

FACULTY OF MEDICINE No. 2

STUDY PROGRAM MEDICINE 0912.1

DEPARTMENT OF FAMILY MEDICINE

APPROVED

at the meeting of the Commission for Quality Assurance and Evaluation of the Curriculum in

Medicine Minutes No. 6 of 24. 02. 2 Chairman doc. hab. med. schi., university professor Andrei Pădure 🖉 🦯

APPROVED

at the Council meeting of the Faculty Medicine 2 Minutes No. <u>of</u> <u>25.02.25</u> Dean of Faculty doc. med. schi., associate professor Mircea Bețiu

APPROVED

approved at the meeting of the chair of the Department of Family Medicine Minutes No.19 of 06/06/2024 Head of chair doc. hab. med. schi., university professor Ghenadie Curocichin

SYLLABUS

Discipline: Clinical internship (Nursing assistant)

Cycle [#]]

Type of course: Compulsory

Syllabus developed by the group of authors:

Curocichin Ghenadie, doc. hab. med. schi., university professor Şalaru Virginia, PhD., associate professor Gîțu Lora, university assistant Munteanu Maria, university assistant Postica Ludmila, university assistant

Chișinău, 2024



I. INTRODUCTION

• General presentation of the discipline:

This clinical practice presents a continuation of the Practical nursing care skills module. Students already having a complete theoretical knowledge in approaching teamwork will train practical skills in holistic and comprehensive patient care during this module. The process of care is a complex one, carried out by a multidisciplinary team of medical and non-medical staff. During the practical internship students will practically realize the place and responsibilities of each team member in care, will collaborate within the team and the medical institution, will train assertive and non-judgemental communication, learn elementary practical care skills, which is the basic of a successful curative process.

Mission of the curriculum (aim) in professional training

To familiarize medical students with teamwork for patient-centered care, taking into consideration patients' personal and existential values, respecting moral and ethical norms. Another objective in professional training is the development of skills in exercising specific roles and responsibilities of each team member, interprofessional collaboration in the common work of different health care providers, assertive and non-discriminatory communication with colleagues, patient, caregivers and community.

- Language (s) of the discipline: Romanian; English; French; Russian.
- Beneficiaries: students of the II-year, faculty Medicine 1 and 2.

II. MANAGEMENT OF THE DISCIPLINE

Code of discipline			
Name of the discipline		Clinical training (Patient's nursing care)	
Person in charge of the discipline		Curocichin Ghenadie, doc. hab. med. schi., university professor	
Year	II	Semester/Semesters	Summer period
Total number of hours, including:			150
Form of assessment	Е	Number of credits	5

III. TRAINING AIMS WITHIN THE DISCIPLINE

At the end of the discipline study the student will be able to:

- at the level of knowledge and understanding:
 - Know their own role and those of other professions to assess and appropriately address patients' health needs;
 - Identify specific elements of interdisciplinary team communication;
 - Understand the roles and environments of an interdisciplinary team;



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- Know the common causes of conflict and miscommunication in interprofessional collaboration;
- Know infection prevention measures in curative institutions;
- Identify the 14 fundamental needs for the care of healthy and sick people;
- Know the techniques of care to ensure the needs of the healthy and sick person;
- Identify the stages of the nursing process;
- Describe the key elements of each stage of the nursing process;
- Realize the interdependence between the stages of the nursing process;
- Characterize nursing techniques and investigations;
- Provide equipment and materials for interventions;
- Know the stages of preparation of the patient for investigations (psychological and physical);
- Monitor the patient's progress after nursing interventions.

• at the application level:

- Analyze the functions, the role of different health care providers within the health care team;
- Collaborate with people from other professions to maintain a climate of mutual respect and values;
- Communicate effectively with patients, families, communities and health or other professionals in a responsible manner;
- Support a team approach to population health promotion and maintenance as well as disease prevention and treatment;
- Apply care techniques to meet the needs of the healthy and sick person
- Determine the degree of independence/dependence of the patient;
- Apply infection prevention measures in curative institutions;
- To apply own and delegated interventions planned on the basis of professional standards providing psychological support and appropriate information to patients;
- Plan the implementation of preventive, educational, relational and curative measures;
- To elaborate the activity and individual care plan.

• at the integration level:

- To interact effectively with different health professional members;
- To adopt a team approach to health promotion and maintenance as well as disease prevention and treatment;
- Provide necessary patient care depending on individual needs, ensuring that it is delivered in a safe, timely, effective and equitable manner;
- Evaluate the results of the care provided.

IV. PROVISIONAL TERMS AND CONDITIONS

- Knowledge of the language of instruction;
- ICT skills (use of the internet, document processing, electronic spreadsheets and presentations, use of graphics software);
- assertive and non-discriminatory communication and teamwork skills;
- qualities tolerance, initiative, autonomy and empathy.



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V. THEMES AND ESTIMATE ALLOCATION OF HOURS

Lectures, practical hours/laboratory hours/seminars and self-training

No. d/o	THEME	Number of hours Clinical
		training
1.	Teamwork and communication basics.	6
2.	Communication as a tool in care activities.	12
3.	Teamwork. Types of teams. Techniques to increase the effectiveness of communication and teamwork.	6
4.	The human being and the bio-psycho-social dimension. Virginia Henderson's concept.	6
5.	The role, functions and competences of the nurse in the provision of health care.	6
6.	The role, functions and competences of the pharmacist as a team member in the provision of health care	6
7.	The role, functions and competencies of the nutritionist and rehabilitation therapist as a member of the team in the provision of health care	6
8.	The role, functions and competencies of the psychologist as a member of the team in the provision of health care	6
9.	The Nursing Process. Stage I. Data collection (anamnesis).	6
10.	The Nursing Process. Stage II. Data analysis and interpretation, nursing diagnosis.	6
11.	The Nursing Process Stage III. Care planning.	6
12.	The Nursing Process. Stage IV. Implementation of care.	6
13.	The Nursing Process. Stage V. Evaluation of care.	6
14.	The need to breathe and have good circulation. The need to maintain body temperature within normal limits.	12
15.	The need to eat and drink. Need to eliminate.	8
16.	The need to move and have good posture.	8
17.	The need to sleep and rest. The need to dress and undress normally.	8
18.	The need to maintain good body hygiene. The need to avoid hazards in environment and avoid endangering others.	8



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	150	
20.	20. The need to be concerned with achievement. The need to recreate. The need to learn how to keep healthy.	
19.	The need to communicate. The need to act or react according to one's beliefs and values and to practise religion.	6
		Clinical training
No. d/o	THEME	Number of hours

VI. PRACTICAL TOOLS PURCHASED AT THE END OF THE COURSE

Mandatory essential practical tools are:

- Proper hand washing technique
- Sterile glove dressing technique
- The technique of dressing non-sterile gloves
- Technique for applying / wearing masks
- Putting on and taking off personal protective equipment (gloves, medical gowns, isolation suits, goggles)
- Observation and measurement of breathing
- Pulse measurement
- Pulse oximetry
- Blood pressure measurement
- Measurement of body mass
- Measurement of abdominal circumference
- Height measurement
- Determination of body mass indexes
- Determination of edema
- Changing the patient's position in bed
- Patient mobilization
- Patient transfer
- Change of bed linen
- Change of bed linen with immobile patient
- Change of the immobile patient's underwear
- Body temperature measurement (oral, axillar, cutaneous, auricular, rectal, non-contact)
- Verbal communication techniques
- Non-verbal communication techniques
- Active listening
- Empathic response.



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VII. OBJECTIVES AND CONTENT UNITS

Objective	Content units	
Theme 1. Teamwork and communication basics.		
• To know the role of nurse and those of other professions to assess and address the health needs of patients appropriately	Interprofessional education. Interprofessional collaboration in medical practice. Interprofessional teamwork. Interprofessional team-based care. Interprofessional skills in health care.	
Theme 2. Communication as a tool in care	activities	
 To possess good communication with the patient and his/her family in order to establish an effective doctor-patient relationship To demonstrate verbal and non-verbal communication skills required in the consultation To demonstrate assertive and non-discriminatory communication skills with the care team members 	Communication as a tool in collecting medical information, establishing partnership and trust between doctor and patient. The aims of doctor-patient communication. Types of communication: verbal and non-verbal communication. Assertive and non-discriminatory communication. Interprofessional team communication. Phases of listening. Main elements of a communication process. Behaviors of sender and receiver. Ethical aspects of communication with the patient. Barriers in communication.	
Theme 3. Teamwork. Types of teams. Tecl and teamwork.	nniques to increase the effectiveness of communication	
 To understand the roles and environments of an interdisciplinary team To know the common causes of conflict and miscommunication in interprofessional collaboration To analyze the functions/roles of different health care providers within the health care team. To collaborate with people from other professions to maintain a climate of mutual respect and shared values To recognize the impact of teamwork on patient-centered practice. 	The role of the team in care work. Types of teams, communication techniques and interaction with team members. Common causes of conflict. Conflict resolution methods. Team work in providing integrated and patient- centered services. Indicators of assessment of effective interprofessional team functioning and their impact on successful healthcare delivery using a case-based approach.	
Theme 4. The human being and the bio-pa	sycho-social dimension. Virginia Henderson's concept.	
 To analyze the fundamental needs specific to the human being; To define independence and dependence in the satisfaction of basic needs; To list the types of dependence; To identify sources of difficulty. Theme 5. The role, functions and competent 	The conceptual model of V. Henderson. Essential components of a conceptual model (postulates, values and elements). Fundamental needs and bio-psycho-social dimensions. Independence and dependence in addressing basic needs. Types of dependency and level of intervention. Sources of difficulty. Manifestations of dependency.	
• To understand and respect the roles, responsibilities and area of practice of the nurse	The role, functions and competencies of the nurse in providing health care.	
Theme 6. The role, functions and competences of the pharmacist as a team member in the provision of health care		



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Objective	Content units		
• To understand and respect the roles, responsibilities and area of practice of the pharmacist	The role, functions and competencies of the pharmacist in providing health care.		
	encies of the nutritionist and rehabilitation therapist		
as a member of the team in the provision			
• To understand and respect the roles,	The role, functions and competencies of the nutritionist		
responsibilities and scope of practice of the nutritionist and rehabilitator.	and rehabilitator in providing health care.		
	encies of the psychologist as a member of the team in		
the provision of health care			
• To understand and respect the role, responsibilities and scope of practice of the psychologist	The role, functions and competences of the psychologist in the provision of health care.		
Theme 9. The Nursing Process. Stage I. Da	ta collection (anamnesis).		
To define the nursing process;	Definition of the Nursing Process. Overview of the stages of		
 To know the stages of the nursing process; 	the nursing process.		
• To apply interviewing and observation to	First stage of the nursing process - Data collection. Types of		
facilitate information gathering;	information collected. Stable data, variable data, sources of		
• To demonstrate the detection of unmet	information. Observation. Interviewing, conditions for		
needs and manifestations of patient	interviewing, skills of the nurse to facilitate the data		
dependency.	collection.		
0 0	Analysis and interpretation of data, establishment of		
nursing diagnosis.	The Nursing Process stage II Data analysis and		
• To examine and classify the data collected from the patient;	The Nursing Process - stage II. Data analysis and interpretation. The distinction between the		
• To separate the manifestations of	manifestations of independence and the manifestations		
independence from dependency;	of dependence. Nursing diagnosis. Components of		
• To formulate the nursing diagnosis.	nursing diagnosis. Types of nursing diagnosis according		
	to the international NANDA classification.		
Theme 11. The Nursing Process Stage III.			
• To set up care priorities;	Stage III of the Nursing approach. Care goals, the		
 To develop care goals; 	characteristics of a care goal - the first component of		
• To plan specific interventions and	planning. Intervention - the second component of		
assessable that meet the needs of the	planning.		
patient Theme 12. The Nursing Process. Stage IV.	Implementation of care		
• To apply care according to interventions	Applying care in practice and the nurse-patient relationship. The patient's reactions during care (anxiety,		
planned;	stress, pain, loneliness, alienation, feeling helpless, etc.),		
	which must be in the nurse's attention.		
Theme 13. The Nursing Process. Stage V. Evaluation of care.			
• To appreciate patient's progress in	Analysis of the obtained result. Evaluation of the patient		
relation to the interventions applied;	in relation to the interventions of the nurse. Patient's		
• To evaluate the whole process followed	satisfaction with the obtained results.		
in case of changes in patient's condition			
(interventions, complications, etc.).			
	have good circulation. The need to maintain body		
temperature within normal limits.			



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Objective	Content units		
 To define the need to breathe and have good circulation; To define the need to maintain body temperature within normal limits; To list the influencing factors in satisfying the need; To describe the nurse's interventions to maintain independence in meeting the need. To list the sources of difficulty; To identify health problems; To develop a care plan. 	Definition, independence in meeting the need: - the factors that influence the satisfaction of the need; - manifestations of independence; - the interventions of the nurse to maintain independence. Addiction in meeting the need: - source of difficulty; - manifestations of addiction problems; - the nurse's interventions in health problems; - coordination and integration of need-specific care.		
 To define the need to eat and drink, the need to eliminate; To list the influencing factors in satisfying the need; To describe the nurse's interventions to maintain independence in meeting the need. To list the sources of difficulty; To identify health problems; To develop a care plan. 	Definition, independence in meeting the need: - the factors that influence the satisfaction of the need; - manifestations of independence; - the interventions of the nurse to maintain independence. Addiction in meeting the need: - source of difficulty; - manifestations of addiction problems; - the nurse's interventions in health problems; - coordination and integration of need-specific care.		
Theme 16. The need to move and have go	od posture.		
 To define the need to move and have a good posture; To list the influencing factors in satisfying the need; To describe the nurse's interventions to maintain independence in meeting the need. To list the sources of difficulty; To identify health problems; To develop a care plan. 	 Definition, independence in meeting the need: the factors that influence the satisfaction of the need; manifestations of independence; the interventions of the nurse to maintain independence. Addiction in meeting the need: source of difficulty; manifestations of addiction problems; the nurse's interventions in health problems; coordination and integration of need-specific care. 		
Theme 17. The need to sleep and rest. The	e need to dress and undress normally.		
 To define the need to sleep and rest, the need to dress and undress normally; To list the influencing factors in satisfying the need; To describe the nurse's interventions to maintain independence in meeting the need. To list the sources of difficulty; To identify health problems; To develop a care plan. 	Definition, independence in meeting the need: - the factors that influence the satisfaction of the need; - manifestations of independence; - the interventions of the nurse to maintain independence. Addiction in meeting the need: - source of difficulty; - manifestations of addiction problems; - the nurse's interventions in health problems; - coordination and integration of need-specific care.		



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Objective	Content units		
Theme 18. The need to maintain good body hygiene. The need to avoid hazards in environment and avoid endangering others.			
 To define the need to maintain good body hygiene, to avoid hazards; To list the influencing factors in satisfying the need; To describe the nurse's interventions to maintain independence in meeting the need. To list the sources of difficulty; To identify health problems; To develop a care plan. 	Definition, independence in meeting the need: - the factors that influence the satisfaction of the need; - manifestations of independence; - the interventions of the nurse to maintain independence. Addiction in meeting the need: - source of difficulty; - manifestations of addiction problems; - the nurse's interventions in health problems; - coordination and integration of need-specific care.		
Theme 19. The need to communicate. The values and to practice religion.	e need to act or react according to one's beliefs and		
 To define the need to communicate, to react according one's beliefs and values, to practice religion; To list the influencing factors in satisfying the need; To describe the nurse's interventions to maintain independence in meeting the need. To list the sources of difficulty; To identify health problems; To develop a care plan. 	Definition, independence in meeting the need: - the factors that influence the satisfaction of the need; - manifestations of independence; - the interventions of the nurse to maintain independence. Addiction in meeting the need: - source of difficulty; - manifestations of addiction problems; - the nurse's interventions in health problems; - coordination and integration of need-specific care.		
Theme 20. The need to be concerned with how to keep healthy.	achievement. The need to recreate. The need to learn		
 To define the need to be concerned with achievement, to recreate, to learn how to keep healthy; To list the influencing factors in satisfying the need; To describe the nurse's interventions to maintain independence in meeting the need. To list the sources of difficulty; To identify health problems; To develop a care plan. 	Definition, independence in meeting the need: - the factors that influence the satisfaction of the need; - manifestations of independence; - the interventions of the nurse to maintain independence. Addiction in meeting the need: - source of difficulty; - manifestations of addiction problems; - the nurse's interventions in health problems; - coordination and integration of need-specific care.		

VIII. PROFESSIONAL (SPECIFIC (SC)) AND TRANSVERSAL (TC) COMPETENCES AND STUDY FINALITIES

✓ Professional (specific) (SC) competences

PC1. The responsible execution of professional tasks with the application of the values and norms of professional ethics, as well as the provisions of the legislation in force. Applies the legal and normative framework in practical activity. Respects the norms of ethics and deontology. It ensures compliance with ethical and deontological norms and is guided by the provisions of the



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code of medical ethics. Promotes collegial relationships with co-workers. Carries out free and independent activities according to the oath of the medical profession. Knows and respects the rights and technical rules regarding the sanitary-hygienic and anti-epidemic regime in various socio-medical situations according to the legislation in force. Knows and respects the provisions of the collective labor agreement, the protection rules and the safety and health technique at the workplace. It ensures the compliance and correctness of the fulfillment of service obligations in the provision of care to the population in public, private and community medical and sanitary institutions. Encourages informed ethical decision making and respects the patient's decision. Responsible execution of professional tasks with the application of the values and norms of professional ethics, as well as the provisions of the legislation in force

PC2. Adequate knowledge of the sciences about the structure of the body, the physiological functions and the behavior of the human body in various physiological and pathological states, as well as the existing relationships between the state of health, the physical and the social environment. Knows the structures, physiological functions of organs and organ systems in healthy subjects. Recognizes the physiological and pathological processes of the human being and the psychosocial responses of individuals in various states of health. Knows the relevant terminology for the important signs and symptoms that are derived from various pathophysiological conditions. Identifies pathophysiological processes and their expression, as well as risk factors that determine health and disease at different stages of the life cycle. Appreciates the relationship between the state of health, the physical and social environment of the human being. Knows the possible evolution and complications leading to the main pathological processes. Adequate knowledge of the sciences about the structure of the body, physiological functions and behavior of the human body in various physiological and pathological conditions, as well as the relationships between health, physical and social environment

PC3. Solving clinical situations by developing the diagnosis, treatment and rehabilitation plan in various pathological situations and selecting the appropriate therapeutic procedures for them, including the provision of emergency medical assistance. Assesses patients' health status through rigorous history and clinical examination. Applies critical and systematic thinking skills to solve problems and make prompt decisions in various situations. Evaluates and identifies problems in advance, facilitating finding the best solution for situations created by risk, achieving objectives, improving results and ensuring the quality of the work carried out. Performs various practical maneuvers during the clinical examination, necessary to establish the diagnosis. Establishes the diagnosis of the most common conditions. Discusses options, advantages, disadvantages and risks of treatments with patients and is able to help patients make decisions about their treatment. Prescribes, reviews and monitors appropriate therapeutic interventions relevant to clinical practice, including therapeutic and prophylactic indications. Responds promptly, independently, in various situations to save life and improve quality of life. Applies first aid techniques in emergency situations. Performs resuscitation and first aid manipulations. Resolving clinical situations by developing a plan for diagnosis, treatment and rehabilitation in various pathological situations and selecting appropriate therapeutic procedures for them, including providing emergency medical care

PC4. Promoting a healthy lifestyle, applying preventive measures and self-care. Applies *Health promotion* and prevention measures. Identifies opportunities for health maintenance and disease prevention. Identifies opportunities to promote lifestyle changes and other actions that will



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positively improve health status. Performs health education actions in accordance with medical practice guidelines and protocols. He maintains his own health and is aware of his responsibility as a physician to promote a healthy, evidence-based approach to life. Talks with patients about factors that could influence their health. Participates and supports individuals or the community in *Health promotion* activities, screening programs and provides information about its risks and benefits. Performs prophylaxis activities at the individual level according to the provisions of the clinical protocols. Promotes and applies measures to promote own health and stress management at work. Systematically performs the medical examination to maintain your own health. Promoting a healthy lifestyle, applying prevention and self-care measures

PC5. Interdisciplinary integration of the doctor's work in the team with the efficient use of all resources. Communicates, interacts and works effectively collectively and with interprofessional staff, individuals, families and groups of people. Interacts effectively with other professionals involved in patient care, demonstrating respect for colleagues and other healthcare professionals. Develops positive collaborative relationships with team members involved in patient care as well as the ability to adapt to change. Provides appropriate and timely support for service users in navigating the health system, including services, access to care and available resources. Uses language skills, information technologies and communication skills efficiently/ Interdisciplinary integration of the doctor's activity in a team with efficient use of all resources

PC7. Promoting and ensuring the prestige of the medical profession and raising the professional level. Plans, organizes and executes scientific research in the field. Identifies sources of information, selects research materials and methods, performs experiments, statistical processing of research results, formulation of conclusions and proposals. Develops and supports speeches, presentations at scientific events by demonstrating personal attitude, coherence in exposition and scientific correctness; participates in discussions and debates at scientific events. Achieves the maintenance of the high level of professional skills during the entire period of activity. Actively participates in professional associations for the purpose of correctly fulfilling professional obligations, promoting the image of the doctor and the medical system in society. Contributes to the adjustment of the legislative framework in the field of medical assistance to European standards, ensuring the quality of the medical act, implementing the Rules of Good Practice, promoting and ensuring the prestige of the medical profession and raising the professional level

PC8. Carrying out the pedagogical and methodical didactic activity in higher education and professional technical institutions in the field of health. Performs small group teaching activities to medical students and nurses. Conducts on-the-job evaluations, including the opportunity to provide constructive feedback. Knows and applies training methods depending on the specifics of the audience. Establishes the purpose and objectives of training and/ or assessment. Determines the optimal forms of training and assessment depending on the specifics of the training process of pupils/ students/ trainees. Carries out *Health promotion* measures in the community. Carrying out the pedagogical and methodological-didactic activity within the technical and professional higher education institutions in the field of health.

✓ Transversal competences (TC)



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TC1. Autonomy and responsibility in activity. The application of rigorous and efficient work rules, the manifestation of a responsible attitude towards the performance of professional tasks with the application of the values and norms of professional ethics, as well as the provisions of the legislation in force. Promoting logical reasoning, practical applicability, evaluation and self-evaluation in decision-making.

TC3. Achievement of interaction skills and social responsibility. Identifying the objectives, available resources, conditions for completing tasks, determining the stages and duration of the work, related completion terms. Identifying roles and responsibilities in a multidisciplinary team and applying effective communication and work techniques within the team and with service beneficiaries. Ensuring the effective deployment and responsible involvement in the activities of organizing teamwork.

TC4 **Personal and professional development**. Objective self-assessment of continuing professional training needs in order to provide quality services and adapt to the dynamics of health policy requirements and for personal and professional development. Identifying opportunities for continuous training continuous training and effectively capitalizing on learning resources and techniques for your own development.

✓ Study finalities

- Collaborate with people from other professions to maintain a climate of mutual respect and shared values.
- Identify the role of self and other health professionals to assess and appropriately address the health needs of patients and promote individual and community health.
- Communicate with patients, families, communities and health and other professionals in an effective and responsible manner, based on teamwork in promoting and maintaining health and preventing and treating disease.
- Providing safe, effective and equitable patient-centred care.

No.	Expected product	Implementation strategies	Assessment criteria	Implementation terms
1.	Case Study	 ✓ Correctness of the interpretation of the proposed case study; ✓ The quality of the solutions, the proposed hypotheses, their argumentation; ✓ Correspondence of the solutions, hypotheses proposed for the adequate solution of the analyzed case; ✓ Adequate use of the terminology in question; 	Presentation of the case study, critical appraisal, personal judgment of the student.	During a week

IX. STUDENT'S INDIVIDUAL WORK



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		 ✓ Correct solution of the problem, associated with the analyzed case study; ✓ Highlighting the topic, issues and wording; ✓ Ability to analyze and synthesize documents, adapt content; ✓ Originality of the case study, formulation and realization; ✓ Individualization (not to be copied things); 		
2.	Care plan	 ✓ Written tabular form of the care process; ✓ To include at least 4 categories of information; ✓ List of addiction issues; ✓ Care objectives; ✓ Interventions / care measures to be applied; ✓ Re-evaluation / evaluation of applied interventions. 	Presentation of the care plan, with the presence of ample information.	During a week
3.	Sheet with the algorithm of the techniques learned in the discipline	 ✓ The correctness of the ordering of the activity of the learned techniques; ✓ The correspondence of the description of the approximately fixed succession of the operations related by the student with their argumentation 	Presentation of the file in the electronic version.	During a week
4.	Completing the internship agenda	✓ Correspondence and correctness of completing the internship agenda and solving the tasks therein.	Presentation of the internship agenda completed and signed by the internship manager from the MSPI.	At the end of the internship
5.	Group project	 Preparation of informational material for health education on topics relevant to the department/institution where the internship will take place: ✓ Relevance of the selected topic ✓ Level of evidence of the material included ✓ Graphic presentation 	Presentation of the developed educational material	At the end of the internship



X. METHODOLOGICAL SUGGESTIONS FOR TEACHING-LEARNING-ASSESSMENT

Teaching and learning methods used

Among the training methods applied in the clinical placement can be observation, assisting, application. Responsible attitude, proactive activity and initiative will be the basis of the training during the practical placement.

Applied (specific to the discipline) teaching strategies / technologies

During the practical training, emphasis will be placed on the student's individual work, under the supervision of medical and non-medical staff from medical institutions, as well as resident physicians, or students in years III, IV, V and VI, who are concurrently undertaking practical training.

Based on the requirements of the current curriculum, but also on the individual needs of the student, each student will draw up an individual work plan in the practice diary and will work towards achieving it during the clinical placement.

In this context the emphasis will be on:

- Relevant teaching strategies, built on real-life professional situations;

- Inductive strategies - students solve problems, make decisions based on concrete cases/problems;

- Active strategies - students learn through action, involvement;

- Collaborative strategies group and cooperative activities;
- Interactive strategies guided discussions and debates;

- Critical strategies - students are encouraged to put forward their views, to argue.

Methods of assessment (including the method of final mark calculation)

Current: peer discussion, active supervision, systematic evaluation of the clinical placement agenda.

Final: The final grade consists of the average of 2 grades: the first grade is the annual average (50%), which is composed of the grade provided by the clinical internship supervisor at the medical institution and the grade from the individual work evaluation. The second grade will be obtained at the exam for the evaluation of practical skills within CUSIM, by applying the OS CE model.

Method of mark rounding at different assessment stages

	1	1
Intermediate marks scale (annual	National	ECTS
average, marks from the examination	Assessment	Equivalent
stages)	System	
1,00-3,00	2	F
3,01-4,99	4	FX
5,00	5	
5,01-5,50	5,5	Е
5,51-6,0	6	
6,01-6,50	6,5	D
6,51-7,00	7	



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7,01-7,50	7,5	С
7,51-8,00	8	
8,01-8,50	8,5	В
8,51-9,00	9	D
9,01-9,50	9,5	Α
9,51-10,0	10	

The average annual mark and the marks of all stages of final examination (computer assisted, test, oral) - are expressed in numbers according to the mark scale (according to the table), and the final mark obtained is expressed in number with two decimals, which is transferred to student's record-book.

Absence on examination without good reason is recorded as "absent" and is equivalent to 0 (zero). The student has the right to have two re-examinations in the failed exam.

XI. RECOMMENDED LITERATURE:

A. Compulsory:

- 1. CHILTON, S., BAIN, H. *A Textbook of Community Nursing.* Abingdon, Oxon; New York, NY: Routledge, 2018. 387 p. ISBN: 978-1-315-15720-7 (ebk)
- PARASCHIV, A., SPĂTARU, D., BERDEU, I. [et al.] *Ghid pentru prevenirea și controlul infecțiilor în instituția medico-sanitară spitalicească.* Ministerul Sănătății al Republicii Moldova, Universitatea de Stat de Medicină și Farmacie "Nicolae Testemițanu" din Republica Moldova, ANSP: Agenția Națională pentru Sănătate Publică. Chișinău: [S. n.], 2024 (Continental Grup). 304 p.
- 3. ŞALARU, V. et all. *Abilități practice de îngrijire în nursing. Educație interprofesională*. Chișinău, 2024, 302 p. ISBN 978-9975-82-394-4
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