



**“CAROL DAVILA” UNIVERSITY  
OF MEDICINE AND PHARMACY BUCHAREST**  
**Faculty of Dentistry**  
**Dental Medicine in English**



## DISCIPLINE GRID

### 1. Programme:

1.1.	<b>CAROL DAVILA UNIVERSITY OF MEDICINE AND PHARMACY BUCHAREST</b>
1.2.	<b>FACULTY OF DENTISTRY / 1<sup>st</sup> DEPARTMENT</b>
1.3.	<b>DIVISION: Psychiatry and Psychology</b>
1.4.	<b>STUDY DOMAIN: Health, regulated by sector within European Union</b>
1.5.	<b>CYCLE OF STUDY (TRAINING): LICENCE</b>
1.6.	<b>STUDY PROGRAMME: DENTAL MEDICINE IN ENGLISH</b>

### 2. Discipline:

2.1.	DISCIPLINE NAME: <b>Psychiatry</b>							
2.2.	LOCATION: „Prof. Dr. Alexandru Obregia” Clinical Hospital of Psychiatry							
2.3.	Course holders: <b>Maria Gabriela Puiu (MD, PhD) – Associate Professor</b>							
2.4.	Practical classes responsible (in charge of) <b>Vlad Dionisie (MD, PhD) - Teaching Assistant</b>							
2.5.	III	2.6.	V	2.7.	Exam	2.8.	Type of discipline	CD/DD
Study year		Semester		Evaluation				

### 3. Estimated total time (hours/semester)

No. hours/week	4	out of which	Lectures: 2	Laboratory sessions: 2
Total hours out of learning schedule	56	out of which	Lectures: 28	Laboratory sessions: 28

Time distribution	hours
Study of textbook, course material, bibliography recommended materials and personal notes	14
Additional documentation activity in the library or on specialized online platforms	5
Activity dedicated to preparing for seminars or to prepare homework, portfolio and essays	14
Tutorial activity	3
Examinations	5
Other activities	3
<b>Total hours of individual study</b>	<b>44</b>
<b>Total hours per semester</b>	<b>100</b>
<b>Credits</b>	<b>4</b>

### 4. Prerequisites

4.1. Curriculum	Knowledge and abilities regarding general examination and evaluation of patient acquired within previous courses
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<b>4.2. Proficiencies</b>	Knowledge regarding Romanian language - as patients assessed during laboratory sessions will be native Romanian speakers
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## 5. Conditions

<b>5.1. for lecture activity</b>	Appropriately equipped lecture hall, computer, video projector, internet, access to e-learning platforms
<b>5.2. for laboratory activity</b>	Case presentation room with appropriate equipment

## 6. Accumulated skills

<b>6.1. Proficiencies</b> <i>(knowledge and skills)</i>	<p><b>I. Knowledge:</b></p> <ul style="list-style-type: none"> <li>● to describe the concepts, theories and fundamental notions regarding the onset of disorders, signs and symptoms characteristic of each disorder useful for guiding the clinical diagnosis in psychiatry;</li> <li>● to describe the mechanisms of drugs' actions, of the indications, contraindications and adverse effects, of the therapeutic resources used in the medical practice as well as the identification of the resuscitation maneuvers in case of first aid / emergency in psychiatry;</li> <li>● knowledge about the main treatments in mental disorders;</li> <li>● knowledge about drug interactions with dental treatments.</li> </ul> <p><b>II. Skills:</b></p> <ul style="list-style-type: none"> <li>● to correctly assess the risk of illness or of the context of the occurrence of a disorder followed by the choice and application of appropriate prophylaxis measures;</li> <li>● to establish the relationships between psychiatric and oral-dental pathology;</li> <li>● knowledge about paraclinical tests and evaluations used in psychiatry;</li> <li>● to master the principles of mental examination: psychiatric interview, anamnesis;</li> <li>● positive and differential diagnosis of mental disorders;</li> </ul>
<b>6.2. Transversal skills</b> <i>(role, professional and personal development)</i>	<p><b>III. Role related skills:</b></p> <ul style="list-style-type: none"> <li>● identifying roles and responsibilities in a multidisciplinary team, applying relationship and efficient work techniques within the team and with the patient;</li> </ul> <p><b>IV. Skills related to professional and personal development:</b></p> <ul style="list-style-type: none"> <li>● identifying the objectives to be achieved, the available resources, the conditions for their completion, the working stages, the working times, the related accomplishments and related risks in various psychiatric pathologies;</li> <li>● • efficient use of information sources and communication and assisted professional training resources (internet portals, specialized software applications, databases, online courses, etc.).</li> </ul>

## 7. Objectives (based on the grid of acquired specific skills)

<b>7.1. General Objective</b>	<ul style="list-style-type: none"> <li>• identifying the state of illness, the degree of medical emergency;</li> <li>• establishing the class diagnosis (neurosis, psychosis, personality disorder, deteriorating disease) of psychiatric illness. Cultivating ethical medical principles in psychiatry.</li> </ul>
<b>7.2. Specific Objectives</b>	<ul style="list-style-type: none"> <li>• presentation of general notions regarding psychiatric disorders;</li> <li>• identifying the state of illness, the degree of medical emergency, as well as establishing the correct diagnosis of the psychiatric condition (s). Cultivating ethical principles in psychiatry;</li> <li>• establishing the most effective means of communication with the patient and improving the skills required to examine patients in order to establish a correct diagnosis.</li> </ul>

## 8. Content

<b>8.1.1. Lectures</b>	<b>No. hrs/topic</b>	<b>Teaching method</b>	<b>Obs.</b>
1. Introduction to Psychiatry, Principles of Mental Health Semiology of mental processes: <ul style="list-style-type: none"> <li><input type="checkbox"/> Semiology of cognitive processes:</li> <li><input type="checkbox"/> Semiology of sensory: sensations and perceptions- hypo and hyperesthesia; qualitative disorders: illusions, hallucinations, pseudo-hallucinations</li> </ul>	2	Interactive presentation of the material according to the analytical program, using multimedia means, power point presentations, which may include didactic films in compliance with data protection norms.	
2. Semiology of attention: hypoprosexia and hyperprosexia, dysprosexia. Semiology of memory: hypomnesias, hypermnesias; paramnesia, disorders of immediate mnemonic synthesis, disorders of recollection of the past.	2	Interactive presentation of the material according to the analytical program, using multimedia means, power point presentations, which may include didactic films in compliance with data protection norms.	
3. Semiology of thought: <ul style="list-style-type: none"> <li><input type="checkbox"/> thought processes; formal disorders (rhythm, flow, coherence),</li> <li><input type="checkbox"/> thought content disorders (dominant, obsessive, prevalent, delusional ideas: definition, characteristics).</li> </ul>	2	Interactive presentation of the material according to the analytical program, using multimedia means, power point presentations, which may include didactic films in compliance with data protection norms.	
4. Disorders of speech and language: description; dyslogias, dysphasias, dyslalia. Disorders of Verbal Communication Disorder of Non-verbal Communication: facial expressions, gestures, clothing, other types of communication	2	Interactive presentation of the material according to the analytical program, using multimedia means, power point presentations, which may include didactic films in compliance with data protection norms.	
5. Behavioral disorders: catatonic syndrome, psychomotor agitation and the clinical entities in which they occur.	2	Interactive presentation of the material according to the analytical program, using multimedia means, power point presentations, which may	

Disorders of the imagination process: increase and decrease of the imaginative force; simulation, metasimulation, dissimulation, oversimulation.		include didactic films in compliance with data protection norms.	
6. The semiology of affectivity: hypothymia, positive and negative hyperthymia, athymia; dysphoria, anxiety.	2	Interactive presentation of the material according to the analytical program, using multimedia means, power point presentations, which may include didactic films in compliance with data protection norms.	
7. Semiology of volition: hypobulia, abulia, hyperbulia; dysbulia. Semiology of consciousness: quantitative and qualitative disorders (ambulatory automatism, delirium, amentia, twilight state).	2	Interactive presentation of the material according to the analytical program, using multimedia means, power point presentations, which may include didactic films in compliance with data protection norms.	
8. Psychiatric pathology. - Organic mental disorders (dementia, Korsakoff amnesic syndrome, delirium). - Personality and behavior disorders due to brain diseases, injuries and dysfunctions. - Mental disorders due to use of psychoactive substances (opioids, cannabis, cocaine, amphetamines, sedatives and hypnotics, caffeine, tobacco, alcohol).	2	Interactive presentation of the material according to the analytical program, using multimedia means, power point presentations, which may include didactic films in compliance with data protection norms.	
9. Schizophrenia and related disorders: brief psychotic disorder, schizophreniform disorder, schizophrenia, schizoaffective disorder, delusional disorder.	2	Interactive presentation of the material according to the analytical program, using multimedia means, power point presentations, which may include didactic films in compliance with data protection norms.	
10. Affective disorders: bipolar affective disorder, recurrent depressive disorder, dysthymia, cyclothymia.	2	Interactive presentation of the material according to the analytical program, using multimedia means, power point presentations, which may include didactic films in compliance with data protection norms.	
11. Personality disorders: Classification Clinical description The typology of the patient encountered in the dentist's practice.	2	Interactive presentation of the material according to the analytical program, using multimedia means, power point presentations, which may include didactic films in compliance with data protection norms.	
12. Anxiety disorders (panic disorder, agoraphobia, specific phobias, social anxiety, generalized anxiety disorder, obsessive-compulsive disorder, acute stress response, post-traumatic stress disorder).	2	Interactive presentation of the material according to the analytical program, using multimedia means, power point presentations, which may	

		include didactic films in compliance with data protection norms.	
13. Somatoform disorders (somatization disorder, conversive disorder, hypochondria). Dissociative disorders (amnesia, fugue).	2	Interactive presentation of the material according to the analytical program, using multimedia means, power point presentations, which may include didactic films in compliance with data protection norms.	
14. Eating disorders (anorexia nervosa, bulimia nervosa). Habits and impuls control disorders (pathological gambling, pyromania, kleptomania). Psychiatric emergencies.	2	Interactive presentation of the material according to the analytical program, using multimedia means, power point presentations, which may include didactic films in compliance with data protection norms.	

<b>8.2.1. Laboratory Sessions</b>	<b>No. hrs/topic</b>	<b>Teaching method</b>	<b>Obs.</b>
1. Psychiatric patient evaluation (psychiatric interview, medical history, medical documents, tests and paraclinical evaluations in psychiatry).	2	Case presentations or multimedia presentations. Examples of using psychiatric scales, inventories and questionnaires.	
2. Epidemiology, etiology, signs and symptoms, positive diagnosis, differential diagnosis, evolution, prognosis and treatment of mental illness.		Case presentations or multimedia presentations. Examples of using psychiatric scales, inventories and questionnaires.	
3. Dementias		Case presentations or multimedia presentations. Examples of using psychiatric scales, inventories and questionnaires.	
4. Disorders due to alcohol consumption (intoxication, abuse, addiction, withdrawal).	2	Case presentations or multimedia presentations. Examples of using psychiatric scales, inventories and questionnaires.	
5. Schizophrenia, brief psychotic disorder, delusional disorder, schizoaffective disorder	2	Case presentations or multimedia presentations. Examples of using psychiatric scales, inventories and questionnaires.	
6. Recurrent depressive disorder	2	Case presentations or multimedia presentations. Examples of using psychiatric scales, inventories and questionnaires.	
7. Bipolar disorder	2	Case presentations or multimedia presentations. Examples of using psychiatric scales, inventories and questionnaires.	
8. Obsessive-compulsive disorder	2	Case presentations or multimedia presentations. Examples of using psychiatric scales, inventories and questionnaires.	

9. Anxiety disorders	2	Case presentations or multimedia presentations. Examples of using psychiatric scales, inventories and questionnaires.	
10. Somatization disorder, hypochondria, somatoform disorder	2	Case presentations or multimedia presentations. Examples of using psychiatric scales, inventories and questionnaires.	
11. Personality disorders	2	Case presentations or multimedia presentations. Examples of using psychiatric scales, inventories and questionnaires.	
12. Suicide attempt and suicide.	2	Case presentations or multimedia presentations. Examples of using psychiatric scales, inventories and questionnaires.	
13. Adverse effects of psychotropics; drug interactions with dental treatments	2	Case presentations or multimedia presentations. Examples of using psychiatric scales, inventories and questionnaires.	
14. Psychiatric presentation in oral health practice	2	Case presentations or multimedia presentations. Examples of using psychiatric scales, inventories and questionnaires.	

<b>8.3. Selective bibliography for lectures and laboratory/practical sessions</b>			
<ol style="list-style-type: none"> <li>1. Diagnostic and statistical manual of mental disorders: DSM-5 (2013). Arlington, VA: American Psychiatric Association.</li> <li>2. Boland, R. (2021) Kaplan and Sadock's synopsis of Psychiatry. Lippincott Williams &amp; Wilkins.</li> <li>3. Oyeboode, F. (2023) Sims' symptoms in The mind: Textbook of descriptive psychopathology. Amsterdam: Elsevier.</li> <li>4. Blitzstein, S., Ganti, L. and Kaufman, M.S. (2022) First aid for the psychiatry clerkship. New York: McGraw Hill.</li> <li>5. Katona, C., Cooper, C. and Robertson, M. (2016) Psychiatry at a glance. Chichester: Wiley Blackwell.</li> <li>6. Levenson, M.D.J.L. (2019) The American Psychiatric Association Publishing Textbook Of Psychosomatic Medicine And Consultation-Liaison Psychiatry, Third Edition. American Psychiatric Association.</li> <li>7. Manea, M., Manea, M. C., and Puiu, M. G. (eds). (2019) Introducere în psihiarie Volumul I. Bucharest: Huston.</li> <li>8. Maloy, K. (2016) A case-based approach to emergency psychiatry. Oxford: Oxford University Press.</li> <li>9. O'Dwyer, A.-M. and Champion, M. (2022) Practical psychiatry for students and trainees. Oxford: Oxford University Press.</li> <li>10. Roberts, L.W. (2013) International handbook of psychiatry: a concise guide for medical students, residents, and medical practitioners. New Jersey: World Scientific.</li> <li>11. Spiegel, J.C. (2021) Psychiatry: Test preparation &amp; review manual. Philadelphia, PA: Elsevier.</li> <li>12. Toy, E.C. and Klamen, D.L. (2021) Case files. psychiatry. New York: McGraw Hill.</li> <li>13. Alpert, J.E., Schlozman, S.C. and Walker, A.M. (2021) Introduction to psychiatry: Preclinical foundations and clinical essentials. Cambridge, United Kingdom: Cambridge University Press.</li> <li>14. Wright, B., Dave, S. and Dogra, N. (2017) 100 cases in psychiatry. Boca Raton: CRC Press.</li> </ol>			

## 9. Corroborating the contents of the discipline with the expectations of epistemic community representatives, professional associations and employers in the fields representative for the program

The professional training of the third year student in the psychiatry discipline follows three main coordinates: the identification of the psychiatric pathology, the orientation towards the correct diagnosis, the identification of the possible urgent nature of the disease in relation with the application of the specialized treatment.

## 10. Evaluation

Activity type	Evaluation Criteria	Methods of evaluation	% out of final grade
<b>Lecture</b>	<b>A. Knowledge for mark 5:</b> correct answer to 23 questions	<b>Written test</b> with 42 questions (3 questions /course) from the whole subject, covers both the course and laboratory sessions.	60%
	<b>B. Additional knowledge for mark 10:</b> correct answer to all questions	<b>2 written papers</b> during the semester (the topic of the written papers will be communicated at the beginning of the course program). Each of the two written paper will be evaluated on a scale from 1 to 10 and will represent 10% of the final grade. Completion of two such assignments will sum 20 % of the final grade.	20%
<b>Laboratory Sessions</b>	Periodic check: Attitude in laboratory sessions	Each day of the laboratory sessions - students will participate in the anamnesis of patients in the presence of the Assistant Professor. The assistant assigned to the group will appreciate the student's attitude during the laboratory sessions (attendance, punctuality, attire, theoretical knowledge in accordance with the work phase/lesson, attitude towards patients, and support staff). Full attendance is required in all laboratory sessions. Absence in one laboratory session may be compensated by written assignments, upon agreement with the course lecturer.	
<b>Laboratory Sessions</b>	Periodic check: Practical exam	Assessment of the practical knowledge: anamnesis, clinical examination, psychiatric examination, establishment of the diagnosis and character of psychiatric emergency (where it is the case) During laboratory sessions students will conduct and discuss with the supervisor of practical activity at least <b>two (2) risk assessments</b> in the following areas: 1. Substance Use Disorder evaluation; 2. Suicide; 3. Depression; 4. Anxiety disorder. Each of these exercises will be evaluated on a scale from 1 to 10 and will represent 10% of the final grade. Completion of two such exercises will give 20 % of the final grade.	20%
Passing conditions: minimum 50 points earned; 50, ... 54p ⇒ Grade 5; 55, ... 64p ⇒ Grade 6; 65 ... 74. ⇒ Grade 7; 75, ... 84p ⇒ Grade 8; 85 ... 94p ⇒ Grade 9; 95, ... 100 p ⇒ Grade 10			

**Additional notes:** if the student participates in conferences (student, local, national, international) or competitions (national, international) that are related to the present curriculum, he/she will benefit from additional points or the equivalence of home and/or works themes; and/or attendance, depending on the results obtained;

**Minimum performance standards**

At the end of the program students should be able to:

- Define signs and symptoms seen in patients with psychiatric disorders;
- Define the components of mental state examination using appropriate terminology;
- State the typical signs and symptoms of common psychiatric disorders;
- Assess the risk for Substance Use Disorder, Depression, Suicide, Anxiety disorder ;
- Show appropriate behavior towards patients and their symptoms and be aware of socio-cultural contexts;
- Respect patient's dignity and confidentiality

**Date:**  
**05.09.2024**

**Chair of Psychiatry and Psychology Division**  
Prof. Dr. Mirela Manea

**Date of the approval**  
**in Department Board:**

**Department director,**  
Prof. Dr. Marina Imre