**COURSE SYLLABUS**

**Dermatology**

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| Subject holder:Subject teacher: *Glodiana SINANAJ PhD. In nursing sciences* |
| Load: | ECTS | Lessons in the auditorium | Individual study | Total |
| Lecture | Seminar | Lab | Practice | Clinical project |
| 6 | 45 | 0 | 0 | 30 | 0 | 75 | 150 |
| **Subject typology** | Compulsory / Discipline of interdisciplinary / integrative subjects |
| **Academic year/Semester when the course takes place** | Year II, Semester II (Spring 2023) |
| **Subject type** | Obligatory |
| **Study program** | Bachelor of General Nursing |
| **Subject code** | INF 276 |
| **E-mail address of the subject holder / lecturer** | glodiana.sinanaj@univlora.edu.alglodisinanaj78@hotmail.com |

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| **SUMMARY AND LEARNING OUTCOMES** |
| **Summary** | Dermatology is a subject in which students gain knowledge during their preparation in the field of dermatology, as well as have an image and acquire its basic knowledge. Nursing students will find many new topics and treatments in it. They will be introduced to the latest developments in the field of dermatology. The first lectures deal with the structure, function and care of normal skin, general types of skin lesions and basic principles of treatment. The text throughout the book has been updated in accordance with developments in the science and practice of dermatology. |
| **Course objectives** | At the end of this course, students will have knowledge in terms of:* Accurate descriptions of skin lesions including morphology, configuration and distribution.
* Recognizing the clinical manifestations of common dermatological conditions.
* Demonstration of family members with the usual diagnostic procedures.
* Identification of the 1st and 2nd lines of therapy for common dermatological conditions.
* Demonstrating an understanding of the basic epidemiology and risk factors for malignant melanoma and non-melanoma skin cancer.
* Identifying clinical situations in which a dermatologist should be consulted and other clinical situations that can be managed without a recommendation.
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| **Learning outcomes** |  At the end of the course students will be able to:* Interact with patients, their families and other health professionals in a way

that is culturally sensitive and appropriate for the role as a health care provider andstudent of dermatology.* Identify and review the issues that must be addressed in patient care effectively, including

context and patient preferences.* Present a story that is relevant, clear, concise and accurate.
* Perform a focused physical examination that is relevant and accurate.
* Demonstrate effective nursing problem solving and judgment to generate

differential diagnosis and management plans. |

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| **BASIC CONCEPTS**1. Physiology and physiopathology.2. Principles of skin diagnostics.3. Diseases caused by herpes simplex virus.4. Dermatophytoses. Explosive factors.5. Pruriginous dermatoses.6. Melanoma.7. Dermatological surgical procedures.  |

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| **Week** | **COURSE TOPICS** |  | **Form of teaching** |
| **I.** | **Topic 1-Anatomy and histology.***The skin, as the outer covering of the whole organism, is closely connected with various systems and organs as well as with the external environment through reflexes, impulses and metabolic processes.***Topic 2-Physiology and physiopathology of the skin.***Physiological and physiopathological processes of the skin are very diverse and complicated.***Topic 3- Principles of skin diagnosis. Recent diagnostic methods, primary morphological elements.***In order to diagnose a skin pathology, it is very important to know the etiological and pathogenetic causes, the clinical framework and finally the auxiliary methods such as laboratory, histopathological, immunological examinations, etc.***Practice 1-Presentation with the dermatology service.**Acquaintance with the documentation in the dermatology service. | *pg.7-14**pg.14 -17**pg.17-20* | 1 hour lecture1 hour lecture1 hour lecture*Practice 2 hours* |
| **II.** |  **Topic 4- Secondary morphological elements.***Secondary morphological elements develop from primary elements, which transform or regress during the course of the disease.***Topic 5 - Causes of skin diseases and clinical tests.***We divide the causes of skin diseases into causes**external, internal and unknown.***Topic 6- Principles of treatment, other treatment alternatives.***Medicine in dermatology is divided into general medicine and local medicine.***Practice 2- Techniques of complete examination of the patient.**Diagnostic methods of skin diseases. | *pg.20-22**pg.22-26**pg.26-33* | 1 hour lecture1 hour lecture1 hour lecture*Practice 2 hours* |
| **III.** | **Topic 7 – Bacterial dermatoses, streptococcal infections, ecthyma, erysipelas.***Normal skin is colonized by a bacterial flora that includes the superficial epithelial layer and the adnexa of the skin.***Topic 8 – Acute lymphangitis, streptococcal gangrene, angular stomatitis, pyodermitis.***Acute lymphangitis is a direct consequence of lymphatic invasion by group A streptococcus.***Topic 9 – Staphylococcal infections, folliculitis, sycosis barbae, hydroadenitis.***Staphylococcal skin infections are frequent, with a selective affinity for the hair follicle.***Practice 3** - Laboratory and clinical examinations auxiliary to the diagnosis of skin diseases.Realization of clinical tests in practice. | *pg.34-37**pg.37-38**pg.38-40* | 1 hour lecture1 hour lecture1 hour lecture*Practice 2 hours* |
| **IV.** |  **Topic 10 – Abscess, furuncle, carbuncle.***Abscess is a localized acute or chronic inflammation, which is accompanied by accumulation of destroyed tissue and pit.***Topic 11 – Scabies and nursing care.***Scabies is a common contagious parasitic disease that spreads by direct skin-to-skin contact.***Topic 12 – Viral dermatoses, herpes simplex virus.***Viruses are obligate intracellular infectious agents that are classified according to their size, morphology, and the unique nature of their DNA or RNA nucleic acids.***Practice 4 -** Magnifying lens, Wood's lamp, Diascopy, Dermatoscopy. Patch test, prick test, bleaching with acetic acid. | *pg.40-42**pg.43-49**pg.49-52* | 1 hour lecture1 hour lecture1 hour lecture*Practice 2 hours* |
| **V.** | **Topic 13 - Varicella herpes - zoster, non-typical forms of herpes zoster, human papilloma virus infections.***Varicella zoster virus replicates in the nucleus of keratinocytes and belongs to the group of herpes viruses.***Topic 14 – Verruca vulgaris, condylomas.***They appear as small papillomatous and keratosis tumors with clear borders.***Topic 15 - Dermatophytoses. General characteristics of dermatophytes, explosive factors.** *Dermatophytoses are superficial fungal infections of the hair, skin and nails caused by dermatophytes.***Practice 5** - Management and nursing care of varicella herpes zoster disease. Demonstration of the procedure for removing warts with curettes using local anesthesia. | *pg.52-54**pg.55-58**pg.59-63* | 1 hour lecture1 hour lecture1 hour lecture*Practice 2 hours* |
| **VI.** |  **Topic 16 – Tinea Pedis, Cruris, Manum. Nursing care.***Tinea pedis is a fungal infection of the foot that can also involve the spaces between the toes.***Topic 17–Tinea Corporis. Tinea Barbae. Tinea Capitis. Tinea Ungium and Nursing Care.***It is a superficial fungal infection caused by dermatophytes in the hairless skin of the trunk and extremities.***Topic 18–Candidiasis and nursing care.***It is a superficial fungal disease of the skin, mucous membranes and nails.***Practice 6-**Treatment of patients in the clinic with fungal infections with the relevant therapy. Use of disinfectants, antifungals and local therapy. | *pg.63-65**pg.65-70**pg.70-74* | 1 hour lecture1 hour lecture1 hour lecture*Practice 2 hours* |
| **VII.** |  **Topic 19–Genital candidiasis, peryonixis candidosis** **chronic mucocutaneous.** *They are the main cause of vulvovaginitis, balanoposthitis.***Topic 20 – Pruriginous dermatoses.***The diseases of this group have as their primary morphological element a typical permanent urticarial papule that develops in the vessels of the dermis and in the epidermis.***Topic 21 – Eczema/Dermatitis.** *It represents a polymorphic inflammatory reaction, involving the epidermis and the dermis.***Practice 7-** Nursing care for patients with pruritic dermatoses. Nursing care for patients with dermatitis of various types. | *pg.75-77**pg.78-82**pg.82-85* | 1 hour lecture1 hour lecture1 hour lecture*Practice 2 hours* |
| **VIIIl.** | **Topic 22- Chronic irritant contact dermatitis, allergic contact. Nursing care.***It develops as a result of the repeated action of weak irritants, from the multiplication of their action.***Topic 23- Dyshidrotic eczema, nummular, autoeczematization.***Dyshidrotic eczema is an acute, chronic, or recurrent dermatosis of the fingers, palms, and soles, characterized by the immediate appearance of numerous pruritic vesicles.***Topic 24- Seborrheic dermatitis of infants and adults. Nursing care.***Areas of the head with hair are mainly affected: scalp, eyebrows, eyelashes, chin.***Practice 8-**Nursing care for children and adults with different dermatitis. Nursing care in the management of eczema. | *pg.85-90**pg.90-92**pg.93-95* | 1 hour lecture1 hour lecture1 hour lecture*Practice 2 hours*  |
| **IX.** | **Topic 25- Atopic dermatitis.***It is a recurrent acute, subacute or chronic skin disease that usually begins in childhood.***Topic 26- Dermatitis of the hands.***Irritated by washing with detergents, strong soaps, disinfectants, it leads to irritant contact dermatitis in atopic patients.***Topic 27- Psoriasis vulgaris.***Psoriasis vulgaris is a chronic inflammatory disease with epidermal proliferation.***Practice 9-** Nursing care in the management of atopic dermatitis. Standards of nursing care in patients with psoriasis. | *pg.95-100**pg.95-100**pg.100-104* | 1 hour lecture1 hour lecture1 hour lecture*Practice 2 hours* |
| **X.** | **Topic 28 – Erythroderma Psoriathica.***It is classified as a severe form of psoriasis vulgaris.***Topic 29 – Erythema nodosa.***Erythema nodosa is an important acute inflammatory**/immunologicalreaction of the subcutaneous tissue, which is characterized by the appearance of painful nodules on the legs (below the knee level) and is caused by many and different etiological factors.***Topic 30 – Erythema polymorpho.***It is an acute, relapsing mucocutaneous syndrome, manifested by iris-shaped skin lesions.***Practice 10-**Nursing care in patients with erythema nodosum.Nursing care in patients with erythema multiforme to treat fever and eruptions. | *pg.105-108**pg.108-110**pg.110-115* | 1 hour lecture1 hour lecture1 hour lecture*Practice 2 hours*  |
| **XI.** | **Topic 31- Stevens-Johnson syndrome.***It is a drug-induced or idiopathic mucocutaneous reaction characterized by skin sensitivity, erythema of the skin and mucous membranes.***Topic 32- Skin tumors. Nursing care.***The term tumor is used to define an abnormal growth above the skin level which can be benign or malignant in nature.***Topic 33- Basal cell carcinoma. Squamous cell carcinoma. Nursing care.***Basal cell carcinoma originates from the basal cells of the epidermis and from the pilosebaceous adnexa.***Practice 11-**Skin tumors. Care for patients with Basal Cell and Squamous Cell Carcinoma. | *pg.115-118**pg.119-120**pg.120-123* | 1 hour lecture1 hour lecture1 hour lecture*Practice 2 hours*  |
| **XII.** | **Topic 34- Melanoma and nursing care.***Cutaneous melanoma, although it is one of the tumors with the highest rate of malignancy, belongs to that group of cutaneous neoplasms, which are diagnosed from the first stage of their evolution.***Topic 35- Sexually transmitted diseases, primary, secondary, tertiary syphilis and nursing care.***Syphilis is a systemic infectious disease, characterized by the presence of a painless ulcer, or chancre at the site of inoculation, accompanied by lymphadenopathy.***Topic 36- Congenital syphilis and nursing care.***It can be transmitted transplacentally from an infected pregnant woman to the fetus.***Practice 12-**Nursing care for patients with melanoma.Nursing care for the management of patients with syphilis. | *pg.123-136**pg.136-140**pg.140-143* | 1 hour lecture1 hour lecture1 hour lecture*Practice 2 hours*  |
| **XIII.** | **Topic 37 – Gonococcal infection and nursing care.***It is a bacterial disease caused by Neisseria gonorrhoeae.***Topic 38 – Urogenital infection in women and men.***70-90% of women with gonorrheal cervicitis also present with urethral infection.***Topic 39 – Chlamydia trachomatis infection.** *It is an important cause of sexually transmitted diseases* *transmissible.***Practice 13-**Nursing care in urethral infections in men.Nursing care and general treatment of urogenital infections in women. | *pg.143-146**pg.146-151**pg.151-156* | 1 hour lecture1 hour lecture1 hour lecture*Practice 2 hours*  |
| **XIV.** | **Topic 40 – Cutaneous manifestations of HIV/Aids. Nursing care.***When immunodeficiency develops during the course of HIV infection, a variety of mucocutaneous manifestations appear.***Topic 41-Superficial fungal infections.***Recurrent and persistent mucocutaneous candidiasis is common in HIV patients.***Topic 42- Dermatology surgical procedures.***They are basic techniques that treat skin diseases.***Practice 14-** The purpose of dermatological surgery is to repair and/or improve the function and cosmetic appearance of skin tissues. | *pg.157-159**pg.159-164**pg.165-171* | 1 hour lecture1 hour lecture1 hour lecture*Practice 2 hours*  |
|  **XV.** | **Topic 43 – Electrodesiccation and basal curettage of cancer cells. Moh's, Dermabrasion. Nursing Care.***The technique for electrodesiccation and curettage of tumor basal cell nodules is performed with local anesthesia.***Topic 44 – Blunt Technique and Cryosurgery Technique.***Punch, biopsy, shave biopsy, electrodesiccation and curettage, blunt autopsy, simple incision and suture closure are the basic techniques that doctors treat in skin diseases.***Topic 45 – Dermabrasion, skin implants. Nursing Care.***It is a technique mainly used to remove scars placed in front of the face.***Practice 15-**Technique of basal curettage in cancer cells.Skin tests and adverse reactions to skin implants. | *pg.171-173**pg.173-16**pg.176-180* | 1 hour lecture1 hour lecture1 hour lecture*Practice 2 hours*  |

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| **FORM OF KNOWLEDGE CONTROL** |
| **ATTENDANCE:** | Active participation in class is required. Lecture hours are compulsory at the rate of 75%. Practice hours are 100% mandatory, in case of excused absences, the hour will be replaced in agreement with the teacher. All students must report to practice classes at the scheduled time and be equipped with a white apron and hair tied up (respecting the ethical nursing dress code).Absences up to 25% of hours are allowed to be made up, if they are justified. Otherwise, the student loses the right to enter the exam. Absences are the student's personal responsibility, as are missed assignments or tests. |
| **Method of assessment** | *Assessment form* | *Evaluation time* | *Learning topics to be evaluated* | *Maximum points* | *Knowledge test form* | *Test content* |
| First Exam | Week 7/8 | 1-15 lectures | 0 points | Written exam | elaborative questions and quiz questions |
| Final exam | End of semester |  16 – 45 lectures  | 90 points | Written exam | elaborative questions and quiz questions |
| Continuous evaluation\* | Week 14/15 | The topics ofpractice | 10 points | Implementation of procedures in practice | Procedural demonstration |
| *\*Continuous evaluation -* It will be carried out by the internship teacher for the entire semester. Students will periodically demonstrate nursing care to patients. |
| The conversion of points to the final grade will be as follows: |
| 40- 49 points | 50-59 points | 60-69 points | 70-79 points | 80-89 points | 90-100 points |
| 5 | 6 | 7 | 8 | 9 | 10 |

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| **LITERATURE** |
| 1. **Compulsory basic literature**
 | ‘**Dermatology and Venereology'** Dr. Xh.Naqo, G.Sinanaj, 2012 (Faculty of Public Health - UV) ISBN: 978-99956-95-23-1 |
| 1. **Recommended reading**
 | * Dermatology Handbook 2021-22

is the essential guide to product selection for healthcare professionals working with skin conditions.* Fitzpatrick's Color Atlas and Synopsis of Clinical Dermatology by Klaus Wolff; Richard Allen Johnson; Arturo P. Saavedra; Ellen K. Roh

ISBN: 9781259642197. Publication Date: 2017* 4 Dermatitis Nursing Care Plans

UPDATED ON MARCH 18, 2022BY MATT VERA, BSN, R.N. |

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| **FINAL REMARKS FROM THE SUBJECT TEACHER** |
| **Provisions:** | Students are expected to develop values and an ethic that reflects their professional interests and behavior. These expectations are related to the appearance in the University premises, the responsibility during the teaching process, but not only, in their honesty and in matters of social justice. Students must respect individual differences, be cooperative, evaluate the abilities and qualities of themselves and others, evaluate the different forms of expression of thought and the choices of each one. In accordance with ethical rules, students must respect ethnic differences and help people with disabilities with integrative and supportive attitudes. |
| **Delays** | Tardies to lectures and seminars will not be tolerated. After the lecturer enters the auditorium, no student is allowed to enter. |
| **Professional behavior of the student** | Students are now considered adults and this requires from them a responsibility and self-awareness at a higher level regarding their behavior, the goals and interests for which they have chosen to attend the university. Bearing in mind that everywhere the university infrastructure and the ecology of the environment where knowledge is imparted is not perfect, we must establish some mandatory rules for everyone. This means, attention during the learning process, mobile phones switched off, no SMS, no use of other digital means for entertainment (MP3, etc.), no games, no toilet boxes on the teaching desks, appropriate clothing to respect lesson time, vocabulary (profanity is strictly prohibited) and acceptable communication inside and outside the classroom. For any deviation from these rules, there will be penalties, which are defined in the Regulations of the University and the Faculty of Public Health. |
| **Academic integrity and copyright** | Any test or written work must be completely individual and original.This means that students create original abstractions or analyzes on the basis of the concepts argued in the lecture and, if possible, always the source of the information received. Plagiarism (mixing), or theft of information in different ways will not be allowed. |

**APPROVED**

**Head of the Department**

**Dr. Majlinda Zahaj**