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Data: 20.09.2017

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**FACULTY OF MEDICINE**  
**MEDICINE 0912.1 STUDY PROGRAM**

**Department of Psychiatry, narcology and medical psychology**

Approved

at the meeting of the Quality Assurance and  
Curriculum Evaluation Commission of faculty  
of Medicine

Minutes No. 8 of 18.03.18

Chair of the commission \_\_\_\_\_  
Serghei Suman, PhD, Associate professor

Approved

At the Council meeting of Faculty of Medicine

Minutes No. 4 of 20.09.17

Dean of Faculty of Medicine

PhD, associate professor

\_\_\_\_\_  
Gh. Placinta

Approved

At the meeting of Department of Psychiatry, narcology and  
medical psychology

Minutes No. 05 of 18/10/2017

Head of Department, PhD, professor

\_\_\_\_\_  
Anatol Nacu

**CURRICULUM**

**PSYCHIATRY COURSE**

**Integrated studies**

Type of course: **compulsory course**

Chișinău, 2017



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### I. PRELIMINARIES

- **General presentation of the course: the place and role of the course in the formation of the specific competences of the professional / specialty training program**

The course of psychiatry, narcology and medical psychology is an important component of clinical education. Psychiatry occupies an important place among medical disciplines, taking into account the significant morbidity of mental illnesses, their increased degree of disability. Knowledge of psychiatry is necessary for all physicians. This is determined by the frequency of the demands of patients suffering from various mental disorders, often disguised under the mask of various somatic syndromes, at various specialists. So about 80 percent of the diseases were recognized as psychosomatic. In turn, somatic disorders cause various psychiatric disorders, making a wide range of psychosomatic syndromes.

Currently psychiatry is considered one of the clinical disciplines with an impressive scientific development. Thus, new basis have been extended in the biochemistry of psychic processes. These have allowed the synthesis of new methods of treatment of psychiatric disorders. Continuous accumulation of new data about bioactive neurotransmitters and neurotransmission processes, new pre- and post-synaptic receptors, new neuropeptides and brain proteins play a major role in the individual's behavior and mental condition. Elucidating the role of disturbances in brain chemistry in the genesis of psychiatric illnesses greatly changes the conceptual content of clinical psychiatry.

Nowadays, it is imperative to know deeply the mechanisms of installing the particularities of the clinical picture, the evolution, prevention and treatment of psychiatric disorders. Only sufficient training in psychiatry will allow future physicians to properly assess the various mental disorders. It is intended not only to establish early diagnosis, prevent the onset of the disease and possible complications, but also to assess the basic mechanisms in the pathogenesis of mental disorders. The psychiatric study program provides the necessary knowledge for acquiring the psychiatric assessment methodology, conducting the psychological assessment of the patients, diagnosing the diseases and providing medical assistance.

The content of the course is structured to prove that medical psychology, through its objectives and research approaches, offers a better understanding and appreciation of the psychological disturbances of the evolution of a disease process, which is necessary for the differentiation of the therapeutic act and the ways of medical assistance designed competently, ambiental and avoiding factors that maintain the risk of illness.

- **The mission of the curriculum (purpose) in professional training**

The curriculum has as a major objective the study of etiology, pathogenetic mechanisms, diagnostic criteria, psychopathological manifestations, evolutionary peculiarities, modern methods of investigation, principles of pharmaco- and psychotherapy of patients with mental and behavioral disorders.

- **Language training:** Romanian, Russian, English, French.
- **Beneficiaries:** the VI-th year students, Faculty of Medicine No. 2, specialty Medicine

### II. MANAGEMENT OF THE COURSE

Code of the course	<b>S.12.O.111</b>		
Name of the course	<b>Psychiatry</b>		
Responsible (s) for the course	PhD, professor <b>Anatol Nacu</b>		
Year	<b>VI</b>	Semester (s)	<b>XII</b>
Total number of hours, including:			<b>120</b>
Lectures	<b>26</b>	Practical / laboratory lessons	<b>32</b>
Seminars	<b>33</b>	Individual activity	<b>29</b>
Method of assessment	<b>E</b>	Number of credits	<b>4</b>

### III. TRAINING OBJECTIVES IN TEACHING THE COURSE

✓ *At the level of knowledge and understanding:*

- to know the theoretical basis of the discipline and its place in general medicine;
- to know the organization of the system of Mental Health in Republic of Moldova and at international level;
- to know the definition, epidemiology, the contemporary aspects of etiology and pathogenesis of psychiatric disorders;
- to know the clinical picture, modern classification, particularities of clinical assessment;



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- to know the early diagnostics, the premorbid conditions, the spinalization and diagnostic criterias, the formulation of a diagnose, differential diagnose;
- to know the evolution, complications, prognostic of mental disorders;
- to know the contemporary methods of investigation (laboratory and instrumental findings);
- to know treatment methods – general principles, indications and contraindications, complications of the treatment.
- ✓ **At the level of application:**
  - to set the mental status of the patient by applying the contemporary psychiatric methods of evaluation;
  - to find and assess main psychiatric emergencies;
  - to initiate the treatment in case of the patient with mental and behavioral disorder.
- ✓ **At the level of integration:**
  - to integrate knowledge in the assessment of the patient's mental status;
  - assessing the psychological condition in establishing the somatic diagnoses;
  - to integrate the principles of the mental health services in collaboration with other medical professionals

### Provisional terms and conditions:

The student of the VI-th year requires the following:

- Knowing the language of training;
- Confirmed competences in preclinical and clinical sciences (pathophysiology, clinical pharmacology, clinical biochemistry, internal diseases, neurology);
- digital competences (use of the Internet, document processing, electronic tables and presentations);
- ability to communicate and team work;
- qualities - comprehension, tolerance, compassion, autonomy.

## IV. THE TOPICS AND APPROXIMATE DISTRIBUTION OF HOURS

### *Lectures, seminars, practical and laboratory lessons, and individual activity*

No.	TOPIC	Hours		
		L	PL/S	I/A
1.	Medical psychology – goal, objectives, history of the discipline. Medical development psychology. Health and mental health concept. Mental health burden. Mental health services. The organization of Mental Health services in Republic of Moldova. International and national legislation in Mental Health and Rights of persons with mental disorders. Disease and psychological reaction to the disease. Psychological problems in patients with different disorders. Psychosomatic medicine.	2	3/3	3
2.	The doctor-patient relationship. Psychological aspects of suicide. Death and grief as problems of medical psychology. Treatment methods in mental health. Psychosocial rehabilitation. Psychopharmacology. Psychotherapy – goal, objectives, historical context. Classification of psychotherapeutic methods – psychodynamic, behavioral, existential, transpersonal. Psychodiagnostic, its technics – observation, anamnesis, conversations, questionnaires, nonverbal and projective tests.	2	2/2	2
3.	Psychoanalysis. The psychosexual development theory of personality. The structure of personality. Defense mechanisms.	2	2/2	2
4.	Cognitive-behavioral psychotherapy. The ABC model of functioning. Systemic sensitization. Aversive therapy etc. Transactional analysis, gestalt therapy, classic and ericksonian hypnosis, autogenic training.	2	2/2	2
5.	Psychiatry - goal, objectives, historical context. Classification of mental and behavioral disorders according to ICD-10 and DSM-5. General psychopathology: perception, memory and intellect disorders, thought, mood (affective), psychomotor and volition disorders. The semiology of conscious disorders. Clinical scales of assessment in psychiatry. The suicidal, violence concept and other emergencies in psychiatry. Perception disorders. Psychopathologic syndromes:	2	3/3	2



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No.	TOPIC	Hours		
		L	PL/S	I/A
	asthenic, obsessive-phobic, paranoid, paranoia, paraphrenia, Kandinski-Clerambault syndrome, Korsakov syndrome <i>Clinical assessment scales in psychiatry</i>			
6.	Schizophrenia, etiopathogenesis, clinical types, evolution, treatment. Schizotypal and delusional disorders differential diagnostic, treatment, prognostic.	2	2/2	2
7.	Bipolar disorder (type I, type II, Cyclothymia). Recurrent depressive disorder. Dysthymia. Actuality, epidemiology, etiopathogenesis, diagnostic criteria, differential diagnose, evolution, treatment. Mental retardation. Mental disorders in epilepsy.	2	2/2	2
8.	Neurotic and stress-related disorders. Phobic anxiety disorders. Panic disorder. Generalized anxiety disorder. Obsessive-compulsive disorder. Reaction to severe stress, and adjustment disorders. Acute stress reaction. Post-traumatic stress disorder. Adjustment disorders. Dissociative and conversion disorders. Dissociative amnesia. Dissociative fugue. Dissociative stupor. Trance and possession disorders. Conversion disorder with motor symptom or deficit. Conversion disorder with seizures or convulsions. Conversion disorder with sensory symptom or deficit. Somatoform disorders (somatization disorder, undifferentiated somatoform disorder, pain disorders related to psychological factors, hypochondriasis, body dysmorphic disorder). Actuality, epidemiology, etiopathogenesis, diagnostic criteria, differential diagnose, treatment.	2	3/3	3
9.	Mental and behavioral disorders due to psychoactive substance use. Actuality of the issue, epidemiology, classification, evolution and dynamic of alcoholism. Acute and chronic alcoholic psychosis (delirium tremens, alcoholic hallucinosis, alcoholic paranoid, Korsakov syndrome). Pathological drunkenness, expertise. The particularities of alcoholic dementia, the main principles of alcoholism treatment. Mental and behavioral disorders due to usage of opioids, cannabinoids, cathinones, sedatives, hypnotics, cocaine, caffeine, hallucinogens, tobacco, volatile solvents and psychoactive substances. Prophylaxis, treatment, rehabilitation, particularities in adolescents.	2	2/2	2
10.	Organic mental disorders. Dementia in Alzheimer disease. Vascular dementia. Dementia in Pick's, Creutzfeldt-Jakob's, Huntington, Parkinson disease, dementia in HIV-AIDS. Korsakov's organic amnesic syndrome. Organic delirium. Organic hallucinosis. Organic catatonic disorder. Organic affective disorders. Organic emotionally labile (asthenic) disorder. Organic personality disorder. Postconcussional organic cerebral syndrome. Postconcussional epilepsy. General problems of gerontopsychiatry. Organic disease that cause psychiatric syndrome: cerebral tumors, traumatic brain injury, demyelinating, infectious, endocrine disease.	2	3/3	3
11.	Disorders of adult personality and behavior. Habit and impulse disorders. Eating disorders. Nonorganic sleep disorders. Mental and behavioral disorders associated with the puerperium. Actuality, epidemiology, etiopathogenesis, diagnostic criteria, differential diagnose, treatment.	2	2/2	2
12.	Pervasive developmental disorders - Childhood autism, Rett syndrome, Asperger syndrome. Behavioral and emotional disorders with onset usually occurring in childhood and adolescence - Hyperkinetic disorders, Conduct disorders. Actuality, epidemiology, etiopathogenesis, diagnostic criteria, differential diagnose, treatment.	2	3/3	2
13.	Emotional disorders with onset specific to childhood - Separation anxiety disorder of childhood. Disorders of social functioning with onset specific to childhood and adolescence - Elective mutism. Tic disorders. Nonorganic enuresis., Nonorganic encopresis, Pica of infancy and childhood, Stuttering [stammering], Transient dissociative [conversion] disorders occurring in childhood and adolescence. Actuality, epidemiology, etiopathogenesis, diagnostic criteria, differential diagnosis, treatment	2	3/4	2
		<b>26</b>	<b>32/33</b>	<b>29</b>



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No.	TOPIC	Hours		
		L	PL/S	I/A
<b>Total</b>		<b>120</b>		

### V. REFERENCE OBJECTIVES AND CONTENTS UNITS

Objectives	Content units
<b>Chapter 1. Medical psychology. General psychopathology.</b>	
<ul style="list-style-type: none"> <li>• To define medical psychology</li> <li>• To know the goal, objectives, history of the discipline</li> <li>• To know medical development psychology, mental health concept</li> <li>• To know the technics of psychodiagnostics</li> <li>• To show the principles functioning of mental health services, treatment methods in mental health</li> <li>• To comment the psychological problems of patients with different disorders, including psychosomatic disorders</li> <li>• To construct own opinions regarding the psychological aspects of suicides, death and grief as medical psychology problems</li> <li>• To create one opinions regarding doctor-patient relationship</li> <li>• To apply the acquired knowledge for optimization of therapeutic compliance</li> <li>• To integrate the knowledge about psychotherapeutic technics and apply them in medical practice</li> <li>• To define Psychiatry</li> <li>• To know the way and the particularities of organization of psychiatric services</li> <li>• To know the classification of mental and behavioral disorders by ICD-10 and DSM-5</li> <li>• To know the general psychopathology</li> <li>• To know the main psychopathologic syndromes</li> <li>• To know the clinical scales of assessment in psychiatry</li> <li>• To show the treatment principles in psychiatry, including in emergencies, adverse effects of medication</li> <li>• To apply the gained knowledge for optimizing the therapeutic process</li> <li>• To integrate the clinical scales of assessment and to apply them in medical practice</li> </ul>	<p>Medical psychology – development, main objectives, contemporary and perspective relationships, the relationship of medical psychology with other discipline.</p> <p>The person’s psychology, the structural components of a personality. Human psychic. The one’s relationship with the surroundings, family and the medical stuff. The subject’s relationship in face of different situations and persons.</p> <p>The concept of health and normality, the role of psychological factors in case of disease, the psychological reaction to disease, the behavior in disease.</p> <p>Health and mental health concept, mental health burden, mental health services, the problematic of psychologic organization of medical institutions. The problem of model of the disease, the importance of psychologic problem in triggering the disease. The Stigma phenomenon in mental health.</p> <p>Medical development psychology. Special aspects regarding the psychopathology of childhood, adolescence and senescence. The individual adaptation in school, profession, family. The ontogenetic development stages.</p> <p>Disease and psychological reaction to the disease, the psychological problems of different diseases, psychosomatic medicine.</p> <p>The doctor-patient relationship, the categories of interpersonal behavior, the “situational” psychology of the patient, the information of the patient by the doctor, doctor and patient claims, patient consent, training and education, patient compliance.</p> <p>The psychological aspects of suicide, risk factors in suicide, management of suicidal patients.</p> <p>Death and grief as problems of medical psychology. The grief’s motives, stages, the grief in parents and in children.</p> <p>Death, reactions and terminal patients management.</p> <p>Treatment methods in mental health – psychopharmacology, psychotherapy, psychosocial rehabilitation, strategies of optimizing the therapeutic act.</p> <p>Psychoanalysis, defense mechanisms.</p> <p>Cognitive-behavioral psychotherapy, the ABC model of functioning.</p> <p>Systemic sensitization, aversive therapy.</p> <p>Transactional analysis, gestalt therapy, classic and ericksonian hypnosis, autogenic training.</p> <p>Psychodiagnostic, its technics – observation, anamnesis, conversations, questionnaires, nonverbal and projective tests.</p> <p>Psychiatry - development, main objectives, contemporary and perspective relationships, the relationship of medical psychology with other discipline.</p> <p>Classification of mental and behavioral disorders according to ICD-10 and DSM-5. General psychopathology - perception, memory and</p>



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Objectives	Content units
	<p>intellect disorders, thought, mood (affective), psychomotor and volition disorders. The semiology of conscious disorders.</p> <p>Main psychopathologic syndromes: asthenic, obsessive-phobic, paranoid, paranoia, paraphrenia, apatho-abulic, Kandinski-Clerambault syndrome, Korsakov syndrome</p> <p>Clinical assessment scales in psychiatry</p> <p>Clinical scales of assessment in psychiatry. The suicidal, violence concept and other emergencies in psychiatry.</p> <p>The treatment principles in psychiatry, adverse effects of medication.</p> <p>The clinical scales for assessment in psychiatry. Emergencies in psychiatry.</p>
<b>Chapter 2. Adult's psychopathology .</b>	
<ul style="list-style-type: none"> <li>• To define dementia, alcohol addiction, schizophrenia, bipolar disorder, dysthymia, cyclothymia, neurotic disorders, acute stress reactions, post-traumatic stress disorder, somatoform disorders, disorders of adult personality and behavior.</li> <li>• To know the actuality, epidemiology of organic mental disorders, mental and behavioral disorders due to psychoactive substance use, affective disorders, stress related, endogenous psychosis, dissociative (conversion) disorders, somatoform disorders, adult personality and behavior disorders, impulse control disorders, eating disorders. sleep disorders.</li> <li>• To show the role of predisposing, precipitating and contributing factors in the development and maintenance of diseases.</li> <li>• To understand the relevant psychopathologic particularities of endogenous and exogenous mental disorders in adults.</li> <li>• To demonstrate the capacity to analyze the types of onset and development particularities.</li> <li>• To apply the gained knowledge to optimize the therapeutic process.</li> <li>• To integrate the knowledge about psychotherapeutic methods in optimal therapeutic management.</li> </ul>	<p>Dementia in Alzheimer disease. Vascular dementia. Dementia in Pick's, Creutzfeldt-Jakob's, Huntington, Parkinson disease, dementia in HIV-AIDS. Actuality, epidemiology, clinical picture, evolution and treatment.</p> <p>Korsakov's organic amnesic syndrome. Organic delirium. Organic hallucinosis. Organic catatonic disorder. Organic affective disorders. Organic emotionally labile (asthenic) disorder. Organic personality disorder. Postconcussional organic cerebral syndrome. Postconcussional epilepsy. Actuality, epidemiology, clinical picture, evolution and treatment.</p> <p>Acute and chronic alcoholic psychosis (delirium tremens, alcoholic hallucinosis, alcoholic paranoid, Korsakov syndrome).</p> <p>Alcoholic dementia. Actuality, epidemiology, clinical picture, evolution, the main principles of alcoholism treatment.</p> <p>Opioids, cannabinoids, sedatives, hypnotics, cocaine, caffeine, hallucinogens, tobacco, volatile solvents and other psychoactive substances. Actuality, epidemiology, clinical picture, evolution, the main treatment principles, prophylaxis and treatment.</p> <p>Schizophrenia, schizotypal and delusional disorders Actuality, epidemiology, clinical picture, evolution and treatment.</p> <p>Mood disorders. Depression, Mania, Major depressive disorder, Dysthymia. Bipolar disorder (type I, type II, Cyclothymia). Actuality, epidemiology, clinical picture, evolution and treatment.</p> <p>Neurotic and stress-related disorders. Phobic anxiety disorders. Panic disorder. Generalized anxiety disorder. Obsessive-compulsive disorder. Reaction to severe stress, and adjustment disorders. Acute stress reaction. Post-traumatic stress disorder. Adjustment disorders. Actuality, epidemiology, clinical picture, evolution and treatment.</p> <p>Dissociative and conversion disorders. Dissociative amnesia. Dissociative fugue. Dissociative stupor. Trance and possession disorders. Conversion disorder with motor symptom or deficit. Conversion disorder with seizures or convulsions. Conversion disorder with sensory symptom or deficit. Actuality, epidemiology, clinical picture, evolution and treatment.</p> <p>Somatoform disorders (somatization disorder, undifferentiated somatoform disorder, pain disorders related to psychological factors, hypochondriasis, body dysmorphic disorder). Actuality, epidemiology, clinical picture, evolution and treatment.</p> <p>Disorders of adult personality and behavior. Habit and impulse disorders. Eating disorders. Nonorganic sleep disorders. Mental and</p>



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Objectives	Content units
	behavioral disorders associated with the puerperium. Actuality, epidemiology, clinical picture, evolution and treatment.
<b>Chapter 3. Child and adolescent's psychopathology</b>	
<ul style="list-style-type: none"><li>To define childhood autism.</li><li>To know the actuality, epidemiology of pervasive developmental disorders, behavioral and emotional disorders with onset usually occurring in childhood and adolescence, emotional disorders with onset specific to childhood, disorders of social functioning with onset specific to childhood and adolescence.</li><li>Demonstrate the role of predisposing, precipitating and contributing factors in the development and maintenance of early onset diseases in childhood and adolescence.</li><li>To show the capability to analyze the psychopathological structure, specific to children and adolescents.</li><li>To apply the gained knowledge to optimize the therapeutic process.</li><li>To integrate the knowledge about psychotherapeutic techniques and apply them in medical practice.</li></ul>	<p>Childhood autism, Rett syndrome, Asperger syndrome. Actuality, epidemiology, clinical picture, evolution and treatment.</p> <p>Hyperkinetic disorders, Conduct disorders. Actuality, epidemiology, clinical picture, evolution and treatment.</p> <p>Separation anxiety disorder of childhood. Actuality, epidemiology, clinical picture, evolution and treatment.</p> <p>Elective mutism. Actuality, epidemiology, clinical picture, evolution and treatment.</p> <p>Tic disorders. Actuality, epidemiology, clinical picture, evolution and treatment.</p> <p>Nonorganic enuresis. Nonorganic encopresis, Pica of infancy and childhood, Stuttering [stammering]. Actuality, epidemiology, clinical picture, evolution and treatment.</p> <p>Transient dissociative [conversion] disorders occurring in childhood and adolescence. Actuality, epidemiology, clinical picture, evolution and treatment.</p>

### VI. PROFESSIONAL SKILLS (SPECIFIC (SS) AND TRANSVERSAL (TS)) AND FINAL STUDY ABILITIES

#### ✓ PROFESSIONAL SKILLS:

- SS1 Strong knowledge, understanding and working with the theoretical knowledge and basic practical methods of organizing and functioning of medical psychology and psychiatry to ensure adequate management of mental and behavioral disorders;
- SS 2 Strong knowledge and practical application of the algorithm of strictly individualized psychological and psychiatric investigations, taking into account the age of the person, the character of the pathology, the specificity, the sensitivity, the accessibility of the examination methods and the reference criteria;
- SS 3 Learning the principles of co-operation with patients with mental and behavioral disorders, testing and monitoring the psychic functions of persons under the control of a specialist, including the screening of frequent psychological pathologies, the application of medical-biological sciences, in correlation with clinical sciences, to achieve an optimal adaptation of the patients;
- SS 4 To know at a professional level the principles of analysis, synthesis, evaluation, explanation, interpretation of psychic processes, establishment of presumptive clinical diagnosis, identification of main strategies for treatment for the prevention of psychiatric illness;
- SS 5 Explanation of causes, conditions that impact the level, the structure and the dynamics of mental disorders among the Moldovan population and active participation in their rehabilitation.

#### ✓ TRANSVERSAL SKILLS:

- TS 1 Executing tasks with responsibility, rigor, punctuality and perseverance in work. Assuming responsibility for the results of personal activity, as well as respecting norms and values of professional ethics.
- TS 2 The manifestation in the professional activity of an active civic position towards solving problems related to mental health and prevention of mental illnesses, promotion and maintenance of mental health through mass media.



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- TS 3 Identification of opportunities for continuous improvement of professional competences and efficient use of acquired knowledge in order to increase the quality of provided services and reduce the number of patients with mental and behavioral disorders.
- ✓ **FINAL STUDY ABILITIES**
  - To know the organizational particularities of medical psychology and psychiatry;
  - To understand the principles of classification of mental and behavior disorders;
  - To know basic psychological processes and their disorders;
  - To be competent to deduce possible causes of psychiatric illnesses;
  - To know the main psychopathological peculiarities of mental disorders in adult, child and adolescent;
  - To know the types of onset, the evolutionary particularities of the patients with mental disorders and behavior;
  - Be able to apply the knowledge acquired to optimize the therapeutic process;
  - To be able to inform the patient about the rational use of the drug, possible side effects, prophylaxis and treatment;
  - To be able to assess the place and role of medical psychology and psychiatry in the clinical training of the student;
  - To be competent to use the knowledge and methodology of medical psychology and psychiatry in the ability to explain the nature of some pathological processes;
  - To be able to implement the knowledge gained in the research activity;
  - To be competent to use critically and confidently the scientific information obtained using the new information and communication technologies.

### VII. STUDENT'S INDIVIDUAL ACTIVITY

No.	The expected product	Implementation Strategies	Evaluation criterias	Deadline
1.	Working the information sources	Read the lecture or the material in the manual to the topic carefully. Read questions on the subject, which require a reflection on the subject. To get acquainted with the list of additional information sources on the topic. Select the source of additional information for that topic. Reading the text entirely, carefully and write down the essential content. State the generalizations and conclusions regarding the importance of the topic / subject.	The capacity to extract the essential, interpreting skills, workload	During the course
2.	Analysis of study case	Until solving the study case to analyze the information from the respective subject in the lecture and manual. Solving consecutive tasks. Formulation of presumptive diagnosis. Selection of additional information, using electronic addresses and additional bibliography.	Workload, solving study cases, the ability to formulate conclusions	During the course
3.	Analysis of clinical case	Description of the clinical case. Solving problems in clinical case analysis.	Workload, the level of insight into different subjects, the level of scientific argumentation, the	During the course



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		The prognostic of the investigated case. Deduction of the expected outcome of the case.	quality of the conclusions, the demonstration of understanding the problem, the formation of the personal attitude	
4.	Work with the online material	Online self-evaluation, study of online materials on the departments site, expressing your own opinions through forum and chat	Number and duration of site entries, self-evaluation results	During the course
5.	Preparation and submission of presentations / portfolios	Selection of the research topic, establishment of the research plan, establishment the deadlines. Establishing PowerPoint project / topic components - topic, aim, results, conclusions, practical applications, bibliography. Peer reviews. Teacher reviews.	The workload, the degree of insight of the project topic, the level of scientific argumentation, the quality of the conclusions, the elements of creativity, the formation of the personal attitude, the coherence of the discourse and the scientific correctness, the graphical presentation, the way of presentation	During the course

### VIII. METHODOLOGICAL SUGGESTIONS FOR TEACHING-LEARNING-EVALUATION

- **The methods of teaching used**

In the teaching of psychiatry, narcology and medical psychology, different teaching methods and procedures are used, oriented towards the efficient acquisition and achievement of the objectives of the didactic process. In the theoretical lessons, along with traditional methods (lesson-exposure, lesson-conversation, synthesis lesson), modern methods (lesson-debate, lecture-conference, problem-lesson) are also used. In the practical lessons are used individual, frontal and group work. In order to acquire deeper material, different semiotic systems (scientific language, graphical and computerized language) and teaching materials (tables, charts, transparent sheets) are used. Inside lessons and extracurricular activities are used Communication Technologies - PowerPoint presentations.

- **Learning methods used:**

- **Observation** - Identifying elements characteristic to structures, description of these elements or phenomena.
- **Analysis** - Imaginary decomposition of the whole into component parts. Highlighting the essential elements. Studying each element as part of the whole.
- **Chart/ figure analysis** - Selection of necessary information. Recognition based on knowledge and information selected structures indicated in the chart, drawing. Analysis of the functions / role of recognized structures.
- **Comparison** - Analyzing the first object / process in a group and determining its essential traits. Analysis of the second object / process and the determination of its essential features. Comparing the objects / processes and highlighting common features. Comparing the objects / processes and determining differences. Establishment criteria for differentiation. Formulation of conclusions.
- **Classification** - Identification of the structures / processes to be classified. Determining the criteria on which classification is to be made. Distribution of structures / processes by groups according to established criteria.
- **Elaboration of charts** - Selection of elements, which must appear in the chart. Drawing the elements selected by different symbols / colors and indicating their relationships. Formulating an appropriate title and legend of the symbols used.
- **Modeling** - Identification and selection of the elements needed to model the phenomenon. Imagining (graphical, schematic) of the phenomenon studied. Realizing the phenomenon using the developed model. Formulation of conclusions, deduced from arguments or findings.



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- **Experiment** – Formulating a hypothesis, starting from known facts, about the process / phenomenon studied. Verifying the hypothesis by performing the processes / phenomena studied under laboratory conditions. Formulation of conclusions, deduced from arguments or findings.
- **Applied teaching strategies/technologies**  
„Brainstorming”, „Multi-voting”; „Round table”; „Group interview”; „Study case”; „Creative controversy”; „Focus-group technic”, „Portfolio”.
- **Evaluation methods** (inclusively indicating the calculation method of the final mark)
  - ✓ **Current:** frontal and/or individual control by:
    - (a) solving study cases,
    - (b) analysis of clinical cases
    - (c) quizzes
    - (d) reports
  - ✓ **Final:** practical skills evaluation, test-control, oral evaluation

### Methods of mark rounding at the evaluation levels

Intermediate grading scale (annual average, grades from steps of exam)	National grading system	ECTS Equivalent
1,00-3,00	2	F
3,01-4,99	4	FX
5,00	5	E
5,01-5,50	5,5	
5,51-6,0	6	D
6,01-6,50	6,5	
6,51-7,00	7	C
7,01-7,50	7,5	
7,51-8,00	8	B
8,01-8,50	8,5	
8,51-8,00	9	A
9,01-9,50	9,5	
9,51-10,0	10	

The annual average mark and the marks from all the steps of the final exam (computer assisted, test, oral answer) – all will be expressed in numbers according to the grading scale (according to the table), and the final obtained mark will be expressed in numbers with two decimal places which will be wrote in the carnet.

*Absence on examination without good reason is recorded as "absent" and is equivalent to 0 (zero). The student has the right to re-take the exam twice.*

## IX. RECOMMENDED LITERATURE:

### A. Compulsory:

1. Kaplan HI, Sadock BJ, Grebb JA. Synopsis of Psychiatry. VIII Ed. Williams and Wilkins, 1998.
2. Oprea N., Nacu An., Oprea V. Psihiatrie. Chișinău, 2007 (Manual)
3. Preliceanu D. Psihiatrie clinică. București, 2010 (Manual)
4. Tulburari Mintale si de Comportament, Clasificarea Internațională a Maladiilor, ed. X, revizia Australiana 2000, Organizatia Mondială a Sănătății,  
<https://www.hosptm.ro/files/drg/icd-10-am/cap05.pdf> (material electronic online)
5. World Health Organization. The ICD-10 Classification of Mental and Behavioral Disorders: Clinical descriptions and diagnostic guidelines, the Blue Book, World Health Organization. Geneva, 1992.  
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