

Student's Module

DECREASE IN CONSCIOUSNESS
&
SHORTNESS OF BREATHING



Given to the 6th semester
Medical Students Of UNHAS
Academic Year 2010/2011

**EMERGENCY & TRAUMATOLOGY SYSTEM
MEDICAL FACULTY
HASANUDDIN UNIVERSITY
2011**

INTRODUCTION

This module is designed for the sixth semester students of UNHAS Medical Faculty who study Emergency and Traumatology System. General Learning objective of each module is provided for the students to ease the understanding process of the basic concepts of decrease in consciousness and shortness of breathing

The students are expected to discuss not only the chief complain (as the main problem) of the scenario, but also about disease base concept and includes everything that considered associated to it, e.g. diseases' pathomechanism in which the students must discuss about the related anatomy, physiology and biochemical process. The ultimate goal is directed more to the problem solving process rather than the diagnosis, and the students are expected to be able to explain all aspects of evaluation and early management of patient with decrease in consciousness and shortness of breathing including hypoxia pathophysiology, and acidosis occurrence for both trauma and non trauma causes.

Prior to the PBL process, both students and tutors must read the goals and objectives of the module assuring the process is accomplished according to the designated objectives, as well as to achieve the desired competition. Discussion materials can be obtained either from lecture handouts or other references provided by the lecturers or tutors.

Specialist's lectures will be given to answer the student's question about the diseases or to explain the problems occurring in consultation meetings between students and lecturer.

We strongly hope that this module can be very useful in helping the students in confirming diagnosis of the emergency and traumatology system as well as the management.

Creative Team,

Emergency and Traumatology System

STUDENTS' TASKS

1. After reading the above scenarios thoroughly, the students must discuss the cases in a leader-led group discussion. Both the leader and the secretary are chosen by the students themselves.
2. Conducting a self study by providing data/information that will support the discussion
3. Conducting a self-coached group discussion (without tutor)
4. Consulting the problems revealed during the PBL to the experts for a better understanding
5. Attending provided experts' lecture for unsolved problems

PROBLEM SOLVING PROCESS

In a leader-led group discussion, the students are expected to solve the problems in the scenarios by conducting these following 7 jumps of problem solving process:

1. Clarifying the un-clear terms stated in the scenario, then defining the keywords/key statement(s)
2. Identifying the basic problem of the scenario, by creating some leading important questions
3. Analyzing the problems by answering the above questions
4. Classifying the answers
5. Developing study objectives that must be achieved by the students during the case discussion
6. Looking for other supporting information related to the above cases
7. Reporting the result of discussion and synthesizing the other identified information

Important Notes:

- Step 1 to 5 are conducted during the first coached-tutorial with the tutor
- Step 6 is a self study; performed out of the class either by a group discussion or by student solely, which will then be discussed together in an un-coached group
- Step 7 is conducted during the second coached-tutorial with the tutor

ACTIVITIES SCHEDULE

1. First meeting in a general class lecture; the lecture delivers a one way communication of lecturing followed with asking question session. **Objective:**
 - explaining the module and how to complete the provided tasks
 - developing several discussion groups. During this first meeting, the modules will also be distributed to the students.
2. Second meeting: self-study. **Objectives:**
 - choosing a group leader and secretary
 - brain storming for step 1 to 3
 - distributing tasks for members of the group
3. Third meeting: a leader-led group discussion, facilitated by a tutor. **Objective:** to report the self-study result and accomplish the PBL process to the fifth step
4. Self-study, either together with other students in a group discussion or solely. **Objective:** Collecting other new necessary information
5. Fourth meeting: a leader-led group discussion, facilitated by a tutor. **Objective:** reporting the last discussion result as well as for synthesizing the recently identified information
6. Fifth meeting (last one): conducted in a general class, applying a panel discussion form, in which students report the final results of each group's discussion, and clarifying things that remain unsolved by the groups.

TIME-TABLE

PERTEMUAN						
I	II	III	IV	V	VI	VII
1 st Meeting Explanation	2 nd Meeting; self study (Brain Storming)	1 st Tutorial Collecting information,an alyzing and synthesizing	Self Study Practical Work, CSL	Lecture, Consultation	2 nd Tutorial (Reporting and discussing)	Last Meeting (Reporting)

STUDY STRATEGIES

1. A leader-led group discussion, facilitated by a tutor
2. A leader-led group discussion, without a tutor
3. Experts consultation
4. Experts lecture in a general class
5. Self-study activities in the library with books, magazines, slides, tape recorder, video or the internet.
6. Conducting practical work of Anatomy, Physiology, Biochemistry, Histology, Pathology Anatomy, Microbiology, Clinical Pathology and Nutrition

OTHER SOURCES OF INFORMATION AND REFERENCE LIST

1. Handouts and Journal

American college of surgeons, **Advance Trauma Life Support Program for Doctors**, 6th edition, USA, 1997.

Rahardjo, Eddy, dkk, **Seri PPDG Penanggulangan Penderita Gawat Darurat/General Emergency Life Support (GELS)**, Materi Teknis Medis Standar (ABCDE), Direktorat Jenderal Pelayanan Medik, Dept. Kesehatan RI, 2003.

Safar, Peter, **Resusitasi Jantung Paru Otak**, Dept. Kesehatan RI, 1984.

Tintinalli, JE. (ed), Kelen, GD., Stapczynski, JS., **Emergency Medicine**, International ed., 5th edition, McGraw-Hill, 2000.

Kattwinkel, John (ed)., **Textbook of Neonatal Resuscitation**, 4th ed., American Academy of Pediatrics, diterjemahkan dalam Buku Panduan Resusitasi Neonatus, Edisi ke 4, Perinasia, Jakarta, 2001.

Guidelines 2000 for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care, volume 102, Number, August 22, 2000

2. Hand outs and Lecturers's Note

3. Others: vcd, Internet, Tape, Slide

4. Lecturers:

NO	NAMA	BAGIAN	TLP.KANTOR/FLEXI/RMH/HP
1	Prof.Dr. A. Husni Tanra, Ph.D, SpAnKIC	Anestesiologi	589777/590290/0816251597
2	Dr. Muh. Ramli, SpAn	Anestesiologi	589777/5023054/0811442733
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4	Dr. Syafri K. Arif, SpAnKIC	Anestesiologi	589777/5063561/08164390974
5	Dr. Syamsul Hilal Salam, SpAn	Anestesiologi	589777/335927/08152545370
6	Dr. Hisbullah, SpAnKIC	Anestesiologi	589777/5036567/08152542997
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8	Prof. DR. Dr. Idrus A. Paturusi, SpB, Sp.BO	B. Orthopedi	586010/0816254420
9	Prof. Dr. Farid Nurmantu, SpBA, FICS	Bedah Anak	0811467020
10	Dr. Nuralim Mallapasi, SpBT	Bedah Toraks	0811418564
11	Dr. A. Asadul Islam, SpBS	Bedah Saraf	441540/0811442630
12	Prof. Dr. Ahmad M. Palinrungi, SpBU	B. Urologi	434433/08164384040
13	Dr. Oeke Rieuwpassa, SpBP	B. Plastik	0811410297
14	Dr. Erizal, Sp.B	B. Digestif	08124221003
15	Dr. Junus Patau, SpPD, SpP	I. P. Dalam	315415/0811414013
16	Dr. Ali Aspar Mappahiya, SpPD, SpJP.KKV	I. P. Dalam	453453/0811416392
17	Dr. IMS Murah Manoe, SpOG(K)	Obgin	872049/5016967/0816278841
18	Dr. Halimah P., SpM	I. P. Mata	08124238285
19	Dr. A. Qadar Punagi, SpTHT	T H T	864049/08124209947
20	Prof Dr. Arifin Limoa, SpS(K)	Neurologi	318365/0816255343
21	Dr. Idham Jaya Ganda, SpA(K)	I. K. Anak	081342660437
22	Dr. Bachtiar Murtala, SpRad	Radiologi	0811444920
23	Dr. Andi Lawang, SpFK	Farmakologi	453534

DECREASE IN CONSCIOUSNESS

EMERGENCY AND TRAUMATOLOGY

STUDY GOAL

Upon the completion of this module the students are expected to be able to understand and explain how to assess, identify and take the prompt and proper management of patient with decrease in consciousness.

CASE I

A 21 year old woman was taken to PUSKESMAS in a lost of consciousness condition. After laid on the bed and undergone some examinations, the patient was not giving any response and remained snoring with breathing frequency of 40 times per minute. The face looked pale, radial pulse was not detected with palpation. Several parts of her body; right forehead, right shoulder and lower left of abdominal area showed marked bruises. None of those people who escorted her to the PUSKESMAS stayed and willing to give information of what happened to the patient.

CASE II

A 48 year old man was taken to PUSKESMAS in a lost of consciousness condition. After laid on the bed and undergone some examinations, the patient was not giving any response and remained snoring with breathing frequency of 32 times per minute, weak pulse 100 bpm. According to the family who took him to the PUSKESMAS, the patient was not in any trauma preceding the condition.

SHORTNESS OF BREATHING

EMERGENCY AND TRAUMATOLOGY

STUDY GOAL

Upon the completion of this module the students are expected to be able to understand and explain how to assess, identify and take the prompt and proper management of patient with shortness of breathing for both trauma and non trauma causes.

CASES

CASE 1

A 25 year old man was taken to PUSKESMAS due to shortness of breathing. The patient looked pale and cyanotic. The palpated pulse indicated fast and weak beats.

CASE 2

A 4 year old girl was taken to PUSKESMAS due to shortness of breathing. The patient looked pale and cyanotic. The palpated pulse indicated fast and weak beats
The patient was not in fever nor coughing.