

## COURSE DETAILS

### "GENERAL SURGERY"

**SSD MED/18**

DEGREE PROGRAMME: **MEDICINE AND SURGERY**

ACADEMIC YEAR **2024-25**

## GENERAL INFORMATION–TEACHER REFERENCES

Faculty	Position	Scientific Fields	Phone	Reception	E-mail
Troisi Roberto (coordinator)	Full Professor	General Surgery (MED/18)	6276	send an email in order to schedule a meeting	Roberto.troisi @unina.it
De Palma Giovanni	Full Professor	General Surgery (MED/18)		send an email in order to schedule a meeting	Giovanni.depalma @unina.it
Musella Mario	Full Professor	General Surgery (MED/18)		send an email in order to schedule a meeting	Mario.musella @unina.it
De Werra Carlo	Associate Professor	General Surgery (MED/18)		send an email in order to schedule a meeting	Carlo.dewerra @unina.it
Galloro Giuseppe	Associate Professor	General Surgery (MED/18)		send an email in order to schedule a meeting	Giuseppe.galloro @unina.it
Marco Milone	Associate Professor	General Surgery (MED/18)		send an email in order to schedule a meeting	Marco.milone @unina.it
Roberto Montalti	Associate Professor	General Surgery (MED/18)		send an email in order to schedule a meeting	Roberto.montalti @unina.it
Francesco Maione	Assisting Professor	General Surgery (MED/18)		send an email in order to schedule a meeting	Francesco.maione @unina.it
Rompianesi Gianluca	Assisting Professor	General Surgery (MED/18)		send an email in order to schedule a meeting	Gianluca.romppianesi @unina.it

## GENERAL INFORMATION ABOUT THE COURSE

INTEGRATED COURSE (IF APPLICABLE):

MODULE (IF APPLICABLE):

SSD OF THE MODULE (IF APPLICABLE):

TEACHING LANGUAGE: **ENGLISH**

CHANNEL (IF APPLICABLE):

YEAR OF THE DEGREE PROGRAMME: **VI**

SEMESTER: **I**

CFU: **8**

### REQUIRED PRELIMINARY COURSES (IF MENTIONED IN THE COURSE STRUCTURE "REGOLAMENTO")

**NONE**

### PREREQUISITES (IF APPLICABLE)

**NONE**

### LEARNING GOALS

**Through presentation of patients with diverse medical presentation (including acute, chronic, and multi-morbid conditions), students learn the fundamentals of:**

- Diagnosis and therapy of pathologies of surgical relevance framed as non-specialist medical competences
- Principles of surgical care, emergency and elective digestive surgical pathology, endocrine surgery
- Principles of surgical endoscopy
- Principles of minimally invasive approaches to surgical diseases
- General principles of surgery for cancer
- Treatment of end-stage organ disease by organ transplantation
- Basics of clinical transplant immunology

### EXPECTED LEARNING OUTCOMES (DUBLIN DESCRIPTORS)

**Knowledge and understanding** - The course aims to provide the knowledge needed to understand the main aspects of the importance of surgical therapy of abdominal diseases. Through the study of these issues, the student will be able to understand the correct diagnostic approaches to the pathologies proposed in the course eventually the preoperative and postoperative patient's care.

**Applying knowledge** - The course, also through the presentation of clinical cases accompanied by laboratory investigations, in a comparative perspective, is aimed at providing tools for analyzing and evaluating the effects of proper approach to surgical therapy of abdominal diseases.

**Making informed judgments and choices** - Through the study of different theoretical approaches and the critical evaluation of the clinical cases proposed, the student will be able to improve their judgment and proposal skills in relation to the analysis of patients suffering from abdominal diseases which can be treated by surgery. The students will have to demonstrate ability to articulate a process of differential diagnosis and critical analysis of diagnostic tools, including the impact of technology in the operating theater and the most recent and innovative surgical approaches. Finally, the student must be able to independently assess the pathogenetic mechanisms underlying the main surgical pathologies and plan preventive, diagnostic and therapeutic interventions. The student must be able to identify diagnostic paths for surgical pathologies and for complex problems.

**Communicating knowledge** - The presentation of clinical cases, theoretical and application concepts on general surgery preoperative patients work up and will not be carried out in such a way as to allow the acquisition of the mastery of a technical language and of an adequate and specialized terminology; the development of communication skills, both oral and written, will also be stimulated through class discussion and through the final oral exam.

**Capacities to continue learning** - Learning skills will be stimulated through power point presentations and classroom discussion also aimed at verifying the effective understanding of the topics covered. Learning skills will be stimulated through supplementary didactic supports (results of laboratory tests, simulations of clinical cases) in order to develop applicative skills.

### **Knowledge and understanding**

**The student needs to show ability to know and understand problems related to:**

- Assessing, diagnosing, and managing patients with acute and chronic surgical abdominal pathologies;
- Assessing, diagnosing, and managing patients with complex morbidity and surgical diseases;
- Assessing and managing hemostasis and shock;
- Performing basic procedures of General Surgery;
- Assessing capacity for surgical decision-making;
- Discussing serious and/or complex aspects of perioperative care with patients, families, and caregivers;

### **Applying knowledge and understanding**

**Disciplinary competence (knowing how to do something) that students need to acquire:**

- Managing an inpatient general surgery service;
- Differential surgical diagnosis and/or treatment;
- Multidisciplinary Team approaches and quality of care in surgical oncology;

# COURSE CONTENT/SYLLABUS

## Teaching activities of the integrated course in GENERAL SURGERY 2024-2025

Week	Date	Time	Lesson Topic	Professor
1 week October 7-11	7	15-16	<b>The operating theatre: classification of operations &amp; surgical instruments</b>	<b>Troisi R.</b>
	8	15-16	Scientific principles: preoperative assessment	De Werra C.
	9	15-16	Nutrition and metabolism	De Werra C.
	10	15-16	Infections and sepsis in surgery	De Werra C.
	11	15-16	Hemostasis and Shock	De Werra C.
2 week October 14-18	14	15-16	<b>Measuring the quality of surgical care</b>	<b>De Werra C.</b>
	15	15-16	3-D preoperative planning and augmented reality	Maione F.
	16	15-16	Artificial Intelligence in surgery	Maione F.
	17	15-16	Technology: minimal access surgery	Troisi R.
	18	15-16	Endoluminal Surgery; Organ sparing surgery and image-guided surgery-1	De Palma G.
3 week October 21-25	21	15-16	<b>Endoluminal Surgery; Organ sparing surgery and image-guided surgery-2</b>	<b>De Palma G.</b>
	22	15-16	Metabolic syndrome and morbid obesity - 1	Musella M.
	23	15-16	Metabolic syndrome and morbid obesity - 2	Musella M.
	24	15-16	Complications in morbid obesity surgery	Musella M.
	25	15-16	Surgical treatment of thyroid diseases - 1	Musella M.
4 week October 28-31	28	15-16	<b>Surgical treatment of thyroid diseases - 2</b>	<b>Musella M.</b>
	29	15-16	Surgical treatment of breast diseases - 1	Musella M.
	30	15-16	Surgical treatment of breast diseases - 2	Musella M.
	31	15-16	Surgical treatment of adrenal glands	Montalti R.
	1/11		<b>HOLIDAY</b>	
5 week November 4-8	4	15-16	<b>Gastrointestinal bleeding: diagnosis, therapy -1</b>	<b>Galloro G.</b>
	5	15-16	Gastrointestinal bleeding: diagnosis, therapy -2	Galloro G.
	6	15-16	Benign Upper GI diseases - 1	De Palma G.
	7	15-16	Benign Upper GI diseases - 2	De Palma G.
	8	15-16	Esophageal neoplasms - 1	De Palma G.
6 week November 11-15	11	15-16	<b>Esophageal neoplasms - 2</b>	<b>De Palma G.</b>
	12	15-16	Gastric neoplasms -1	Maione F.
	13	15-16	Gastric neoplasms -2	Maione F.
	14	15-16	Benign Lower GI diseases	De Palma G.
	15	15-16	Inflammatory bowel diseases: Crohn's disease	Luglio G.
7 week November 18-22	18	15-16	<b>Inflammatory bowel diseases: Ulcerative colitis</b>	<b>Luglio G.</b>
	19	15-16	Colorectal neoplasms	Maione F.
	20	15-16	Anal canal neoplasms	Maione F.
	21	15-16	Jaundice: when the surgery is indicated	De Palma G.
	22	15-16	Jaundice: combined multimodal approaches	De Palma G.
8 week November 25-29	25	15-16	<b>Focal liver lesions and primary liver tumors</b>	<b>Troisi R</b>
	26	15-16	Secondary liver tumors	Troisi R
	27	15-16	Benign pancreatic diseases	Troisi R
	28	15-16	Pancreas neoplasms	Troisi R
	29	15-16	Pancreatic neuroendocrine tumors	Troisi R

9 week December 2-6	<b>2</b>	<b>15-16</b>	<b>Gastroenteric neuroendocrine tumors</b>	<b>De Werra C.</b>
	3	15-16	Abdominal Multiorgan Procurement	Rompianesi G.
	4	15-16	Principles of Organ Preservation	Troisi R.
	5	15-16	Kidney Transplantation	Rompianesi G.
	6	15-16	Pancreas Transplantation	Rompianesi G.
10 week December 9-13	<b>9</b>	<b>15-16</b>	<b>Liver Transplantation</b>	<b>Troisi R.</b>
	10	15-16	Multivisceral transplantation	Troisi R.
	11	15-16	Abdominal vascular diseases of surgical relevance - 1	Rompianesi G.
	12	15-16	Abdominal vascular diseases of surgical relevance - 2	Rompianesi G.
	13	15-16	Surgical spleen diseases	Rompianesi G.
11 week December 16-20	<b>16</b>	<b>15-16</b>	<b>Acute abdomen I</b>	<b>Luglio G.</b>
	17	15-16	Acute abdomen - 2	Luglio G.
	18	15-16	Retroperitoneal diseases	Luglio G.
	19	15-16	Hernias (1)	Milone M.
	20	15-16	Hernias (2)	Milone M.
12 week January 10	<b>10</b>	<b>15-16</b>	<b>Incisional hernias</b>	<b>Milone M.</b>

## READINGS/BIBLIOGRAPHY

### GREENFIELD'S SURGERY: SCIENTIFIC PRINCIPLES AND PRACTICE

Authors/Editor: Mulholland, Michael W.; Lillemoe, Keith D.; Doherty, Gerard M.; Upchurch, Jr., Gilbert R.; Alam, Hasan B.; Pawlik, Timothy M.

Publisher: Lippincott Williams & Wilkins (LWW) (Publication Year: 2016) Edition: 6th Ed.

### SCHWARTZ'S PRINCIPLES OF SURGERY

Authors: John Hunter, Lillian Kao, Jeffrey Matthews, Raphael Pollock, F. Brunicardi, Dana Andersen, Timothy Billiar, David Dunn.

Publisher: McGraw-Hill 2019

## TEACHING METHODS

Teachers will use: a) lectures for approximately 70 % of total hours; b) practical exercises for approximately 20 % of total hours d) seminars, e) stages, d)other, to elaborate on specific themes for approximately 10% of total hours".

## EXAMINATION/EVALUATION CRITERIA

Examstype	
ONLY ORAL	X
CLINICAL CASE DISCUSSION	X