

# UNIVERSITÀ DEGLI STUDI DI MILANO-BICOCCA

# SYLLABUS DEL CORSO

## **Pediatria**

1819-5-H4101D036

### **Aims**

The Pediatric Course, divided into two years (5th and 6th), in the 2nd semseter of the 5th yr provides an INTERNSHIP which aims the students to learn the following topics: by attending a pediatric outpatient clinic (family doctor) and in the classroom according to the updated bibliography and aspects of multiculturalism

-the skills for a non-specialist-physician in order to deal with the most common pediatric problems concerning the healthy child and its growth, both in the clinical practice and in the preventive field, considering the differences according to different ages.

-the basic knowledges in order to identify situations requiring prompt medical intervention or reference to the specialist on problems concerning the pediatric area

-hints of diagnostic and therapeutic approach of the most common pediatric disorders

As well, it's proposed a learning method by the use of CONCEPT MAPS and according to the Problem Based Learning (PBL) on topics regarding the healthy child

#### **Contents**

General framework and management of healthy child

How to manage the medical records, the doctor/parent/patient relationship.

Complete pediatric examination

Setting of the feeding, of the preventive aspects (screening,vaccinations); evaluation of growth and laboratory tests in the pediatric age.

Evidence of conditions requiring attention and / or immediate medical intervention or referral to a specialist/consultant Diagnostic and therapeutic approach to the most common diseases of childhood. (eg fever)

## **Detailed program**

#### IN THE CLASSROOM

**CONCEPT MAPS** and in-depth analysis of themes, enhanced by imaging and readings (bibliography / information sources), **ON THE FOLLOWING LEARNING OBJECTIVES**:

NEWBORN (0-28 days): the physiological newborn (hints) and the most frequent problems and useful practical advices at discharge from the hospital nursery

Main ASPECTS OF NUTRITION (rationale and recommendations)

- - Breast and artificial milk
- -weaning, ,
- -feeding in 1 year of life,
  - -until school age, adolescence(hints)

and in physical activity (hints)

Evaluation of main different habits or alternative diet regimens

SUPPLEMENTS recommended in the 1st year of life according to the evidence

GROWTH: physiological development (general, physical and pubertal, according on genetics and ethnicities, too). Use of percentiles and knowledge of the main growth standard measurements in the pediatric age

### PEDIATRIC CLINICAL AND OBJECTIVE EXAM:

(rationale and measurement of main vital signs , temperature, ear and mouth examination,) and the differences if compared to adults and typical, relevant in the pediatric age

NEUROLOGICAL EXAM: MAIN REFLEXES and STAGES OF PSYCHOMOTOR DEVELOPMENT, (including speech, environmental and social interaction) in the first year, (hints in the following ages until adolescence)

HEALTH MANTEINANCE VISITS: rationale and implementations

NEONATAL / FIRST YEAR OF LIFE SCREENING TESTS: rationale and implementations according to the evidence

VACCINATIONS, rationale and implementations according to the evidence

FOCUS TO THE MAIN ORTHOPEDIC PROBLEMS in pediatric age

TEETHING: physiological development and the interception of the main pathologies and occlusive problems; the preventive requirements or criteria for the specialist/consultant referee

Main topics about SPORT ACTIVITY IN PEDIATRIC AGE

Evaluation in the pediatric age of EMOCROMO, LIVER FUNCTION, URINE EXAMINATION AND URINOCOLTURE, in order to recognize, manage or send to the specialist/consultant referee

Most important PEDIATRIC PRESCRIPTIONS: how to set and prescribe drugs, dietary or sth else

FEVER OF UNKNOWN ORIGIN

### **GENERAL PEDIATRIC outpatient CLINIC ATTENDANCE**

- 1 student :1 pediatric family doctor in the daily work, based on principles of scientific evidences and priorities
- ACTIVE PARTICIPATION IN ALL THE PHASES OF THE MEDICAL VISIT (medical history, objective examination)
- OBSERVING the ongoing relationship among the physician ,the child and his family: listening, promoting of the therapeutic alliance and parental commitment and empowering
- DEVELOPING, CONSIDERING the need / ability to inform and make the patient aware and part of the history of illness and treatment
- KNOWLEDGE OF INDICATIONS related to

prevention, diagnosis, behavior advice, prescriptions

- KNOWLEDGE of the pathways for the contacts with the reference centers of assistance / excellence in the surrounding area

### **Prerequisites**

Enrollment in the 5th year of course

## **Teaching form**

In the CLASSROOM: under the guidance of tutor, willing for any other sin-depth analysis concerning the issues addressed in the internship, students work into little groups on clear learning objectives based on a specific method and on a joint slide show of the work carried out using the CONCEPT MAPS (such as Novak)

Attendance of a PEDIATRIC OUTPATIENT CLINIC (pediatric family doctor) 1:1

# Textbook and teaching resource

Nelson Essentials of Pediatrics - 8th edition

Authors: Marcdante - Kliegman - Behrman - Nelson Editore: Elsevier - Saunders

Suggested readings during training activity

#### Semester

To be carried out within the second semester (10th) of the 5th year:

for classroom meetings according to the lessons schedule

and for the outpatient clinic attendance in periods free from other activities, agreed with the pediatrician

#### **Assessment method**

IN THE CLASSROOM: slide show of the work done by the members of each working group. Delivery of the papers to the chief of the internship.

PEDIATRIC (OUTPATIENT) CLINIC: attendance approved by the tutor and by the course coordinator

#### Office hours

By appointment

039-2333513

( segreteria Clinica Pediatrica)