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| **Course title** | **Code** | **Semester** | **Type of course** | **Course volume (Contact hours)** | **ECTS** |
| **Introduction to General Surgery** | **MED**  **3006** | **VI** | **Mandatory** | 59 | **4** |
| **Faculty, the educational program and level of education** | * School of Medicine and Health Sciences * Higher Medical Educational Program “Medicine” * One cycle 6-year | | | | |

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| **Learning Course Content** |
| * **Shock and Blood transfusion**   The pathophysiology of shock and ischaemia–reperfusion injury  The different patterns of shock and them principles and priorities of resuscitation  The appropriate monitoring and endpoints of resuscitation  Bleeding  The use of blood and blood products and the benefits and risks of blood transfusion  Bleeding (Hemorrhage Control: external, internal, arterial, venous, capillary bleeding); Stopping Methods of Arterial, Venous and Capillary Bleeding .   * **The metabolic response to Injury**   Classical concepts of homeostasis  Mediators of the metabolic response to injury  Physiochemical and biochemical changes that occur during injury and recovery  hanges in body composition that accompany surgical injury  Avoidable factors that compound the metabolic response to injury  Concepts behind optimal perioperative care   * **Wounds, Tissue repair and Scars**   Normal healing and how it can be adversely affected  How to manage wounds of different types, of different structures and at different sites  Aspects of disordered healing which lead to chronic wounds  The variety of scars and their treatment  Wound care, general review of assessment tools. Pressure ulcer, prevention;   * **Asepsis, antisepsis, disinfection and sterilization; Surgical Infection**   The factors that determine whether a wound will become infected  The classification of sources of infection and their severity  The indications for and choice of prophylactic antibiotics  The characteristics of the common surgical pathogens and their sensitivities  The spectrum of commonly used antibiotics in surgery and the principles of therapy  The misuse of antibiotic therapy with the risk of resistance such as methicillin-resistant Staphylococcus aureus (MRSA)] and emergence (such as Clostridium difficile enteritis)   * **Surgical Infection** (Purulent Inflammatory Diseases).   Acute Infectious Diseases of Skin and Subcutaneous Tissue.  Purulent Diseases of Soft Tissues and Glandular Organs.  Purulent Diseases of Hand.  Purulent Diseases of Bones, Joints and Synovial Bursas.  Purulent Inflammatory Diseases of Serous Cavities.  Acute and Chronic Specific Types of Infection.  Surgical Parasitology.   * Malformations (Congenital Anomalies). Disturbance of Blood and Lymph Circulation. * **Preoperative Preparation; Patient History taking in general surgery; Patient examination;**   The tasks involved in preparing a patient for theatre  The common problems affecting a patient’s fitness for operation  How to optimize a patient’s medical state prior to anesthesia/surgery  How to take informed consent  The organization of an operating list  Preoperative care, lab sample collection.  Urine elimination, Foley catheterization in Male/ Female,  [Nasogastric and orogastric tube management; Patient feeding, abdominal assessment ,](https://www.gosh.nhs.uk/health-professionals/clinical-guidelines/nasogastric-and-orogastric-tube-management) [auscultation ,inspection, palpation, percussion.](https://www.gosh.nhs.uk/health-professionals/clinical-guidelines/nasogastric-and-orogastric-tube-management) Bowel management-enema.  Vomiting care. Body composition. BMI. Hip and waist circumference measurement.   * **Care in the Operating Room**   How to prepare a patient for theatre  The process of gloving and gowning  The process of preparation and draping the patient  Behavior in the operating room  The process of writing an operative note   * **Postoperative Care**   The system of postoperative care  The common and serious postoperative complications, their recognition, avoidance and treatment  The system of daily entries in patients’ records  The system for discharging patients   * **Nutrition and Fluid Therapy**   The causes and consequences of malnutrition in the surgical patient  Fluid and electrolyte requirements in the pre and postoperative patient  The nutritional requirements of surgical patients and the nutritional consequences of intestinal resection  The different methods of providing nutritional support and their complications   * **Surgical Ethics**   The importance of autonomy in good surgical practice  The moral and legal boundaries and practical difficulties of informed consent  Good practice in making decisions about the withdrawal of life-sustaining treatment  The importance and boundaries of confidentiality in surgical practice  The importance of appropriate regulation in surgical research  The importance of rigorous training and maintenance of good practice standards |
| **Textbooks and Materials** |
| * Schwartz's principles Of Surgery - Brunicardi , Charles F. Mc Graw Hill Edıcation; 11th.ed. 2019; * General Surgical Operations.-R.M.Kirk; Churchill Livingstone Elvesier; 5th.ed. 2005; * Current Surgical Therapy-John L.Cameron; Mosby Elsevier; 8th.ed. 2004; * Essential Surgery : Problems, Diagnosis and Management: With STUDENT CONSULT Online Access- Quick, Clive RG; Saeb-Parsy, Kourosh; Churchill Livingstone; 5th.ed. 2014; e-book; * Essential Practice of Surgery : Basic Science and Clinical Evidence-Norton ,Jeffrey A;Bollinger; Springer; 2002; |