

 **UNIVERSITY “ISMAIL QEMALI VLORE**

 **FACULTY OF HEALTH**

 **HEALTH CARE DEPARTMENT**

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| **SUBJECT SYLLABUS** **Advanced Pediatrics** |
| Pedagogue of the subject  | Aurela Saliaj *Assoc. Prof. PhD in Pediatrics \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* |
| Hours: | ECTS | Hours in the auditorium  | Individual study | Total |
| Lecture  | Seminar | Lab | Practice | Clinical project  |
| 12 | 60 | 15 | 0 | 75 | 0 | 150 | 300 |
| **Typology of the subject**  | Discipline of the characterizing formation of the program  |
| **Academic year /term when the subject is followed**  | Year I, Term II (Spring)  |
| **Type of the subject**  | Mandatory  |
| **Study program** | Professional Master in Pediatric Nursing |
| **Subject code**  | INF 480 |
| **E-mail of the pedagogue of the subject**  | aurela.dai@univlora.edu.al  |

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| **PËRMBLEDHJE DHE REZULTATET E TË NXËNIT** |
| **Subject description**  | In this course, students will receive in-depth professional knowledge in the field of human development and pediatric pathologies. Neonatology studies health care for the newborn child and the treatment of problems that may appear during the neonatal period. Human growth and development deals with the basic concepts and issues encountered during the development of the human being. Students will also be taught to recognize and treat the most common childhood diseases. |
| **Objectives of the subject**  | * Getting to know the risk factors for the child's health during the perinatal period.
* Evaluation and monitoring of the child's development according to contemporary standards.
* Knowledge of developmental, neonate and child pathologies according to tracts and systems, as well as their management strategies.
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| **Expected results**  | At the end of the module the student will be able to: * To manage the reception and evaluation of the newborn child.
* Address the main pathologies of the perinatal period.
* To monitor the child's development and address developmental problems.
* To guide the natural feeding and ablation of the child.
* To clinically diagnose the main pediatric pathologies.
* Have knowledge of modern management strategies for children with pediatric pathology.
* To present comprehensive clinical cases: from etiology to assistance plan
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| **BASIC CONCEPTS** * 1. The perinatal period means 'the time around the birth of the baby'.
	2. The goal of pediatric care is to reduce fetal and neonatal/pediatric morbidity and mortality.
	3. The term "child development" refers to biological, psychological, emotional changes in human beings from birth to the end of adolescence, during which the individual progresses from dependence to progressive autonomy.
	4. Clinical diagnosis and integrated management of neonatal and pediatric pathologies is addressed according to standardized protocols.
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| **Week**  | **Theoretical topics: lectures**  | **Reference literature** | **Teaching forms**  |
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|  | **Chapter I: Perinatology****Topic 1 –** Perinatal care. Intrauterine period. Methods of fetal assessment*The goal of perinatal care is to reduce fetal and neonatal morbidity and mortality. The intrauterine period is the period from the moment of conception of the zygote until the fetus leaves the mother's womb.***Topic 2 -** Fetal medicine. Prenatal diagnosis and genetic counseling.*Familiarity with the factors related to the mother that affects the embryo, fetus or newborn and the consequences on the product of conception.***Topic 3 -** Acute and chronic fetal distress. Neonate in life after birth.*Events that intervene at the moment of birth to allow a harmonious transition from aquatic life (inside the womb/mother-dependent), to autonomous life (extrauterine/aerial).***Topic 4 -** Normal birth (aspect of the reception of the newborn). Clinical examination of the neonate at term (anamnesis).*Expectation goals of the normal neonate (AGA, term, no pathology). Taking his anamnesis.***Seminar 1 -** Prenatal diagnosis and genetic counseling.*Teaching practice in the Department of Neonatology-OBS*  | (1)*pg.3-12*(1)*pg.12-17*(1)*pg.399-401*(1)*pg.18-21*(1)*pg.22-27* |  Lecture 1 hourLecture 1 hourLecture 1 hourLecture 1 hour*Seminar 1 hour**Practice 5 hour* |
|  | **Topic 5 -** Clinical examination of the neonate at term (physical examination)*In the neonatal period, the clinical examination, as at any other age, must be complete and detailed. It includes the assessment of the physical and neuro-motor condition of the newborn.***Topic 6 -** Clinical examination of the term neonate (neuromotor examination)*In the neonatal period, the clinical examination, as at any other age, must be complete and detailed. It includes the assessment of the physical and neuro-motor condition of the newborn.***Topic 7 -** Evaluation of the neonate based on growth curves. IUGR baby. Child LGA, Preterm and Postterm.*Method of evaluating the physical development of the neonate. Diagnosis and expected problems of IUGR newborns. Diagnosis and expected problems of LGA, Preterm and Postterm newborns.***Topic 8 -** Determination of gestational age. The healthy-at-risk-sick neonate.*Determining the pediatric age of pregnancy: it is done on the basis of physiological and neurological criteria of maturity and shows us the real maturity of the child. Assessment of whether the neonate is in good condition, is at risk of developing any pathology or is sick.***Seminar 2 -** Evaluation of the physical development of the neonate.*Teaching practice in the Department of Neonatology-OBS* | (1)*pg.30-35*(1)*pg.36-38*(1)*pg.39-52*(1)*pg.53-56* |  Lecture 1 hourLecture 1 hourLecture 1 hourLecture 1 hour*Seminar 1 hour**Practice 5 hour* |
|  | **Topic 9 -** Neonatal resuscitation. Neonatal respiratory distress. Hypoxic-ischemic encephalopathy.*The causes of asphyxia in the newborn and its treatment plan. Clinical diagnosis and treatment plan for respiratory distress of the newborn. Classification Sarnat.***Topic 10 -** Neonatal jaundice.*Clinical diagnosis and treatment plan of Hyperbilirubinemia of the newborn.***Topic 11 -** Hypothermia in neonates. Hyperthermia in neonates. Neonatal hypoglycemia.*Clinical diagnosis and treatment plan for hypothermia of the newborn. Clinical diagnosis and treatment plan for hypoglycemia of the newborn.***Topic 12 -** Neonatal infections. Acute dehydration. Cyanosis in the neonate.*Clinical diagnosis and treatment plan of newborn infections. Clinical diagnosis and treatment plan for Dehydration and Cyanosis.***Seminar 3 -** Neonatal resuscitation.*Teaching practice in the Department of Neonatology-OBS* | (1)*pg.57-70*(1)*pg.71-77*(1)*pg.78-87*(1)*pg.88-93* |  Lecture 1 hourLecture 1 hourLecture 1 hourLecture 1 hour*Seminar 1 hour**Practice 5 hour* |
|  | **Topic 13 -** Neonatal convulsions. Ulcer-necrotic enterocolitis*Clinical diagnosis and treatment plan of seizures and ECUN.***Topic 14 -** Vomiting and regurgitation. Gastrointestinal reflux in neonates.*Clinical diagnosis and treatment plan for gastric disturbances in newborns****.*****Topic 15 -** Down syndrome. Turner syndrome.*Clinical diagnosis and management plan of genetic syndromes diagnosed in the neonatal period.***Topic 16 -** Summary of the main neonatal pathologies.*Differential clinical diagnosis and treatment plan of neonatal pathologies.***Seminar 4 –** Genetic syndromes**.**Teaching practice in the Neonatology-OBS pavilion | (1)*pg.94-96*(1)*pg.97-99*(1)*pg.405-409* |  Lecture 1 hourLecture 1 hourLecture 1 hourLecture 1 hour*Seminar 1 hour**Practice 5 hour* |
|  | **Chapter II: Growth and Development****Topic 17 -** Concepts of human development. Physical development.*Physical development as a result of the process of growth and maturity. Measurement and monitoring of biometric parameters.***Topic 18 -** Psychomotor development.*The notion of psycho-motoricity as psychic and motor interaction. Sectors and laws of psychomotor development.***Topic 19 -** Monitoring psychomotor development.*Screening test Age&Stage Questionnaires. Neuromotor examinations according to age groups.***Topic 20 -** Psychological development.*The theory of Freud and Piaget.***Seminar 5 -** Monitoring psychomotor development.*Teaching practice in the Primary Pediatric Service.* | (1)*pg.104-112*(1)*pg.113-119*(1)*pg.120-133*(1)*pg.134-136* | Lecture 1 hourLecture 1 hourLecture 1 hourLecture 1 hour*Seminar 1 hour**Practice 5 hour* |
|  | **Topic 21 -** Heritage and the environment. Attachment.*The concept and components of the child's Temperament. Stages and types of attachment.***Topic 22 -** Adolescence and puberty.*Physical development and personality during puberty. Erikson's theory.***Topic 23 -** The healthy child.*Clinical examination: the process of observing the child, taking anamnesis and physical examination****.*****Topic 24 -** Follow-up plan of the normal child.*The visits. Health notebook. Vaccinations.***Seminar 6 -** Follow-up plan for the normal child.*Teaching practice in the Primary Pediatric Service.* | (1)*pg.137-142*(1)*pg.149-152*(1)*pg.153-156*(1)*pg.157-159* | Lecture 1 hourLecture 1 hourLecture 1 hourLecture 1 hour*Seminar 1 hour**Practice 5 hour* |
|  | **Topic 25/26 -** Natural nutrition*Lactation. Advantages of breastfeeding. Food supplements. Marketing Code for Breast Substitutes.***Topic 27 -** Ablation.*The beginning of foods other than breast milk. The dangers of premature ablation. Nutrition during the I-II year of life.***Topic 28 -** Protein-caloric malnutrition.*Clinical diagnosis and treatment plan of Malnutrition. Failure to thrive.***Seminar 7 -** Natural nutrition*Teaching practice in the Primary Pediatric Service****.*** | (1)*pg.160-180*(1)*pg.181-188*(1)*pg.189-193* | Lecture 2 hourLecture 1 hourLecture 1 hour*Seminar 1 hour**Practice 5 hour* |
|  | **Topic 29 -** Abuse and neglect. Convention on the rights of the child.*The basic principle of this Convention is that the best interest of the child is at the center of attention.***Topic 30 -** Summary of the main issues of monitoring the child's growth and development.**Chapter III: Pediatric pathologies****Topic 31 -** Pathologies of the upper respiratory tract.*Clinical diagnosis and treatment plan of pathologies of the upper respiratory tract.***Topic 32 -** Bronchiolitis. Bronchial asthma*Clinical diagnosis and treatment plan of Bronchiolitis and Bronchial Asthma.***Seminar 8 -** Abuse and neglect.*Teaching practice in the Primary Pediatric Service*. | (1)*pg.198-203*(1)*pg.205-212*(1)*pg.213-219* | Lecture 1 hourLecture 1 hourLecture 1 hourLecture 1 hour*Seminar 1 hour**Practice 5 hour* |
|  | **Topic 33 -** Pneumonia. Cystic fibrosis. Bronchiectasis.*Clinical diagnosis and treatment plan for Pneumonia, Mucoviscidosis and Bronchiectasis.***Topic 34 -** Vaccination. Diphtheria.*Types, calendar and use of vaccines. Clinical diagnosis and treatment plan of Diphtheria.***Topic 35 -** Tetanus. Pertussis.*Clinical diagnosis and treatment plan for Tetanus and Pertussis.***Topic 36 -** Bacterial meningitis.*Clinical diagnosis and treatment plan for Meningitis and Meningococcemia****.*****Seminar 9 -** Vaccination.*Teaching practice in the Pediatric Secondary Service*. | (1)*pg.219-231*(1)*pg.232-239* (1)*pg.240-244*(1)*pg.245-249* | Lecture 1 hourLecture 1 hourLecture 1 hourLecture 1 hour*Seminar 1 hour**Practice 5 hour* |
|  | **Topic 37 -** Salmonellosis. Shigellosis.*Clinical diagnosis and treatment plan of diarrheal diseases.***Topic 38 -** Diarrhea and dehydration.*Clinical diagnosis and treatment plan for dehydration.***Topic 39 -** Pulmonary tuberculosis. Scarlet fever. Haemophilus Influenza.*Clinical diagnosis and treatment plan of TB, Scarlet fever and types of H.Influence infections.***Topic 40 -** Osteomyelitis and suppurative arthritis. Botulism.*Clinical diagnosis and treatment plan of bone diseases and Botulism.***Seminar 10 -** Diarrhea and dehydration.*Teaching practice in the Pediatric Secondary Service.* | (1)*pg.254-257*(1)*pg.258-263*(1)*pg.250-253**/264-267*(1)*pg.268-275* | Lecture 1 hourLecture 1 hourLecture 1 hourLecture 1 hour*Seminar 1 hour**Practice 5 hour* |
|  | **Topic 41 -** Sepsis and Shock.*Sepsis treatment plan.***Topic 42 -** Parotitis. Varicella. Measles. Rubella.*Clinical diagnosis and treatment plan for Mumps, Varicella, Measles and Rubella.***Topic 43 -** Poliomyelitis. Viral hepatitis. The fifth disease.*Clinical diagnosis and treatment plan for Poliomyelitis, Erythema Infectious and Hepatitis.***Topic 44 -** AIDS.*Clinical diagnosis and treatment plan of AIDS in children.***Seminar 11 -** Sepsis and Shock.*Teaching practice in the Pediatric Secondary Service.* | (1)*pg.276-279*(1)*pg.280-286*(1)*pg.287-293*(1)*pg.294-298* | Lecture 1 hourLecture 1 hourLecture 1 hourLecture 1 hour*Seminar 1 hour**Practice 5 hour* |
|  | **Topic 45 -** Parasites.Clinical diagnosis and treatment plan for parasites.**Topic 46 -** Rheumatic fever. Acquired and inborn vices of the heart.*Clinical diagnosis and treatment plan of rheumatic fever and cardiac diseases.***Topic 47 -** Diabetes.*Clinical diagnosis and treatment plan for diabetes and ketoacidosis.***Topic 48 -** Urinary tract infections. Vesicourethral reflux*.**Clinical diagnosis and treatment plan of Infections and Reflux.***Seminar 12 -** Diabetes.*Teaching practice in the Pediatric Secondary Service*. | (1)*pg.299-303*(1)*pg.304-315*(1)*pg.320-326*(1)*pg.330-333* | Lecture 1 hourLecture 1 hourLecture 1 hourLecture 1 hour*Seminar 1 hour**Practice 5 hour* |
|  | **Topic 49 -** Nephrotic syndrome and acute glomerulonephritis.*Clinical diagnosis and treatment plan of Nephrotic Syndrome and Glomerulonephritis*.**Topic 50 -** Anemias.*Classification of anemias and clinical diagnosis and treatment plan of Iron Deficiency Anemia.***Topic 51 -** Sickle cell disease. Thalassemia.*Clinical diagnosis and treatment plan for sickle cell disease and thalassemia.***Topic 52 -** Hemophilia. Hemorrhagic syndrome. Leukemias.*Clinical diagnosis and treatment plan of Hemophilia, Hemorrhagic Syndrome and Leukemia****.*****Seminar 13 -** Anemias.*Teaching practice in the Pediatric Secondary Service*. | (1)*pg.337-341*(1)*pg.342-352* (1)*pg.353-358* (1)*pg.359-365* | Lecture 1 hourLecture 1 hourLecture 1 hourLecture 1 hour*Seminar 1 hour**Practice 5 hour* |
|  | **Topic 53 -** Convulsions in childhood. Cerebral palsy.*Clinical diagnosis and treatment plan of febrile convulsions and paralysis.***Topic 54 -** Atopic dermatitis. Urticaria. Angioedema.*Clinical diagnosis and treatment plan of allergic-based diseases.***Topic 55 -** Serum sickness. Anaphylactic shock.*Clinical diagnosis and treatment plan of anaphylactic emergencies.***Topic 56 -** Sudden death syndrome. Rickets.*Clinical diagnosis and treatment plan of SIDS and Rickets.***Seminar 14 -** Convulsions in childhood.*Teaching practice in the Pediatric Secondary Service.* | (1)*pg.366-373*(1)*pg.374-378* (1)*pg.379-381*(1)*pg.382-386* | Lecture 1 hourLecture 1 hourLecture 1 hourLecture 1 hour*Seminar 1 hour**Practice 5 hour* |
|  | **Topic 57** - Poisoning in children. Celiac disease. Drowning in water.*Clinical diagnosis and treatment plan for Poisoning and Celiac Disease.***Topic 58 -** Monitoring of the seriously ill child.*Resuscitative treatment of a child in a coma. Glasgow Coma Scale.***Topic 59 -** Pain management in pediatrics.*Clinical assessment and pain management methods.***Topic 60 -** Summary of the main pediatric pathologies.*Clinical differential diagnosis and treatment plan of pediatric pathologies.***Seminar 15 -** Monitoring the seriously ill child.*Teaching practice in the Pediatric Secondary Service****.*** | (1)*pg.387-392*(1)*pg.393-394* (1)*pg.395-397* | Lecture 1 hourLecture 1 hourLecture 1 hour*Seminar 1 hour**Practice 5 hour* |

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| **FORMS OF KNOWLEDGE EVALUATION**  |
| **FREKUENTIMI:** | The key to a successful education is participation and preparation. 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. |
| **KONTROLLI I VAZHDUESHËM** | *Type of evaluation*  | *Time of evaluation*  | *Themes being evaluated*  | *Maximal points*  | *Forms of knowledge testing*  | *Testing contents*  |
| Final exam  | End of the term | Chapter I, II, III | 90 point | Written exam  | Quiz and explanation questions  |
| *Continuing evaluation* \*(Coursework \*)  | week 14/15 | Clinical cases | 10 point  | Oral presentation | Case report / Procedure demonstration |
| *\** *Coursework -* It will be in the form of a project that will start at the beginning of the semester. Students will describe the most frequent cases of pediatric or neonatal pathologies encountered in practice, comparing them with the theoretical descriptions of the pathologies. They will also implement 3 care plans, based on a ready-made format, for health assistance encountered in practice. A part of the works will be presented in the PPT. |
| Conversion of the points in the final grade will be as follows:  |
| 40- 49 points | 40- 49 points | 40- 49 points | 40- 49 points | 40- 49 points | 40- 49 points |
| 5 | 6 | 7 | 8 | 9 | 10 |

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| **LITERATURA** |
| **Literatura bazë e detyruar** | 1. ‘**Pediatrics**’ A.Saliaj, 2017 (Faculty of Health - UV) ISBN: 978-99956-95-89-7
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| **Literatura e rekomanduar** | 1. ‘Pediatrics’ D.Bebeci 2002 (Fakulteti of Medicine - UT)
2. ‘Do we use or misuse technology' E.Tushe 2008 (UT)
3. ‘Nursing Pediatrics infermierore’ H.Jazo, 2005
4. ‘Textbook of Paediatric’ Nelson, 2008
5. ‘Maternity and Pediatric Nursing’ Thompson 2010
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| **FINAL REMARKS FROM THE SUBJECT PEDAGOGUE**  |
| **Dispozita:**  | Students are expected to develop values and ethics that show their interests and behavior in a professional perspective. These expectations relate to the appearance at the University premises, accountability during the teaching process, their honesty and social justice issues. Students should respect individual differences, be collaborative, evaluate the abilities and qualities of themselves and others, to evaluate the different forms of expression of thought and individual choices. In accordance to the ethical rules, students should respect ethnic differences and assist with integrating and supporting attitudes of persons with disabilities. |
| **Vonesat** | Being late in lectures and seminars will not be tolerated. After the pedagogue enters the classroom no student is allowed to enter after.  |
| **Sjellja profesionale e studentit**  | Students are considered adults and this requires a higher level of responsibility and self-awareness about their behavior, goals and interests for which they have chosen to attend the university. Bearing in mind that the university infrastructure and ecology of the environment where knowledge is provided is not perfect, we must set some mandatory rules for everyone. That is, attention during the process of teaching, mobile phones should be turned off, no messages and no use of other digital entertainment devices (MP3s), no games, no make ups on the desks, suitable clothing to attend the lesson, acceptable vocabulary (strictly forbidden vulgarity) and communication within and outside the classroom. For any deviation from these rules, there will be penalties, as written in the University Regulations and the Faculty of Public Health. |
| **Integriteti akademik dhe e drejta e autorit**  | Each test or written work should be entirely individual and original. This means that the students write only based on argument concepts, in lectures, abstracts and original analyses and always state the source of their information. Copying and mixtures of information, stealing of other’s work will not be tolerated.  |
| **Karakteristikat e detyrave të kursit** | CASE REPORTGeneralities - name, surname, age, place of residenceThe epidemiology (spread) of the disease - where it is encountered more often: in which country and in which period of the year.Etiology (causes) of the illness – what was the cause of the patient's illness being reported. In addition, other causes of this disease will be mentioned according to the literature.Disease clinic:o All clinical presentation of the disease at the time of reportingo Clinical course since the onset of the disease (anamnesis morbi)During the clinical presentation of the disease, the characteristic clinical features of the disease presented by the patient will be identified, together with other clinical signs that are not typical or are not part of this disease.o All other health or lifestyle problems that the patient has are presented, as well as the possible ways in which they may have influenced the clinic or the treatment of the underlying disease (anamnesis vitae)o After that, referring to the literature, the full spectrum of clinical features and complications of the disease in question will be presented.Diagnosis: The clinical diagnosis established by the relevant doctor will be presented and the reasons why this diagnosis was established will be argued. The examinations performed by the patient will be listed and all possible examinations will be referenced from the literature, highlighting the key examination in establishing the diagnosis of this disease.Treatment: The progress of the treatment since the beginning of the disease will be presented, what has been changed in this treatment plan or assistance plan and why. The current treatment of the patient will be presented, arguing the reasons why it was decided on this assistance plan at the current moment of the development of the disease. Other possible patient assistance plans will be referenced from the literature. They will be compared to the patient's current care plan. Possible recommendations for improving the current patient assistance plan will be given.Prognosis (prediction on the course of the disease):o The patient's prognosis according to the attending physician will be referred to.o A prediction will be made according to the personal opinion of the referrer.Rules for submitting course assignments/projects: All papers must be submitted on time. They should show a professional style in appearance. They must be printed. Handwritten works will not be accepted and the student will be automatically evaluated with 0 points. In papers, the language should be official, literary and neutral. The use of unsubstantiated jargon, expressions that burden professional and human ethics, threats, insults, insults, labeling, politicizing tendencies, treatments outside the required topics, etc. are strictly prohibited. The works must have a volume of more than 3 pages (A4 format, Times New Roman font, 12 pt) and the first pages must be marked without spelling errors:Name of the StudentThe title of the paperThe course and the student's relevant groupThe date of submission of the paper according to the announced scheduleName of the instructor number of pages***The assessment elements of the coursework will include:***Essential: Respecting the structure of the scientific paper Sorting of academic-scientific arguments Specific ways of dealing with issues in relation to the Albanian realityAuxiliary: Selected idea Way of organizing the work The logic of using concepts Compliance with the objectives of the curriculum* Arguments and critical analysis
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**Approved by**

**Head of the Health Care Department**

**PhD(c)Emirjona Kiçaj**