



Information about the subject

Degree: Bachelor of Science Degree in Podiatry

Faculty: Faculty of Medicine and Health Sciences

Code: 472009 **Name:** Preventive Podiatry

Credits: 3,00 **ECTS Year:** 4 **Semester:** 1

Module: GENERAL PODOLOGY AND BIOMECHANICS

Subject Matter: General Podiatry **Type:** Compulsory

Field of knowledge: Health Sciences

Department: Biostatistics, Epidemiology, and Public Health

Type of learning: Classroom-based learning

Languages in which it is taught: Spanish

Lecturer/-s:

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Module organization

GENERAL PODOLOGY AND BIOMECHANICS

Subject Matter	ECTS	Subject	ECTS	Year/semester
General Podiatry	21,00	Evolutionary Podiatry	3,00	This elective is not offered in the academic year 24/25
		Expertise in podiatry	3,00	This elective is not offered in the academic year 24/25
		General Podiatry	6,00	1/2
		Preventive Podiatry	3,00	4/1
		Social Morality. Deontology	6,00	3/1
Biomechanics	27,00	Biomechanics	6,00	2/2
		Ergonomics and footwear	3,00	4/1
		General Intervention Procedures	6,00	This elective is not offered in the academic year 24/25
		Physiotherapy Assessment	6,00	This elective is not offered in the academic year 24/25
		Sports Podiatry	6,00	3/2
Radiology	6,00	Radiology and Radiation Protection	6,00	3/1



Research and management	12,00	Introduction to research and sanitary documentation	6,00	4/1
		Planning and management of the podiatric clinic	6,00	4/2

Recommended knowledge

None

Learning outcomes

At the end of the course, the student must be able to prove that he/she has acquired the following learning outcomes:

- R1 The student knows the Health-Disease process and the levels of prevention.
- R2 Knows the importance of the podiatrist in Health Education.
- R3 Knows the concept of Epidemiology, its strategies and techniques. Deepens in Statistics.
- R4 Knows the methods of sterilization and disinfection.
- R5 Knows the risks of communicable diseases to which the podiatrist is exposed, as well as the prevention measures against them.
- R6 Knows the risks associated with the diabetic foot.
- R7 Knows preventive measures against podiatric pathologies. Mycosis of skin and nails, plantar warts and others.
- R8 Finds out about prevention measures applied to children and the elderly.
- R9 Students acquire knowledge about occupational health applied to their profession.



Competencies

Depending on the learning outcomes, the competencies to which the subject contributes are (please score from 1 to 4, being 4 the highest score):

BASIC		Weighting			
		1	2	3	4
CB2	Students know how to apply their knowledge to their work or vocation in a professional way and possess the skills that are usually demonstrated through the elaboration and defense of arguments and the resolution of problems within their area of study.				X
CB4	Students convey information, ideas, problems and solutions to both specialized and non-specialized audiences.				X

GENERAL		Weighting			
		1	2	3	4
CG5	Students collaborate with health professionals specifically trained in the field, in the adaptation and use of prostheses and necessary technical aids, according to the physical, psychological and social conditions of the patients.				X
CG11	Students incorporate the ethical and legal principles of the profession into practice, always acting on the basis of compliance with deontological obligations, current legislation and normopraxis criteria, integrating social and community aspects into decision-making		X		

SPECIFIC		Weighting			
		1	2	3	4
CE31	Students know the Spanish Health System and the basic aspects related to the management of health services, mainly those related to chiropody care and rehabilitation.				X



TRANSVERSAL	Weighting			
	1	2	3	4
CT1 Analytical capabilities				X
CT3 Oral and written communication in native language				X
CT7 Problem solving				X
CT8 Decision making				X
CT10 Interdisciplinary teamwork				X
CT14 Critical Reasoning				X
CT15 Ethical commitment				X
CT16 Autonomous learning				X
CT17 Adaptation to new situations				X
CT21 Initiative and entrepreneurship				X
CT22 Motivation for quality		X		



Assessment system for the acquisition of competencies and grading system

Assessed learning outcomes	Granted percentage	Assessment method
	65,00%	Tests
	20,00%	Practice (exercises, case studies, problems)
	10,00%	Written works
	5,00%	Class participation

Observations

All parts of the subject must be tested with 5, to be able to average between them. Maintaining the respective percentages, the evaluation systems set out above can be developed in continuous evaluation mode throughout the semester, informing students in advance and collecting this information on the UCVnet platform of the subject.

MENTION OF DISTINCTION:

In accordance with the regulations governing the assessment and grading of subjects in force at UCV, the distinction of "Matrícula de Honor" (Honours with Distinction) may be awarded to students who have achieved a grade of 9.0 or higher. The number of "Matrículas de Honor" (Honours with Distinction) may not exceed five percent of the students enrolled in the group for the corresponding academic year, unless the number of enrolled students is fewer than 20, in which case a single "Matrícula de Honor" (Honours with Distinction) may be awarded. Exceptionally, these distinctions may be assigned globally across different groups of the same subject. Nevertheless, the total number of distinctions awarded will be the same as if they were assigned by group, but they may be distributed among all students based on a common criterion, regardless of the group to which they belong. The criteria for awarding "Matrícula de Honor" (Honours with Distinction) will be determined according to the guidelines stipulated by the professor responsible for the course, as detailed in the "Observations" section of the evaluation system in the course guide.



Learning activities

The following methodologies will be used so that the students can achieve the learning outcomes of the subject:

- M1 Theoretical classes (TC). Training activity preferably oriented to the acquisition of knowledge skills. It is characterised by the fact that students are spoken to. Also called master class or expository class, it refers to the oral exposition made by the teacher, (with the support of a blackboard, computer and cannon for the exposition of texts, graphics, etc.).
- M2 Seminars (S). Training activity preferably oriented to obtain knowledge application and research competences. Knowledge is built through interaction and activity. Consisting of supervised monographic sessions with shared participation (Teachers, students, experts). The size of the group is variable, from a large group to small groups, no less than 6 students for interaction. The evaluation will be made by means of follow-up records by the teacher. Participation and development of problem-solving skills should be taken into account.
- M3 Problems practice (CPP). Training activity oriented to group work for problem solving under the supervision of a teacher. The size of the group is variable, in a range of 10-20 students, to avoid confusion with a master class.
- M4 Classroom practice (CPA). Training activity of work in groups that is developed in the classroom. It includes work with documents (e.g.: work with articles or documents, clinical case studies, diagnostic analyses, etc). The size of the group is variable, in a range of 10-20 students.
- M5 Computer Practice (CPI). Training activity of work in groups that is developed in the Computer Classroom where the learning is developed using the computer as a support. It includes the work with computer models, specific software, web queries, etc. The size of the group is variable, in a range of 10-20 students.
- M7 Tutorials (T). Set of activities carried out by the teacher with personalised attention to the student or in small groups with the aim of reviewing and discussing the materials and topics presented in the classes, seminars, readings, completion of assignments, etc. The aim is to ensure that education is truly a comprehensive training of the student and is not reduced to a transfer of information. It is, therefore, a personalized relationship of help in which the teacher-tutor attends, facilitates and guides one or more students in the formative process.



- M8 Evaluation (Ev). It is the set of processes that try to evaluate the learning results obtained by the students and expressed in terms of acquired knowledge, capacities, developed skills or abilities and manifested attitudes. It covers a wide range of activities that can be developed for students to demonstrate their training (e.g. written, oral and practical tests, projects or assignments,). It also includes Official Calls.
- M10 Estudio del alumno: Preparación individual de lecturas, ensayos, resolución de problemas, seminarios

IN-CLASS LEARNING ACTIVITIES

	LEARNING OUTCOMES	HOURS	ECTS
Theoretical lessons M1	R1, R2, R3, R4, R5, R6, R7, R8, R9	14,00	0,56
Seminar M3	R1, R5, R6, R7, R8, R9	8,00	0,32
Practice lessons M4	R2, R6, R7, R8, R9	4,00	0,16
Office Hours M7	R1, R2, R3, R4, R5, R6, R7, R8, R9	2,00	0,08
Evaluation M8	R1, R2, R3, R4, R5, R6, R7, R8, R9	2,00	0,08
TOTAL		30,00	1,20

LEARNING ACTIVITIES OF AUTONOMOUS WORK

	LEARNING OUTCOMES	HOURS	ECTS
Autonomous work M7, M10	R1, R2, R3, R4, R5, R6	20,00	0,80
Group work M7, M10	R4, R5, R6	25,00	1,00
TOTAL		45,00	1,80



Description of the contents

Description of the necessary contents to acquire the learning outcomes.

Theoretical contents:

Content block	Contents
Introduction to prevention in Podiatry	Introduction to prevention in Podiatry
Health and sickness. Health Diagnosis. Determinants of health. Methodology.	Introduction Health and sickness Concepts. Determinants of Health health measures Concepts of community, problem, need. Methodology Instruments to measure health
Methodology of a health program.	Description Activities Chores Location Schedule
Prevention applied in geriatric population.	Generalities Podiatric Diseases in Geriatrics Preventive strategies, Prevention 1st, 2nd and 3rd. Health programs
The foot in the early stages of life. Childish	Introduction Major preventable diseases Preventive strategies Disease prevention Child education and promotion
Occupational hazards.	Introduction General risks and preventive disciplines Medical examinations.
Prevention applied in patients at risk Diabetic foot	Prevention applied in patients at risk Diabetic foot
Prevention applied in sport	Introduction Medical factors Sports medical monitoring Other factors
Hygiene and preventive podiatry against nosocomials.	Hygiene and preventive podiatry against nosocomials.
Hygiene against nosocomial diseases	Cleaning and disinfection techniques. Products and hand hygiene Sterilization process



Temporary organization of learning:

Block of content	Number of sessions	Hours
Introduction to prevention in Podiatry	2,00	4,00
Health and sickness. Health Diagnosis. Determinants of health. Methodology.	3,00	6,00
Methodology of a health program.	2,00	4,00
Prevention applied in geriatric population.	2,00	4,00
The foot in the early stages of life. Childish	1,00	2,00
Occupational hazards.	1,00	2,00
Prevention applied in patients at risk Diabetic foot	1,00	2,00
Prevention applied in sport	1,00	2,00
Hygiene and preventive podiatry against nosocomials.	1,00	2,00
Hygiene against nosocomial diseases	1,00	2,00



References

Hernández Aguado I. Manual de Epidemiología Y Salud Pública?: Para Grados En Ciencias de La Salud. Médica Panamericana; 2011.

Camacho M, Bibiana D. Pasos para realizar un programa de salud ocupacional.

García A, Vera M, Campo A. Enfermería Comunitaria: bases teóricas. Madrid Difusión Av Enfermería. 2001.

Galv R, Gonz AI, Titular P, CI C. Prevención de las infecciones en el pie. 2010;(6):247-252.

La´zaro Marti´nez JL, Arago´n Sa´nchez FJ. Atlas de Manejo Práctico Del Pie Diabético. [s.n.]; 2004.

Doctor A, Ciencias F De, Salud D, et al. Actitudes Posturales de la extremidad inferior en los escolares durante las clases : Estudio Observacional.

Ramos Galv.n J, Tovaruela Carri.n N, L.pez L.pez D, Gonz.lez Elena ML. Estrategias para promocionar la salud podol.gica, despu.s de 10 a.os. Aten Primaria. 2016;48(1):67-68. doi:10.1016/j.aprim.2014.12.013.

Rodríguez-Marín J (1999). La Psicología de la Salud en la España actual. En : Simón, M.A (Eds). Manual de Psicología de la Salud. Fundamentos, Metodología y Aplicaciones, (pp. 177-216).. Madrid: Biblioteca Nueva S.L.

Vileikyte L, González JS (2008). Aspectos Psicosociales de las Complicaciones del Pie Diabético. En M.E. Levin L.W. & O´Neal (Eds). El Pie Diabético. (pp.589 - 598).. Barcelona: Elsevier.

Lipner SR, Scher RK. Onychomycosis: Treatment and prevention of recurrence. J Am Acad Dermatol. 2019 Apr;80(4):853-867.

Rodríguez-Molinero A, Narvaiza L, Ga´lvez-Barro´n C, de la Cruz JJ, Rui´z J, Gonzalo N, et al. Caídas en la poblacio´n anciana espanola: incidencia, consecuencias y factores de riesgo. Rev Esp Geriatr Gerontol. 2015; 50(6):274-80.

Oh-park M, Kirschner J, Abdelshahed D, Kim DDJ. Painful Foot Disorders in the Geriatric Population A Narrative Review. 2019;98(9):811–9.

Cranage S, Perraton L, Bowles KA, Williams C. The impact of shoe flexibility on gait, pressure and muscle activity of young children. A systematic review. J Foot Ankle. <https://pubmed.ncbi.nlm.nih.gov/31798689/>