****

### თბილისის ჰუმანიტარული სასწავლო უნივერსიტეტი

**TBILISI HUMANITARIAN TEACHING UNIVERSITY**

**Syllabus**

|  |  |
| --- | --- |
| **Name of the course/module** | **Psychiatry and clinical Psychology** |
| **Code of the course** | **GCM0413DM** |
| **Status of the course****(elective/compulsory)** | **C**ompulsory coursefor the one-cycle higher educational Programme-Dentistry |
| **ECTS** | **3 credits.Total: 75 hours**Contact Hours–32 hours (Class Meeting Time Period:7L/21Pr.) + 4 hours (Midterm:2h and Final Examinations 2h):Individual Work-43 hours |
| **Authors (lecturer)** | Qetevan Lashxi- Ph.D, THTUinvited lecturer,tel/591807128Consultation days: according to consultation schedule |
| **Aim of the course** | The goal of the course is to give the future dentists corresponding knowledge about medical phsycology and Psychiatry issues; develop their skills for communicating with the patients, teach them main phsycopathology symptoms, assessment of the state of phsycopathologic approaches and identification of the adequate action plan; In addition to this the lecturers will introduce to the students the clinics of the spread phsycic diseases and the skills of managing these diseases (Schizophrenia, manic-depressive psychosis, Intoxicative psychosis, psychic disorders of organ nature etc…) |
| **Program prerequisits** |  |
| **Assessment system and criteria** | Assessment system of the Tbilisi Humanitarian Teaching University's is divided into the following components:The total marks of the mid term Out of the overall assessment (100 points ) is 60 points, which includes three kinds of grades:**Student’s activity during a semester** **One-midterm exam****Final exam**Theminimum competence requirement for mid termevaluation components is at least 11 points in total.**The minimum competence requirement of the final evaluation is 50% of the total mark from final evaluation that means 20 points out of 40.**Evaluation System includes: I. Five Forms of Positive Assessment:  (A) Excellent – 91% and more from maximum evaluation  (B) Very good – 81-90% from maximum evaluation (C) Good – 71-80% from maximum evaluation (D) Satisfactory – 61-70% from maximum evaluation (E) Sufficient – 51-60% from maximum evaluation II. Two Forms of Negative Assessment: (A)(FX) Fail (Not passed ) - 41-50 from maximum evaluation score, which means that the student will need to work more and to retake the test after additional independent work;(B) (F) Fail – A student gets 40 points, or less from maximum evaluation, which means that the work done by him/her is not sufficient and s/he has to retake the course from the beginning. 1. One of the negative assessment: In case of not passing, the University fixes additional exam at least in 5 days, after the announcement of final examination results, which must be published in the examination table.2. The grades, which student gets after additional test is a student's final grades, in which is not considered the negative points of the major examination.If a student receives from 0 to 50 points after additional test, in the final exam sheet is formed (F) -0 for the student. |
| **Course description** | appendix 1 |
| **Assessment system/activities, methods****and criteria** | **Activities** -maximal **30 points** (daily activities 20 points, **Case study** 4 points, presentation 6 points).Activities is calculated in accordance with the level of being active during 5practices– each is equal **4 points**.4 points -The student is well prepared, the answer is perfect and exhausting, there are no mistakes. Student evaluate the general condition of the patient.3points - The student is prepared, the answers are full, but not perfect, there are no essential mistakes,is thoroughly masters basic and additional literature. Student evaluate the general condition of the patient.2 points - The answer is incomplete. The student owns the material provided by the program, but there are some shortcomings. Student has difficulties to evaluate the general condition of the patient.1points -The answer is incomplete. Terminology is wrong. The subject matter of the issue is set out in part. There are some essential mistakes. Can not evaluate the general condition of the patient.Case study – 4 points, each student is evaluated one by 4 grade point system, Rubric:4 points – the evaluation is correct, the conclusion/diagnosis is correct, risks/complications are correctly evaluated, the treatment/approach is correct.3 points – the evaluation is correct, the conclusion/diagnosis is correct, risks/complications are correctly evaluated, the treatment/approach is not correct.2 points - the evaluation is correct, the conclusion/diagnosis is correct, risks/complications are not correctly evaluated, the treatment/approach is not correct.1 point - the evaluation is correct, the conclusion/diagnosis is not correct, risks/complications are not correctly evaluated, the treatment/approach is not correct.0 point - the evaluation is not correct, the conclusion/diagnosis is not correct, risks/complications are not correctly evaluated, the treatment/approach is not correct.* **Presentation** – **6 points**

6 points- Presentation is done in Power Point, s/he obtains perfect knowledge of the presented topic, has full awareness of problem issues, freely attracts attention of the audience, answers all questions completely. S/he has used different sources to cover material.5 points - Presentation is done in Power Point, s/he obtains good knowledge of the presented topic, has good understanding of problem issues, freely attracts attention of the audience, answers all questions well. S/he has used several sourses.4 points - Presentation is done without IT technologies, s/he obtains fair knowledge of the presented topic, partly understands the problem issues, answers all questions briefly. S/he has used a few sourses.3 points - Presentation is done without IT technologies, s/he obtains fair knowledge of the presented topic, partly understands the problem issues, has difficulties in communication with the audience, answers all questions briefly. S/he has used a few sourses.2 points - Presentation is done without IT technologies, s/he has fair knowledge of the presented topic, does not understand the problem issues, answers some questions briefly. S/he has used a few sourses.1 point - Presentation is done without IT technologies, s/he is not ready to communicate with the audience, has fair knowledge of the presented topic, cannot answer all questions. **Midterm exam - 30 points**, administered in written form ( 30 test), each correct answer is evaluated with 1 point, wrong answer -0 points.**Final Exam -40** points administered in written form ( 40 test), each correct answer is evaluated with 1 point, wrong answer -0 points. |
| **Core literature:** | 1. 1. Harrison s Principles of Internal Medicine < Volumes 1 andm2, 17th Edition,p.2505.
2. 2.Current Medical Diagnosis and Treatment- S.J.Mcphee, M.A..Papadakis, p.897.

3.Psychology. Mind, Brain and Culture, Drew Westen, 2003 |
| **Additional literature** | Psychology. An Introduction, Nicky Hayes and Sue Orrel, 1998 |
| **Learning outcomes, competences****(general and field specific)** | **Knowledge**1. Student describes the main concepts and terms of psychiatry;
2. Student identifies of certain psychopathic syndromes and symptoms out of the general clinical picture;
3. Student establishes adequate research scheme for examining psychiatric patient.

**Skills**1. Student Critically analyzes complex and non-full information (frequent in psychiatric practice)
2. Student collects grounded subjective an objective information, as well as amnesis of the illness.
3. Student correctly perceives the principles of group work.

**Responsibilities**1. Student develops argument conclusions that will be accepted based on certain ethic and social grounds.
 |
| **Learning/Teaching methods** |  Lecture course (modified interactive lectures)problem-oriented teaching(group discussion), presentation. |

**Appendix1**

**Course description:**

**Topics of the lecture, practical classes/laboratory work/working group, literature**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Day №** | **Type of****the class** | **Topics** | **Contact hours** | **literature** |
| **Iday** | Lect. | Medical deontology, phsycology. Subject and objectives of the psychiatry, The connection of medical psychiatry to the other desiciplines. The history of psychiatry and its modern developments. Organization of psychiatric assistance. | **1** |  |
| Pract. | Basis of the general psychopathology. Symptoms and sundromes in psychiatry. Geeting aqcuainted with the history of the illness. Perception Pathology: agnosia, illussion, Hallucination, phsycosensory disorders. Communication with the patients | **3** |  |
| **IIday** | Lect. | Basis of the general psychopathology. Symptoms and sundromes in psychiatry. Pathology of perceptions and memory.Pathologies of thinking and intelectual sphere. Emotional,consciusness and will sphere pathologies | **1** |  |
| Pract. | Thinking pathology: association disorder, fixed ideas, over-estimating ideas, delirium. Communication with the patients.Memory pathologies: Amnesya, paramnesya, attention pathology. Pathologies in the intelectual sphere, communication with the patients. Emotional pathologies: mania, depression,Parathymia, affect.Communication with the patients | **3** |  |
| **IIIday** | Lect. | Methods of seaching and treating psychiatric diseases. Principles for systematization and classification. Concept about the phsycical disorder, main phsycopathologic syndromes. Modern classification systems of phsycical disorders: ICD-10 DSM-IV. | **1** |  |
| Pract. | Pathologies in the sphere of wills: axcitation, stupor, catatonic syndromes, parabula, abulia. Communication with the patients. Consciousness pathologies: stupefy, delirium, aneiroid, vague consciousness, amentia, confusion of consciousness, discussion of the histories;  | **3** |  |
| **IVday** | Lect. | Schizophrenia and the spectre of Schizophrenic disorders. Affective disorders: depression, mania, distimia | **1** |  |
| Pract. | Schizophrenia and the spectre of Schizophrenic disorders. Etiology, pathogenesis, treatment. Affective disorders :depression, mania, distimia. Etiology, pathogenesis, treatment. Wokring on the histories, communication with the patients. | **3** |  |
| **V day** | **Midterm** | **2** |  |
| **VI day** | Lect. | Phsycic disorder of organ nature, traumatic and vascular phsycosis, ephilephsy; Infectious and intoxicative phsycosis | **1** |  |
| Pract. | Phsycic disorders of organic genesis. Etiology, pathogenesis, treatment. Wokring on the histories, communication with the patients.Infectious and intoxicative phsycosis, alcoholism and drug-addiction | **3** |  |
| **VII day** | Lect. | Stress and the phsycical disorders connected to the stress; | **1** |  |
| Pract. | Stress and the phsycical disorders connected to the stress; Etiology, pathogenesis, treatment, olygophrenia. Main principles of treatment of physical diseases. | **3** |  |
| **VIII day** | Lect. | Phsycical disorders connected to the age. Personal disorders,Main principles for the treatment of physcic diseases. | **1** |  |
| Pract. | Phsycical disorders in Children`s age. Etiology, pathogenesis, treatment. Working on histories, communication with the patients. | **3** |  |
|  | **Final exam** | **1** |  |
|  | **Additional exam** |  |  |