

Name of the course	<b>Dermatovenerology</b>			<b>Code</b>	
Type of study program Cycle	Integrated study program, medicine			Year of study	IV
Credits (ECTS):	<b>6</b>	<i>Semester</i>	VIII	Number of hours per semester (l+e+s)	80 (33+30+17)
Status of the course:	mandatory	Preconditions:	Successfully passed 3rd year exams	Comparative conditions:	
Access to course:	4th year medical students			Hours of instructions:	According to schedule
Course teacher:	Associate Professor Dubravka Šimić, MD,PhD				
<i>Consultations:</i>	As agreed				
E-mail address and phone number:	<a href="mailto:simicdubravka@gmail.com">simicdubravka@gmail.com</a>				
Associate teachers					
<i>Consultations:</i>					
E-mail address and phone number:					
<b>The aims of the course:</b>	The aim of dermatovenerology course is to introduce students with the role, structure and function of the skin and visible mucous membranes. Applying the dermatological clinical examination, as well as other methods of dermatology diagnostics. Familiarization with local and systemic as well as physical treatments in dermatovenerology. Familiarization with a detailed examination of dermatosis and sexually transmitted disease and learning about skin cancers.				
<b>Learning outcomes (general and specific competences):</b>	<p><u>Expected outcomes:</u> Synthesis of general and specific competencies - knowledge and skills.</p> <p><u>General Outcomes:</u> Applying the independent learning, communication skills and teamwork capability.</p> <p><u>Specific Outcomes:</u> Understanding and applying the peculiarities of dermatological and venereal disease. Analyzing the approach to treatment of patients.</p>				
<b>Course content (Syllabus):</b>	Course consists of of lectures, seminars and exercises in duration of two weeks				

<b>Format of instruction (mark in bold)</b>	<b>Lectures</b>	<b>Exercises</b>	<b>Seminars</b>	Independent assignments
	<b>Consultations</b>	Work with mentor	Field work	Others
	Remarks:			
<b>Student responsibilities</b>	Students are required to attend classes, it is allowed to miss 20% of teaching.			
<b>Screening student work (mark in bold)</b>	Class attendance	Class participations	<b>Seminar essay</b>	<b>Practical training</b>
	<b>Oral exam</b>	<b>Written exam</b>	Continuous assessment	Essay
Detailed evaluation within a European system of points				
<b>STUDENTS RESPONSIBILITIES</b>	<b>HOURS</b>	<b>PROPORTIONS OF ECTS CREDITS</b>	<b>PROPORTION S OF MARK</b>	
Class attendance and participations	30	1		
Seminar essay	30	1	20%	
Written exam	50	2	60%	
Oral exam	60	2	20%	
Further clarification:				
The exam consists of a practical, written and oral part.				
According to the Book of Rules, the final grade is obtained as follows:				
A = 91-100% 5				
B = 79 to 90% 4				
C = 67 to 78% 3				
D = 55 to 66% 2				
F = 0 to 54% 1				
<b>Required literature:</b>	Prof. Aleksandra Basta Juzbašić i sur. Dermatovenerology. Zagreb, Medicinska naklada, 2014.g.			
<b>Optional literature:</b>	G. Rassner. Dermatology- textbook and atlas (translated by prof. dr. sc. Mirna Šitum), Naklada «Slap», 2004.  Dubravka Šimić et al. Mucous disease multidisciplinary approach, Zagreb, Medicinska naklada, 2012.			

<b>Additional information about the course</b>	<p>Monitoring methods of teaching quality:</p> <ul style="list-style-type: none"> <li>- student questionnaire</li> <li>- quality analysis by students and teachers</li> <li>- exam results analysis</li> <li>- report of the office for teaching quality</li> <li>- external evaluation (visit of team for quality control)</li> </ul>
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Annexes: calendar classes

<i>The number of teaching units</i>	<b>TOPICS AND LITERATURE</b>
<b>I.</b>	<p>Title: Development, texture and skin function. Eflorescence system on the skin. Basic Principles of Dermatological Diagnosis and Treatment of Allergic and Urticative Skin Diseases. Dermatitis (contact, professional, atopic). Amyloidic, intertriginous, numular dermatitis. Blood and lymphatic vessel diseases. Diseases of apocrine and ecrinous glands. Skin and mucous diseases caused by viruses. Bacterial skin infections (pyoderma). Skin diseases caused by borrelia, protozoa, parasitic skin diseases. Granulomatous skin diseases of unknown etiology. Chronic piodermy</p> <p>Short description: After the presentation of the basics of the subject, specific dermatoses are identified</p> <p>Literature. required and optional</p>
<b>II.</b>	<p>Title: A group of hereditary bullous epidermolysis. Group of pemphigus and pemphigoids. Group of herpetiform dermatitis and pustular dermatosis. Congenital disorders of connective tissue, acquired atrophy of the skin. Skin changes in the graft versus host reaction. Skin changes in pregnancy. Scleroderma, dermatomiozitis. Group of erythematosus, fatty tissue disease.</p> <p>Short description: illustrated examples of dermatological diseases.</p> <p>Literature: required and optional</p>
<b>III.</b>	<p>Title: sexually transmitted diseases. (Syphilis, gonorrhea) AIDS, Ulcus molle, lymphogranuloma venereum, donovanosis, nonspecific (nagonoric) urethritis, herpes genitalis, HPV. Diseases of an external sex in men. Diseases of external sex in women A group of erythematosus dermatoses. Eritematosquamous and papulose dermatosis. Pityriasis rubra pilaris, parapsoriasis, erythrodermia, lichen ruber planus.</p> <p>Short description: Illustrated examples of sexually transmitted and dermatological diseases</p> <p>Literature: required and optional</p>
<b>IV.</b>	<p>Title: Hemorrhagic skin disorders. Disorders of metabolism of lipids, amino acids, mucopolysaccharides and purines. Hypersensitivity to insect bites, anaphylaxis, desensitisation. Infectious granulomatous skin diseases. Special course of bacterial skin diseases. Scalp disease. Disease of the nails. Physical and chemical damage of the skin. Benign vascular and epidermal tumors. Cysts. Benign tumors of adnexa, connective tissue, nervous and muscular tissue.</p>

	<p>Pre-cancer. Malignant epithelial tumors, intraepithelial cancers, invasive carcinomas. Malignant soft tissue and blood vessels, pigmental neurons, malignant melanoma. Paraneoplastic dermatoses. Lymphoma of pseudolymphoma.</p>
	<p>Short Description: Described with illustrated examples of dermatological diseases, benign and malignant tumors, and paraneoplastic dermatitis.</p>
	<p>Literature: required and optional</p>
<b>V.</b>	<p>Title: Diseases of skin caused by fungi and yeast, deep and systemic mycoses. Diseases of hair follicles and sebaceous glands. Diseases of apocrine and ecrinous glands.</p> <p>Pigmentation disorders. Diseases of lips and mouth cavities. Neurogenes and psychogenic manifestations on the skin. Nasal disorders of keratinization, (ihtiosis, keratoderma). Erythrokeratodermia. Follicular Keratoderma. Mastocytosis, Histiocytic Skin Diseases. Porphyry, hyalensis</p>
	<p>Short description: Illustrated examples of dermatological diseases and hereditary dermatitis.</p>
	<p>Literature: required and optional</p>
<b>VI.</b>	<p>Title: Anamnesis of a dermatological patient. Dermatological status. The system of ephlorescence of the skin. The basic principles of dermatological diagnostics. Fundamental Principles of Dermatological Local and Systemic Therapy. Wound treatment of lower leg.</p>
	<p>Short description: The basics of dermatological diagnostics are presented.</p>
	<p>Literature: required and optional</p>
<b>VII.</b>	<p>Title: Allergology Diagnosis. Types of tests (intradermal, prick, scarring, epicutaneous tests). Other types of allergology tests. Microbiological diagnosis. Mycological diagnosis (native mycological preparations, Wood lamp). Particularities of dermatosis in childhood. Diagnostic and therapeutic guidelines of the most common dermatoses of children. Dermatological oncology (dermoscopy). Therapy of Sexual Diseases</p>
	<p>Short description: The basics of dermatological diagnostics are presented.</p>
	<p>Literature: required and optional</p>
<b>VIII.</b>	<p>Title: Demonstration of small interventions in dermatology: (excohleation, electrocauterization, application of liquid nitrogen in dermatology). Taking dermatological biopsy. Treatment of patients with systemic diseases. Treatment of patients with bullous dermatitis. Immunofluorescence diagnostics. Independent treatment of dermatological patients</p>
	<p>Short description: The basics of dermatological diagnostics are presented.</p>
	<p>Literature: required and optional</p>