MEDICINE the student must be fully acquainted with

- Cardiac and vascular diseases: angina pectoris, aortic

- Bolezni srca in ožilja: angina pektoris, bolezni aorte, atrijska fibrilacija, atrijska undulacija, AV prevodne motnje, aortna anevrizma, kardiomiopatija, endokarditis, srčna odpoved, miokardni infarkt, mitralna insuficienca, mitralna stenoza, miokarditis, perikarditis, sinusna tahikardija, ekstrasistole, supraventrikularna tahikardija, ventrikularna fibrilacija, kardiogeni, hipovolemični, septični šok, globoka venska tromboza, hipertenzija, ateroskleroza.
- Pljučne bolezni: astma, akutni bronhitis, alergične pljučne bolezni, bronhiektazije, kronični bronhitis, empiem, intersticijske pljučne bolezni, pljučni absces, pljučni karcinom, emfizem pljuč, pljučna fibroza, pljučni infarkt, plevritis, pljučnica, pnevmotorax, pljučni embolizmi, respiratorna insuficienca, kronično pljučno srce, bolezni plevre, tuberkolozni plevritis, transudati, tumorji plevre, hemotoraks, bolezni mediastinuma.
- Gastrointestinalne bolezni: ahalazija, akutni abdomen, akutni apendicitis, karcinoid, karcinom požiralnika, karcinom želodca, divertikuloza črevesja, krvavitev iz gastrointestinalnega trakta, gastritis, gastroenterokolitis, hemeroidi, Mallory-Weiss sindrom, varice požiralnika, peptični ulkus, peritonitis, polipi kolona, vnetne bolezni črevesja, zaprtje, kolorektalni karcinom, gastrointestinalni hormoni.
- Bolezni jeter, žolčnika, trebušne slinavke: alkoholni hepatitis, Budd-Chiari sindrom, malignom žolčnika in trebušne slinavke, žolčni kamni, kronični hepatitis, ciroza jeter, infekcijski hepatitis, vnetje trebušne slinavke, portalna hipertenzija, primarni karcinom jeter.
- Bolezni ledvic: motnje v kislinsko baznem ravnotežju, motnje v presnovi kalija, akutni glomerulonefritis, akutna ledvična odpoved, karcinom mehurja, kronični glomerulonefritis, kronična ledvična odpoved, Goodpasture sindrom, ledvice in hipertenzija, intersticijski nefritis, nefrotski sindrom, cistične in prirojene bolezni ledvic, vnetja v predelu sečil, sečni kamni, nadomestno zdravljenje, nosečnost in ledvica, zdravila in ledvica.
- Hematološke bolezni: laboratorijske preiskave v hematologiji, bolezni matične krvne celice, transplantacija kostnega mozga, anemije, fiziološke spremembe levkocitov, akutne levkemije, mielodisplastični sindromi, kronične mieloproliferativne bolezni, maligni limfomi, bolezni vranice, fiziologija in patofiziologija hemostaze, trombocitopenije, motnje koagulacije, tromboza.
- Avtoimune in revmatološke bolezni: imunski

diseases, atrial fibrillation, atrial flutter, AV conduction disturbances, aortic aneurysm, cardiomyopathy, endocarditis, heart failure, myocardial infarction, mitral stenosis and regurgitation, myocarditis, pericarditis, sinus tachycardia, extrasystoles, supraventricular tachycardia, ventricular fibrillation, cardiogenic, hypovolemic, septic shock, deep venous thrombosis, hypertension, atherosclerosis.

- Pulmonary diseases: asthma, acute bronchitis, allergic pulmonary diseases, bronchiectasis, chronic bronchitis, empyema, interstitial pulmonary diseases, pulmonary abscess, pulmonary carcinoma, pulmonary emphysema, pulmonary fibrosis, pulmonary infarction, pleuritis, pneumonia, pneumothorax, pulmonary embolism, respiratory failure, chronic pulmonary heart, pleural diseases, tuberculosis and pleuritis, transudates, tumors of pleura, hemothorax, mediastinal diseases.
- Gastrointestinal diseases: achalasia, acute abdomen, acute appendicitis, carcinoid tumors, esophageal carcinoma, gastric carcinoma, intestinal diverticula, gastrointestinal hemorrhage, gastritis, gastroenteritis, hemorrhoids, Mallory-Weiss syndrome, esophageal varices, peptic ulcer, peritonitis, polyps in colon, inflammatory bowel disease, obstipation, colorectal carcinoma, gastrointestinal hormones.
- Liver, gallbladder and pancreatic diseases: alcoholic hepatitis, Budd-Chiari syndrome, gallbladder and pancreatic malignancies, cholelithiasis, chronic hepatitis, liver cirrhosis, viral hepatitis, pancreatitis, portal hypertension, liver carcinoma.
- Kidney diseases: acid-base balance, disturbances in potassium metabolism, acute glomerulonephritis, acute renal failure, urinary bladder carcinoma, chronic glomerulonephritis, chronic renal failure, Goodpasture syndrome, renal hypertension, interstitial nephritis, nephrotic syndrome, cystic and hereditary kidney diseases, inflammatory kidney diseases, urolithiasis, replacement therapy, pregnancy and the kidney, drugs and the kidney.
- Hematologic diseases: laboratory tests in hematology, stem cell disorders, transplantation of bone marrow, anemia, physiologic changes of leukocytes, acute leukemia, myelodysplastic syndrome, chronic myelodysplastic disorders, lymphoma, splenic diseases, physiology and pathophysiology of hemostasis, thrombocytopenia, coagulopathy, thrombosis.
- Autoimmunity and rheumatic diseases: immune system, arthritis, arthrosis, Bechterew and Behcet's disease, temporal arteritis, gout, rheumatoid arthritis, seronegative spondylarthritis, vasculitis, amyloidosis, metabolic rheumatism, nonsteroid antireumatics and analgesics, corticosteroids, inflammatory arthritis, degenerative joints and vertebral diseases, synovial fluid.
- Diseases of endocrine system: hypothalamic and pituitary disorders, adrenal gland cortex dysfunction, pheochromocytoma, Cushing syndrome, primary hypoaldosteronism, goiter, other thyroid diseases, diabetes mellitus, hypoglycemia,

sistem, artritis, artroza, Bechterewa bolezen, Behcetova bolezen, temporalni arteritis, giht, revmatoidni artritis, seronegativni spondilartritisi, sistemske vezivnotkivne bolezni, vaskulitisi, amiloidoza, metabolni revmatizem, nesteroidni antirevmatiki in analgetiki, kortikosteroidi, infekcijski artritisi, degenerativne bolezni sklepov in hrbtenice, sinovijska tekočina. • Endokrinološke bolezni: bolezni hipotalamusa in hipofize, insuficienca skorje nadledvične žleze, feokromocitom, Cushingov sindrom, primarni hipoaldosteronizem, golša in druge bolezni ščitnice, sladkorna bolezen, hipoglikemija, gastrointestinalni hormoni, hiperlipoproteinemija, porfirija, multipli endokrini sindrom, metabolne bolezni kosti, denzitometrija, bolezni obščitnic, osteoporoza, osteomalacija, Pagetova bolezen. • Prehrano: debelost, anoreksija nervoza, parenteralna prehrana, vitamini. • Anafilaktično reakcijo. • Zastrupitve. • Oživljanje. • Šok.	gastrointestinal hormones, hyperlipoproteinemia, porphyria, multiple endocrine syndrome, metabolic bone disease, densitometry, parathyroid gland diseases, osteoporosis, osteomalacia, Paget's disease. • Dietary measures: obesity, anorexia nervosa, parenteral nutrition, vitamins. • Anaphylaxis. • Poisoning. • Resuscitation. • Shock.

Temeljni literatura in viri / Textbooks:

1. A. Kocijančič: Klinična preiskava. Ljubljana: Littera picta, 2000.
2. J. Thomas, T. Monaghan (eds): Oxford Handbook of Clinical Examination and Practical Skills. Oxford: Oxford University Press, 2007.
3. M. Košnik et al (eds): Interna medicina. Ljubljana: Littera picta, 2011.
4. D. Longo et al (eds): Harrison's Principles of Internal Medicine, 18th edition. New York: McGraw-Hill, 2011.
5. PJ. Kumar, ML. Clark (eds): Clinical Medicine, 7th edition. Edinburgh: Saunders Elsevier, 2009.

Cilji:	**Objectives:**
Cilj tega predmeta je pripraviti študente na samostojno delo z internističnimi bolniki.	This course objective is to prepare students for independent work with internal medicine patients.

Predvideni študijski rezultati:	**Intended learning outcomes:**
Znanje in razumevanje: Študent bo praktično osvojil veščine jemanja anamneze in izvedbe kliničnega pregleda preden bo pristopil k bolniku. Ustrezen nivo obvladanja teh veščin bo zagotovljen z uporabo objektivnega strukturiranega kliničnega izpita. Klinične veščine bo s praktičnim delom na oddelkih ustrezno nadgradil, tako da bo po zaključku tega predmeta sposoben samostojno in varno pristopiti k bolniku, obvladal bo odnos z njim in svojci, znal bo vzeti anamnezo, pregledati bolnika ter ovrednotiti diagnostične metode. Študent osvoji veščine citiranja po Vancouverskem stilu, razvija veščine javnega nastopanja in argumentiranja ter kritičnega vrednotenja literature. Prenesljive/ključne spretnosti in drugi atributi: Študent se bo naučil tudi praktičnih opravil, ki so potrebna pri delu z bolniki: jemanje krvi, dajanje injekcij, snemanje EKG, opravljanje punkcij, kateterizacija mehurja, pisanje receptov.	Knowledge and Understanding: Student will practically acquire history taking and patient examination skills before approaching the patient. Appropriate competence level will be determined by using objective structured clinical examination. By upgrading these skills with practical work in the ward, the student will be able to approach the patient independently and safely, communicate effectively with the patient and his family members, take the history and examine the patient, and evaluate the diagnostic methods to be applied. Student is able to apply Vancouver style of citations, develops presentation and argumentation skills, as well as critical appraisal of literature. Transferable/Key Skills and other attributes: The student will also acquire the necessary practical knowledge: withdrawing of blood, giving injections, ECG recording, performing of punctures and bladder catheterization, making out prescriptions.

Metode poučevanja in učenja:	**Learning and teaching methods:**
• Predavanja. (50% obvezna prisotnost) • Vaje in simulacije: (80% obvezna prisotnost) študentje vadijo jemanje anamneze s pomočjo simulacij, vadijo klinične preglede drug na drugem in šele nato na bolnikih ter trenirajo praktične posege na simulatorjih. V proces poučevanja se aktivno vključujejo tutorji študenti pod nadzorom habilitiranih visokošolskih (so)delavcev. • Seminarji: (80% prisotnost) Ena ura je namenjena podajanju povratne informacije po sprotnih preverjanjih znanja. Seminarji temeljijo na predstavitvah študentov. Vsak študent pripravi vsaj dva seminarja; bodisi kot predavanje, lahko predstavi teorijo na podlagi realnega ali virtualnega primera bolnika ali seminar zapiše v obliki članka in ga tudi predstavi.	• Lectures (50% obligatory attendance) • Work in the wards and simulations: (80% obligatory attendance), students practice history taking and clinical examinations on each other. After achieving competence in these two fields they enter wards and practice on patients. They also train practical procedures on simulators. The teaching process is enriched by peer assisted learning applied under close supervision of faculty members. • Seminars: (80% attendance) One hour is for giving feedback after interim assessments. Seminars are based on student presentations. Each student prepares at least two seminars; either as a lecture, or as the theory on the basis of a real or virtual patient case, or as seminar written in the form of an article which student also presents.

Načini ocenjevanja:	Delež (v %) / Weight (in %)	**Assessment:**
Opravljeni seminarji, klinične vaje in sprotna preverjanja znanja so pogoj za pristop k pisnemu izpitu).		Eligible to enter after completion of seminars, clinical work and interim assessments).
• Pisni izpit	**50 %**	• Final written examination
• Ustni izpit (pogoj za pristop: opravljen pisni izpit).	**50 %**	• Oral examination (eligible after passing final written examination).
ŠTUDIJSKE OBVEZNOSTI ŠTUDENTOV: TESTI IN KOLOKVIJI KOT SPROTNO PREVERJANJE OSVOJENEGA ZNANJA •za vsako tematsko področje (8 – internistična propedevtika in OSKI, kardiologija, nefrologija in toksikologija, hematologija, gastroenterologija, pulmologija, revmatologija, endokrinologija), opravljajo študenti kolokvij/test, na katerem bo: do 50 vprašanj z do 5 možnih odgovorov, različno število pravilnih; štejejo le pravilni odgovori v celoti • pozitivna ocena je od 56 % naprej; ocenjevalna lestvica: - 56 % - 65 % 6 - 66 % - 75 % 7 - 76 % - 85 % 8 - 86 % - 95 % 9 - 96 % - 100 % 10 •sprotno preverjanje znanja je pisno v prvem roku, v vseh nadaljnjih pisno ali ustno •OSKI (velja enaka ocenjevalna lestvica kot pri teoretičnih testih)		ACADEMIC OBLIGATIONS OF STUDENTS: TESTS AND PARTIAL EXAMS AS REGULAR CHECKING OF ACQUIRED KNOWLEDGE • for every thematic area (8 – internistic propedeutics and OSCE marking, cardiology, nephrology and toxicology, hematology, gastroenterology, pulmonology, rheumatology, endocrinology) students take a partial exam/test in which there will be: up to 50 questions with up to 5 possible answers with various numbers of correct answers; only correct answers on the whole are taken into account • a mark is positive from 56% onwards; grading scale: 56% - 65% 6 66% - 75% 7 76% - 85% 8 86% - 95% 9 96% - 100% 10 • regular knowledge checking is done in a written form in the first examination date, in all following examination dates it is done in a written form or orally • OSCE (the same grading scale is applied as in theoretical tests)

POGOJI ZA PRISTOP K POSAMEZNEMU PREVERJANJU ZNANJA - izpit je pisni in ustni - pisni izpit: do 100 vprašanj iz vseh obravnavanih tematskih sklopov - do 5 možnih odgovorov - različno število pravilnih odgovorov - možna tudi vprašanja esejskega tipa, štejejo po 2 točki - štejejo le pravilni odgovori v celoti - pozitivna ocena je od 56 % naprej in omogoča pristop k ustnemu izpitu - ustni izpit: izvajajo ga vsi habilitirani učitelji znotraj predmeta, ki jih določi predstojnik katedre - obvezen je za vse študente 3. letnika, tudi za tiste, ki so sicer oproščeni opravljanja pisnega izpita - če študent ne opravi ustnega izpita, ponavlja izpit v celoti (pisni in ustni del) - uspešno opravljen pisni in ustni izpit je pogoj za vpis v 4. letnik • k izpitu lahko pristopi študent, ki je opravil vse teste oz. sprotna preverjanja znanja in dosegel 56 % točk pri vsakem kolokviju; - je oddal dva zapisa anamneze in statusa in ima pozitivno ocenjen drugi oddan zapis ter ima opravljene in pozitivno ocenjene seminarje in klinične vaje • ustno izpraševanje (pogoj za pristop: opravljen pisni izpit) • pisnega izpita je lahko oproščen študent, ki je pisal vse kolokvije iz teorije prvič pozitivno nad 70 % (71 % in več) • skupno povprečje vseh kolokvijev iz teorije nad 80 % (81 % in več)		REQUIREMENTS FOR ACCESS TO INDIVIDUAL KNOWLEDGE CHECKING -the exam is written and oral -the written exam: up to 100 questions from all thematic sets dealt with -up to 5 possible answers -various numbers of correct answers -possible also essay-type questions, valued with 2 points each -only correct answers on the whole are taken into account -a mark is positive from 56% onwards and enables access to the oral exam -the oral exam: is implemented by all habilitated professors within the subject who are appointed by the Head of the Department -the oral exam is obligatory for all 3rd year students, also for those students who are otherwise exempt from the written exam -in case a student fails the oral exam, he/she takes the entire exam (written and oral part) again -successfully completed written and oral exam are the enrolment requirements for the 4th academic year • the exam can be taken by a student who has passed all tests or all regular knowledge checking and has achieved 56% of points in every partial exam; -the exam can be taken by a student who has handed in 2 records of anamneses and statuses and has a positively marked second record and has completed and positively marked coursework and clinical practice • oral questioning (the requirement for access: passed written exam) • a student ca be exempt from the written exam provided that all partial exams in theory are positive above 70% in the first try (71% and more) • overall average of all partial exams in theory above 80% (81% and more)

Reference nosilca / Lecturer's references:

IVAN KRAJNC:

KOŠUTIĆ, Damir, PEJKOVIĆ, Božena, ANDERHUBER, Friedrich, VADNJAL, Sabina, ŽIC, Rado, GULIC, Rozita, KRAJNC, Ivan, ŠOLMAN, Lea, KOCBEK, Lidija. Complete mapping of lateral and medial sural artery perforators : anatomical study with Duplex-Doppler ultrasound correlation. Journal of plastic, reconstructive & aesthetic surgery, 2012, vol. 65, issue 11, str. 1530-1536, doi: 10.1016/j.bjps.2012.04.045. [COBISS.SI-ID 512228408]

KOCBEK, Lidija, KRAJNC, Ivan, ANDERHUBER, Friedrich. Anatomical variations of the posterior intercostal arteries and the thoracic vertebral artery. J. int. med. res., 2011, vol. 39, no. 3, str. 1001-1005. [COBISS.SI-ID 3996223]

GORIŠEK, Borut, KRAJNC, Petra, KRAJNC, Ivan. Quality of life and the effect on social status among Slovenian women after breast cancer treatment. J. int. med. res., Mar.-Apr. 2009, vol. 37, no. 2, str. 557-566. [COBISS.SI-ID 3285311]

GORIŠEK, Borut, REBOLJ STARE, Marija, KRAJNC, Ivan. Accuracy of intra-operative frozen section analysis of ovarian tumours. J. int. med. res., 2009, vol. 37, no. 4, str. 1173-1178.

http://www.jimronline.net/content/full/2009/92/1227.pdf. [COBISS.SI-ID 3384127]

DINEVSKI, Dejan, POLI, Andrea, KRAJNC, Ivan, ŠUŠTERŠIČ, Olga, ARH, Tanja. E-health integration and interoperability based on open-source information technology. Wien. klin. Wochenschr., Suppl., 2010, vol. 122, suppl. 2, str. 3-10, doi: 10.1007/s00508-010-1354-9. [COBISS.SI-ID 3670335]

BREDA PEČOVNIK BALON:

HOJS, Nina, BEVC, Sebastjan, PEČOVNIK-BALON, Breda, HOJS, Radovan, EKART, Robert. Paricalcitol reduces proteinuria in non-dialysis chronic kidney disease patients. V: BUTUROVIĆ-PONIKVAR, Jadranka (ur.). Special issue : contributions from the 5th Slovenian Congress of Nephrology with international participation, (Therapeutic apheresis and dialysis (Online), ISSN 1744-9987, vol. 17, no. 4). [S. l.]: International Society for Apheresis, cop. 2013, str. 368-372. http://onlinelibrary.wiley.com/doi/10.1111/1744-9987.12080/pdf, doi: 10.1111/1744-9987.12080. [COBISS.SI-ID 4745023], [JCR, SNIP, WoS do 23. 9. 2013: št. citatov (TC): 0, čistih citatov (CI): 0, normirano št. čistih citatov (NC): 0, Scopus do 9. 9. 2013: št. citatov (TC): 0, čistih citatov (CI): 0, normirano št. čistih citatov (NC): 0]
tipologija 1.08 -> 1.01

BEVC, Sebastjan, PURG, Darinka, TURNŠEK, Nina, HREN, Martin, HOJS, Nina, ZORMAN, Tadej, PEČOVNIK-BALON, Breda, DVORŠAK, Benjamin, EKART, Robert, HOJS, Radovan. Ankle-brachial index and cardiovascular mortality in nondiabetic hemodialysis patients. V: BUTUROVIĆ-PONIKVAR, Jadranka (ur.). Special issue : contributions from the 5th Slovenian Congress of Nephrology with international participation, (Therapeutic apheresis and dialysis (Online), ISSN 1744-9987, vol. 17, no. 4). [S. l.]: International Society for Apheresis, cop. 2013, str. 373-377, ilustr. http://onlinelibrary.wiley.com/doi/10.1111/1744-9987.12081/pdf, doi: 10.1111/1744-9987.12081. [COBISS.SI-ID 4745535], [JCR, SNIP, WoS do 16. 9. 2013: št. citatov (TC): 0, čistih citatov (CI): 0, normirano št. čistih citatov (NC): 0, Scopus do 9. 9. 2013: št. citatov (TC): 0, čistih citatov (CI): 0, normirano št. čistih citatov (NC): 0]
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tipologija 1.08 -> 1.01

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RADOVAN HOJS

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