| Course title                 | PSYCHIATRY  |   | Code of the course                             |   |                |  |
|------------------------------|---|---|--|---|----------------|--|
| Study program<br>cycle       | Integrated university study, medicine   |   | Year study                                     | III   |                |  |
| ECTS points value:           | 5,5   | Semester                                | 8.   | Number of<br>classes per<br>semester<br>(l+p+s) | 90 (30+30+30)  |  |
| Course status:               | mandatory   | prerequisites:                          | Passed<br>all<br>exams<br>of<br>second<br>year | Comparative<br>conditions:                      |                |  |
| Course accsess:              | IV-y  | vear undergraduates                     |  | Time of classes                                 | By schedule    |  |
| Lecturer:                    |   | Doc.dr.sc. Marko Martinac, psychiatrist |  |   |                |  |
| Contact hours/consu          | ltations:   |   |  |   |                |  |
| E-mail adress and ph         | ione  | marko.martinac@tel.net.ba               |  |   |                |  |
| number:                      |   |   |  |   |                |  |
| Teacher                      |   | -doc. dr. sc. Marko Martinac            |  |   |                |  |
|                              |   | -doc.dr.sc. Tomislav Franić             |  |   |                |  |
|                              |   | -doc.dr.sc. Davor Lasić                 |  |   |                |  |
|                              |   | - dr. sc. Marko Pavlović, viši asistent |  |   |                |  |
| Asistant                     |   | - dr. med. Sanjin Lovrić, asistent      |  |   |                |  |
|                              |   | - dr. sc. Romana Babić, psihijatar      |  |   |                |  |
|                              |   | - dr. med. Krešimir Grbavac, psihijatar |  |   |                |  |
|                              |   |   | -dr.med Renata Čamber, psihijatar              |   |                |  |
| Contact hours/consultations: |   | Consultations during clinical practical |  |   |                |  |
| E-mail address and p         | phone   |   |  |   |                |  |
| number                       |   |   |  |   |                |  |
| Course objectives:           | The goals   | of this course are:                     |  |   |                |  |
|                              | - introduct   | on to determinants                      | s of mental                                    | health and mental                               | disorders      |  |
|                              | -understan  | ding mental diseas                      | es within t                                    | he biopsychosocial                              | concept        |  |
|                              | -recognitio   | n of clinical course                    | e and diffe                                    | rential diagnoses o                             | f mental       |  |
|                              | disorders   |   |  |   |                |  |
|                              |   | -                                       | organizatio                                    | nal possibilities of                            | mental         |  |
|                              | health care   |   |  |   |                |  |
|                              |   | -                                       |  | t of mild mental he                             | alth disorders |  |
|                              | -mastering  | basic therapeutic                       | algorithms                                     |   |                |  |
| Learning outcomes            | After atten   | ding and passing t                      | ne course                                      | students will be ab                             | le to:         |  |
| (general and specific        | After attending and passing the course, students will be able to: General outcomes: |   |  |   |                |  |
| competencies):               | Constant outcomes.  |   |  |   |                |  |

-be able to plan independent learning through studying a way of critical and self-critical questioning of scientific truths

- demonstrate personal qualities including teamwork skills, active listening and building positive relationships with members of a multidisciplinary and interdisciplinary professional team.

# Specific outcomes:

- understanding the basics of psychiatry, psychiatric diseases and disorders as well as intellectual disabilities
- ability to perform mental status assessment and psychiatric evaluation trough examining patients in primary health care
- -being able to utilize diagnostic criteria to arrive at an appropriate diagnosis and to develop an apropriate list of differential diagnoses.
- -applying appropriate psychopharmacological and psychosocial methods of treatment;
- recognizing urgent psychiatric conditions and apply therapy accordingly in primary health care setting;
- recognizing psychiatric disorders that demand complex workup and/or hospital treatment and being able to referee to appropriate psychiatric unit
- application of therapy for complex and chronical mental disorders under specialized psychiatric care supervision;

# Content of syllabus:

Psychiatry course classes consist of 10 units, two partial knowledge tests during clinical practices (colloquium from general psychopathology and test in a form of casuistic representation), two partial knowledge tests in seminar works, one in an essay form with two essay questions and writing test materials with 20 questions with 4 and 5 offered answers in last seminar, final writing exam with 100 questions and 4-5 offered answers, practical and oral exam. Every theme unit contains 1-5 hours of lectures, 1-5 hours of seminars and 1-5 hours of clinical practices.

## Teaching form

| Lectures      | <u>Clinical</u>   | Seminar         | Independent |
|---------------|-------------------|-----------------|-------------|
| Lectures      | <u>practicals</u> | <u>Schillar</u> | assignments |
| Consultations | Work with         | Field teaching  | Other       |
|               | mentors           | Their teaching  | Other       |

#### Notes:

Teaching from every part begin with lectures and continue with seminars and clinical practicals. At the seminars students get problem assignments that they solve in smaller groups. Their knowledge is tested trough a test-quiz, and then the correct answers are discussed with explanations of the problem tasks. During the exercises, students, with the help of an assistant, independently take psychiatric anamnesis and psychiatric status, refer to examined patients in a group and discuss

| Student obligations                   | diagnosis and differential diagnostic possibilities, and make a plan of diagnostic processing and therapeutic possibilities. In addition, they get to know and participate in the work of group psycho-social therapeutic procedures at the Clinic of Psychiatry SKB Mostar and in the CMZ DZ Mostar.  Attending and active participating in all classes. Preparation of teaching units for seminars. Active participating in seminars and clinical practices. Reading materials and developing critical opinion as well an expressing one.  Final exam; attending and actively participating in classes, all colloquiums passed, seminar quizzes passed, writing exam, practical exam, oral exam. |   |   |                            |
|---------------------------------------|--|---|---|----------------------------|
| Monitoring and evaluation of students | Attending classes Oral exam  | Activities during teaching Writing exam | Seminar work  Continuous testing of knowledge | Practical<br>work<br>Essay |

## Detail presentation of grading system within the ECTS

| STUDENT<br>OBLIGATIONS | HOURS<br>(EVALUATION) | PART IN ECTS-u | PART IN<br>FINAL GRADE |
|------------------------|-----------------------|----------------|------------------------|
| Attending and          | 15                    | 0,5            | 5%                     |
| engaging in classes    |                       |                |                        |
| Seminar work           | 15                    | 0,5            | 10%                    |
| Colloquiums            | 30                    | 1              | 20%                    |
| Writing exam           | 45                    | 1,5            | 30%                    |
| Practical exam         | 15                    | 0,5            | 10%                    |
| Oral exam              | 30                    | 1              | 30%                    |

### Additional clarifications:

Students' engagement in classes is valued during classes and in final exam. During classes there will be seminar work organized as well as four knowledge tests: general psychopathology colloquium, casuistic representation test and two knowledge test in seminars.

**Attending classes (lectures, clinical practices, seminars)** will be valued by maximum of 5 points at the end of all successfully finished knowledge tests. These points can affect the amount of final grade but not the basic points needed for passing the exam.

- 5 points 100% attendance in all forms of classes (*lectures*, *seminars*, *clinical practices*)
- 4 points –absence from any type of the lecture
- 3 points two absences

- 1 point three absences
- 0 points four absences

Seminar paper includes writing work and presentation. Seminar validation will be done by Study regulations, i.e. writing work will be valued (70% of the grade) and presentation (30% of the grade).

#### Writing exam:

- the paper is exhaustive, grammatically and orthographically correct–excellent (5).
- the paper is formally and substantively satisfactory, but there are smaller grammatic and orthographic mistakes—very good (4).
- paper satisfies formally and substantively, but major grammatical and spelling errors were noticed good (3).
- paper meets the formal criteria, but major deficiencies have been identified in terms of content sufficient (2).
   the paper is not written, plagiarism is present or does not meet the formal criteria insufficient (1).

### Presentation:

- excellently presented work, almost without language errors, excellent cooperation and relationship with listeners excellent (5).
  - the work is very well presented, grammatical or pronunciation errors are rare, very good relationship with the listeners very good (4).
  - the paper is solidly presented, occasional errors in pronunciation or grammar good (3)
  - the paper is presented with quite frequent errors in pronunciation and grammar sufficient (2).
  - the paper is not presented or is presented with a lot of errors in grammar, pronunciation, in distinct address insufficient (1).

This partial check lasts a total of 45 minutes and is evaluated with a maximum of 10 points.

- excellent (5) 10 points
- very good (4) 8.5 points
- good (3) 7.0 points
- sufficient (2) 5.5 points
- Insufficient (1) 0 points.

Two colloquia (general psychopathology and a test in the form of a casuistic presentation) are taken by students in exercises.

Test of knowledge in general psychopathology will be organized at the 14th Exercise. The test will be in the form of a 25-question test with 5 answers offered (the correct answer carries 0.2 points). This test lasts a total of 30 minutes and the evaluation of the test will be performed according to the Rules of Study: (91-100% correct answers - excellent (5), 79-90% very good (4), 67-78% good (3), 55 -66% sufficient (2), 0 to 55% insufficient (1).

The maximum number of points is 5, and the minimum number of points for passing is 2.75.

The test in the form of a casuistic presentation is done on the penultimate exercise (V27, V28) and consists of the presentation of patients in the way it is presented to the doctor in the first meeting. Based on the data in the test, the student considers the differential diagnostic orientations and clinical procedures that need to be undertaken (work diagnosis, diagnostic guidelines, differential diagnostic options, therapeutic guidelines and emphases).

This partial check lasts a total of 30 minutes and is evaluated with a maximum of 5 points.

- excellent (5) 5 points
- very good (4) 4 points
- good (3) 3 points
- sufficient (2) 2 points
- Insufficient (1) 0 points.

At the end of the seminar (S30) there will be a test of knowledge from the material covered by the seminars. The test will be performed with a test that will consist of 40 questions with 4 and 5 offered answers (correct answer carries 0.25 points). This test lasts a total of 45 minutes and the test will be evaluated according to the Study Regulations: 91-100% correct answers - excellent (5), 79-90% very good (4), 67-78% good (3), 55-66% sufficient (2), 0 to 55% insufficient (1).

The maximum number of points is 10, and the minimum number of points for passing is 5.5.

The final exam consists of a written, practical and oral part. Students who have duly attended classes according to the Faculty Regulations have the right to take the final exam. The written exam will be in the form of a test with 100 questions with 4 and 5 answers offered, and will last 90 minutes (the correct answer carries 0.3 points). The questions will cover the entire material from psychiatry, and the evaluation of the test will be done according to the Study regulations, i.e., 91-100% of correct answers - 5 (excellent), 79-90% 4 (very good), 67-

The written exam is evaluated with a maximum of 30 points, and the minimum number of points for passing is 16.5.

78% 3 good), 55-66% 2 (sufficient), 0 to 54% 1 (insufficient).

- Attendance at classes (lectures, exercises, seminars) - 1 -5 points (can be obtained when a student collects 55 or more points through the passed teaching material)

The formation of the final grade will be done according to the Regulations on studying: (91-100% points - excellent (5), 79-90% very good (4), 67-78% good (3), 55-66% sufficient (2), 0 to 55% insufficient (1). The written exam will be in the form of a test with 100 questions with 4 and 5 answers offered, and will last 90 minutes (the correct answer carries 0.3 points). Entire material from psychiatry, and the evaluation of the test will be don according to the Study regulations, i.e., Attendance at classes (lectures, exercises, seminars) - 1 -5 points (can be obtained when a student collects 55 or more points through the passed teaching material)

The formation of the final grade will be done according to the Regulations on studying: (91-100% points - excellent (5), 79-90% very good (4), 67-78% good (3), 55-66% sufficient (2), 0 to 55% insufficient (1).

- The written exam will be in the form of a test with 100 questions with 4 and 5 answers offered, and will last 90 minutes (the correct answer carries 0.3 points). The questions will cover the entire material from psychiatry, and the evaluation of the test will be done according to the Rulebook on studying, i.e., 91-10

The practical part of the exam consists of two parts: taking the anamnesis and presentation of the patient, and the oral exam. The total duration of the practical part of the exam is 60 minutes and is evaluated with a maximum of 10 points.

- excellent (5) 10 points
- very good (4) 8.5 points
- good (3) 7.0 points
- sufficient (2) 5.0 points
- Insufficient (1) 0 points.

The oral part of the exam is evaluated with a maximum of 30 points. Students draw fivequestion cards from the entire psychiatry curriculum.

- excellent (5) 30 points
- very good (4) 26 points
- good (3) 22 points
- sufficient (2) 18 points
- insufficient (1) 0 points.

Final grade:

The final grade is formed by the sum of points from all weights.

- Colloquium in general psychopathology (test) 2.75 5 points
- Test in the form of a casuistic case report 2 5 points
- Seminar paper 5.5 10 points
- Test from the seminar material 5.5 10
- Final written exam 16.5 30 points
- Practical part of the exam 5 10 points
- Oral part of the exam 18 30 points

| <b>Mandatory</b> S       | Sadock BJ, Sadock VA, Ruiz P. Kaplan and Sadock's Concise                  |
|--------------------------|--|
| literature:              | Textbook of Clinical Psychiatry. 4. ed. Philadelphia: Wolters Kluwer;      |
| 2                        | 2017.  |
| Additional literature: S | Sadock BJ, Sadock VA, Ruiz P. Kaplan & Sadock's Synopsis of                |
| P                        | Psychiatry, Behavioral Sciences/Clinical Psychiatry. 11. ed.               |
| P                        | Philadelphia: Wolters Kluwer; 2015.  |
|                          |  |
| N                        | Method of monitoring the quality of teaching:                              |
| Additional S             | Student survey   |
| information about the A  | Analysis of the quality of teaching by students and teachers               |
| course                   | Analysis of passing exams  |
| R                        | Report of the Office for Teaching Quality                                  |
| S                        | Self-evaluation and non-institutional evaluation (visit of quality control |
| te                       | eams)  |
|                          |  |

Attachment: Calendar of classes

| Teaching unit | TEME I LITERATURA  |  |  |
|---------------|--|--|--|
| <i>I</i> .    | Title: Neural Sciences   |  |  |
|               | Short description: Psychiatry and The Human Brain. Psychiatry and the        |  |  |
|               | Human Genome. Functional Neuroanatomy. Neural Development and                |  |  |
|               | Neurogenesis. The Neurodevelopmental Basis of Psychiatric Disease.           |  |  |
|               | Neurophysiology and Neurochemistry. Psychoneuroendocrinology. Immune         |  |  |
|               | System and Central Nervous System Interactions. Neurogenetics.               |  |  |
|               | Literature: required and supplementary                                       |  |  |
| II.           | Title: Examination and Diagnosis of the Psychiatric Patient                  |  |  |
|               | Short description: Psychiatric Interview, History, and Mental Status         |  |  |
|               | Examination. Process Of the Interview. Elements Of the Initial               |  |  |
|               | Psychiatric Interview. Mental Status Examination. Physical Examination.      |  |  |
|               | Interviewing The Difficult Patient. Brain Imaging.                           |  |  |
|               | Literature: required and supplementary                                       |  |  |
| III.          | Title: Contributions of the Psychosocial and Sociocultural Sciences          |  |  |
|               | Short description: Jean Piaget and Cognitive Development. Attachment         |  |  |
|               | Theory. Learning Theory. Biology of Memory. Normality and Mental Health.     |  |  |
|               | Sociobiology and Ethology. Transcultural Psychiatry. Culture-Bound           |  |  |
|               | Syndromes. Sigmund Freud: Founder of Classic Psychoanalysis. Erik H.         |  |  |
|               | Erikson. Carl Gustav Jung.   |  |  |
|               | Literature: required and supplementary                                       |  |  |
| IV.           | Title: Schizophrenia Spectrum and Other Psychotic Disorders                  |  |  |
|               | Short description: Schizophrenia. Schizoaffective Disorder. Schizophreniform |  |  |
|               | Disorder. Delusional Disorder and Shared Psychotic Disorder. Brief Psychotic |  |  |
|               | Disorder, Other Psychotic Disorders, and Catatonia.                          |  |  |
|               | Literature: required and supplementary                                       |  |  |
| V.            | Title: Mood Disorders  |  |  |
|               | Short description: Major Depression and Bipolar Disorder. Dysthymia and      |  |  |
|               | Cyclothymia.   |  |  |
|               | Literature: required and supplementary                                       |  |  |
| VI.           | Title: Anxiety Disorders   |  |  |
|               | Short description: Normal Anxiety. Pathological Anxiety. Panic Disorder.     |  |  |
|               | Agoraphobia. Specific Phobia. Social Anxiety Disorder (Social Phobia).       |  |  |
|               | Generalized Anxiety Disorder. Other Anxiety Disorders.                       |  |  |
|               | Literature: required and supplementary                                       |  |  |
| VII.          | Title: Obsessive-Compulsive and Related Disorders                            |  |  |
|               | Short description: Obsessive Compulsive Disorder. Body Dysmorphic            |  |  |
|               | Disorder. Hoarding Disorder. Hair-Pulling Disorder (Trichotillomania).       |  |  |
|               | Excoriation (Skin-Picking) Disorder.   |  |  |
|               | Literature: required and supplementary                                       |  |  |
| VIII.         | Title: Trauma-Related Disorders, Dissociative disorders                      |  |  |
|               | Short description: Posttraumatic Stress Disorder and Acute Stress Disorder.  |  |  |
|               | Adjustment Disorders. Dissociative Disorders.                                |  |  |
|               | Literature: required and supplementary                                       |  |  |
| IX.           | Title: Feeding and Eating Disorders  |  |  |

|            | Chart desciption Association Deliver Names Deliver Names Discourse |
|------------|--|
|            | Short description: Anorexia Nervosa. Bulimia Nervosa. Binge Eating Disorder  |
|            | and Other Eating Disorders. Obesity and the Metabolic Syndrome.  |
| <b>T</b> 7 | Literature: required and supplementary   |
| <i>X</i> . | Title: Substance Use and Addictive Disorders   |
|            | Short description: Alcohol-Related Disorders. Caffeine-Related Disorders.  |
|            | Cannabis-Related Disorders. Hallucinogen-Related Disorders. Inhalant-  |
|            | Related Disorders. Opioid-Related Disorders. Sedative-, Hypnotic-, or  |
|            | Anxiolytic-Related Disorders. Stimulant-Related Disorders. Tobacco-Related   |
|            | Disorders. Anabolic Androgenic Steroid Abuse. Other Substance Use and  |
|            | Addictive Disorders. Gambling Disorder.  |
|            | Literature: required and supplementary   |
| XI.        | Title: Neurocognitive Disorders  |
|            | Short description: Delirium. Dementia (Major Neurocognitive Disorder).   |
|            | Major or Minor Neurocognitive Disorder Due to Another Medical Condition  |
|            | (Amnestic Disorders). Neurocognitive and Other Disorders Due to a General  |
|            | Medical Condition. Mild Cognitive Impairment.  |
|            | Literature: required and supplementary   |
| XI.        | Title: Personality Disorders   |
|            | Short description: Paranoid Personality Disorder. Schizoid Personality   |
|            | Disorder. Schizotypal Personality Disorder. Antisocial Personality Disorder.   |
|            | Borderline Personality Disorder. Histrionic Personality Disorder. Narcissistic   |
|            | Personality Disorder. Avoidant Personality Disorder. Dependent Personality   |
|            | Disorder. Obsessive-Compulsive Personality Disorder. Other Specified   |
|            | Personality Disorder. Personality Change Due to a General Medical  |
|            | Condition.   |
|            | Literature: required and supplementary:  |
| XII.       | Title: Emergency Psychiatric Medicine  |
|            | Short description: Suicide. Psychiatric Emergencies in Adults. Psychiatric   |
|            | Emergencies in Children.   |
|            | Literature: required and supplementary:  |
| XIII.      | Title: Treatment in Psychiatry   |
|            | Short description: Psychoanalysis and Psychoanalytic Psychotherapy. Brief  |
|            | Psychodynamic Psychotherapy. Group Psychotherapy, Combined Individual  |
|            | and Group Psychotherapy, and Psychodrama. Family Therapy and Couples   |
|            | Therapy. Dialectical Behavior Therapy. Biofeedback. Cognitive Therapy.   |
|            | Behavior Therapy. Hypnosis. Interpersonal Therapy. Psychiatric   |
|            | Rehabilitation. Combined Psychotherapy and Pharmacotherapy. General  |
|            | Principles of Psychopharmacology. Medication-Induced Movement  |
|            | Disorders. Anticholinergic Agents. Anticonvulsants. Antihistamines.  |
|            | Barbiturates and Similarly Acting Drugs. Benzodiazepines and Drugs Acting  |
|            | on GABA Receptors. Cholinesterase Inhibitors and Memantine. Disulfiram   |
|            | and Acamprosate. Dopamine Receptor Agonists and Precursors.  |
|            | Antipsychotics. Melatonin Agonists. Mood stabilizers. Antidepressants.   |
|            | Opioid Receptor Agonists and Antagonists. Phosphodiesterase-5 Inhibitors.  |
|            | Stimulant Drugs and Atomoxetine. Brain Stimulation Methods. Neurosurgical  |
|            | Treatments and Deep Brain Stimulation.   |
|            | Literature: required and supplementary:  |
|            | 1 11 V   |
| VIV        | Title: Public Psychiatry Cariatric Psychiatry End-of-Life Issues   |
| XIV.       | Title: Public Psychiatry, Geriatric Psychiatry, End-of-Life Issues  Short description: Contemporary Public and Community Psychiatry. The Role  |
| XIV.       | Title: Public Psychiatry, Geriatric Psychiatry, End-of-Life Issues  Short description: Contemporary Public and Community Psychiatry. The Role of Public and Community Psychiatry in Twenty-First Century Health Care.  |

|      | Biology of Aging. Psychiatric Problems of Older Persons. Mental Disorders of Old Age. Psychopharmacological Treatment of Geriatric Disorders. Psychotherapy For Geriatric Patients. Death, Dying, and Bereavement. Palliative Care. |  |
|------|---|--|
|      | Literature: required and supplementary:   |  |
| XV.  | Title: Child Psychiatry   |  |
|      | Short description: Infant, Child, and Adolescent Development. Assessment,   |  |
|      | Examination, and Psychological Testing. Intellectual Disability.  |  |
|      | Communication Disorders. Autism Spectrum Disorder. Attention  |  |
|      | Deficit/Hyperactivity Disorder. Specific Learning Disorder. Motor Disorders.  |  |
|      | Feeding and Eating Disorders of Infancy or Early Childhood. Elimination   |  |
|      | Disorders. Trauma-and Stressor-Related Disorders in Children. Mood  |  |
|      | Disorders and Suicide in Children and Adolescents. Anxiety Disorders  |  |
|      | of Infancy, Childhood, and Adolescence. Obsessive-Compulsive Disorder in  |  |
|      | Childhood and Adolescence. Early-Onset Schizophrenia. Adolescent  |  |
|      | Substance Abuse. Psychiatric Treatment of Children and Adolescents.   |  |
|      | Literature: required and supplementary:   |  |
| XVI. | Title: Forensic Psychiatry and Ethics in Psychiatry   |  |
|      | Short description: Forensic Psychiatry. Ethics in Psychiatry.   |  |
|      | Literature: required and supplementary:   |  |