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Physiotherapy

GENERAL INFORMATION

COURSE UNIT

Course unit	TECHNICAL ENGLISH			
Code	200562		Academic year	2016-2017
ECTS	6		Type of course unit	Compulsory
Year	3		Term	1
Timetable	Available on the virtual campus for all those students enrolled in this course unit			nrolled in this course unit
Language of instruction		ENGLISH		

TEAM TEACHERS

Team leader

Name of lecturer	Ms CARME SANAHUGES
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Office hours	To be agreed on

Team members

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Office hours	To be agreed on	

ADMISSION REQUIREMENTS

None

THE COURSE UNIT WITHIN THE CURRICULUM

- Course contents: Technical English
- This course aims to consolidate the bases of the knowledge of the English language in order to facilitate communication with patients and other health professionals, to understand and work effectively with data and information in this language, and to present oral and written arguments. In short, to demonstrate basic linguistic skills in English to be able to fluently cope within the current context of free circulation of professionals and students. This is a practical course where the four fundamental linguistic skills (reading, writing, listening, and speaking) are worked through different activities and, at the same time, the most common grammatical and discourse structures used in medical English are practised.



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• The knowledge of the English language is fundamental within the degree in and the profession of physiotherapy. English is in fact the current *lingua franca* that allows us to participate in multiple academic and professional events, particularly internationally. By having a good command of the language, the student will be able to keep up with the latest research, studies, and developments worldwide and take part in multilingual and multicultural contexts and situations.

COMPETENCES AND LEARNING OUTCOMES

Specific competences

Competence		up with the knowledge, skills, abilities, and attitudes required by competences.
Learning outco	omes	E18.1. Interpret and analyse information in English found in documentary sources within the field of health sciences. Specific objectives: E18.1.1. Use the basic linguistic tools in order to interpret a written text about a health science topic correctly. E18.1.2. Identify the basic idea in an oral or written documentary source. E18.1.3. Identify the specific, detailed information in a documentary source.

Competence		1. Communicate effectively and clearly, both orally and in writing, with users of the alth care service as well as with other health professionals.		
Learning outco	omes	 E21.3. Use the English language for communication within the student's professional field. Specific objectives: E21.3.1. Use the most appropriate register according to our interlocutor. E21.3.2. Communicate both orally and in writing within the student's professional field in a grammatically correct way. E21.3.3. Write a text on a health science topic in a correct, clear, and coherent way, from a formal point of view. E21.3.4. Express correctly different linguistic functions (recommendations, obligations, requests, opinions) applied to the health science field. 		

Transversal competences

Competence	T1. Analyse and summarise.		
Learning outcomes		Specific objectives:	
J		T1.1. Identify the basic idea in a text.	
		T1.2. Identify the different parts in a text.	

Competence	T7. Team work	
Learning outco	mes	Specific objectives:
		T7.2. Demonstrate organization, negotiation, and cooperation skills in the team.
		T7.3. Develop critical skills and self-criticism when working in a
		team.



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T7.4. Demonstrate	ability to	adapt to	the team	with an open
and flexible attitude	١.			

T7.5. Consider and respect other people's different ideas/opinions.

T7.6. Show initiative and capacity for action.

Generic competences

Competence		1. Develop critical thinking and reasoning and know how to effectively express it oth in the student's own languages and in a third language.		
Learning outco	omes	 Specific objectives: G1.1. Organise and lay out one's own ideas and reasoning in a logical and clear way. G1.2. Argue the justifications that lead to a particular proposal or idea. G1.3. Connect different premises in a logical and coherent way so that they can support a conclusion. 		

CONTENTS

- 1. Taking a medical history
- 2. Examining the patient
- 3. Common medical terminology.
- 4. Terms used in anatomy.
- 5. Explaining a diagnosis
- 6. Reading charts
- 7. Some medical conditions
- 8. The ageing process



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TEACHING METHOD AND ACTIVITIES

DIRECTED ACTIVITIES

Text analysis, video watching and debates.

Estimated time: 45 hours

SUPERVISED ACTIVITIES

• Mainly communicative activities such as role-playing activities or project work.

Estimated time: 15 hours.

AUTONOMOUS ACTIVITIES

• Individual essay writing activities: text analysis and other activities set in class. Estimated time: 38 hours.

• Paper writing in groups: text analysis and other activities set in class.

Estimated time: 25 hours.

• Autonomous work of individual study to prepare exams, organise notes/materials, tutorials: individually or in group.

Estimated time: 24 hours.

ACTIVITY TYPE	ACTIVITY	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
Directed activities	Text analysis, video watching and debates	E18, E21, T1, T7, G1	45
Supervised activities	Mainly communicative activities	E21,G1, T7	15
Autonomous	Individual essay writing	E18, E21, T1, G1	38
activities	Group writing	E18, E21, T1, T7, G1	25
	Autonomous work	E21	24
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ASSESSMENT METHOD

The assessment method will include:

- The knowledge acquired and the specific competences will be assessed through written tests, which will amount to 70% of the final mark.
- Text analysis. 20% of the final mark.
- Group activities will account for 10% of the final mark.

In order to pass the course, the following conditions have to be met:

- Hand in all the papers and activities asked by the teacher, fulfilling the criteria established by the teacher.
- Get a minimum final mark of 5.

ASSESSED ACTIVITIES	PERCENTAGE FINAL MARK	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
Written tests	70%	E18, E21, T1, G1	3
Text analysis	20%	E18, E21, T1, G1	
Group activities	10%	E18, E21, T1, T7, G1	
	3		

BIBLIOGRAPHY AND WEB PAGES / BASIC REQUIRED READINGS

Others		
Title	Description	
"Anglès Tècnic" Packet	Material necessari per	
	treballar a les classes	
	accessible mitjançant el web	
	de l'assignatura	

BIBLIOGRAPHY AND WEB PAGES / BASIC RECOMMENDED READINGS

Books					
Author/s	Year	Title	Edition	City	Publisher
Murphy, Raymond	1996	English Grammar in Use		Cambridge	CUP
Bolton, D. & Goodey, N.	1996	English Grammar in Steps		London	Richmond Publishing
Willis, Dave	1993	Collins Cobuild Student's		London	Harper Collins
		Grammar			



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Web pages				
Title	Description	URL		
Chartered	Col·legi de			
Society of	Fisioterapeutes	http://www.csp.org.uk		
Physiotherapy	anglesos			
British Medical	Revista mèdica	http://www.bmj.com		
Journal	Nevista illedica	neep.// www.binj.com		
The Lancet	Revista mèdica	100 //01 1		
G: 1 /		http://thelancet.com		
Stedman's	5	1.11.11		
	Medical Diccionari mèdic http://stedmans.com	http://stedmans.com		
Dictionary				
Medilexicon	Diccionari mèdic	http://pharma-lexicon.com		
MedlinePlus				
Medical	Diccionari mèdic	http://www.nlm.nih.gov/medlineplus/encyclopedia.html		
Encyclopedia				
Online Medical	Diccionari mèdic	http://www.online-medical-dictionary.org/		
Dictionary	Diccionari medic	Tittp://www.online-medical-dictionary.org/		
The Terminology				
of Health and	Drograma on line			
Medicine A Self-	Programa on-line per practicar			
		http://wps.prenhall.com/chet_rice_terminolog_2/3/775/198649.cw/index.html		
Instructional	terminologia mèdica			
Program	medica			
Jane Rice				

PLANNING OF THE COURSE UNIT

Available on the virtual campus for all those students enrolled in this course unit.



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COURSE UNIT

Course unit	PHYSIOTHERAPY IN CLINICAL SPECIALTIES IN THE			CIALTIES IN THE
	LOCOMOTOR SYSTEM - III			— III
Code	200560		Academic year	2016-2017
ECTS		6	Type of course unit	Compulsory
Year	3		Term	1
Timetable	Timetable Available on the virtual campus for all those students enrolled in this course		in this course unit	
Language of instruction		CATALAN/SPANIS	SH	

TEAM TEACHERS

Team Leader

Name of lecturer	Mr ALFONSO CÁNOVAS
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Team members

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ADMISSION REQUIREMENTS



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• None



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THE COURSE UNIT WITHIN THE CURRICULUM

- Course contents: Physiotherapy of the locomotor system.
- This course aims to consolidate the bases of the knowledge, treatment, and prevention of the locomotor system in the vertebral column as well as the bases of differential diagnosis and containment techniques of the locomotor system.
- The knowledge of these aspects is fundamental within the degree and the profession.

COMPETENCES AND LEARNING OUTCOMES

Specific competences

Competence	E1. Demonstrate kr

E1. Demonstrate knowledge of the morphology, physiology, pathology, and conduct of both healthy and ill people in their natural and social environment.

Learning outcomes

E1.21. Describe and analyse human movement.

Specific objectives:

- **E1.21.1.** Describe the vertebral column in the sagittal plane in geometry terms.
- **E1.21.2.** Describe the concepts of harmony and disharmony applied to the sagittal geometry of the vertebral column.
- **E1.21.3.** Identify mobility reduction and increase of the different parts of joints.
- **E1.21.4.** Identify the functional patterns of three- and four-curve scoliosis.
- **E1.21.5.** Identify bone asymmetry and muscle imbalance.
- **E1.21.6.** Identify the movement pattern of the trunk and limbs.
- **E1.21.7.** Enumerate the visceral fixation systems.
- **E1.21.8.** Analyse the mechanical repercussions of visceral origin of the locomotor system.
- **E1.21.9.** Identify the location of the different abdominal viscera by means of palpation.

Competence

E3. Demonstrate knowledge of the physiotherapy methods, procedures, and actions that lead to clinical therapeutics.

Learning outcomes

E3.2. Identify the physiological and structural changes caused by a physiotherapy intervention for impairments of the locomotor system.

Specific objectives:

- **E3.2.1.** Describe how the different types of manoeuvres of manual therapy for the limbs may modify tissues.
- **E3.2.2.** Identify mobility restrictions and compensation strategies during postural and movement re-education.



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E3.2.3. Identify improvement in posture and movement after doing	
some exercises	

- **E3.2.4.** Identify the different consequences caused by organic pathologies in the physiotherapy diagnosis and treatment.
- **E3.3.** Apply the physiotherapy methods, procedures, and actions in the different clinical specialities that treat impairments of the locomotor system.

Specific objectives:

- **E3.3.1.** Enumerate the general principles of the physiotherapy treatment for kyphosis and scoliosis.
- **E3.3.2.** Describe the principles of the main evidence-based concepts of physiotherapy for the treatment of scoliosis.
- **E3.3.3.** Enumerate the main orthopaedic concepts in the treatment of spinal deformities, particularly of idiopathic scoliosis
- **E3.3.4.** Distinguish between the brace used in the treatment of thoracic scoliosis convex to the right and convex to the left.
- E3.3.5. Apply the different containment techniques.
- **E3.3.6.** Enumerate the principles of postural correction.
- **E3.3.7.** Understand the concepts of stabilization and integration of postural correction.
- **E3.4.** Apply specific physiotherapy intervention methods in order to promote a healthy lifestyle, in relation to the locomotor system, by means of health education.

Specific objectives:

- E3.4.1 Define the concept of ergonomics and its goals.
- **E3.4.2** Define the sphere of application and action of ergonomics.
- **E3.4.3.** Define the general and specific assessment methods of working conditions in the field of ergonomics.
- **E3.4.4.** Describe the different methods of ergonomic analysis from a theoretical and practical point of view to be applied within physiotherapy.
- **E3.4.5.** Define the concept of occupational health.
- **E3.4.6.** Define its objective within the prevention framework.
- **E3.4.7.** Define the concept of occupational disease.
- **E3.4.8.** Enumerate the different types of occupational diseases.
- **E3.4.9.** Describe the causes of occupational diseases.
- **E3.4.10.** Enumerate the causal agents of occupational diseases.
- **E3.4.11.** Give the most appropriate piece of advice to sufferers of spinal deformities so that they can lead a normal life.

Competence

E5. Integrate, through clinical experience, ethical and professional values, the knowledge, skills, and attitudes characteristic in physiotherapy to solve specific clinical cases in hospital, out-of-hospital, primary and community health care environments.

Learning outcomes

E5.1. Solve clinical cases susceptible of physiotherapy treatment in the field of disorders of the musculoskeletal system.

Specific objectives:

- **E5.1.1.** Suggest the most adequate treatments for the proposed medical cases of trunk deformities.
- **E5.1.2.** Identify, through the medical history or anamnesis, the most significant symptomatology of a patient in a proposed medical case.



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E5.1.3. Relate the symptomatology presented by the patient to the different pathologies in a clinical case.

E5.1.4. Enumerate the different differential diagnoses associated with the symptomatology in a proposed medical case

E5.1.5. Design an appropriate treatment for a given medical case.

Competence

E7. Assess the patient's functional state, taking into account physical, psychological, and social aspects.

Learning outcomes

E7.4. Describe and apply the adequate physiotherapy assessment procedures, with the aim of determining the level of affection of the locomotor system and its possible functional repercussion.

Specific objectives:

E7.4.1. Measure the thoracic and lumbar regional angles. Analyse the geometrics of the anatomical transitional thoracicolumbar region through specific measurements.

E7.4.2. Identify changes in spine geometry and classify them according to the concepts normokyphosis/normolordosis, hyperkyphosis/hyperlordosis, and hypokyphosis/hypolordosis.

E7.4.3. Define and describe the concept of the Cobb angle.

E7.4.4. Define and describe the concept of axial rotation.

E7.4.5. Define Adams test.

E7.4.6. Describe a positive, negative, and doubtful Adams test.

E7.4.7. Identify the radiological signs that confirm or rule out structured scoliosis.

E7.4.8. Identify dorsal and ventral asymmetry associated with idiopathic scoliosis.

E7.4.9. Enumerate the clinical signs and symptoms associated with idiopathic scoliosis

E7.4.10. Identify some scale to assess perception of trunk deformity.

E7.4.11. Identify the SRS-22 quality of life test.

E7.4.12. Identify the symptomatology associated with visceral palpation in order to distinguish between a visceral organic disorder and a visceral functional disorder.

E7.4.13. Measure the angle trunk inclination (ATI) with a scoliometer in the Adams test and in the prone position.

E7.4.14. Identify the postural changes and the improvements in motor control achieved by doing some exercises.

Competence

E8. Determine the physiotherapy diagnosis according to established norms and using internationally recognised validation instruments.

Learning outcomes

E8.3. Establish physiotherapy diagnostic hypotheses through clinical cases of impairments of the musculoskeletal system.

Specific objectives:

E8.3.1. Identify structured kyphosis.

E8.3.2. Enumerate and describe the signs of Scheuermann's disease as well as its functional limitations.

E8.3.3 Enumerate and describe the typical radiological signs of Scheuermann's thoracic, thoracicolumbar, and lumbar disease.



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E8.3.4. Identify the radiological signs that confirm or rule out
structured scoliosis.

- **E8.3.5.** Define idiopathic scoliosis.
- **E8.3.6.** Describe the different clinical forms of idiopathic scoliosis according to age of onset.
- **E8.3.7.** Classify scoliosis following the SRS terminology.
- **E8.3.8.** Interpret the concept of idiopathic scoliosis as a basic phenomenon.
- **E8.3.9.** Classify scoliosis according to its evolutionary prognosis.
- **E8.3.10.** Describe the 3D nature of idiopathic scoliosis.
- **E8.3.11.** Distinguish between mechanical torsion and geometrics of the spine.
- **E8.3.12.** Distinguish between structural, geometric flatback, and paradoxical kyphoscoliosis.
- **E8.3.13.** Distinguish the different factors involved in the pathomechanism of the progression of idiopathic scoliosis.
- **E8.3.14.** Define, in a simple way, the aetiopathogenic model of idiopathic scoliosis based on the bipolar concept of neuro-osseous maturation clock.
- **E8.3.15.** Distinguish between idiopathic scoliosis and de-novo degenerative scoliosis in adults.
- **E8.3.16.** Identify any regional or local physical deficiencies, necessary for the subsequent therapeutic containment approach.
- **E8.3.17.** Distinguish between a three- and a four-curve scoliosis.
 - Identify the muscle imbalance in these types of scoliosis.
 - Identify the movement patterns in these types of scoliosis.Identify the restriction areas that hinder static and dynamic
- symmetry. **E8.3.18.** Make a differential diagnosis between a primary musculoskeletal pathology and a systemic pathology that has somatic repercussions.
- **E8.3.19.** Identify the symptomatology involved in an organic disorder that has musculoskeletal repercussions.
- **E8.3.20.** Enumerate the different tests that allow making the differential diagnosis of an organic disorder that has musculoskeletal repercussions.

Competence

E9. Develop a physiotherapy intervention plan according to criteria of adequacy, validity, and efficiency.

Learning outcomes

E9.4. Define the general and specific objectives for the application of the physiotherapy treatment of impairments of the locomotor system

Specific objectives:

- **E9.4.1.** Identify the primary containment objectives in the treatment and prevention of regional or local physical deficiencies of the affected musculoskeletal structures.
- **E9.4.2.** Identify the therapeutic objectives of physiotherapy in the treatment of scoliosis related to mechanics and neurophysiological bases.
- **E9.5.** Describe the circumstances that determine the priorities for action in the physiotherapy treatment of impairments of the locomotor system.



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J	pecific	UU	ectives.

E9.5.1. Identify the main indications and contraindications of bandages.

E9.5.2. Identify the presence of a functional visceral disorder.

E9.5.3. Identify when a functional visceral disorder causes a musculoskeletal alteration that requires physiotherapy treatment.

E9.5.4. Know when a case of scoliosis needs a conservative treatment and determine what type of treatment is needed.

E9.6. Enumerate the different types of material and apparatus to be used in the physiotherapy treatment of impairments of the locomotor system.

Specific objectives:

E9.6.1. Use the different types of bandage: cotton bandages, adhesive elastic bandages, non-adhesive elastic bandages, Kinesio Taping.

E9.6.2. Use the Bunnell scoliometer, Perdriolle's torsiometer, Raimondi table.

Competence

E17. Participate in the making of health care protocols of scientific evidence-based physiotherapy, promoting professional activities that foster research in physiotherapy.

Learning outcomes

E17.1. Describe and analyse the health care protocols of evidence-based physiotherapy in conditions of the musculoskeletal system.

Specific objectives:

E17.1.1. Enumerate the different physiotherapy assistance protocols on deformities of the spine.

Competence

E20. Apply the quality guarantee mechanisms in the practice of physiotherapy, according to recognised and validated criteria.

Learning outcomes

E20.3. Describe the guides to good clinical practice applied to impairments of the locomotor system.

Specific objectives:

E20.3.1. Name and identify existing guides to good clinical practice applied to spinal deformities.

Transversal competences

Competence T2. Organizing and planning.

Learning outcomes

Specific objectives:

T2.1. Design the process that needs to be gone through after examining the patient in order to reach the established goals of the treatment with bandages.

T2.2. Suggest the treatment for the proposed clinical cases according to logical clinical algorithms and reasoning.

Generic competences

Competence

G2. Develop strategies of autonomous learning.



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Learning outcomes

This is a competence that is developed by working competence "T2. Organizing and planning".

CONTENTS

1. SPINAL DEFORMITIES

- 1.1. Sagittal plane
- 1.2. Scoliosis
- 1.3. Model of comprehensive rehabilitation in the conservative treatment of spinal deformities.
- 1.4. PHYSIOTHERAPY FOR SPINAL DEFORMITIES
- 1.5. Clinical assessment.
- 1.6. Trunk impairments.
- 2.3. Scoliosis: Block tension.
- 2.4. Physiotherapy treatment.
- 2.5. Radiology.

2. DIFFERENTIAL DIAGNOSIS IN PHYSIOTHERAPY

- 2.1. Clinical vision of pain.
- 2.2. Cardiovascular system.
- 2.3. Digestive system.
- 2.4. Hepatic and biliary system.
- 2.5. Renal/urinary system.
- 2.6. Endocrine system.
- 2.7. Female reproductive system.
- 2.8. Oncology.
- 2.9. Clinical cases.

3. FUNCTIONAL BANDAGING

- 3.1. Functional bandaging.
- 3.2. Non-adhesive elastic bandages.
- 3.3. Adhesive elastic bandages.
- 3.4. Neuromuscular bandages.

4. ERGONOMICS AND OCCUPATIONAL HEALTH

- 4.1. Ergonomics.
- 4.2. Occupational health.
- 4.3. Health problems related to the working environment.



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TEACHING METHOD AND ACTIVITIES

DIRECTED ACTIVITIES

• Theoretical lessons that will provide the student with the necessary theoretical knowledge to learn the different actions included in the course through deductive procedures. The lessons will offer visual and computer-based support.

Estimated time: 13.5 hours.

• **Practical lessons** where the teacher will present, with the help of a model, different techniques. The lessons will offer visual and computer-based support.

Estimated time: 22 hours.

SUPERVISED ACTIVITIES

• **Practical activities** where the student, under the teacher's supervision, will practise the different techniques presented.

Estimated time: 21 hours.

AUTONOMOUS ACTIVITIES

• Complementing theoretical and practical knowledge with some **further bibliographic reading** that will be assessed in the writing tests.

Estimated time: 20 hours.

Paper writing:

- Search for scientifically based evidence and establish the level of influence in physiotherapy in relation to organic pathology.
- Describe a clinical case of spinal deformities.

Estimated time: 20 hours.

• **Autonomous work** of individual study to prepare exams, organise notes/materials, tutorials: individually or in group.

Estimated time: 50.5 hours.



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ACTIVITY TYPE	ACTIVITY	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
Directed	Theoretical lessons	E1.21, E3.2, E3.3, E3.4, E5, E7.4, E8, E9.4, E9.5, E9.6, E17, E20.3	13.5
activities	Practical lessons	E1.21, E3.3, E3.4, E5, E7.4, E8	22
Supervised activities	Practical activities by the student	E1.21, E3.3, E3.4, E5, E7.4, E8	21
	Bibliographic reading	E1.21, E3.2, E3.3, E3.4, E5, E7.4, E8, E17, E20.3	20
Autonomous activities	Paper writing	E1.21, E3.2, E3.3, E3.4, E5, E7.4, E8, E9.4, E9.5, E9.6, E17, E20.3, T2, G2	20
	Autonomous work	E1.21, E3.2, E3.3, E3.4, E5, E7.4, E8, E9.4, E9.5, E9.6, E17, E20.3	50.5
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ASSESSMENT METHOD

The assessment method will include:

- The knowledge acquired in each section the unit is divided into will be assessed through written tests, which will amount to 35% of the final mark.
- Assessment of the manual skills necessary to apply a specific technique and of the adequacy of the technique/manoeuvre used in a given situation, through oral practical tests that account for 55% of the final mark.
- Written papers with 10% of the final mark.

In order to pass the course, the following conditions have to be met:

- Pass each section and part of the unit with a minimum mark of 5.
- Attendance at 100% of practical classes (justified absences will allow the student to miss up to 20% of all the practical classes).
- Get a minimum final mark of 5.



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ASSESSED ACTIVITIES	PERCENTAGE FINAL MARK	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
Written tests	35%	E1.21, E3.2, E3.3,	
		E3.4, E5, E7.4, E8,	2
		E9.4, E9.5, E9.6,	2
		E17, E20.3	
Oral practical tests	55%	E1.21, E3.3, E3.4,	1
		E5, E7.4, E8	1
Written papers	10%	E1.21, E3.2, E3.3,	
		E3.4, E5, E7.4, E8,	
		E9.4, E9.5, E9.6,	
		E17, E20.3, T2, G2	
	3		

BIBLIOGRAPHY AND WEB PAGES / BASIC REQUIRED READINGS

Books					
Author/s	Year	Title	Edition	City	Publisher
P.R. Mondelo, Enrique Gregori Torada i otros	2001	Ergonomía 1 Fundamentos		Barcelona	Ediciones U.P.C
Ruiz-Frutos C, Garcia AM, Declòs J, Benavides FG.	2007	Salud laboral: Conceptos i técnicas para la prevención de riesgos laborales.	3ª	Barcelona	Masson
Derek Field	2004	Anatomía, palpación y localización superficial.		Barcelona	Paidotribo
Goodman C.C.	2003	Patología médica para fisioterapeutas		Madrid	Mc. Graw Hill
Surós, A. Surós Batlló,J.	2001	Semiología médica y técnica exploratoria.	8 <u>a</u>	Barcelona	Masson
Txema aguirre Maria Achalanda Baso	2009	Kinesiologia, tape manual, aplicaciones prácticas			Biocorp Europa
Kenso Kase, Jim Wallis Tsuyoshi Kase	2003	Clinical Therapeutic applications of the Kinesio taping method	2ª		Kinesio Taping Association

Web pages				
Title	Description	URL		
Apunts del bloc "Deformitats		Intranet de l'Escola		
de Columna"		corresponent a l'assignatura		
SOSORT Consensus papers	Publicats en "Scoliosis the	www.scoliosisjournal.com		
	Journal"			
Apunts del professor	Fisioteràpia del Raquis.	Intranet de l'Escola		
		corresponent a l'assignatura.		
Apunts del professor	Embenats	Intranet de l'Escola		
		corresponent a l'assignatura.		
Kinesio taping in pediatrics		www.Kinesiotaping.com		

BIBLIOGRAPHY AND WEB PAGES / BASIC RECOMMENDED READINGS

Books					
Author/s	Year	Title	Edition	City	Publisher
Travell y Simons	2004	Dolor y disfunción miofacial	Vol 1	Madrid	Panamericana



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Travell y Simons	2004	Dolor y disfunción miofacial	Vol 2	Madrid	Panamericana
McMahon,S.	2006	Tratado del dolor	5 <u>ª</u>	Madrid	Elsevier
Koltzenburg, M. Wall & Melzack					
Loeser. Bonica.	2003	Terapéutica del dolor Vol 1	3 <u>a</u>	Mèxic	Mc Graw Hill
Loeser. Bonica	2003	Terapéutica del dolor Vol 2	3 <u>ª</u>	Mèxic	Mc Graw Hill
Guyton/ Hall	2001	Tratado de fisiologia médica	10ª	Mèxic	Mc Graw Hill
Hauser,K., Longo,B., Jameson	2005	Principios de medicina interna	16ª	Madrid	Mc Graw Hill
F. Harrison.					
Papadakis, Maxine A., Mc	2006	Consulta àpida. Medicina	Hebgen,	2005	Mc Graw Hill
Phee,Stephen J.		clínica	Eric.		
Hebgen, Eric.	2005	Osteopatía Visceral,	2ª	Madrid	Mc Graw Hill
		fundamentos y técnicas			
Geof Maitland, Hengelveld	2007	Maitland, manipulación	7 <u>ª</u>	Madrid	Elsevier
Elly, Banks Kevin, English Kay.		vertebral.			
François Ricard.	2008	Tratado de Osteopatia visceral		Madrid	Panamericana
		y medicina interna, sistema			
		digestivo.			
Brigit Kumbrink	2009	K-Taping international			Springer
		Academy			

Web pages				
Title	Description	URL		
Scoliosis the Journal		www.scoliosisjournal.com		
SOSORT		www.sosort.mobile/		
SRS		www.srs.org		
Scoliosis the Journal		www.scoliosisjournal.com		

PLANNING OF THE COURSE UNIT

Available on the virtual campus for all those students enrolled in this course unit



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GENERAL INFORMATION

COURSE UNIT

Course unit		PHYSIOTHE	RAPY IN NEURO	DLOGY II
Code	200561		Academic year	2016-2017
ECTS	6		Type of course unit	Compulsory
Year	3		Term	1
Timetable Availa		ble on the virtual campus for all those students enrolled in this course unit.		
Language of instruction		CATALAN / SPANISH		

TEAM TEACHERS

Team leader

Name of lecturer	Ms ELIA GONZÁLEZ ROCH	
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Office hours	To be agreed on	

Team members

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Office hours	To be agreed on

Name of lecturer	Ms NÚRIA PASTALLÉ BURRULL	
e-mail	nuria.pastalle@eug.es	
Office hours	To be agreed on	

Name of lecturer	Ms LLUÏSA PORTE CARRERA	
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Office hours	To be agreed on	

ADMISSION REQUIREMENTS

None



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THE COURSE UNIT WITHIN THE CURRICULUM

- Course contents: Physiotherapy in neurology.
- This course aims to provide the student with the theoretical knowledge and practical skills
 necessary to carry out assessments and give scientific evidence-based treatments in the field
 of neurological physiotherapy, going into specific fields such as paediatric neurology and pain
 management physiotherapy in depth.
- The main aim is to provide the students with the necessary tools to develop their critical view, which will allow them to analyse and use the different therapeutic options at hand in the most appropriate way. The course also tries to motivate the students to do research on neurology.

COMPETENCES AND LEARNING OUTCOMES

Specific competences

Competence

E3. Demonstrate knowledge of the physiotherapy methods, procedures, and actions that lead to clinical therapeutics.

Learning outcomes

E3.6. Identify the physiological and structural changes caused by a physiotherapy intervention for neurological impairments.

Specific objectives:

- **E3.6.1.** Experience any changes in muscle tone when applying inhibition techniques.
- **E3.6.2.** Experience tissue response when applying myofascial techniques.
- **E.3.6.3.** Experience any changes in muscle tone when applying neurodynamic techniques.
- **E3.6.4.** Experience any changes in motor control caused by the application of movement facilitation techniques and strategies for learning motor skills.
- **E3.7.** Apply the physiotherapy methods, procedures, and actions in the therapeutics of neurological conditions.

Specific objectives:

- **E3.7.1.** Apply specific myofascial techniques for the upper and lower limbs.
- **E3.7.2.** Apply specific neurodynamic techniques for the upper and lower limbs.
- **E3.7.3.** Apply techniques to improve planning of voluntary movements.
- **E3.7.4.** Appropriate use of movement facilitation techniques.
- **E3.7.5.** Apply strategies for learning voluntary movements.
- **E3.7.6.** Describe the procedures used in the treatment of neuropathic pain.

Competence

E5. Integrate, through clinical experience, ethical and professional values, the knowledge, skills, and attitudes characteristic in physiotherapy to solve specific clinical cases in hospital, out-of-hospital, primary and community health care environments.



PHYSIOTHERAPY (EHEA DEGREE)

COURSE CATALOGUE

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Physiotherapy

Learning outcomes

E5.2. Solve clinical cases susceptible of physiotherapy treatment in the field of neurological conditions.

Specific objectives:

- **E5.2.1.** Choose the most adequate physiotherapy actions or procedures to solve specific clinical cases in the field of neurological physiotherapy.
- **E5.2.2.** Develop empathetic abilities when dealing with people with neurological conditions.
- **E5.2.3.** Choose the most appropriate exercise according to motor, sensitive, and cognitive impairments within the framework of some clinical cases with hemiplegic patients.

Competence

E7. Assess the patient's functional state, taking into account physical, psychological, and social aspects.

Learning outcomes

E7.5. Describe the bases of the assessment of the nervous system.

Specific objectives:

- **E7.5.1.** Develop a rehabilitation medical history centred on promoting observation skills.
- **E7.5.2.** Interpret the terminology of neurological conditions in hospital discharge reports.
- **E7.5.3.** Distinguish the different types of pain and their characteristics.
- **E7.5.4.** Identify the typical alterations of neuropathic pain: allodynia, hypersensitivity, and hypoesthesia.
- **E7.5.5.** Identify the phenomena of central and peripheral sensitization of neuropathic pain.
- **E7.5.6.** Enumerate the systems involved in pain processing in order to get a more detailed assessment.
- **E7.6.** Apply the adequate physiotherapy assessment procedures, with the aim of determining the level of affection of the nervous system and its possible functional repercussion.
 - **E7.6.3.** Choose the most appropriate assessment tools to measure a given condition in a clinical case of a neurological patient presented in class.
 - **E7.6.4.** Observe behavioural differences in different neurological disorders.
 - **E7.6.5.** Use the different scales for measuring neuropathic pain.
 - **E7**.6.6. Choose the most appropriate assessment tools used in paediatrics to measure a given condition within the framework of a clinical case presented in class.

Competence

E8. Determine the physiotherapy diagnosis according to established norms and using internationally recognised validation instruments.

Learning outcomes

- **E8.5.** Design a physiotherapy diagnostic hypothesis from some clinical cases related to neurological conditions.
 - **E8.5.1.** Formulate a diagnostic hypothesis from the deficits detected (motor, sensory, and cognitive) in a neurological physiotherapy examination
 - **E8.5.2.** Formulate a diagnostic hypothesis from the deficits detected in a pain management physiotherapy examination.
 - **E8.5.3.** Formulate a diagnostic hypothesis from the deficits detected (motor, sensory, and cognitive) in a physiotherapy examination of a motor impaired child.



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Competence

E9. Develop a physiotherapy intervention plan according to criteria of adequacy, validity, and efficiency.

Learning outcomes

E9.8. Define the generic and specific goals to be applied for the physiotherapy treatment of neurological conditions.

Specific objectives:

- **E9.8.1.** Plan the short-term and long-term treatment goals given a diagnostic hypothesis.
- **E9.8.1.** Describe the different models of pain management.
- **E9.9.** Describe the circumstances that determine the priorities for action in the physiotherapy treatment of neurological conditions.

Specific objectives:

- **E9.9.1.** Identify the alteration of the different functional systems in order to organise a treatment.
- **E9.9.2.** Prioritize the type of action according to the type of treatment the patient is receiving (domiciliary, in hospital ...).
- **E9.10.** List the different types of material and equipment to be used in the physiotherapy treatment of neurological conditions.

Specific objectives:

- **E9.10.1.** Mention the different types of technical aids that improve functioning in neurological patients.
- **E9.10.2.** Meet the patient's functional needs using different technical aids and adaptations.
- **E9.10.3.** Mention and relate the different habilitation measures necessary to achieve the patient's maximum level of functioning and independence.

Competence

E17. Participate in the making of health care protocols of scientific evidence-based physiotherapy, promoting professional activities that foster research in physiotherapy.

Learning outcomes

E17.2. Describe and analyse the health care protocols of evidence-based physiotherapy in conditions of the nervous system.

Specific objectives:

E17.2.1. List the different health care protocols of evidence-based physiotherapy in conditions of the nervous system.

Competence

E20. Apply the quality guarantee mechanisms in the practice of physiotherapy, according to recognised and validated criteria.

Learning outcomes

E20.5. Describe the guides to good clinical practice applied to neurological conditions.

Specific objectives:

E20.5.1. Name and identify the guides to good clinical practice applied to neurological conditions.



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Transversal competences

Competence	T9. Develop co	3. Develop critical thinking.			
Learning outco	mes	Specific objectives: T9.1. Assess the differences and similarities of the different techniques used in neurological physiotherapy. T9.2. Review, presenting valid arguments, the scientific papers given by the teachers.			

Generic competences

Competence G2. Develop strategies of autonomous learning.		strategies of autonomous learning.
Learning outcomes This is a competence that is developed by w		This is a competence that is developed by working competence "T9.
		Develop critical thinking".

CONTENTS

1. PHYSIOTHERAPY OF THE CENTRAL NERVOUS SYSTEM - II

- 1.1 The hemiplegic patient: special considerations.
- 1.2 Neurological physiotherapy for the treatment of cerebellar syndrome.
- 1.3 Techniques used in neurological physiotherapy: main similarities and differences.
- 1.4 Research techniques in neuroscience.

2. THE PERFETTI METHOD - II

- 2.1 The hemiplegic patient.
- 2.2 The patient with a medullary lesion.
- 2.3 The patient suffering from Parkinson's.
- 2.4 Technical aids and adaptations for the neurological patient at home and according to his/her pathology.
- 2.5 The patient with TBI (traumatic brain injury).

3. PAEDIATRICS

- 3.1 Main neurological pathologies in paediatrics.
- 3.2 Physiotherapy intervention.

4. NEUROPATHIC PAIN

- 4.1 General concepts of pain.
- 4.2 Neurophysiological basis of pain.
- 4.3 Models of pain management.
- 4.4 Neuropathic pain.



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TEACHING METHOD

DIRECTED ACTIVITIES

• ICT-supported master classes will provide the student with the theoretical bases on assessment methods and basic treatment techniques in neurological physiotherapy.

Estimated time: 27 hours.

• **Practical lessons** where the teacher will present, with the help of a model, the different techniques, relating them to clinical cases. The lessons will offer visual and computer-based support.

Estimated time: 12 hours.

• **Presentation and resolution of clinical cases.** Different clinical cases will be presented for which the student will have to put the theoretical knowledge into rehabilitation practice.

Estimated time: 4.5 hours.

SUPERVISED ACTIVITIES

 Practical activities, under the supervision of the teacher, to apply the different techniques presented.

Estimated time: 21 hours.

• **Group work**: Journal club: review and critical analysis of a scientific article handed in by the teachers and make a presentation in class.

Estimated time: 9 hours.

AUTONOMOUS ACTIVITIES

- **Information search and management.** Searching for scientific articles about pain. Estimated time: 10 hours.
- Writing a paper to show acquisition of knowledge after reading a chapter of a bibliographic work. Estimated time: 10 hours.
- **Autonomous work** of individual study to prepare exams, organise notes/materials, tutorials: individually or in group.

Estimated time: 53.25 hours.



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ACTIVITY TYPE	ACTIVITY	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT	
	Theoretical lessons	E3.6, E3.7, E5, E7.5, E8.5, E9.8, E9.9, E9.10, E17, E20.5	27	
Directed	Practical lessons	E3.7, E5, E7.5, E7.6, E8.5	12	
activities	Presentation and resolution of clinical cases	E3.7, E5, E7.5, E7.6, E8.5, E9.8, E9.9, E9.10, E17, T9, G2	4.5	
	Practical activities	E3.7, E5, E7.5, E7.6, E8.5	21	
Supervised activities	Group work	E3.6, E3.7, E5, E7.5, E7.6, E8.5, E9.8, E9.9, E9.10, E17, T9	9	
	Information search and management	E3.6, E3.7, E5, E7.5, E7.6, E8.5, E17, E20.5	10	
Autonomous activities	Writing a paper	E3.6, E3.7, E5, E7.5, E7.6, E8.5, E9.8, E9.9, E9.10, E17, E20.5, T9, G2	10	
	Autonomous work	E3.6, E3.7, E5, E7.5, E7.6, E8.5, E9.8, E9.9, E9.10, E17, E20.5	53.25	
	TOTAL NUMBER OF HOURS 146.75			

ASSESSMENT METHOD

The assessment method will include:

- The knowledge acquired in each section the unit is divided into will be assessed through written tests, which will amount to 40% of the final mark.
- Assessment of the manual skills necessary to apply a specific technique and of the adequacy of the technique/manoeuvre used in a given situation, through oral practical tests that account for 35% of the final mark.
- Papers based on some bibliographic search account for 5% of the final mark.
- Analysis of clinical cases in paediatrics amounts to 5% of the final mark.
- Paper on a work of the bibliography, 5% of the final mark.
- Group work (JOURNAL CLUB), 10%.

In order to pass the course, the following conditions have to be met:

- Pass each section and part of the unit with a minimum mark of 5.
- Hand in and pass all the papers, fulfilling the criteria established by the teacher.
- Attendance at 100% of practical classes (justified absences will allow the student to miss up to 20% of all the practical classes).
- Get a minimum final mark of 5.



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ASSESSED ACTIVITIES	PERCENTAGE FINAL MARK	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
Written tests	40	E3.6, E3.7, E5, E7.5, E8.5, E9.8, E9.9, E9.10, E17, E20.5	2
Oral practical tests	35	E3.7, E5, E7.5, E7.6, E8.5	1
Written papers and clinical cases	15	E3.6, E3.7, E5, E7.5, E7.6, E8.5, E9.8, E9.9, E9.10, E17, E20.5, T9, G2	
Group work	10	E3.6, E3.7, E5, E7.5, E7.6, E8.5, E9.8, E9.9, E9.10, E17, T9	0.25
	NUMBER OF HOURS	3.25	

BIBLIOGRAPHY AND WEB PAGES / BASIC REQUIRED READINGS

Books					
Author/s	Year	Title	Edition	City	Publisher
PHYSIOTHERAPY IN NEUROLO	GY			•	
Stokes, M	2006	Fisioterapia en la rehabilitación neurológica	1ª	Madrid	Elsevier
Umphered D	2007	Neurological rehabilitation	5 <u>ª</u>	St.Louis, Missouri	Elsevier
PHYSIOTHERAPY IN NEUROLO	GY, THE P	PERFETTI METHOD			
Kandel E, Schuwartz J, Jessell T	2001	Principios de neurociencia	3ª	Madrid	McGraw-Hill Interamericana
THE PERFETTI METHOD					
Perfetti, C	1999	El ejercicio Terapéutico Cognoscitivo para la reeducación motora del hemipléjico adulto	1ª	Barcelona	EDIKAMED
Perfetti, C	1992	Esercizi per una memoria riabilitativa	2ª	Italia	Idelson-Gnocchi
NEUROPATHIC PAIN					
Serra, J	2007	Tratado de dolor neuropático	1ª	Madrid	Panamericana
Butler D, Moseley L	2010	Explicando el dolor	1ª	Adelaide	Noigroup Publications
PHYSIOTHERAPY IN PAEDIATR	ICS				
Macías L., Fagoaga J.	2002	Fisioterapia en pediatría	1ª	Madrid	MC Graw-Hill Interamericana.

BIBLIOGRAPHY AND WEB PAGES / BASIC RECOMMENDED READINGS

Books					
Author/s	Year	Title	Edition	City	Publisher
PHYSIOTHERAPY IN NEUROLOGY					
Butler, D	2002	Movilización del sistema	1 <u>ª</u>	Barcelona	Paidotribo
		nervioso			
CarrJ, Sheperd R	2004	Rehabilitación de pacientes en	1ª	Madrid	Elsevier



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		el ictus			
Davies P	2002	Pasos a seguir	2 <u>ª</u>	Madrid	Panamericana
Paeth B	2006	Experiencias con el concepto Bobath	2ª	Madrid	Panamericana
Purves D	2001	Invitación a la neurociencia	1ª	Madrid	Panamericana
Shacklok M	2007	Neurodinámica clínica	1ª	Madrid	Elsevier
THE PERFETTI METHOD					
Perfetti, C	1992	La logica dell'esercizio	2 <u>ª</u>	Italia	Idelson-Gnocchi
Ramachandram, V	1999	Fantasmas en el cerebro	1ª	Madrid	Debate pensamiento
NEUROPATHIC PAIN					
Loeser, J.D	2003	Bonica Terapéutica del dolor	3 <u>a</u>	México	McGraw-Hill Interamericana
Butler, D	2000	The sensitive nervous system	1ª	Adelaide	Noigroup Publications
Spicher, C	2008	Handbook for somatosensory rehabilitation	1ª		Sauramps Médicals
PHYSIOTHERAPY IN PAEDI	ATRICS				
Campbell, S	1999	Decisión Making in Pediatric Neurologic Physical Therapy	1ª	New York	Ed. Churchill Livingstone.
Campbell, S	2000	Physical Therapy for children	2 <u>ª</u>	Philadelphia	Saunders
Carr J., Shepperd R.	2002	Neurological Rehabilitation. Optimizing Motor Performance.	1ª	Oxford	Butterworth Heinemann
Le Métayer M.	1995	Reeducación cerebromotriz del niño pequeño. Educación terapéutica	1ª	Barcelona	Masson
Sheperd R.,	2000	Phisioterapy in Paediatrics	3ª	Oxford	Butterworth Heinemann

PLANNING OF THE COURSE UNIT

Available on the virtual campus for all those students enrolled in this course unit.



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GENERAL INFORMATION

COURSE UNIT

Course unit		P	PRACTICUM - III	
Code		200563	Academic year	2016-2017
ECTS	6		Type of course unit	Compulsory
Year	3		Term	1
Timetable Availa		ble on the virtual camp	us for all those students e	nrolled in this course unit.
Language of instruction		CATALAN		

4 TEAM TEACHERS

Team leader

Name of lecturer	Ms YOLANDA SÁNCHEZ
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Team members

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ADMISSION REQUIREMENTS

- BASIC PHYSIOTHERAPY OF THE LOCOMOTOR SYSTEM I
- BASIC PHYSIOTHERAPY OF THE LOCOMOTOR SYSTEM II



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THE COURSE UNIT WITHIN THE CURRICULUM

- Contents: Guided training.
- This course unit aims to consolidate and integrate all the knowledge, abilities, skills, attitudes, and values acquired and related to complex impairments of the locomotor system and mild neurological conditions, under the guidance of qualified physiotherapists. All those professional competences necessary to prepare the student to give effective physiotherapy care and comprehensive care to patients/users will be developed.

COMPETENCES AND LEARNING OUTCOMES

Specific competences

Competence	E4. Demonstrate knowledge of the physiotherapy methods, procedures, and actions that contribute to health promotion and maintenance.		
Learning outco	omes	E4.1. Design, teach, and advise about the different prevention methods for functional impairments and particularly those related to postural hygiene, mobility loss, and algid acute stages. Specific objectives: E4.1.1. Recommend prevention guidelines for patients with complex affections of the locomotor system and mild neurological conditions. E4.1.2. Explain, in a clear and structured way, recommended	

prevention guidelines developed for patients with complex affections of the locomotor system and mild neurological

Competence	E5. Integrate, through clinical experience, ethical and professional values, the		
	knowledge,	skills, and attitudes characteristic in physiotherapy to solve specific clinical	
	cases in hospital, out-of-hospital, primary and community health care envi		
Learning outcomes		E5.5. Solve clinical cases susceptible of physiotherapy treatment in any	
		clinical specialty.	
		Specific objectives:	
		E5.5.1. Effectively apply the different physiotherapy techniques to	
		patients with complex impairments of the locomotor system and	
		mild neurological conditions.	

conditions.

Competence	E6. Write and fill in physiotherapy registers.	
Learning outco	omes	E6.3. Record all the steps taken from the moment the patient/user is admitted to the moment he/she is discharged in an adequate and effective way according to each clinical specialty. Specific objectives:



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E6.3.1. Interpret physiotherapy records of patients with complex impairments of the locomotor system and mild neurological conditions.

Competence

E7. Assess the patient's functional state, taking into account physical, psychological, and social aspects.

Learning outcomes

E7.12. Follow the adequate physiotherapy validation procedures in order to determine the level of affection and its possible functional impact for the patients/users the student takes care of during the training.

Specific objectives:

E7.12.1. Use appropriately the specific assessment tools on patients with complex impairments of the locomotor system and mild neurological conditions.

Competence

E8. Make the physiotherapy diagnosis according to established norms and internationally recognised validation instruments.

Learning outcomes

E8.9. Establish a physiotherapy diagnostic hypothesis.

Specific objectives:

E8.9.1. Identify the deficiencies, limitations in everyday activities, participation restrictions, and contextual factors of patients with complex impairments of the locomotor system and mild neurological conditions.

E8.9.2. Interrelate the deficiencies, limitations in everyday activities, and participation restrictions of the patient applied to complex impairments of the locomotor system and mild neurological conditions.

Competence

E9. Develop a physiotherapy intervention plan according to criteria of adequacy, validity, and efficiency.

Learning outcomes

E9.17. Define the general and specific objectives for the application of the physiotherapy treatment.

Specific objectives:

E9.17.1. Propose the treatment objectives of complex impairments of the locomotor system and mild neurological conditions.

E9.18. Establish treatment priorities according to the problems detected.

Specific objectives:

E9.18.1. Classify the short-term and long-term goals for patients with complex impairments of the locomotor system and mild neurological conditions.

E9.18.2. Prioritise problems according to their importance and/or emergency, applied to complex impairments of the locomotor system and mild neurological conditions.

E9.19. Establish the periodicity for a physiotherapy treatment.

Specific objectives:

E9.19.1. Establish follow-up sessions for the treatment of complex impairments of the locomotor system and mild neurological conditions.



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E9.20. Anticipate the necessary material and equipment.

Specific objectives:

E9.20.1. Anticipate the necessary material and equipment for the treatment of complex impairments of the locomotor system and mild neurological conditions.

Competence E11. Assess the evolution of the results obtained in the treatment in relation to the final goals. Learning outcomes E11.1. Assess the results and their link with the final goals, through real cases in the different clinical specialties.

Compatence F13 Write discharge reports when the chiestives have been achieved

Specific objectives: E11.1.1. Compare the results and the predetermined goals in the treatment of complex impairments of the locomotor system and mild neurological conditions.

Competence	E12. Write discharge reports when the objectives have been achieved.	
Learning outco	omes	E12.2. Make a physiotherapy report that includes all the necessary information so that it is a valid communication tool for users and/or professionals. Specific objectives: E.12.2.1. Write clear and correct physiotherapy reports on complex impairments of the locomotor system and mild neurological conditions.

Competence	E13. Provide the patient with effective physiotherapy care and offer comprehensive
	care.

Learning outcomes

E13.5. Interpret a doctor's prescription.

Specific objectives:

E13.5.1. Analyse the instructions from the medical team.

E13.5.2. Incorporate the recommendations from the medical team into the physiotherapy treatment.

E13.6. Prepare the room where the physiotherapy treatment is going to be administered to make it comfortable.

Specific objectives:

E13.6.1. Adapt the material according to the patient's needs.

E13.6.2. Organise the physiotherapy treatment according to each individual case.

E13.7. Keep the patient informed about his/her treatment, explaining the tests and manoeuvres being used and their preparation, and encouraging him/her to participate in the treatment at all times.

Specific objectives:

E13.7.1.Communicate in a way that is easy to understand for the patient.

E13.7.2. Encourage the patient to take part in his/her recovery process.

E13.8. Identify the symptoms and signs of alterations in biological functions related to physiotherapy care.

Specific objectives:

E13.8.1. Detect any alterations in the patient's biological functions that can interfere and/or modify the physiotherapy treatment.



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Competence	E14. Take part in the areas of health promotion, prevention, protection, and recovery.	
Learning outco	omes	E14.9. Carry out health promotion, prevention, and protection activities for those patients assigned in the clinical training. Specific objectives: E14.9.1. Recommend specific pathology-related preventive measures to the patients assigned in the clinical training.

Competence	E16. Incorporate the ethical and legal principles of the profession into professional culture.	
Learning outco	omes	E16.5. Apply the legal and professional norms laying down the practice of physiotherapy. Specific objectives: E16.5.1. Assume professional responsibility. E16.5.2. Respect the limits of professional competence. E16.6. Comply with the professional code of ethics. Specific objectives: E16.6.1. Respect the individual's human and social rights. E16.6.2. Respect the professional code of ethics in each and every action.

Competence	E17. Participate in the making of health care protocols of scientific evidence-based physiotherapy, promoting professional activities that foster research in physiotherapy.		
Learning outco	omes	 E17.5. Apply health care protocols of scientific evidence-based physiotherapy. Specific objectives: E17.5.1. Apply validated and/or agreed health care protocols when treating complex impairments of the locomotor system and mild neurological conditions. 	

Competence	E21. Communicate effectively and clearly, both orally and in writing, with users of the health care service as well as with other health professionals.	
Learning outco	team. Specific ol E21.4.1. P E21.4.2. R action. E21.5. Use efferinteraction befamily. Specific ol E21.5.1. Idea	efrain from interfering with workmates' professional ective and appropriate communication skills to facilitate tween the physiotherapist and the patient and his /her

Transversal competences

Competence	T4. Manage information systems.	
Learning outco	mes	Specific objectives: T4.1. Use efficiently clinical databases about patients.



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Competence	T7. Team work.		
Learning outco	omes	This competence is developed through the E21.4. learning outcome.	
Competence	T8. Develop i	interpersonal relationships.	
Learning outco	omes	Specific objectives:	
		This competence is developed through the E21.5. learning outcome	
Competence	T9. Develop critical thinking.		
Learning outco	omes	Specific objectives:	
_		T9.1. Make a value judgment on the treatment given to a patient.	
		T9.2. Contribute elements that can improve our colleagues' and our own actions.	
		T9.3. Make judgments and assessments of one's own actions.	
		-	
Competence	T14. Demonstrate sensitivity to environmental issues.		
Learning outcomes		Specific objectives:	
		T14.1. Put environmental actions into professional practice, by means of energy saving tips and recycling waste.	

Generic competences

Competence	G2. Develop strategies of autonomous learning.		
Learning outcomes		This competence is developed by working competences " T4. Manage information systems", " T7. Team work", " T8. Develop interpersonal relationships", and " T9. Develop critical thinking".	
Competence	G3. Respect diversity and plurality of ideas, people, and situations.		
Learning outcomes		Specific objectives: G3.1. Establish good relationships regardless of social or cultural differences.	

CONTENTS

The Practicum aims to integrate all the knowledge, abilities, skills, attitudes, and values
acquired in and related to complex impairments of the locomotor system and mild
neurological conditions, under the guidance of qualified physiotherapists, under the guidance
of qualified physiotherapists. All those professional competences necessary to prepare the
student to give effective physiotherapy care and comprehensive care to patients/users will be
developed



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TEACHING METHOD

TRAINING

• The student will assess the patients, make the physiotherapy diagnosis, create a plan of action and apply it, and evaluate the results.

Estimated time: 105 hours.

INFORMATIVE SESSIONS

• The student will be informed about how to do the different training activities. Estimated time: 7,5 hours.

PAPER WRITING

Write a report of the training.
 Estimated time: 30 hours.

•

SELF-EVALUATION

Write a self-evaluation report.
 Estimated time: 4,5 hours.

EVALUATION BY THE CENTRE AND TUTOR

Fill in an evaluation form about the centre and tutor.

Estimated time: 3 hours.

ACTIVITY TYPE	ACTIVITY	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
Directed activities	Informative sessions		7,5
Supervised activities	Training	E4, E5, E6.3, E7, E8.9, E9.17, E9.18, E9.19, E9.20, E11, E12, E13.5, E13.6, E13.7, E13,.8, E14, E16, E17, E21, T4, T7, T8, T14, G2, G3	105
	Write a report of the training	E4, E16, E21, T14, G2, G3	30
Autonomous activities	Write a self-evaluation report	Т9	4,5
	Fill in an evaluation form about the centre and tutor	Т9	3
TOTAL NUMBER OF HOURS			150



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Physiotherapy

ASSESSMENT METHOD

The Practicum commission will take the following into account:

- The report presented by the tutor. This will account for 60% of the final mark.
- The student's self-evaluation report. This will account for 1% of the final mark.
- The practicum report. This will account for 39% of the final mark.

In order to pass the course, the following conditions have to be met:

- Pass each section and part of the unit with a minimum mark of 5.
- Get a minimum final mark of 5.

ASSESSED ACTIVITIES	PERCENTAGE FINAL MARK	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
The report presented by the tutor	60%	E4, E5, E6.3, E7, E8.9, E9.17, E9.18, E9.19, E9.20, E11, E12, E13.5, E13.6, E13.7, E13,.8, E14, E16, E17, E21, T4, T7, T8, T14, G2, G3	
The student's self-evaluation report	1%	Т9	
The practicum report	39%	E4, E16, E21, T14, G2, G3	
TOTAL NUMBER OF HOURS			0

BIBLIOGRAPHY AND WEB PAGES / BASIC READINGS

Web pages			
Title	Description	URL	
EscalesFisioterapia.pdf	Escales de valoració i	Intranet de l'assignatura	
	qüestionaris més		
	emprats a Fisioteràpia		

PLANNING OF THE COURSE UNIT

Available on the virtual campus for all those students enrolled in this course unit.



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Physiotherapy

GENERAL INFORMATION

COURSE UNIT

Course unit		APPLIED DIET AND NUTRITION		
Code		200556	Academic year	2016-2017
ECTS		6	Type of course unit	Optional
Year		3	Term	1
Timetable	Available on the virtual campus for all those students enrolled in this course unit			
Language of instruction CATALAN				

TEAM TEACHERS

Team leader

Name of lecturer	Ms PILAR CASAS JANSÀ	
e-mail	pilar.casas@eug.es	
Office hours	To be agreed on	

ADMISSION REQUIREMENTS

• None.

THE COURSE UNIT WITHIN THE CURRICULUM

- Course contents: Applied diet and nutrition
- This course aims to introduce the student to the field of food science and nutrition, study in
 depth the importance of a good diet as a basic aspect of human life and health, and know how
 to use the different types of food in an appropriate way in all the stages of life and in the
 treatment of different pathologies by recommending balanced and varied diets.
- The knowledge of nutrition and diet complements the degree of physiotherapy within the field of public and community health allowing further interaction among different health professionals.



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Physiotherapy

COMPETENCES AND LEARNING OUTCOMES

Specific competences

E4. Demonstrate knowledge of the physiotherapy methods, procedures, and action that contribute to health promotion and maintenance.

Learning outcomes

Competence

E4.14. Give advice about the importance of a healthy diet in order to improve and maintain good health in the population, taking healthy and ill and/or injured individuals into account.

Specific objectives:

E4.14.1. Describe the bases of human nutrition, including nutrients and their importance for the human body.

E4.14.2. Describe the bases of bromatology, including food and its components.

E4.14.3. Explain the nutritional needs of a healthy population.

E4.14.4. Explain the nutritional needs of the population in the different stages of life.

E4.14.4. Explain the nutritional needs of a population suffering from different pathologies.

Competence

E14. Take part in the areas of health promotion, prevention, protection, and recovery.

Learning outcomes

E14.13. Carry out activities to promote, prevent, protect, and recover good health.

Specific objectives:

E14.13.1. Identify and classify the different types of food and their nutritional values.

E14.13.2. Interpret and use food composition tables and databases.

E14.13.3. Understand the importance of a healthy diet.

E14.13.4. Give diet guidelines for the prevention of some pathologies.

Transversal competences

Competence	T1. Analyse and summarise.

Learning outcomes

Specific objectives:

T1.1. Identify food labels.

T1.2. Draw conclusions about some articles and publications.

T1.3. Analyse one's own diet.

Competence T7. Team work.

Learning outcomes

Specific objectives:

T7.1. Participate actively in the team, sharing experiences and knowledge.

T7.2. Take account of other people's point of view.

T7.3. Connect with team members.



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Physiotherapy

Generic competences

Competence G2. Develop strategies of autonomous learning.

Learning outcomes This is a competence that is developed by working competence "T1.

Analyse and summarise" and "T7. Team work".

CONTENTS

- 1. DIET AND NUTRITION
- 2. NUTRIENTS
- 3. NUTRITIONAL NEEDS OR FUNCTIONS OF NUTRIENTS
- 4. FOOD
- 5. A HEALTHY DIET
- 6. A DIET FOR EVERY STAGE OF LIFE
- 7. A DIET FOR DIFFERENT DISEASES

TEACHING METHOD AND ACTIVITIES

DIRECTED ACTIVITIES

• **Theoretical lessons** that will provide the student with the theoretical basis of the subject. The lessons will offer visual and computer-based support.

Estimated time: 37.5 hours.

SUPERVISED ACTIVITIES

Debates over a suggested topic.

Estimated time: 15 hours.

AUTONOMOUS ACTIVITIES

• Complement the theoretical and practical knowledge gained with some **further bibliographic reading** that will be assessed in the writing tests.

Estimated time: 20 hours.

- Write a paper on the analysis of diet.
- Write a paper on the analysis of different food labels.

Estimated time: 25 hours.



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Physiotherapy

• **Autonomous work** of individual study to prepare exams, organise notes/materials, tutorials: individually or in groups.

Estimated time: 50.25 hours.

ACTIVITY TYPE	ACTIVITY	LEARNING OUTCOMES	TIME (in hours) DEVOTED BY THE STUDENT
Directed activities	Theoretical lessons	E4	37.5
Supervised activities	Debates	E4, E14, T7, G2	15
Autonomous	Bibliographic reading	E4, T1, G2	20
Autonomous activities	Paper writing	E4, E14, T1	25
activities	Autonomous work	E4, E14	50.25
TOTAL NUMBER OF HOURS 147.75			

ASSESSMENT METHOD

The assessment method will include:

- The knowledge acquired in the theoretical lessons will be assessed through written tests, which will amount to 50% of the final mark.
- Student's motivation, attitude, and participation in the debates will be assessed throughout the course, which will amount to 10% of the final mark.
- The written papers will account for 40% of the final mark.

In order to pass the course, the following conditions have to be met:

- Pass each section and part of the unit with a minimum mark of 5.
- Hand in and pass all the papers, fulfilling the criteria established by the teacher.
- Get a minimum final mark of 5.

ASSESSED ACTIVITES	PERCENTAGE FINAL MARK	LEARNING OUTCOMES	TIME (in hours) DEVOTED BY THE STUDENT
Written tests	50%	E4, E14	2
Participation in the debates	10%	E4, E14, T7, G2	0.25
Written papers	40%	E4, E14, T1, G2	
TOTAL NUMBER OF HOURS			2.25



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Physiotherapy

BIBLIOGRAPHY AND WEB PAGES/BASIC REQUIRED READINGS

Books					
Author/s	Year	Title	Edition	City	Publisher
Mataix, J.	2002	Nutrición y Alimentación			Ergon Creación
		Humana			
Vidal García, E.	2009	Manual Práctico de Nutrición y			Monsa–Prayma
		Dietoterapia			Ediciones
Gonzalez Gallego, J. Sánchez	2006	Nutrición en el deporte. Ajudas			Diaz de Santos
Collado P. Mataix Verdú, J.		ergogénicas y dopage.			
Martínez,A, Astizaran, I.	2002	Alimentos composición y		Madrid	Mc.Graw-Hill
		propiedades			

BIBLIOGRAPHY AND WEB PAGES / BASIC RECOMMENDED READINGS

Books					
Author/s	Year	Title	Edition	City	Publisher
Roselló Borredà, M.J.	2006	La importància de menjar sa i		Barberà del	Rosa dels Vents
		saludable		Vallès	
				(Barcelona)	
Federación Española de	2010	Ingestas Dietéticas de			Eunsa. Astrolabio
Sociedades de Nutrición,		Referéncia (IDR) para la			
Alimentación y Dietética		población española			
(FESNAD)					
Ortega Anta, R. López Sobalier	2004	La Composición de los			Complutense
A. Requejo Marcos A. Andrés		Alimentos			
Carbajales P.					

Web pages			
Title	Description	URL	
Agència Catalana de Seguretat alimentària.	2 de setembre 2010	"http://www.gencat.cat/salut/acsa/Du12/html/ca/Du12/"	
Agencia española de seguridad alimentaria y nutrición	2 de setembre 2010	"http://www.aesan.msc.es"	
Base de Datos Española Composición de Alimentos.	2 de setembre 2010	" http://www.bedca.net/bdpub/index.php"	

PLANNING OF THE COURSE UNIT

Available on the virtual campus for all those students enrolled in this course unit.



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GENERAL INFORMATION

COURSE UNIT

Course unit	PHYSIOTHERAPY IN PSYCHIATRY			
Code	200559		Academic year	2016-2017
ECTS	6		Type of course unit	Optional
Year	3		Term	1
Timetable	Available on the virtual campus		us for all those students e	nrolled in this course unit
Language of instruction CATALAN / SPANISH				

TEAM TEACHERS

Team leader

Name of lecturer	Mr FERNANDO GUERRICO	
e-mail	fernando.guerrico@eug.es	
Office hours	To be agreed on	

Team members

Name of lecturer	Dr HECTOR GRIMBERG
e-mail	hectorgrimberg52@hotmail.com
Office hours	To be agreed on

Name of lecturer	Ms ROSANA LUBELZA ROCA	
e-mail	rosana.lubelza@eug.es	
Office hours	office hours To be agreed on	

ADMISSION REQUIREMENTS

• None

THE COURSE UNIT WITHIN THE CURRICULUM

- Course contents: Physiotherapy in psychiatry.
- This course aims to consolidate the bases of physiotherapy assessment and treatment of patients with psychiatric pathologies.
- The knowledge of physiotherapy applied to patients with a psychiatric pathology is important since the frequency of psychiatric cases is quite high and it provides knowledge of the specific care required within the degree and the profession.



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Physiotherapy

COMPETENCES AND LEARNING OUTCOMES

Specific competences

Competence

E1. Demonstrate knowledge of the morphology, physiology, pathology, and conduct of both healthy and ill people in their natural and social environment.

Learning outcomes

E1.34. Describe mental disorders, identifying the different symptoms and signs in the development process, as well as their aetiology and the medical, psychological, and rehabilitation treatments involved.

Specific objectives:

E1.34.1. Describe the symptomatology and aetiology of mental disorders.

E1.34.2. Enumerate and describe the medical, psychological and rehabilitation treatments for mental disorders.

E1.34.3. Take account of the way the psychiatric patient interacts with other people so that the most appropriate treatment can be administered.

Competence

E3. Demonstrate knowledge of the physiotherapy methods, procedures, and actions that lead to clinical therapeutics.

Learning outcomes

E3.28. Apply the basic physiotherapy methods, procedures and actions in the treatment of psychiatric disorders.

Specific objectives:

E3.28.1. Describe the main psychopathological characteristics that determine the physiotherapy approach to mental disorders.

E3.28.2. Apply a therapeutic approach from the perspective of physiotherapy in the treatment of mental disorders, taking into account their basic determinants and premises.

Competence

E5. Integrate, through clinical experience, ethical and professional values, the knowledge, skills, and attitudes characteristic in physiotherapy to solve specific clinical cases in hospital, out-of-hospital, primary and community health care environments.

Learning outcomes

E5.18. Apply the knowledge and competences acquired in the course to solve clinical cases in psychiatry that can be treated with physiotherapy.

Specific objectives:

E5.18.1. Get to know the general system of healthcare for patients with mental illness within the health service.

E5.18.2. Define the figure of the physiotherapist in the current healthcare system (mental illness).

E5.18.3. Describe the role of physiotherapy in the rehabilitation of patients with a mental disorder.

E5.18.4. Organise and plan physiotherapy intervention strategies for patients with mental disorders taking the healthcare environment into account.

E5.18.5. Perform the role of the physiotherapist in the interdisciplinary team that treats patients with mental disorders.



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Competence

E7. Assess the patient's functional state, taking into account physical, psychological, and social aspects.

Learning outcomes

E7.25. Describe and apply the adequate physiotherapy assessment procedures, with the aim of determining the level of affection of the locomotor system due to psychiatric problems.

Specific objectives:

E7.25.1.Select the clinical data in the clinical history of the psychiatric patient.

E7.25.2. Assess the alterations in the locomotor system and postural structure of the patients with mental disorders.

E7.25.3. Gather kineanthropometric data.

E7.25.4. Assess the basic physical capacities in the patients with mental illness

E7.25.5. Describe the gait patterns characteristic of different mental pathologies.

E7.25.6. Assess gait alterations in patients with mental disorders.

E7.25.7. Enumerate the external factors that need to be taken into account in the patient's functional state, as well as medication side effects

E7.25.8. Use the tools and diagnostic assessment scales related to alterations of the locomotor system.

Competence

E8. Determine the physiotherapy diagnosis according to established norms and using internationally recognised validation instruments.

Learning outcomes

E8.15. Establish the physiotherapy diagnostic hypothesis based on some clinical cases related to alterations of the locomotor system due to psychiatric problems.

Specific objectives:

E8.15.1. Describe the objective criteria to be taken into account in the diagnostic orientation of patients with mental disorders.

E8.15.2. Formulate a diagnostic hypothesis based on the deficits found when examining the patient.

E8.15.3. Distinguish between a psychiatric diagnosis and a physiotherapy diagnosis.

Competence

E9. Develop a physiotherapy intervention plan according to criteria of adequacy, validity, and efficiency.

Learning outcomes

E9.43. Define the general and specific objectives for the application of the physiotherapy treatment of impairments of the locomotor system due to psychiatric problems.

Specific objectives:

E9.43.1. Draw up a good intervention plan for patients with a mental illness. Intervention models (individual intervention, group intervention, ...)

E9.43.2. Establish general objectives for the treatment of patients with a mental illness, according to their priority.

E9.43.3. Establish specific objectives for the treatment of patients with a mental illness, according to their priority.

E9.44. Describe the circumstances that determine the priorities for action in the physiotherapy treatment of impairments of the locomotor system due to psychiatric problems.



PHYSIOTHERAPY (EHEA DEGREE)

COURSE CATALOGUE

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Physiotherapy

Specific objectives:

E9.44.1. Identify the characteristics of psychiatric decompensation, detecting any alarm sign or symptom.

E9.44.2. Identify the circumstances that lead to physiotherapy treatment withdrawal for those patients with a mental illness.

E9.44.3. Determine the best moment to give treatment to those patients with a mental disorder.

E9.44.4 Establish criteria for priority or selection of techniques to be used when treating patients with a mental disorder.

E9.44.5 Detect any alarming or critical situation and apply the guidelines to be followed when treating patients with a mental disorder.

E9.45. Enumerate the different types of material and apparatus to be used in the physiotherapy treatment of impairments of the locomotor system due to psychiatric problems.

Specific objectives:

E9.45.1. Choose the most appropriate material to treat a psychiatric patient.

Competence

E17. Participate in the making of health care protocols of scientific evidence-based physiotherapy, promoting professional activities that foster research in physiotherapy.

Learning outcomes

E17.12. Describe and analyse the health care protocols of evidence-based physiotherapy in conditions of the musculoskeletal system due to psychiatric problems.

Specific objectives:

E17.12.1. Enumerate the different evidence-based physiotherapy assistance protocols for patients with a mental illness.

E17.12.2 Perform a useful role within a multidisciplinary team conducting psychiatric research.

Competence

E20. Apply the quality guarantee mechanisms in the practice of physiotherapy, according to recognised and validated criteria.

Learning outcomes

E20.14. Describe the guides to good clinical practice applied to impairments of the locomotor system due to psychiatric problems.

Specific objectives:

E20.14.1. Describe the quality control processes that are used in centres for psychiatric patients.

E20.14.2. Interpret the guides to good clinical practice used in centres for mental health services.

Transversal competences

Competence	T8. Develop interpersonal relationships.	
Learning outcome	es	Specific objectives: T8.1. Describe the communication strategies to be used with a psychiatric patient.
		T8.2. Establish the limits and limitations in the treatment of psychiatric patients.



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T8.3. Identify the elements that play a part in the physiotherapist-
psychiatric patient relationship.

- **T8.4.** Communicate in a natural way, creating a climate of equality and collaboration.
- **T8.5.** Be respectful to the interlocutor regarding both content (what is said) and form (how something is said).
- **T8.6.** Adapt verbal and non-verbal communication to the situation and needs of a patient with a mental disorder.
- **T8.7.** Establish limits to the affective links with the patient with a mental disorder.

Generic competences

Competence	G3. Respect diversity and plurality of ideas, people, and situations.		
Learning outco	omes	Specific objectives:	
		G3.1. Identify, recognise, and respect the patient's subjective position.	
		G3.2. Recognise the main characteristics of the patient's religious and cultural beliefs.	

CONTENTS

- 1. History of mental disorders.
- 2. Main mental illnesses. Characteristics, physiopathology, ...
- 3. Treatment of mental illnesses. Psycho drugs, psychotherapies. Side effects of medicines.
- 4. Mental health network.
- 5. Physiotherapy and healthcare social structure of mental illnesses.
- 6. Multidisciplinary teams.
- 7. Physiotherapy treatment.
- 8. Communication and relationship with the mental patient.
- 9. Prevention of mental disorders.
- 10. Research in physiotherapy and mental health.
- 11. Clinical cases: presentation, development, discussion.

TEACHING METHOD AND ACTIVITIES

DIRECTED ACTIVITIES

• **Theoretical lessons** that will provide the student with the theoretical bases of physiotherapy in psychiatry. The lessons will offer visual and computer-based support.

Estimated time: 27 hours.

• **Practical lessons** where the teacher will present, with the help of a model, different treatments. The lessons will offer visual and computer-based support

Estimated time: 12 hours.



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• **Presentation and resolution of clinical cases.** Different clinical cases will be presented for which the student will have to suggest the best treatment.

Estimated time: 6 hours.

SUPERVISED ACTIVITIES

• **Practical activity** with a patient, under the supervision of the teacher, to apply the different techniques presented.

Estimated time: 15 hours.

AUTONOMOUS ACTIVITIES

• In small groups. Based on a topic agreed by the teacher and the student, the student will search updated bibliography on the topic and will write a summary of the five most relevant articles and will present a critical review of them.

Estimated time: 20 hours.

• Elaboration, theoretical approach and discussion of a clinical case presented by the teacher based on the search previously done.

Estimated time: 10 hours.

• **Autonomous work** of individual study to prepare exams, organise notes/materials, tutorials: individually or in group.

Estimated time: 57.5 hours.

ACTIVITY TYPE	ACTIVITY	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
	Theoretical lessons	E1, E3, E5, E7, E8, E9, E17, E20, T8, G3	27
Directed	Practical lessons	E3, E5, E7, E8	12
activities	Presentation and resolution of clinical cases	E1, E3, E5, E7, E8, E9, E17, T8, G3	6
Supervised activities	Practical activities	E3, E5, E7, E8	15
	Article summaries	E1, E3, E5, E7, E8, E17, E20	20
Autonomous activities	Development of a clinical case	E1, E3, E5, E7, E8, E9, E17, E20	10
	Autonomous work	E1, E3, E5, E7, E8, E9, E17, E20	57.5
TOTAL NUMBER OF HOURS 147.5			



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ASSESSMENT METHOD

The assessment method will include:

- The theoretical part will be assessed through written tests, which amount to 35% of the final mark.
- Assessment of the necessary skills involved in therapeutic management and their appropriateness in a given situation. This accounts for 40% of the final mark.
- The written papers and the clinical cases presented amount to 25% of the final mark.

In order to pass the course, the following conditions have to be met:

- Pass each section and part of the unit with a minimum mark of 5.
- Hand in and pass all the papers, fulfilling the criteria established by the teacher.
- Attendance at 100% of practical lessons (justified absences will allow the student to miss up to 20% of all the practical lessons).
- Get a minimum final mark of 5.

ASSESSED ACTIVITIES	PERCENTAGE FINAL MARK	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
		E1, E3, E5, E7, E8,	
Written tests	35%	E9, E17, E20, T8,	2
		G3	
Oral practical tests	40%	E3, E5, E7, E8	0.25
Written papers and clinical		E1, E3, E5, E7, E8,	
, ,	25%	E9, E17, E20, T8,	0.25
cases		G3	
	2.5		

BIBLIOGRAPHY AND WEB PAGES / BASIC READINGS

Books					
Author/s	Year	Title	Edition	City	Publisher
Demetrio Barcia Salorio	2000	Tratado de Psiquiatria		Madrid	Aran ediciones
Kaplan-Sadock	2004	Sinopsis de Psiquiatria			Waverly Hispanica
J. vallejo Ruiloba	2002	Introducción a la Sicopatología		Barcelona	Masson
		y Psiquiatria			
Sigmund Freud	2000	Las perspectivas futuras de la		Buenos	Obras Completas,
		terapia psicoanalítica		Aires	Vol XI Amorrortu
					Ediciones 1996

PLANNING OF THE COURSE UNIT

Available on the virtual campus for all those students enrolled in this course unit.



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Physiotherapy

GENERAL INFORMATION

COURSE UNIT

Course unit	CARDIORESPIRATORY PHYSIOTHERAPY			
Code	200564		Academic year	2016-2017
ECTS	6		Type of course unit	Compulsory
Year	3		Term	2
Timetable	Available on the virtual campus for all those students enrolled in this course unit.			nrolled in this course unit.
Language of instruction CATALAN				

TEAM TEACHERS

Team leader

Name of lecturer	Ms JULIA ESTELA ESTEVE	
e-mail	julia.estela@eug.es	
Office hours	To be agreed on	

Team members

Name of lecturer	Ms. VANESA RODRÍGUEZ
e-mail	vanesa.rodriguez@eug.es
Office hours	To be agreed on

Name of lecturer	Ms ANDREA VALIENTE
e-mail	andrea.valiente@eug.es
Office hours	To be agreed on

ADMISSION REQUIREMENTS

None

THE COURSE UNIT WITHIN THE CURRICULUM

Course contents: Cardiorespiratory physiotherapy.



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- This course aims to provide the student with the necessary theoretical knowledge and practical skills to give assessment and treatment based on scientific evidence and good clinical practice in the field of cardiorespiratory physiotherapy.
- The knowledge of this speciality is fundamental within the degree and the profession since the incidence of cardiorespiratory diseases has greatly increased in the population.

COMPETENCES AND LEARNING OUTCOMES

Specific competences

Competence

E3. Demonstrate knowledge of the physiotherapy methods, procedures, and actions that lead to clinical therapeutics.

Learning outcomes

E3.9. Identify the physiological and structural changes caused by a physiotherapy intervention for cardiorespiratory diseases.

Specific objectives:

- **E3.9.1.** Relate the different procedures used in cardiorespiratory physiotherapy to the physiopathology of the cardiorespiratory system.
- **E3.9.2.** Distinguish normal and pathological ventilatory biomechanics.
- **E3.9.3.** Identify the objective changes produced by the application of procedures used in cardiorespiratory physiotherapy.
- **E3.8.** Apply physiotherapy methods, procedures, and actions in the treatment for cardiorespiratory diseases.

Specific objectives:

- **E3.8.1.** Apply basic physiotherapy procedures to increase pulmonary ventilation.
- **E3.8.2.** Apply basic physiotherapy procedures to reduce pulmonary hyperinsuflation.
- **E3.8.3.** Apply basic physiotherapy procedures to permeate air passages.
- E3.8.4. Apply basic physiotherapy procedures to control dyspnoea.

Competence

E5. Integrate, through clinical experience, ethical and professional values, the knowledge, skills, and attitudes characteristic in physiotherapy to solve specific clinical cases in hospital, out-of-hospital, primary and community health care environments.

Learning outcomes

E5.3. Solve clinical cases susceptible of physiotherapy treatment in the field of cardiorespiratory diseases.

Specific objectives:

E5.3.1. Suggest the most adequate treatments for the proposed cases of pathologies in the field of cardiorespiratory physiotherapy. **E5.3.2.** Develop empathic, communicative and educational skills to address the patient and his/her family, paying attention to critical or terminal situations.

Competence

E7. Assess the patient's functional state, taking into account physical, psychological,



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Physiotherapy

and social aspects.

Learning outcomes

E7.9. Describe and apply adequate physiotherapy assessment procedures, with the aim of determining the level of affection of the cardiorespiratory system and its possible functional repercussion.

Specific objectives:

E7.9.1. Take a physiotherapy medical history focused on promoting observation skills and data gathering about the patient's clinical condition, statics, dynamics and symptomatology.

E7.9.2. Use the different assessment scales employed in the field of cardiorespiratory physiotherapy.

E7.9.3. Develop data interpretation skills in order to carry out an assessment and recommend an appropriate treatment in cardiorespiratory physiotherapy.

Competence

E8. Determine the physiotherapy diagnosis according to established norms and using internationally recognised validation instruments.

Learning outcomes

E8.7. Establish a physiotherapy diagnostic hypothesis through clinical cases of cardiorespiratory diseases.

Specific objectives:

E8.7.1. Establish a physiotherapy diagnostic hypothesis according to the analysis of any possible cardiorespiratory deficits and alterations found on examination.

Competence

E9. Develop a physiotherapy intervention plan according to criteria of adequacy, validity, and efficiency.

Learning outcomes

E9.12. Define the general and specific objectives for the application of the physiotherapy treatment of cardiorespiratory diseases.

Specific objectives:

E9.12.1. Identify the action priorities of cardiorespiratory physiotherapy according to short-term and long-term diagnostic hypothesis.

E9.12.2. Set the objectives of the cardiorespiratory treatment according to a given diagnostic hypothesis.

E9.13. Describe those circumstances that determine the priorities for action in the physiotherapy treatment in the field of cardiorespiratory diseases.

Specific objectives:

E9.13.1. Establish short-term and long-term treatment objectives based on the continuous assessment of the patient as well as his/her sociofamilial environment.

E9.14. Enumerate the different types of material and equipment used in the physiotherapy treatment of cardiorespiratory diseases.

Specific objectives:

E9.14.1. Choose the most appropriate and specific equipment when prescribing a treatment.

E9.14.2. Teach the cardiorespiratory patient how to use the necessary equipment.



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Physiotherapy

Competence

E17. Participate in the making of health care protocols of scientific evidence-based physiotherapy, promoting professional activities that foster research in physiotherapy.

Learning outcomes

E17.3. Describe and analyse the health care protocols of evidence-based physiotherapy in the field of cardiorespiratory diseases.

Specific objectives:

E17.3.1. Enumerate the different physiotherapy assistance protocols in the field of cardiorespiratory diseases.

Competence

E20. Apply the quality guarantee mechanisms in the practice of physiotherapy, according to recognised and validated criteria.

Learning outcomes

E20.7. Describe the guides to good clinical practice applied in the field of cardiorespiratory diseases.

Specific objectives:

E20.7.1. Name the existing guides to good clinical practice in the field of cardiorespiratory diseases.

Transversal competences

Competence	T6 . Take the most adequate decisions in a specific situation.		
Learning outcome	25	Specific objectives: T6.1. Justify the decisions made in relation to any basic problem in the cardiorespiratory patient, using the clinical cases presented in class.	

Competence	T7. Team work.
Competence	I / I Calli WOLK.

Learning outcomes

Specific objectives:

T7.1. Observe the necessary conditions to work in teams.

T7.2. Assume responsibility for the tasks assigned within the team.

Generic competences

Competence	G2. Develop strategies of autonomous learning.		
Learning outco	omes	This is a competence that is developed by working competence "T7. Team work."	

CONTENTS

- 1. Introduction.
- 2. Kinesiology and biomechanics of ventilation.



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Physiotherapy

- 3. General objectives of physiotherapy.
- 4. Cardiorespiratory physiotherapy assessment.
- 5. Ventilatory reeducation techniques.
- 6. Secretion drainage techniques. Permeating air passages.
- 7. Techniques to control dyspnoea.
- 8. Analyse the techniques to be used.
- 9. Physiotherapy treatment for COPD.
- 10. Treating other obstructive pathologies of the respiratory system.
- 11. Physiotherapy treatment for restrictive diseases.

TEACHING METHOD AND ACTIVITIES

DIRECTED ACTIVITIES

• **Theoretical lessons** that will provide the student with the necessary theoretical knowledge. The lessons will offer visual and computer-based support.

Estimated time: 27 hours.

• **Practical lessons** where the teacher will present, with the help of a model, different techniques. The lessons will offer visual and computer-based support.

Estimated time: 12 hours.

Presentation and resolution of clinical cases. Different clinical cases will be presented for which
the student will have to interpret the data and suggest an appropriate treatment in the field of
cardiorespiratory physiotherapy.

Estimated time: 4.5 hours.

SUPERVISED ACTIVITIES

- **Practical activity,** under the teacher's supervision, to apply the different techniques presented. Estimated time: 21 hours.
- **Group work** where the students will have to discuss and solve a clinical case in the field of cardiorespiratory physiotherapy.

Estimates time: 9 hours.

AUTONOMOUS ACTIVITIES

 The student will complement all the theoretical knowledge provided in class with the reading of some bibliography that will be assessed in the written tests.

Estimated time: 10 hours.

Writing a basic medical history of a cardiorespiratory patient.

Estimated time: 10 hours.

 Autonomous work of individual study to prepare exams, organise notes/material, tutorials: individually or in group.

Estimated time: 51.5 hours.

ACTIVITY TYPE	A CTIVITY	LEADAUNG OUTCOMES	TIME DEVOTED BY
ACTIVITY TYPE	ACTIVITY	LEARNING OUTCOMES	THE STUDENT



EUIF GIMBERNAT

Physiotherapy

	Theoretical lessons	E3.8, E3.9, E5, E7.9,	27
		E8.7, E9.12, E9.13,	
Discrete		E9.14, E17, E20.7	
Directed	Practical lessons	E3.8, E5, E7.9, E8.7	12
activities	Presentation and	E3.8, E5, E7.9, E8.7,	4.5
	resolution of clinical	E9.12, E9.13, E9.14,	
	cases	E17, T6, G2	
	Practical activity	E3.8, E5, E7.9, E8.7	21
Supervised	Group work	E3.8, E3.9, E5, E7.9,	9
activities		E8.7, E9.12, E9.13,	
		E9.14, E17, T7	
	Reading bibliography	E3.8, E3.9, E5, E7.9,	10
		E8.7, E17, E20.7	
	Writing a medical	E3.8, E3.9, E5, E7.9,	10
Autonomous	history	E8.7, E9.12, E9.13,	
activities		E9.14, E17, E20.7	
	Autonomous work	E3.8, E3.9, E5, E7.9,	51.5
		E8.7, E9.12, E9.13,	
		E9.14, E17, E20.7	
	T	OTAL NUMBER OF HOURS	145

ASSESSMENT METHOD

The assessment method will include:

- The knowledge acquired will be assessed through written tests, which will amount to 50% of the final mark.
- Assessment of the manual skills necessary to apply a specific technique and of adequacy
 of the technique/manoeuvre used in a given situation, through oral practical tests that
 account for 30% of the final mark.
- The medical history will account for 10% of the final mark.
- The oral presentation of a clinical case based on the group work will amount to 10% of the final mark.

In order to pass the course, the following conditions have to be met:

- Pass each section and part of the unit with a minimum mark of 5.
- Hand in and pass all the papers, fulfilling the criteria established by the teacher.
- Attendance at 100% of practical classes (justified absences will allow the student to miss up to 20% of all the practical classes).
- Get a minimum final mark of 5.

ASSESSED ACTIVITIES	PERCENTAGE FINAL MARK	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
Written tests	50	E3.8, E3.9, E5,	2
		E7.9, E8.7, E9.12,	2



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		HORES TOTALS	5
		T7, T6, G2	
		E9.13, E9.14, E17,	1.5
group work		E7.9, E8.7, E9.12,	1.5
Clinical case based on the	10	E3.8, E3.9, E5,	
		E20.7	
		E9.13, E9.14, E17,	
		E7.9, E8.7, E9.12,	
Medical history	10	E3.8, E3.9, E5,	
Oral practical tests	30	E3.8, E5, E7.9, E8.7	1.5
		E20.7	
		E9.13, E9.14, E17,	

BIBLIOGRAPHY AND WEB PAGES / BASIC REQUIRED READINGS

Books					
Author/s	Year	Title	Edition	City	Publisher
Netter F	2000	Sistema Respiratorio	1ª, reimpres 8ª	Barcelona	Masson
West J	2005	Respiratory physiology the essentials	7ª	USA	Panamericana
Kapandji	2007	El tórax y la respiración	6 <u>ª</u>	Madrid	Panamericana
Postiaux	2000	Fisioterapia respiratoria en el niño	1ª	Madrid	Mc Graw Hill
Antonello	2002	Fisioterapia respiratoria	1ª	Barcelona	Masson
Pryor JA, Prasad SA	2002	Physiotherapy for respiratoryand cardiac problems. Adults and paediatrics	3ª	London	Churchill Livingstone
Güell R	2005	Tratado de RHB respiratoria		Barcelona	SEPAR

Articles						
Author	Title	Publication	Volume	Year	Pages	Description/
						comment
Orozco Levi	El diafragma	Arch bronconeumol	33	1997	399-411	
Josa R	Avaluació en la	Actualitzacions en	1	2004	17-40	
	Fisioterapia	fisioterapia				
	respiratoria					

BIBLIOGRAPHY AND WEB PAGES / BASIC RECOMMENDED READINGS

Books					
Author/s	Year	Title	Edition	City	Publisher
Jefferies A	2001	Lo esencial en aparato respiratorio	1ª	Madrid	Hartcourt
Frowenfelter	2006	Cardiovascular and pulmonary physical therapy	4ª	USA	Mosby Elsevier
Reychler, Roesler, Delguste	2009	Kinésithérapie respiratoire	2ª	Bruxelles	Elsevier
Champignion Ph	2008	Respir- acciones	2ª	Alicante	Lencina y Verdú
Gimenez M, Servera E, Vergara P	2004	Prevención y RHB en patología respiratoria crónica	2ª	Madrid	Panamericana



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Physiotherapy

Articles						
Author	Title	Publication	Volume	Year	Pages	Description/ comment
Weibel ER	How to make an alvéolus	Eur Respir J	31	2008	483-85	

PLANNING OF THE COURSE UNIT

Available on the virtual campus for all those students enrolled in this course unit.



EUIF GIMBERNAT

Physiotherapy

GENERAL INFORMATION

COURSE UNIT

Course unit		GERIATRIC PHYSIOTHERAPY			
Code	200566		Academic year	2016-2017	
ECTS	6		Type of course unit	Compulsory	
Year	3		Term	2	
Timetable	Available on the virtual campus for all those students enrolled in this course unit.				
Language of instruction CATALAN		CATALAN / SPAN	ISH		

TEAM TEACHERS

Team leader

Name of lecturer	Mr JORDI PUJOL
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Office hours	To be agreed on

Team members

Name of lecturer	Ms EVA GARCÍA BARREDA
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Name of lecturer	Ms CARME OLIVERA NOGUEROLA	
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Office hours	To be agreed on	

Name of lecturer	Mr CARLES SALVADÓ
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Office hours	To be agreed on

Name of lecturer	Dr JOSEP SÁNCHEZ ALDEGUER		
e-mail	josep.sanchez@eug.es		
Office hours	To be agreed on		

ADMISSION REQUIREMENTS

None

THE COURSE UNIT WITHIN THE CURRICULUM



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Physiotherapy

- Course contents: Geriatrics.
- This course aims to consolidate the bases of geriatric physiotherapy in order to help the elderly from a biopsychosocial perspective.
- The knowledge of geriatric physiotherapy is important since life expectancy has increased in most countries and it is fundamental within the degree and the profession.

COMPETENCES AND LEARNING OUTCOMES

Specific competences

Competence E1

E1. Demonstrate knowledge of the morphology, physiology, pathology, and conduct of both healthy and ill people in their natural and social environment.

Learning outcomes

E1.22. Describe lesions and diseases in geriatrics, identifying the different symptoms and signs in the development process, as well as their aetiology and the medical, surgical, and rehabilitation treatments involved.

Specific objectives:

- **E1.21.1.** Define the concepts of geriatrics and gerontology.
- **E1.21.2.** Describe the main characteristics of the ageing process.
- E1.21.3. Explain the different theories of ageing.
- **E1.21.4.** Describe the different types of ageing.
- **E1.21.5.** Describe the characteristics of geriatric patients.
- **E1.21.6.** Explain the health problems associated with the elderly.
- **E1.21.7.** Explain the classification, epidemiology, aetiology, pathogenesis, risk factors, symptoms and signs, prognosis, evolution, and diagnosis of the most common conditions affecting the elderly.
- **E1.21.8.** Describe a healthy diet for the elderly.
- **E1.21.9.** Explain the most common types of medication taken by the elderly.

Competence

E3. Demonstrate knowledge of the physiotherapy methods, procedures, and actions that lead to clinical therapeutics.

Learning outcomes

E3.10. Apply the basic physiotherapy methods, procedures, and actions in the different clinical specialties that treat geriatric conditions

Specific objectives:

- **E3.10.1.** Describe the different roles and responsibilities of the members in the geriatric team.
- **E3.10.2.** Apply measures in order to prevent falls in elderly people.
- **E3.10.3.** Describe the health benefits of physical activity in older adults, as well as its guidelines and recommendations.
- **E3.10.4.** Apply different methods and techniques in geriatric rehabilitation.
- **E3.10.5.** Design psychomotricity sessions adapted to the different types of elderly patients and geriatric conditions.
- **E3.10.6.** Develop a program of neuromotor activation, care, and available technology adapted to the degree of independence of the elder adult and his/her environment.
- E3.10.7. Devise a prevention plan to promote active ageing.



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Physiotherapy

Competence

E5. Integrate, through clinical experience, ethical and professional values, the knowledge, skills, and attitudes characteristic in physiotherapy to solve specific clinical cases in hospital, out-of-hospital, primary and community health care environments.

Learning outcomes

E5.4. Solve clinical cases in geriatrics that can be treated with physiotherapy.

Specific objectives:

E5.4.1. Choose the most appropriate physiotherapy actions or procedures to solve specific clinical cases in different geriatric healthcare settings.

Competence

E7. Assess the patient's functional state, taking into account physical, psychological, and social aspects.

Learning outcomes

E7.10. Describe the basis of geriatric assessment.

Specific objectives:

E7.10.1. Choose the different validated geriatric assessment scales.

E7.10.2. Assess the patient's functional capacity and degree of independence.

E7.10.3. Identify the efficiency of geriatric assessment

E7.10.4. Make a holistic assessment of the elder adult using the appropriate equipment.

E7.10.5. Assess the risk of falls in the elderly.

E7.11. Apply the adequate physiotherapy assessment procedures, with the aim of determining the level of affection and its possible functional consequences.

Specific objectives:

E7.11.1. Identify and interpret the different validated geriatric assessment scales.

E7.11.2. Identify the degree of independence of the elder adult and design and adapt a therapeutic rehabilitation intervention plan **E7.11.3.** Identify any signs of frailty or geriatric syndromes that can lead to functional reduction or dependence.

Competence

E9. Develop a physiotherapy intervention plan according to criteria of adequacy, validity, and efficiency.

Learning outcomes

E9.15. Design therapeutic exercises and activities to treat geriatric lesions and conditions.

Specific objectives:

E9.15.1. Identify the target population to be treated according to their functional, cognitive, and relational homogeneity.

E9.15.2. Identify functional diversity in the ageing process and agerelated pathologies.

E9.15.3. Adapt the different methods and techniques to the goals of individual and group activities.

E9.15.4. Establish the necessary goals of geriatric healthcare from a multi and/or interdisciplinary perspective.



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Competence

E17. Participate in the making of health care protocols of scientific evidence-based physiotherapy, promoting professional activities that foster research in physiotherapy.

Learning outcomes

E17.4. Describe and analyse the health care protocols of evidence-based physiotherapy in geriatric conditions.

Specific objectives:

E17.4.1. Promote search, treatment, and use of information associated with geriatrics.

E17.4.2. Come to know the methodology for elaborating basic health care protocols.

E17.4.3. Explain the physiotherapy health care protocols used in some geriatric conditions.

Competence

E20. Apply the quality guarantee mechanisms in the practice of physiotherapy, according to recognised and validated criteria.

Learning outcomes

E20.8. Describe and analyse the quality guarantee mechanisms in the processes of geriatric physiotherapy.

Specific objectives:

E20.8.1. Do any professional activity according to good clinical practice.

E20.8.2. Describe the mechanisms that guarantee high-quality health care.

Transversal competences

Competence

T3. Be able to communicate in a fluent, coherent, and adequate way according to established norms, both orally and in writing.

Learning outcomes

Specific objectives:

T3.1. Give oral presentations and written papers using adequate language, taking each specific situation and/or audience into account.

T3.2. Identify non-verbal communication.

Competence T5. Problem solving.

Learning outcomes

Specific objectives:

T5.1. Identify the patient's degree of independence and his/her functional possibilities.

T5.2. Identify the importance of the patient's own responsibility and environment in the evolution of the functional rehabilitation process.

Competence T6. Take the most adequate decisions in a specific situation.

Learning outcomes

Specific objectives:

T6.1. Explain the established goals and treatments for the clinical cases presented in class.



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Physiotherapy

Competence	T7. Team wo	ork.		
Learning outcomes Specific objectives:				
		T7.1. Recognise professional diversity in geriatrics.		
		T7.2. Work in teams through the elaboration and presentation of		
		clinical cases.		

Generic competences

Competence	G3. Respect diversity and plurality of ideas, people, and situations.					
Learning outco	omes	 Specific objectives: G3.1. Understand diversity as a concept implicit to human nature. G3.2. Identify, acknowledge, and respect the patient's privacy, needs, decisions, and social condition, as well as the characteristics of his/her environment. G3.3. Acknowledge the importance of caring and treating, accompanying, guiding, and rehabilitating in the health care process. 				

CONTENTS

- 1. BASIC KNOWLEDGE OF THE AGEING PROCESS AND AGE-RELATED CONDITIONS.
 - 1.1. Geriatrics. Gerontology. Definition of geriatrics and gerontology.
 - 1.2. Comprehensive geriatric assessment.
 - 1.3. Age-related conditions. The changes and effects of ageing.
 - 1.4. Risk factors in the older adult.
 - 1.5. Main geriatric syndromes.
 - 1.6. Other syndromes.
 - 1.7. Cerebrovascular accident.
 - 1.8. Medication and the older adult.
 - 1.9. Infections in the older adult.
 - 1.10. Vaccines in geriatric patients.
 - 1.11. Methodology for the creation of basic health care protocols.
- 2. PHYSIOTHERAPY INTERVENTIONS AND TECHNIQUES FOR THE OLDER ADULT.
 - 2.1. Geriatric physiotherapy.
 - 2.2. Geronto-psychomotricity.
 - 2.3. Transfers and mobility of the elderly patient.
 - 2.4. Neuromotor activation and reprogramming.
 - 2.5. Falls.
 - 2.6. Neurological disorders.
 - 2.7. Dementia and palliative care.
 - 2.8. Wheelchairs and technical aids.



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Physiotherapy

TEACHING METHOD AND ACTIVITIES

DIRECTED ACTIVITIES

- **Theoretical lessons** that will provide the student with the theoretical and practical bases of geriatric physiotherapy. The lessons will offer visual and computer-based support. Estimated time: 34 hours.
- Practical lessons where the teacher will present, with the help of a model, different treatments.
 The lessons will offer visual and computer-based support.
 Estimated time: 18.5 hours.

SUPERVISED ACTIVITIES

- Practical activity, under the teacher's supervision, to apply the different techniques presented.
 Estimated time: 7.5 hours.
- **Presentation and resolution of clinical cases.** Different clinical cases will be presented for which the student will have to suggest the best treatment in the field of geriatric rehabilitation. Estimated time: 7.5 hours.

AUTONOMOUS ACTIVITIES

- Information search and management from articles, books and other sources in relation to the clinical cases presented.
 Estimated time: 15 hours.
- Writing a paper on some clinical cases in the field of geriatric rehabilitation based on the students' bibliographical search and/or their own training and presented by the students in groups. Estimated time: 15 hours.
- Autonomous work of individual study to prepare exams, organise notes/material, tutorials: individually or in group.
 Estimated time: 50 hours.

ACTIVITY TYPE	ACTIVITY	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
Directed	Theoretical lessons	E1, E3, E7, E17, E20	34
activities	Practical lessons	E5, E7, E9	18.5
Supervised	Practical activities	E5, E7, E9	7.5
activities	Presentation and resolution of clinical	E1, E5, E17, E20, T3, T5, T6, T7, G3	7.5
	cases		
Autonomous	Information search	E1, E3, E17, E20	15
activities	and management		
	Writing a paper	E1, E3, E17, E20, T3, T7	15



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Physiotherapy

Autonomous work	E1, E3, E5, E7, E9, E17, E20	50
	TOTAL NUMBER OF HOURS	147.5

ASSESSMENT METHOD

The assessment method will include:

- The knowledge acquired during the course will be assessed through written tests, which will amount to 50% of the final mark.
- Assessment of the manual skills necessary to apply a specific technique and of the adequacy of the technique / manoeuvre used in a given situation, through oral practical tests that account for 25% of the final mark.
- The written papers on a clinical case to be produced in groups amount to 20% of the final mark.
- The presentation in groups of clinical cases amounts to 5% of the final mark.

In order to pass the course, the following conditions have to be met:

- Pass each section and part of he unit with a minimum mark of 5.
- Hand in and pass all the papers, fulfilling the criteria established by the teacher.
- Attendance at 100% of practical lessons (justified absences will allow the student to miss up to 20% of all the practical lessons).
- Get a minimum final mark of 5.

ASSESSED ACTIVITIES	PERCENTAGE FINAL MARK	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
Written tests	50%	E1, E3, E7, E17, E20	2
Oral practical tests	25%	E5, E7, E9	0.25
Written papers in groups	20%	E1, E3, E17, E20, T3, T7	
Presentation in groups	5%	E1, E5, E17, E20, T3, T5, T6, T7, G3	0.25
	2.5		

BIBLIOGRAPHY AND WEB PAGES / BASIC READINGS

Books					
Author/s	Year	Title	Edition	City	Publisher
Austad, Steven	1998	Por que envejecemos		Barcelona	Paidos
Rebelatto, Jose Rubens Da	2005	Fisioterapia en Geriatria		Madrird	Interamericana. Mc.Graw-Hill
Abrams, W.B.; Berkow, R	2001	Merck de Geriatria		Madrid	Harcourt
Pilar Point/ Maite Carriggio	2009	Ejercicios de motricidad i memoria para personas		Barcelona	Paidotribo
Tribiel-Thome, Anna	1989	El metodo Feldenkrais		Barcelona	Abraxas



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Montagut, F/Flotats,G	2005	Rehabilitación domiciliria:principios e indicaciones y programas terapeuticos		Barcelona	Masson
Abric, Max/Dotte, Paul	2004	Gestos y Activacion para las peronas mayores. Tomo I y II		Barcelona	Masson
Dotte, Paul	2010	Método de movilización de los pacientes		Barcelona	Masson
Nolasc Acarin	2010	Alzheimer Manual de instrucciones		Barcelona	RBA
Gabor Abellán Van Kan et al.	2007	Tratado de geriatría para residentes		Madrid	Sociedad Española de Geriatría y Gerontología, cop.
Salgado, A.; Guillén, F.; Ruipérez, I.	2002	Manual de geriatría	3a	Barcelona	Masson
Cervera Díaz, M.C.; Sáiz García, J.	2009	Actualización en geriatría y gerontología II	4a	Alcalá la Real	Formación Alcalá

Audiovisual material				
Title	Description			
Bicicleta, cullera, poma	Pelicula de Carles Bosch			
El discurso del rey	Película			

Others			
Title	Description		
Un cuidador. Dos vides	Programa d'atenció a la dependència. Obra Social " La		
	Caixa" de 2008.		

BIBLIOGRAPHY AND WEB PAGES / RECOMMENDED READINGS

Books					
Author/s	Year	Títol	Edition	City	Publisher
Pàmies, Teresa	2002	L´Aventrua d´envellir		Barcelona	Empúries
Fuster, Valentí / Sampedro.,J.L	2008	La cència i la Vida		Barcelona	Rosa dels Vents
Henenezel, de Marie	2009	La suerte de envejecer		Barcelona	Plataforma
Serrano Sebastià	2003	El regal de la comunicació		Barcelona	Ara llibres
Henezel, de Marie		La Muerte intima			Plaza & Janes
Oliver Sacks	2009	Musicofilia		Barcelona	Anagrama
Kübler- Ross, E	2006	La Rueda de la vida		Barcelona	Zeta bolsillo
Küber- Ross.E	2008	La muerte un amanecer		Barcelona	Luciernaga
Molins, Jaci	2010	Coaching y Salud		Barcelona	Plataforma
Paeth, Bettina	2006	Experiencias con el concepto Bobath		Barcelona	Paramerica-na
De Pablo Hernández, C.	2004	Manual de urgencias geriátricas		Alcalá la Real	Formación Alcalá

Web pages			
Title	Description	URL	
Escola de formació en	És de Barcelona	www.espailudic.com	
tècniques de creixament			
personal			
Centre de fisioteràpia	Centre de Premià de Dalt	www.punterapeutic.com	
Col·legi de fisioterapeutes de	Seu a Barcelona	www.fisioterapeutes,com	
Catalunya			
Bicicleta, cullera, poma	pelicula	http//www.bicicletacullerapoma.cat	
Obra Social "La Caixa"	Consulta- Servei d'informació	www.laCaixa.es/ObraSocial	
		www.hipocampo.org/alzheimer.asp	



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Physiotherapy

Rehabilitación domiciliaria	Servei de rehabilitació	www.fisiogestion.com
Editorial llibres d'interès	Habilitats humanes	www.plataformaeditorial.com
Revista de pràctica i tècnica	Llengua francesa	www.ks-mag.com
de fisoteràpia		
Physical Therapy	Llengua Anglesa	www.automailer.com
Professional Blandine	Escola de formació	www.calais-germain.com
Sociedad española de	Revistes de geriatria mèdica	www.segg.es
geriatria y gerontologia		
Pàgina web de grup d'experts	Llengua anglesa	www.profane.eu.org
de prenció de caigudes		
Institut envelliment- UAB	Brcelona	www.envelliment.org
Fundació Pascual Maragall	Barcelona	www.alzheimerinternacional.org

PLANNING OF THE COURSE UNIT

Available on the virtual campus for all those students enrolled in this course unit.



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Physiotherapy

GENERAL INFORMATION

COURSE UNIT

Course unit	PHYSIOTHERAPY IN CLINICAL SPECIALTIES IN THE LOCOMOTOR SYSTEM - IV			
Code	200565		Academic year	2016-2017
ECTS	6		Type of course unit	Compulsory
Year	3		Term	2
Timetable	Available on the virtual campu		us for all those students e	nrolled in this course unit.
Language of instruction		CATALAN		

TEAM TEACHERS

Team leader

Name of lecturer	Mr RICARD MONTANÉ
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Office hours	To be agreed on

Team members

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ADMISSION REQUIREMENTS



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Physiotherapy

None

THE COURSE UNIT WITHIN THE CURRICULUM

- Course contents: Physiotherapy of the locomotor system.
- This course aims to consolidate the bases of the physiopathology, assessment, and treatment of the lymphatic system, fascial system, and vertebral column, associated with the functioning of the locomotor system.
- The knowledge of the lymphatic system, fascial system, and vertebral column is fundamental within the degree and the profession to give an assessment and eventual treatment.

COMPETENCES AND LEARNING OUTCOMES

Specific competences

Competence	E1. Demonstrate knowledge of the morphology, physiology, pathology, and conduct of both healthy and ill people in their natural and social environment.	
Learning outco	omes	 E1.21. Describe and analyse human movement. Specific objectives: E1.21.1. Demonstrate knowledge of the physiology of the lymphatic system and its relation to human movement. E1.21.2. Relate any impairment of the locomotor system to biomechanical normality of the vertebral column. E1.21.3. Identify any alteration of articular movement and its relationship with spinal disorders and deformities. E1.21.4. Describe and analyse the physiological motor control patterns in the vertebral column. E1.21.5. Understand the functions of the fascial system and its relations with different parts of the body, as well its importance in human movement.

Competence	E3. Demonstrate knowledge of the physiotherapy methods, procedures, and actions that lead to clinical therapeutics.	
Learning outco	omes	E3.2. Identify the physiological and structural changes caused by a physiotherapy intervention for impairments of the locomotor system. Specific objectives: E3.2.1. Describe how the different types of active and passive techniques may modify tissues. E3.2.2. Describe the best therapeutic approach for the proper



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evolution of tissue.

- **E3.2.3.** Describe and analyse the evolution of lymphoedema as a response to manual lymphatic drainage (MLD) and other techniques.
- **E3.2.4.** Describe the evolution of different pathologies in the vertebral column as a response to treatment.
- **E3.2.5.** Describe the evolution of connective tissue as a consequence of a treatment of fascial normalization.
- **E3.3.** Apply the physiotherapy methods, procedures, and actions in the different clinical specialities that treat impairments of the locomotor system.

Specific objectives:

- **E3.3.1.** Describe MLD and the different techniques used in the treatment of oedema.
- **E3.3.2.** Give MLD on upper and lower limbs, trunk, and face.
- **E3.3.3.** Describe the theoretical and biomechanical bases of articular re-harmonisation of the spine.
- **E3.3.4.** Describe the theoretical bases of spinal stabilization exercises
- **E3.3.5.** Apply the different re-education methods used in the treatment of different musculoskeletal pathologies affecting the vertebral column
- **E3.3.6.** Describe the best therapeutic approach for the treatment of musculoskeletal pathologies affecting the vertebral column.
- **E.3.3.7.** Describe the different manoeuvres and methods used in the treatment of fascial restrictions.
- **E3.4.** Apply specific physiotherapy intervention methods in order to promote a healthy lifestyle, in relation to the locomotor system, by means of health education.

Specific objectives:

- **E3.4.1.** Give primary, secondary, and/or tertiary prevention recommendations in order to promote a healthy lifestyle in relation to lymphoedema.
- **E3.4.2.** Give the most appropriate advice to sufferers of spinal conditions so that they can lead a normal life.

Competence

E5. Integrate, through clinical experience, ethical and professional values, the knowledge, skills, and attitudes characteristic in physiotherapy to solve specific clinical cases in hospital, out-of-hospital, primary and community health care environments.

Learning outcomes

E5.1. Solve clinical cases susceptible of physiotherapy treatment in the field of disorders of the musculoskeletal system.

Specific objectives:

- **E5.1.1.** Identify the lesions and impairments in the lymphatic and fascial system and in the vertebral column in the clinical cases presented in class.
- **E5.1.2.** Suggest the most adequate treatments for the proposed medical cases of pathologies in the lymphatic and fascial system and the vertebral column.
- **E5.1.3.** Interpret the results achieved after administering a treatment for the proposed medical cases of pathologies in the lymphatic and fascial system and the vertebral column.



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Competence

E7. Assess the patient's functional state, taking into account physical, psychological, and social aspects.

Learning outcomes

E7.4. Describe and apply adequate physiotherapy assessment procedures, with the aim of determining the level of affection of the locomotor system and its possible functional repercussion.

Specific objectives:

E7.4.1. Identify the different types of oedema through physiotherapy assessment.

E7.4.2. Determine the type of muscular and articular disorders in the vertebral column using mobility and stability tests.

E7.4.3. Assess fascial motility as well as any possible restrictions affecting connective tissue.

Competence

E8. Determine the physiotherapy diagnosis according to established norms and using internationally recognised validation instruments.

Learning outcomes

E8.3. Establish physiotherapy diagnostic hypotheses through clinical cases of impairments of the musculoskeletal system.

Specific objectives:

E8.3.1. Identify any local, regional or global deficiencies of the lymphatic and fascial system and the vertebral column in order to be able to make functional diagnoses.

E8.3.2. Establish a physiotherapy diagnostic hypothesis to write a therapeutic treatment plan.

Competence

E9. Develop a physiotherapy intervention plan according to criteria of adequacy, validity, and efficiency.

Learning outcomes

E9.4. Define the general and specific objectives for the application of the physiotherapy treatment of impairments of the locomotor system.

Specific objectives:

E9.4.1. Identify the health priorities in the patient suffering from disorders in the lymphatic and fascial system and the vertebral column

E9.4.2. Identify the priority objectives in the treatment of the main impairments in the lymphatic and fascial system and vertebral column.

E.9.4.3. Identify the objectives of the treatment of myofascial, viscero-fascial, neuromeningeal and lymphatic disorders.

E9.5. Describe the circumstances that determine the priorities for action in the physiotherapy treatment of impairments of the locomotor system.

Specific objectives:

E9.5.1. Identify those priorities that need to be solved in the disorders affecting the lymphatic and fascial system and the vertebral column, according to:

- Stability problems.
- Mobility problems.
- Static problems.
- Pain severity.
- Factors that favour chronicity.

E9.6. Enumerate the different types of material and apparatus to be



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Physiotherapy

used in the physiotherapy treatment of impairments of the locomotor system.

Specific objectives:

E9.6.1. Use:

- Proprioceptive material
- Goniometers
- Plumb-bobs
- Stabilizers
- Multi-layer bandages for the management of oedema.

E9.6.2. Describe the basics of pressotherapy and compression bandages.

Competence

E17. Participate in the making of health care protocols of scientific evidence-based physiotherapy, promoting professional activities that foster research in physiotherapy.

Learning outcomes

E17.1. Describe and analyse the health care protocols of evidence-based physiotherapy in conditions of the musculoskeletal system.

Specific objectives:

E17.1.1. Find published articles and bibliography on scientific evidence-based physiotherapy of the vertebral column, lymphatic and fascial system.

E17.1.2. Do a critical analysis of the consulted bibliography of physiotherapy of the vertebral column, lymphatic and fascial system in a critical way.

E17.1.3. Analyse the different established and agreed physiotherapy protocols followed when treating the vertebral column, lymphatic and fascial system.

Competence

E20. Apply the quality guarantee mechanisms in the practice of physiotherapy, according to recognised and validated criteria.

Learning outcomes

E20.3. Describe the guides to good clinical practice applied to impairments of the locomotor system.

Specific objectives:

E20.3.1. Describe the most consensual algorithms in the field of physiotherapy of the vertebral column, lymphatic and fascial systems.

E20.3.2. Name and identify existing guides to good clinical practice applied to those pathologies presented in class.

Transversal competences

Competence T2. Organizing and planning.

Learning outcomes

T2.1. Suggest the assessment and treatment for the proposed clinical cases according to logical clinical reasoning.

Competence T6. Take the most adequate decisions in a specific situation.

Learning outcomes

T6.1. Justify the decisions made in the treatment of the clinical cases proposed in class.



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Generic competences

Competence G2. Develop strategies of autonomous learning.

Learning outcomes

This is a competence that is developed by working competence "T2.

Organizing and planning".

CONTENTS

1. VERTEBRAL COLUMN / NEURODYNAMICS

- 1.1. Pathophysiology of intervertebral segments.
- 1.2. Biomechanics of the cervical spine.
- 1.3. Pathophysiology to the pelvis.
- 1.4. Myofascial pain syndrome (MPS).
- 1.5. Introduction to neurodynamics.

2. LYMPHATIC DRAINAGE

- 2.1. Structure of the lymphatic system.
- 2.2. Physiology of the lymphatic system.
- 2.3. Lymphatic system anatomy.
- 2.4. Pathophysiology of oedema.
- 2.5. Assessment tests of the venous system.
- 2.6. Assessment tests of the lymphatic system.
- 2.7. Physiotherapy assessment and diagnosis of lymphoedema.
- 2.8. Treatment for lymphoedema.
- 2.9. Practice of manual lymphatic drainage.
- 2.10. Prevention and education related to the circulatory system.

3. FASCIAL ASSESSMENT AND TREATMENT

- 3.1. Basics of the fascial system.
- 3.2. Fascial function.
- 3.3. Pathophysiology of the fascial system.
- 3.4. Anatomy of superficial fascia.
- 3.5. Anatomy of deep fascia.
- 3.6. Assessment and treatment manoeuvres.
- 3.7. Craniosacral therapy (CST).
- 3.8. Diaphragms.

TEACHING METHOD AND ACTIVITIES

DIRECTED ACTIVITIES

• Theoretical lessons that will provide the student with the necessary theoretical knowledge of physiotherapy in the treatment of pathologies of the lymphatic and fascial systems and vertebral column. The lessons will offer visual and computer-based support.

Estimated time: 21 hours.

• **Practical lessons** where the teacher will present, with the help of a model, different techniques. The lessons will offer visual and computer-based support.



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Estimated time: 19 hours.

• **Presentation and resolution of clinical cases.** Different clinical cases will be presented for which the student will have to suggest the appropriate assessment, treatment, and clinical reasoning.

Estimated time: 2 hours.

SUPERVISED ACTIVITIES

• **Practical activity,** under the teacher's supervision, to apply the different techniques presented.

Estimated time: 25.5 hours.

AUTONOMOUS ACTIVITIES

• Information search and management and paper writing. The students will work in small groups and, based on some clinical cases presented by the teacher, will have to search the recommended bibliographic references to write three papers: one about a case affecting the lymphatic system, one about a case affecting the fascial system and one about a case affecting the vertebral column. The student will make a written report and a public presentation. The methodology used will be described by the teachers.

Estimated time: 30 hours.

• **Autonomous work** of individual study to prepare exams, organise notes/material, tutorials: individually or in group.

Estimated time: 47.5 hours.

ACTIVITY TYPE	ACTIVITY	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
Directed activities	Theoretical lessons	E1.21, E3.2, E3.3, E3.4, E5, E7.4, E8, E9.4, E9.5, E9.6, E17, E20.3	21
	Practical lessons	E1.21, E3.3, E3.4, E5, E7.4, E8	19
	Presentation and resolution of clinical cases	E1.21, E3.3, E3.4, E5, E7.4, E8, E9.4, E9.5, E9.6, E17, T2, T6, G2	2
Supervised activities	Practical activities	E1.21, E3.3, E3.4, E5, E7.4, E8	25.5
	Information search and management	E1.21, E3.2, E3.3, E3.4, E5, E7.4, E8, E17, E20.3	15
Autonomous activities	cases ised Practical activities es Information search and management Writing a paper	E1.21, E3.2, E3.3, E3.4, E5, E7.4, E8, E9.4, E9.5, E9.6, E17, E20.3, T2, G2	15
	Autonomous work	E1.21, E3.2, E3.3, E3.4, E5, E7.4, E8, E9.4, E9.5, E9.6, E17, E20.3	47.5
	145		



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ASSESSMENT METHOD

The assessment method will include:

- The knowledge acquired in each section the unit is divided into will be assessed through written tests, which will amount to 30% of the final mark.
- Assessment of the manual skills necessary to apply a specific technique and of the adequacy
 of the technique /manoeuvre used in a given situation, through oral practical tests that
 account for 45% of the final mark.
- The presentation of clinical cases amount to 25% of the final mark. The criteria adopted to assess this part are the following:
 - a) On a previously agreed day, with all the students in class, one single paper (from the three each group will have already prepared) will be chosen at random and be publicly presented.
 - b) The paper will be presented to the audience (including the team teachers) within a limited time.
 - c) The mark awarded will be given through a report made by the teachers attending the presentation.

In order to pass the course, the following conditions have to be met:

- Pass each section and part of the unit with a minimum mark of 5.
- Attendance at 100% of practical classes (justified absences will allow the student to miss up to 20% of all the practical classes).
- Get a minimum final mark of 5.

ASSESSED ACTIVITIES	PERCENTAGE FINAL MARK	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
Written tests	30%	E1.21, E3.2, E3.3, E3.4, E5, E7.4, E8, E9.4, E9.5, E9.6, E17, E20.3	2
Oral practical tests	45%	E1.21, E3.3, E3.4, E5, E7.4, E8	
Written papers	25%	E1.21, E3.2, E3.3, E3.4, E5, E7.4, E8, E9.4, E9.5, E9.6, E17, E20.3, T2, T6, G2	3
	5		



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BIBLIOGRAPHY AND WEB PAGES / BASIC REQUIRED READINGS

Books					
Author/s	Year	Title	Edition	City	Publisher
Sohier R	1995	La dynamique du vivant		La Louviere	Kine-Sciences
Butler D	2009	Movilización del sistema		Barcelona	Paidotribo
		nervioso			
Leduc A, Leduc O	1978	Le drainage limphatique		France	Masson
Ferrandez J C	2006	El sistema linfático		Argentina	Panamericana
Andrzej Pilat	2003	Inducción miofascial		Madrid	Mc. Graw - Hill
Serge Paoletti	2004	Las fascias		Barcelona	Paidotribo

Articles						
Author	Title	Publication	Volume	Year	Pages	Description/ comment
Jean-Claude Ferrandez y col.	Reeducación linfático- venosa:nuevas tendencias	Kinésitérapie	Nº 504	2009		
Serge Theys	Presoterapia y electroestimulación	Kinésitérapie	Nº 412	2001		
Jean-Claude Ferrandez y col.	Monografico de drenaje linfático	Kinésitérapie	№ 390	1999		

Audiovisual material			
Title	Description		
Pràctiques de DLM Filmació de les maniobres			
	bàsiques per a EESS i EEII		

BIBLIOGRAPHY AND WEB PAGES / BASIC RECOMMENDED READINGS

Books					
Author/s	Year	Title	Edition	City	Publisher
Josya Sijmonsma	2007	TNM Taping Neuro Muscular		Portugal	Aneid press
Travel G, Simons D	2004	Dolor y disfunción miofascial		Madrid	Panamericana
Peninou G, Tixa S.	2008	Les tensions musculaires		Issy-Les- Molineaux	Masson
Kapandji I.A.	1973	Cuadernos de fisiología articular		Barcelona	Toray-Masson
Shacklock M	2006	Neurodinámica clínica		Madrid	Elsevier
Warszawski G	2006	Drenaje linfático. Rehabilitación el edema, flebología y linfología		Argentina	Corpus
Leduc A i col.	1990	Traitament physique de lóedème du bras		France	Masson
Leduc A, Leduc O	1992	Drenaje del miembro inferior		Barcelona	Masson
Viñas F	1998	La linfa y su drenaje manual		Barcelona	Integral
V. Smith - Agreda	2004	Fascias Principios de anatomo-fisio- patología		Barcelona	Ed. Paidotribo
Eric Hebgen	2005	Osteopatía Visceral		Madrid	Mc.Graw Hill



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PLANNING OF THE COURSE UNIT

Available on the virtual campus for all those students enrolled in this course unit



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GENERAL INFORMATION

COURSE UNIT

Course unit	PRACTICUM - IV			
Code	200567		Academic year	2016-2017
ECTS	6		Type of course unit	Compulsory
Year	3		Term	2
Timetable	Availa	ble on the virtual camp	us for all those students e	nrolled in this course unit
Language of instruction CATALAN		CATALAN		

TEAM TEACHERS

■ Team leader

Name of lecturer	Ms YOLANDA SÁNCHEZ
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Team members

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ADMISSION REQUIREMENTS

- BASIC PHYSIOTHERAPY OF THE LOCOMOTOR SYSTEM I
- BASIC PHYSIOTHERAPY OF THE LOCOMOTOR SYSTEM II



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THE COURSE UNIT WITHIN THE CURRICULUM

- Contents: Guided training.
- This course unit aims to consolidate and integrate all the knowledge, abilities, skills, attitudes, and values acquired and related to complex impairments of the locomotor system and mild neurological conditions, under the guidance of qualified physiotherapists. All those professional competences necessary to prepare the student to give effective physiotherapy care and comprehensive care to patients/users will be developed.

COMPETENCES AND LEARNING OUTCOMES

Specific competences

Competence	E4. Demonstrate knowledge of the physiotherapy methods, procedures, and actions that contribute to health promotion and maintenance.		
Learning outco	omes	E4.1. Design, teach, and advise about the different prevention methods for functional impairments and particularly those related to postural hygiene, mobility loss, and algid acute stages. Specific objectives: E4.1.1. Recommend prevention guidelines for patients with complex affections of the locomotor system and mild neurological conditions. E4.1.2. Explain, in a clear and structured way, recommended prevention guidelines developed for patients with complex affections of the locomotor system and mild neurological conditions.	

Competence	E5. Integrate, through clinical experience, ethical and professional values, the knowledge, skills, and attitudes characteristic in physiotherapy to solve specific clinical cases in hospital, out-of-hospital, primary and community health care environments.		
cases in hos Learning outcomes		E5.5. Solve clinical cases susceptible of physiotherapy treatment in any clinical specialty. Specific objectives: E5.5.1. Effectively apply the different physiotherapy techniques to patients with complex impairments of the locomotor system and mild neurological conditions.	

Competence	E6. Write an	E6. Write and fill in physiotherapy registers.		
Learning outco	omes	E6.3. Record all the steps taken from the moment the patient/user is admitted to the moment he/she is discharged in an adequate and effective way according to each clinical specialty. Specific objectives: E6.3.1. Interpret physiotherapy records of patients with complex impairments of the locomotor system and mild neurological conditions.		



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Competence

E7. Assess the patient's functional state, taking into account physical, psychological, and social aspects.

Learning outcomes

E7.12. Follow the adequate physiotherapy validation procedures in order to determine the level of affection and its possible functional impact for the patients/users the student takes care of during the training.

Specific objectives:

E7.12.1. Use appropriately the specific assessment tools on patients with complex impairments of the locomotor system and mild neurological conditions.

Competence

E8. Make the physiotherapy diagnosis according to established norms and internationally recognised validation instruments.

Learning outcomes

E8.9. Establish a physiotherapy diagnostic hypothesis.

Specific objectives:

E8.9.1. Identify the deficiencies, limitations in everyday activities, participation restrictions, and contextual factors of patients with complex impairments of the locomotor system and mild neurological conditions.

E8.9.2. Interrelate the deficiencies, limitations in everyday activities, and participation restrictions of the patient applied to complex impairments of the locomotor system and mild neurological conditions.

Competence

E9. Develop a physiotherapy intervention plan according to criteria of adequacy, validity, and efficiency.

Learning outcomes

E9.17. Define the general and specific objectives for the application of the physiotherapy treatment.

Specific objectives:

E9.17.1. Propose the treatment objectives of complex impairments of the locomotor system and mild neurological conditions.

E9.18. Establish treatment priorities according to the problems detected.

Specific objectives:

E9.18.1. Classify the short-term and long-term goals for patients with complex impairments of the locomotor system and mild neurological conditions.

E9.18.2. Prioritise problems according to their importance and/or emergency, applied to complex impairments of the locomotor system and mild neurological conditions.

E9.19. Establish the periodicity for a physiotherapy treatment.

Specific objectives:

E9.19.1. Establish follow-up sessions for the treatment of complex impairments of the locomotor system and mild neurological conditions.

E9.20. Anticipate the necessary material and equipment.

Specific objectives:

E9.20.1. Anticipate the necessary material and equipment for the treatment of complex impairments of the locomotor system and mild neurological conditions.



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Competence	E11. Assess the evolution of the results obtained in the treatment in relation to the final goals.		
Learning outco	omes	E11.1. Assess the results and their link with the final goals, through real cases in the different clinical specialties. Specific objectives: E11.1.1. Compare the results and the predetermined goals in the treatment of complex impairments of the locomotor system and mild neurological conditions.	

Competence	E12. Write d	Write discharge reports when the objectives have been achieved.		
Learning outco	omes	 E12.2. Make a physiotherapy report that includes all the necessary information so that it is a valid communication tool for users and/or professionals. Specific objectives: E.12.2.1. Write clear and correct physiotherapy reports on complex impairments of the locomotor system and mild neurological conditions. 		

Competence	E13. Provide	the patient with effective physiotherapy care and offer comprehensive	
	care.		
Learning outcomes		E13.5. Interpret a doctor's prescription.	
_		Specific objectives:	
		F13.5.1. Analyse the instructions from the medical team	

E13.5.2. Incorporate the recommendations from the medical team into the physiotherapy treatment.

E13.6. Prepare the room where the physiotherapy treatment is going to

Specific objectives:

be administered to make it comfortable.

E13.6.1. Adapt the material according to the patient's needs.

E13.6.2. Organise the physiotherapy treatment according to each individual case.

E13.7. Keep the patient informed about his/her treatment, explaining the tests and manoeuvres being used and their preparation, and encouraging him/her to participate in the treatment at all times.

Specific objectives:

E13.7.1.Communicate in a way that is easy to understand for the patient.

E13.7.2. Encourage the patient to take part in his/her recovery process.

E13.8. Identify the symptoms and signs of alterations in biological functions related to physiotherapy care.

Specific objectives:

E13.8.1. Detect any alterations in the patient's biological functions that can interfere and/or modify the physiotherapy treatment.

Competence	E14. Take part in the areas of health promotion, prevention, protection, and recovery.		
Learning outcomes		E14.9. Carry out health promotion, prevention, and protection activities	
		for those patients assigned in the clinical training.	



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Specific objectives:

E14.9.1. Recommend specific pathology-related preventive measures to the patients assigned in the clinical training.

Competence

E16. Incorporate the ethical and legal principles of the profession into professional

Learning outcomes

E16.5. Apply the legal and professional norms laying down the practice of physiotherapy.

Specific objectives:

E16.5.1. Assume professional responsibility.

E16.5.2. Respect the limits of professional competence.

E16.6. Comply with the professional code of ethics.

Specific objectives:

E16.6.1. Respect the individual's human and social rights.

E16.6.2. Respect the professional code of ethics in each and every

action.

Competence

E17. Participate in the making of health care protocols of scientific evidence-based physiotherapy, promoting professional activities that foster research in

Learning outcomes

physiotherapy.

E17.5. Apply health care protocols of scientific evidence-based

physiotherapy.

Specific objectives:

E17.5.1. Apply validated and/or agreed health care protocols when treating complex impairments of the locomotor system and mild

neurological conditions.

Competence

E21. Communicate effectively and clearly, both orally and in writing, with users of the health care service as well as with other health professionals.

Learning outcomes

E21.4. Communicate effectively with all the members of the medical

Specific objectives:

E21.4.1. Participate in team meetings.

E21.4.2. Refrain from interfering with workmates' professional

action.

E21.5. Use effective and appropriate communication skills to facilitate interaction between the physiotherapist and the patient and his /her

family.

Specific objectives:

E21.5.1. Identify the patient's social and cultural traits.

E21.5.2. Adapt information to the patient's situation.

Transversal competences

Competence	T4. Manage information systems.		
Learning outcomes		Specific objectives:	
		T4.1. Use efficiently clinical databases about patients.	

Competence	T7. Team work.		
Learning outco	omes	This competence is developed through the E21.4. learning outcome.	



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Competence	T8. Develop interpersonal relationships.
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Learning outcomes Specific objectives:

This competence is developed through the **E21.5**. learning outcome

Competence T9. Develop critical thinking.

Learning outcomes Specific objectives:

T9.1. Make a value judgment on the treatment given to a patient. **T9.2.** Contribute elements that can improve our colleagues' and our

own actions.

T9.3. Make judgments and assessments of one's own actions.

Competence T14. Demonstrate sensitivity to environmental issues.

Learning outcomes Specific objectives:

 $\textbf{T14.1.} \ \ \text{Put environmental actions into professional practice, by}$

means of energy saving tips and recycling waste.

Generic competences

Competence	G2. Develop strategies of autonomous learning.
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Learning outcomes This competence is developed by working competences "**T4.** Manage

information systems", "T7. Team work", "T8. Develop interpersonal

relationships", and "T9. Develop critical thinking".

Competence G3. Respect diversity and plurality of ideas, people, and situations.

Learning outcomes Specific objectives:

G3.1. Establish good relationships regardless of social or cultural

differences.

CONTENTS

The Practicum aims to integrate all the knowledge, abilities, skills, attitudes, and values
acquired in and related to complex impairments of the locomotor system and mild
neurological conditions, under the guidance of qualified physiotherapists, under the guidance
of qualified physiotherapists. All those professional competences necessary to prepare the
student to give effective physiotherapy care and comprehensive care to patients/users will be
developed

TEACHING METHOD

TRAINING

• The student will assess the patients, make the physiotherapy diagnosis, create a plan of action and apply it, and evaluate the results.

Estimated time: 105 hours.



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INFORMATIVE SESSIONS

• The student will be informed about how to do the different training activities. Estimated time: 7,5 hours.

PAPER WRITING

• Write a report about the management of one or several patients. Estimated time: 30 hours.

SELF-EVALUATION

• Write a self-evaluation report. Estimated time: 4,5 hours.

EVALUATION BY THE CENTRE AND TUTOR

• Fill in an evaluation form about the centre and tutor. Estimated time: 3 hours.

ACTIVITY TYPE	ACTIVITY	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
Directed activities	Informative sessions		7,5
Supervised activities	Training	E4, E5, E6.3, E7, E8.9, E9.17, E9.18, E9.19, E9.20, E11, E12, E13.5, E13.6, E13.7, E13,.8, E14, E16, E17, E21, T4, T7, T8, T14, G2, G3	105
Autonomous activities	Write a report about the management of one or several patients	E4, E5, E6.3, E7, E8.9, E9.17, E9.18, E9.19, E9.20, E11, E21, T4, T9	30
	Write a self-evaluation report	Т9	4,5
	Fill in an evaluation form about the centre and tutor	Т9	3
TOTAL NUMBER OF HOURS 150			



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Physiotherapy

ASSESSMENT METHOD

The Practicum commission will take the following into account:

- The report presented by the tutor. This will account for 49% of the final mark.
- The student's self-evaluation report. This will account for 1% of the final mark.
- The patients' follow-up reports. This will account for 50% of the final mark.

In order to pass the course, the following conditions have to be met:

- Pass each section and part of the unit with a minimum mark of 5.
- Get a minimum final mark of 5.

ASSESSED ACTIVITIES	PERCENTAGE FINAL MARK	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
The report presented by the		E4, E5, E6.3, E7,	
tutor		E8.9, E9.17, E9.18,	
		E9.19, E9.20, E11,	
	49%	E12, E13.5, E13.6,	
		E13.7, E13,.8, E14,	
		E16, E17, E21, T4,	
		T7, T8, T14, G2, G3	
The student's self-evaluation	1%	Т9	
report	170		
The patients' follow-up reports		E4, E5, E6.3, E7,	
	F00/	E8.9, E9.17, E9.18,	
	50%	E9.19, E9.20, E11,	
		E21, T4, T9	
	TOTAL	NUMBER OF HOURS	0

BIBLIOGRAPHY AND WEB PAGES / BASIC READINGS

Web pages			
Title	Description	URL	
EscalesFisioterapia.pdf	Escales de valoració i qüestionaris més	Intranet de l'assignatura	
	emprats a Fisioteràpia		

PLANNING OF THE COURSE UNIT

Available on the virtual campus for all those students enrolled in this course unit.



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Physiotherapy

GENERAL INFORMATION

COURSE UNIT

Course unit	PELVIC FLOOR PHYSIOTHERAPY			
Code	200557		Academic year	2016-2017
ECTS	6		Type of course unit	Optional
Year	3		Term	2
Timetable	Available on the virtual campu		us for all those students e	nrolled in this course unit.
Language of instruction		CATALAN/SPANISH		

TEAM TEACHERS

Team leader

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ADMISSION REQUIREMENTS

None.



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Physiotherapy

THE COURSE UNIT WITHIN THE CURRICULUM

- Course contents: Pelvic floor physiotherapy.
- This course unit aims to consolidate the bases of the physiotherapy assessment and treatment of patients with pelvic floor dysfunctions.
- The knowledge of physiotherapy in this field is important within the curriculum and the profession.

COMPETENCES AND LEARNING OUTCOMES

Specific competences

Competence		trate knowledge of the morphology, physiology, pathology, and conduct			
Learning outco	of both heal	thy and ill people in their natural and social environment. E1.33. Describe lesions and diseases in obstetrics and gynaecology, identifying the symptoms and signs throughout their evolution, as well as their aetiology and medical, surgical, and rehabilitation treatments. Specific objectives: E1.33.1. Describe pelvic anatomy and its three-dimensional disposition by means of a physical examination, which will facilitate the identification of the anatomical structures involved in the physiotherapy rehabilitation of the region. E1.11.2. Describe the physiology of continence, urination, defecation, and labour. E1.33.3. Identify the different types of urinary and faecal incontinence and their physiopathology. E1.33.4. Distinguish the different types of rectal lesions in childbirth. E1.33.5. Distinguish the different types of pelvic organ prolapse and rank them according to WHO/ICS criteria. E1.33.6. Explain the neuroanatomy of pain, the physiopathology of chronic pain and their causes and their physiotherapy treatments. E1.33.7. Enumerate the different surgical procedures in the correction of pelvic organ prolapse. E1.33.8. Describe the different surgical procedures performed in			
		rank them according to WHO/ICS criteria. E1.33.6. Explain the neuroanatomy of pain, the physiopathology of chronic pain and their causes and their physiotherapy treatments. E1.33.7. Enumerate the different surgical procedures in the correction of pelvic organ prolapse.			

Competence		trate knowledge of the physiotherapy methods, procedures, and actions clinical therapeutics.
Learning outco	omes	E3.27. Apply the basic physiotherapy methods, procedures, and actions in the field of pelvic floor physiotherapy. Specific objectives:
		E3.27.1. Apply the different basic physiotherapy techniques in the treatment of urinary and faecal incontinence.



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E3.27.2. Apply massotherapy for the activation of the trigger points
related to chronic pelvic pain of myofascial origin.

E3.27.3. Apply basic hypopressive techniques in the management of pelvic dysfunctions.

E3.27.4. Explain the characteristics and applications of the electronic devices used in the treatment of pelvic floor physiotherapy (biofeedback and electrical stimulation).

E3.27.5. Keep updated information regarding scientific evidence on pelvic floor rehabilitation.

Competence

E4. Demonstrate knowledge of the physiotherapy methods, procedures, and actions that contribute to health promotion and maintenance.

Learning outcomes

E4.15. Apply physiotherapy methods, procedures, and actions in the management of pelvic floor dysfunctions.

Specific objectives:

E4.15.1 Apply physiotherapy techniques in the prevention of incontinence and pelvic organ prolapse as well as assess their use in the prevention of lesions during childbirth.

Competence

E5. Integrate, through clinical experience, ethical and professional values, the knowledge, skills, and attitudes characteristic in physiotherapy to solve specific clinical cases in hospital, out-of-hospital, primary and community health care environments

Learning outcomes

E5.17. Apply the acquired knowledge and competences in order to solve clinical cases related to pelvic floor dysfunctions susceptible of physiotherapy treatment.

Specific objectives:

E5.17.1 Establish a correct diagnosis of the concurrent pathologies during the presentation of a clinical case and guide any possible therapeutic option.

E5.17.2 Adapt any therapeutic option to the patient's cultural, religious, or social context through some theoretical clinical cases.

Competence

E7. Assess the patient's functional state, taking into account physical, psychological, and social aspects.

Learning outcomes

E7.24. Describe and apply the correct physiotherapy assessment procedures so that the degree of involvement of the pelvic floor can be determined

Specific objectives:

E7.24.1. Examine the pelvic region in order to detect any pathology susceptible of being treated with physiotherapy.

E7.24.2. Assess pelvic floor tone and degree of pelvic prolapse as well as the anatomical structures involved in a given pathology.

E7.24.3. Identify musculoligamentous injuries and the existence of tough bands and trigger points involved in a pelvic pathology.

E7.24.4. Describe the basic principles of a neurological examination of the pelvic floor.

E7.24.5. Fill in questionnaires on symptomatology and quality of life (directed or self-administered) in order to get information about the impact of a given disease on the patient.



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E7.24.6. Make a correct interpretation of any piece of information obtained through complementary tests (imaging diagnostic systems, functional diagnoses, symptomatology questionnaires).

Competence

E8. Make the physiotherapy diagnosis according to established norms and internationally recognised validation instruments.

Learning outcomes

E8.14. Establish a physiotherapy diagnostic hypothesis based on some clinical cases related to pelvic floor dysfunctions.

Specific objectives:

E8.14.1 Identify any local, regional, or global physical impairment and describe any alterations affecting the pelvic floor in order to propose a diagnostic hypothesis.

Competence

E9. Develop a physiotherapy intervention plan according to criteria of adequacy, validity, and efficiency.

Learning outcomes

E9.40. Define the general and specific objectives for the application of the physiotherapy treatment for pelvic floor dysfunctions.

Specific objectives:

E9.40.1. Draw up a physiotherapy programme for the prevention of pelvic floor disorders associated with childbirth, postpartum, and senile degeneration.

E9.41.2. Specify the realistic goals that need to be established in a rehabilitation programme.

E9.41. Describe those circumstances that affect any priorities in the physiotherapy treatment for pelvic floor dysfunctions.

Specific objectives:

E9.41.1. Adapt a physiotherapy programme to the patient's personal conditions such as cultural habits, religious beliefs, perspectives and goals.

E9.41.2. Establish a treatment and rehabilitation strategy compliant with the patient's personal characteristics (e.g. possible related conditions, limitations, previous operations, neurological or degenerative diseases).

E9.41.3. Determine any priority in the treatment according to severity, impact or chances of recovery, taking availability of resources into account.

E9.42. Enumerate the different types of equipment and apparatus used in the physiotherapy treatment of pelvic floor dysfunctions.

Specific objectives:

E9.42.1. Identify biofeedback devices and other auxiliary devices used in physiotherapy like electrostimulators and neuromodulators.

E9.42.2. Identify auxiliary devices used in the treatment of pelvic floor dysfunctions (e.g. absorption products, drip collectors, urinary catheters, pessaries).

Competence

E17. Participate in the making of health care protocols of scientific evidence-based physiotherapy, promoting professional activities that foster research in physiotherapy.



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Learning outcomes

E17.11. Describe and analyse health care protocols of scientific evidence-based physiotherapy in the treatment of pelvic floor dysfunctions.

Specific objectives:

E17.11.1. Get updated bibliographic information searching internationally recognised databases.

E17.11.2. Interpret accumulated scientific evidence about the efficiency and safety of the different therapeutic options used in pelvic floor physiotherapy.

Competence

E20. Apply the quality guarantee mechanisms in the practice of physiotherapy, according to recognised and validated criteria.

Learning outcomes

E20.13. Describe the guides to good clinical practice applied to pelvic floor dysfunctions.

Specific objectives:

E20.13.1. Carry out one's professional activity according to the ethical norms and guides to good clinical practice used in physiotherapy.

E20.13.2. Assess the results of a given physiotherapy programme based on objective criteria.

Transversal competences

Competence	T10. Identify	analyse and solve ethical	problems in com	nlex situations
COMPETERICE	I TO. IUCITUITY,	analyse and solve ethical	problems in com	pick situations.

Learning outcomes

Specific objectives:

T10.1. Adapt to the patient's characteristics when ethical conflicts are likely to occur within a physiotherapy programme: related pathologies, behaviour disorders, psychopathologies, infectious diseases, "taboo" diseases, total or partial dependence, etc

Generic competences

Competence	G3 Respect diversity	and plurality of ideas	, people, and situations.
Competence	G3. Respect diversity	, aliu piulality oi lucas	, people, and situations.

Learning outcomes

Specific objectives:

G3.1. Modify functional rehabilitation programmes and physiotherapy treatments to the patient's preferences, goals, and religious or cultural beliefs.

G3.2. Adapt the treatment to the patient's specific situation, respecting his/her privacy in those cases of total or partial dependence, personal or family conflicts, and emotional disorders.



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Physiotherapy

CONTENTS

THEORY

- 1. ANATOMY
- 2. PHYSIOLOGY
- 3. FOUNDATIONS OF PHYSIOTHERAPY AND PELVIC FLOOR REHABILITATION
- 4. URINARY INCONTINENCE
- 5. FAECAL INCONTINENCE
- 6. CONSTIPATION AND DYSFUNCTION OF RECTAL DISCHARGE
- 7. PELVIC ORGAN DISCHARGE
- 8. ADDED PELVIC PATHOLOGIES TO BE CONSIDERED IN PELVIC FLOOR PHYSIOTHERAPY
- 9. CHRONIC PELVIC PAIN
- 10. AUXILIARY DEVICES FOR THE MANAGEMENT OF PELVIC FLOOR DISORDERS USED IN PHYSIOTHERAPY

PRACTICE

- 1. TAKING A CLINICAL HISTORY
- 2. EXAMINATION, PALPATION AND ASSESSMENT
- 3. APPLYING TREATMENT TECHNIQUES
- 4. ELABORATION OF TREATMENT PROTOCOLS

TEACHING METHOD AND ACTIVITIES

DIRECTED ACTIVITIES

• **Theoretical lessons** that will provide the student with the foundations of pelvic floor physiotherapy. The lessons will offer visual and computer-based support

Estimated time: 30 hours.

• **Practical lessons** where the teacher will present, with the help of a model, different techniques. The lessons will offer visual and computer-based support.

Estimated time: 7.5 hours.

• **Presentation and resolution of clinical cases.** Different clinical cases will be presented for which the student will have to suggest an appropriate treatment.

Estimated time: 7.5 hours.

SUPERVISED ACTIVITIES

Practical activity, under the teacher's supervision, to apply the different techniques presented.

Estimated time: 15 hours.



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AUTONOMOUS ACTIVITIES

 Search and revision of the information included in the meta-analyses on the results of pelvic floor exercises. Taking the importance of this task into account, this part will be included in the exams.

Estimated time: 22 hours.

 Writing a group paper about cultural diversity within a population treated for some pelvic floor dysfunction.

Estimated time: 10 hours.

• **Autonomous work** of individual study to prepare exams, organise notes/material, tutorials: individually or in group.

Estimated time: 55.5 hours.

ACTIVITY TYPE	ACTIVITY	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
	Theoretical lessons	E1, E3, E4, E5, E7, E8,	30
		E9, E17, E20, G3	
Directed	Practical lessons	E3, E4, E5, E7, E8	7.5
activities	Presentation and	E1, E3, E4, E5, E7, E8,	7.5
	resolution of clinical	E9, E17, T10, G3	
	cases		
Supervised	Practical activity	E3, E4, E5, E7, E8, G3	15
activities			
	Info	F4 F2 F4 FF F7 F0	22
	Information search	E1, E3, E4, E5, E7, E8,	22
	and revision	E17, E20	
Autonomous	Writing papers	E1, E3, E4, E5, E7, E8,	10
activities		E9, E17, E20, T10	
	Autonomous work	E1, E3, E4, E5, E7, E8,	55.5
		E9, E17, E20	
	TC	TAL NUMBER OF HOURS	147.5



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Physiotherapy

ASSESSMENT METHOD

The assessment method will include:

- The knowledge acquired will be assessed through written tests, which will amount to 35% of the final mark.
- Assessment of the manual skills necessary to apply a specific technique and of adequacy of the technique/manoeuvre used in a given situation, through oral practical tests that account for 50% of the final mark
- The papers and the clinical cases presented amount to 15% of the final mark.

In order to pass the course, the following conditions have to be met:

- Pass each section and part of the unit with a minimum mark of 5.
- Hand in and pass all the papers, fulfilling the criteria established by the teacher.
- Attendance at 100% of practical classes (justified absences will allow the student to miss up to 20% of all the practical classes).
- Get a minimum final mark of 5.

ASSESSED ACTIVITIES	PERCENTAGE FINAL MARK	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
Written tests	35%	E1, E3, E4, E5, E7,	
		E8, E9, E17, E20,	2
		T10, G3	
Oral practical tests	50%	E3, E4, E5, E7, E8	0.5
Written papers and clinical	15%	E1, E3, E4, E5, E7,	
cases		E8, E9, E17, E20,	
		T10, G3	
	TOTAL	NUMBER OF HOURS	2.5

BIBLIOGRAPHY AND WEB PAGES / BASIC READINGS

Books						
Author/s Year Title Edition City Publisher						
M.Caufriez	Caufriez 1997 Gymnastique Abdominale			Brussel·les		
		Hyporessive				
B. Calais-Germain	1996	El periné femenino y el parto		Brussel·les	Liebre de Marzo	

Articles						
Author	Title	Publication	Volume	Year	Pages	Description/
						comment
Jean Hay-Smith, Kari	Pelvic floor muscle	Cochrane Database	CD 001407	2001		
Bo, Bary Berghmans,	training for urinary	Systematic Review				
Erik Hendriks, Rob de	incontinence in					
Bie, Ernst van	women					
Waalwijk van Doorn						
Jean Hay-Smith, Siv	Pelvic floor muscle	Cochrane Database	CD 007471	2008		



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Physiotherapy

A A real constitution A	toototoo Consumuntion	Carla markin Dania	1	1	
Mørkved, Kate A	training for prevention	Systematic Review			
Fairbrother, G Peter	and treatment of				
Herbison	urinary and faecal				
	incontinence in				
	antenatal and				
	postnatal women				
Chantale Dumoulin,	Pelvic floor muscle	Cochrane Database	CD 005564	2010	
Jean Hay-Smith	training versus no	Systematic Review			
	treatment, or inactive				
	control treatments,				
	for urinary				
	incontinence in				
	women				
Elias Thomas Kovoor,	Pelvic floor muscle	Cochrane Database	CD 007172	2010	
Sam Datta, Anand	training in	Systematic Review			
Patel	combination with				
	another therapy				
	compared with the				
	other therapy alone				
	for urinary				
	incontinence in				
	women				

Web pages			
Title	Description	URL	
Mayday Urogynaecology and	Pàgina sobre reconstrucció	http// www.perineum.net	
pelvic floor reconstruction unit	perineal, amb bona iconografia		

BIBLIOGRAPHY AND WEB PAGES / RECOMMENDED READINGS

Author/s	Year	Title	Edition	City	Publisher
J. Salinas, M. Rapariz	1997	Tratado de reeducación en urogineproctología		Madrid	Salinas-Rapariz eds
P. Abrams, L. Cardozo, S. Khoury, A. Wein	2009	Incontinence		Paris	Editions 21
J. Laycock, J. Haslam	2007	Therapeutic management of incontinence and pelvic pain, pelvic organ disorders		London	Springer Ed
D. Wise, R. Anderson	2003	A headache in the pelvis: a new understanding and treatment for prostatitis and chronic pelvic pain syndromes		USA	Ed National Center for Pelvic Pain Research
A. Montoto Marques	2005	Lesión medular y vejiga neurógena		Barcelona	Ars Medica
P.E. Papa Petros	2006	Suelo pelvico en la mujer. Funcion, disfuncion y tratamiento según la teoria integral		Barcelona	Mayo Eds
J. Moreno Sierra	2007	Atlas de incontinencia urinaria y suelo pélvico		Madrid	Ene Eds
M. Espuña	2004	Tratado de uroginecología. Incontinencia urinaria		Barcelona	
C.Walker	2006	Fisioterapia en obstetrícia y uroginecología		Barcelona	Masson
R.Stephenson, L.O'Connor	2003	Fisioterapia en obstetricia y ginecología		Madrid	Mc.Graw-Hill
B.Calais-Germain, N.Vives	2010	Abdominales sin riesgo		Barcelona	Liebre de Marzo
D. Grosse, J. Sengler	2001	Reeducación del periné. Fisioterapia en las incontinencias urinarias		Barcelona	Masson
B.Calais-Germain, N.Vives	2009	Parir en movimiento. Las		Barcelona	Liebre de Marzo



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Physiotherapy

	movilidades de la pelvis en el		
	parto		

PLANNING OF THE COURSE UNIT

Available on the virtual campus for all those students enrolled in this course unit.



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Physiotherapy

GENERAL INFORMATION

• COURSE UNIT

Course unit	PHYSIOTHERAPY IN AESTHETIC MEDICINE AND PLASTIC AND RECONSTRUCTIVE SURGERY			
Code		200879	Academic year	2016-2017
ECTS	6		Type of course unit	Optional
Year	3		Term	2
Timetable	Available on the virtual campu		us for all those students e	nrolled in this course unit
Language of instruction CATALAN / SPANI		ISH		

• TEAM TEACHERS

Team leader

Name of lecturer	MS MÓNICA GÓMEZ MARTÍNEZ	
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ADMISSION REQUIREMENTS

• None



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Physiotherapy

THE COURSE UNIT WITHIN THE CURRICULUM

- Course contents: physiotherapy in aesthetic medicine and plastic and reconstructive surgery.
- This course unit aims to consolidate the bases of the knowledge and understanding of
 anatomy and physiology of the skin and surrounding tissue, pathologies associated with
 dermatological disorders, plastic and reconstructive surgery, aesthetic medicine, and nutrition.
 The student will be able to identify functional alterations in this field and make a diagnostic
 hypothesis and physiotherapy treatment for pathologies treated by means of aesthetic
 medicine and reconstructive surgery.
- The knowledge of physiotherapy in this field is important within the curriculum and the profession because of the growing demand for issues related to aesthetics and health in our current society.

COMPETENCES AND LEARNING OUTCOMES

Specific competences

Competence

E1. Demonstrate knowledge of the morphology, physiology, pathology, and conduct of both healthy and ill people in their natural and social environment.

Learning outcomes

E1.35. Describe the anatomy, physiology, and main pathological processes affecting the skin and surrounding tissue, as well as the metabolic and nutritional mechanism.

Specific objectives:

- **E1.35.1.** Describe the anatomy of the skin and surrounding tissue.
- **E1.35.2.** Describe the physiology of the skin, connective tissue, and visceral relationships in our organism.
- **E1.35.3.** Describe the pathological processes and disorders of the skin and surrounding tissue.
- **E1.35.4.** Describe autoimmune pathological processes and their connection with superficial and deep tissues.
- **E1.35.5.** Describe vascular disorders and their connections with the skin and annexes.
- **E1.35.6.** Revise the concepts of metabolic regulation, body growth, and energetic balance.
- **E1.35.7.** Describe infectious processes and their connection with the skin.
- **E1.35.8.** Describe the basis of nutrition, including nutrients and their functions in the body.
- **E1.35.9.** Describe regulation of food intake and dietary balance and assess the importance of a balanced diet.
- **E1.35.10.** Describe the nutritional needs of the healthy population in general.
- **E1.35.11.** Describe the nutritional needs of the populations with different pathologies.



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E1.36. Describe the pathophysiology of obesity and cellulitis.

Specific objectives:

E1.36.1. Describe the classification, epidemiology, aetiology, pathogenesis, risk factors, evolution, and diagnosis of obesity.

E1.36.2. Describe the classification, epidemiology, aetiology, pathogenesis, risk factors, clinical manifestations (symptoms and signs), prognosis, evolution, complementary tests, and diagnosis of cellulitis.

E1.37. Describe the medico-surgical treatments used in aesthetic medicine and plastic and reconstructive surgery.

Specific objectives:

E1.37.1. Describe non-invasive / non-surgical medical treatments provided by aesthetic and reconstructive medicine and in the treatment of different conditions related to vascular, metabolic, and hormonal disorders.

E1.37.2. Describe the surgical procedures used in the treatment of metabolic, vascular, hormonal, and viral diseases.

E1.37.3. Describe the pharmacological and cosmetic treatments administered in the field of aesthetic and reconstructive medicine.

E1.37.4. Describe the different dietetic treatments for obesity.

E1.37.5. Describe the classification, aetiology, pathogenesis, risk factors, symptoms and signs, prognosis, and diagnosis of burns.

E1.37.6. Describe the different medical and surgical treatments given in the treatment of burns.

E1.37.7. Describe the classification, aetiology, pathogenesis, risk factors, symptoms and signs, prognosis, evolution and diagnosis of facial paralysis.

E1.37.8. Describe the different medical and surgical treatments given in the treatment of facial paralysis.

E1.37.9. Describe the classification, epidemiology, aetiology, pathogenesis, risk factors, symptoms and signs, prognosis, evolution, complementary tests and diagnosis of mammary pathologies.

E1.37.10. Describe the medical and surgical procedures used in the treatment of mammary pathologies.

E1.37.11. Describe the classification, pathogenesis, healing stages, symptoms and signs, diagnosis, complications and side effects of scars.

Competence

E3. Demonstrate knowledge of the physiotherapy methods, procedures, and actions that lead to clinical therapeutics.

Resultats d'aprenentatge

E3.29. Apply the basic physiotherapy methods, procedures, and actions in the field of aesthetic medicine and plastic and reconstructive surgery.

Specific objectives:

E3.29.1. Define the role of the physiotherapist in the field of aesthetic medicine and plastic and reconstructive surgery.

E3.29.2. Apply the different physiotherapy techniques in the conservative treatments of metabolic, hormonal, viral, autoimmune, vascular, mammary pathologies, burns, facial paralysis, and amputations.

E3.29.3. Apply the different physiotherapy techniques in postsurgical treatments in aesthetic medicine and plastic and



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Physiotherapy

reconstructive surgery.

E3.29.4. Describe the characteristics and applications of electrical devices for the treatments provided by aesthetic medicine.

Competence

E5. Integrate, through clinical experience, ethical and professional values, the knowledge, skills, and attitudes characteristic in physiotherapy to solve specific clinical cases in hospital, out-of-hospital, primary and community health care environments.

Learning outcomes

E5.19. Apply the knowledge and competences acquired in the course to solve clinical cases in aesthetic medicine and plastic and reconstructive surgery that can be treated with physiotherapy.

Specific objectives:

E5.19.1. Identify lesions and disorders of the skin and surrounding tissues in some specific clinical cases presented in class.

E5.19.2. Formulate the appropriate diagnostic hypotheses and treatments for the clinical cases presented in class in relation to aesthetic medicine and plastic and reconstructive surgery.

Competence

E7. Assess the patient's functional state, taking into account physical, psychological, and social aspects.

Learning outcomes

E7.26. Describe and apply the adequate physiotherapy assessment procedures, with the aim of determining the level of affection of a condition in the field of aesthetic medicine and plastic and reconstructive surgery.

Specific objectives:

E7.26.1. Assess the patient's body composition.

E7.26.2. Examine the patient in relation to the different pathological processes and disorders that are common in the field of aesthetic medicine and plastic and reconstructive surgery (history-taking, examination, and palpation).

E7.26.3. Use the tools and diagnostic assessment scales employed in the field of aesthetic medicine and plastic and reconstructive surgery.

Competence

E8. Determine the physiotherapy diagnosis according to established norms and using internationally recognised validation instruments.

Learning outcomes

E8.16. Establish a physiotherapy diagnostic hypothesis based on some clinical cases related to the field of aesthetic medicine and plastic and reconstructive surgery.

Specific objectives:

E8.16.1. Identify local, regional, or global physical alterations and describe any alteration in the patient's physical capacity in order to generate diagnostic hypotheses in the field of aesthetic medicine and plastic and reconstructive surgery.

Competence

E9. Develop a physiotherapy intervention plan according to criteria of adequacy, validity, and efficiency

Learning outcomes

E9.46. Define the general and specific objectives for the application of the physiotherapy treatment in the field of aesthetic medicine and plastic and reconstructive surgery.



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Physiotherapy

Specific objectives:

E9.46.1. Set the short-term and long-term treatment objectives according to a given diagnostic hypothesis in the field of aesthetic medicine and plastic and reconstructive surgery.

E9.47. Describe those circumstances that determine the priorities for action in the physiotherapy treatment in the field of aesthetic medicine and plastic and reconstructive surgery.

Specific objectives:

E9.47.1. Prioritise the type of intervention according to the patient's healthcare setting.

E9.47.2. Identify any health priorities affecting the patient in the field of aesthetic medicine and plastic and reconstructive surgery according to a given diagnostic hypothesis.

E9.47.3. Adapt the physiotherapy programme in the field of aesthetic medicine to the patient's specific conditions regarding his/her religion, culture, perspectives and objectives.

E9.47.4. Establish treatment priorities according to severity, impact or chances of recovery including available equipment and material in the field of aesthetic medicine and plastic and reconstructive surgery.

E9.48. Enumerate the different types of material and equipment used in the physiotherapy treatment in the field of aesthetic medicine and plastic and reconstructive surgery.

Specific objectives:

E9.48.1. Identify the electrotherapy equipment and additional material most commonly used in the field of aesthetic medicine and plastic and reconstructive surgery.

E9.48.2. Use the most appropriate equipment according to the type of pathology to be treated.

Competence

E17. Participate in the making of health care protocols of scientific evidence-based physiotherapy, promoting professional activities that foster research in physiotherapy.

Learning outcomes

E17.10. Describe and analyse the health care protocols of evidence-based physiotherapy in the field of aesthetic medicine and plastic and reconstructive surgery.

Specific objectives:

E17.10.1. Interpret accumulated scientific evidence regarding the effectiveness and safety of different physiotherapy treatments given in the field of aesthetic medicine and plastic and reconstructive surgery.

E17.10.2. Enumerate the different evidence-based physiotherapy assistance protocols in the field of aesthetic medicine and plastic and reconstructive surgery.

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E20. Apply the quality guarantee mechanisms in the practice of physiotherapy, according to recognised and validated criteria.

Learning outcomes

E20.15. Describe the guides to good clinical practice applied in the field of aesthetic medicine and plastic and reconstructive surgery.

Specific objectives:

E20.15.1. Describe the most consensual algorithms in



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physiotherapy in the field of aesthetic medicine and plastic and reconstructive surgery.

E20.15.2. Name and identify the existing guides to good clinical practice in the field of aesthetic medicine and plastic and reconstructive surgery.

Transversal competences

Competence	T8. Develop	interpersonal relationships.	
Learning outcome	es	Specific objectives: T8.1. Develop communicative skills to address the patient taking into account his/her pathology, and social, family, and individual circumstances. T8.2. Identify the most relevant aspects of a good listener. T8.3. Identify the most relevant aspect when establishing limits. T8.4. Develop empathic abilities.	

Generic competences

Competence	G3. Respect	diversity and plurality of ideas, people, and situations.
Learning outcome	25	Specific objectives: G3.1. Identify, recognise, and respect the patient's subjective position. G3.2. Adapt functional rehabilitation programmes and physiotherapy treatments to the patient's preferences, goals, and religious or cultural beliefs. G3.3. Adapt the treatment to the patient's specific situation, respecting his/her privacy in those cases of total or partial dependence, personal or family conflicts, and emotional disorders.

CONTENTS

- 1. Dermatology
- 2. Plastic and reconstructive surgery
- 3. Burns
- 4. Scars
- 5. Vascular alterations and their link with the skin
- 6. Aesthetic medicine
- 7. Obesity and physical exercise
- 8. Facial paralysis
- 9. Treatment of amputated stumps
- 10. Physiotherapy in aesthetic and plastic medicine



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TEACHING METHOD AND ACTIVITIES

DIRECTED ACTIVITIES

 Theoretical lessons that will provide the student with the theoretical bases of physiotherapy in the field of aesthetic medicine and plastic and reconstructive surgery. The lessons will offer visual and computer-based support.

Estimated time: 30 hours.

• **Practical lessons** where the teacher will present, with the help of a model, different treatments. The lessons will offer visual and computer-based support.

Estimated time: 10 hours.

 Presentation and resolution of clinical cases. Different clinical cases will be presented for which the student will have to assess, formulate a diagnostic hypothesis, and suggest the best treatment.

Estimated time: 5 hours.

SUPERVISED ACTIVITIES

• **Practical activity,** under the teacher's supervision, to apply the different techniques presented.

Estimated time: 15 hours.

AUTONOMOUS ACTIVITIES

Information search and management in small groups. Based on a topic agreed by the
teacher and the student, the student will search for updated bibliography on the topic and
will write a summary of the five most relevant articles and will present a critical review of
them.

Estimated time: 15 hours.

 Writing a paper with some bibliographical research: elaboration, theoretical approach, and discussion of a clinical case selected by the student during his / her training in hospital.

Estimated time: 15 hours.

• **Autonomous work** of individual study to prepare exams, organise notes/material, tutorials: individually or in group.

Estimated time: 57.75 hours.



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ACTIVITY TYPE	ACTIVITY	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
	Theoretical lessons	E1, E3, E5, E7, E8, E9,	30
Directed activities		E17, E20, T8, G3	
	Practical lessons	E3, E5, E7, E8	10
	Presentation and	E1, E3, E5, E7, E8, E9,	5
	resolution of clinical	E17, T8, G3	
	cases		
Supervised	Practical activities	E3, E5, E7, E8	15
activities			
	Information search	E1, E3, E5, E7, E8, E17,	15
	and management	E20	
Autonomous	Writing a paper	E1, E3, E5, E7, E8, E9,	15
activities		E17, E20	
	Autonomous work	E1, E3, E5, E7, E8, E9,	57.75
		E17, E20	
	147.75		

ASSESSMENT METHOD

The assessment method will include:

- The knowledge acquired during the course will be assessed through written tests, which will amount to 35% of the final mark.
- Assessment of the manual skills necessary to apply a specific technique and of the adequacy of the technique / manoeuvre used in a given situation, through oral practical tests that account for 50% of the final mark.
- The written papers and the clinical cases presented amount to 15% of the final mark.

In order to pass the course, the following conditions have to be met:

- Pass each section and part of the unit with a minimum mark of 5.
- Hand in and pass all the papers, fulfilling the criteria established by the teacher.
- Attendance at 100% of practical lessons (justified absences will allow the student to miss up to 20% of all the practical lessons).
- Get a minimum final mark of 5.

ASSESSED ACTIVITIES	PERCENTAGE FINAL MARK	LEARNING OUTCOMES	TIME DEVOTED BY THE STUDENT
Written tests	35%	E1, E3, E5, E7, E8,	
		E9, E17, E20, T8,	2
		G3	
Oral practical tests	50%	E3, E5, E7, E8	0.25
Written papers and clinical	15%	E1, E3, E5, E7, E8,	
cases		E9, E17, T8, G3	-
	2.25		



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BIBLIOGRAPHY AND WEB PAGES / BASIC READINGS

Books					
Author/s	Year	Title	Edition	City	Publisher
Carlos Ferrándiz Foraster	2009	Dermatología Clínica	3a.Edicion	Barcelona	Elsevier

BIBLIOGRAPHY AND WEB PAGES / RECOMMENDED READINGS

Books					
Author/s	Year	Title	Edition	City	Publisher
Quetglas J.	1983	Traumatología Facial		Madrid	Sociedad Española de Cirugía Plástica
Riefkohl R, Brawick WJ.	1992	Textbook of Plastic, Maxillofacial and Reconstructive Surgery.		Baltimor e	Williams Williams,
Jackson I.	1990	Colgajos locales en la reconstrucción de cabeza y cuello.		Barcelon a	Salvat editores
McCarthy J.	1992	Traumatismos de la cara. Cirugía plástica		Buenos Aires	Panamericana
Hammon Burns. Hermon	1987	LIPOSUCCIÓN EN CIRUGÍA ESTÉTICA Y PLÁSTICA. Atlas de cirugía estética de la mama			Salvat.
Mataix, J.*	2002	Nutrición y Alimentación Humana, vol 2		Madrid	Ergon Creación

PLANNING OF THE COURSE UNIT

Available on the virtual campus for all those students enrolled in this course unit