



Medical Doctorate (M.D.) Degree Program and Courses Specifications for Ear, Nose & Throat surgery.

(According to currently applied Credit point bylaws)

Ear , Nose and Throat
surgery
Faculty of medicine
Assiut University
2022-2023

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Assiut University Faculty of Medicine Quality Assurance Unit (QAU)

M. D. degree of Ear , Nose & Throat Surgery

A. Basic Information

- Program Title: M.D. degree of Ear , Nose & Throat Surgery.
- Nature of the program: Single.
- Responsible Department: Department of E.N.T. Surgery Faculty of Medicine- Assiut University.
- Program Academic Director (Head of the Department):
 - Prof.: Ahmed Abo El wafa.
- Coordinator (s):
 - Principle coordinator: Prof.Dr. Hussein Farid Mostafa Wishahi
 - Assistant coordinator (s): Prof.Dr: Ahmed Abo El wafa.
- Internal evaluators: Prof. Dr: Mahmoud Ragib Alsherief
- **♣** External evaluator: Prof. Dr: Abdl mateen Mosa

 Prof. of Otolaryngology head and neck surgery , South Vally

 University).
- Date of Approval by the Faculty of Medicine Council of Assiut University: 23-9-2014
- **♣** Date of most recent approval of program specification by the Faculty of Medicine Council of Assiut University: 27/11/2022
- **Total number of courses:** 6 courses + 2 Elective courses.

B. Professional Information

1- Program aims

- I/1- To enable candidates to keep with international standards of ENT patients care by teaching high level of clinical skills, bedside care skills, in addition to update medical knowledge as well as clinical experience and competence in the area of Ear Nose-Throat surgery in addition to surgical skills for emergency and all elective surgical procedures.
- I/2- Provide candidates with fundamental knowledge of Ear Nose- Throat surgery as regards; dealing with critically ill ENT patients, ENT equipments, techniques, indications, contraindications and training skills of different surgical techniques.
- 1/3 To enable candidates to perform high standard scien fic medical research and how to proceed with publication in indexed medical journals.
- 1/4 To enable candidates to describe the basic ethical and medicolegal principles relevant to Ear Nose- Throat surgery 1/5 To enable candidates to have professional careers as a consultant in Egypt but recognized abroad.
- 1/6To enable candidates to con nue self learning in subspecialties.
- 1/7 To enable candidates to master different research methodology and do their own.

2-Intended learning outcomes (ILOs) for the whole program:

2/1Knowledge and understanding:

- A. Demonstrate in-depth knowledge and understanding of theories, basics and updated biomedical, clinical epidemiological and socio behavioral science relevant to his speciality as well as the evidence based application of this knowledge to ENT patient care.
- B. Explain basics, methodology, tools and ethics of scientific medical, clinical research.
- C. Mention ethical, medico logical principles and bylaws relevant to his practice in the field of Otolaryngology head and neck surgery.
- D. Mention principles and measurements of quality assurance and quality improvement in medical education and in clinical practice of Ear Nose- Throat surgery.
- E. Mention health care system, public health and health policy, issues relevant to this speciality and principles and methods of system based improvement of patient care in common health problems of the field of Ear Nose- Throat surgery.

2/2 Intellectual outcomes

Apply the basic and clinically supportive sciences which are appropriate to Ear – Nose- Throat surgery related conditions, problem, and topics.

- A. Demonstrate an investigatory and analytic thinking "problem solving "approaches to clinical situation related to Ear Nose- Throat surgery.
- B. Plain research projects.
- C. Write scientific papers.
- D. Participate in clinical risk management as a part of clinical governance.
- E. Plan for quality improvement in the field of medical education and clinical practice in Ear Nose- Throat

surgery.

- F. Create / innovate plans, systems, and other issues for improvement of performance in his practice.
- G. Present and defend his / her data in front of a panel of experts.
- H. Formulate management plans and alternative decisions in different situations in the field of Ear Nose-Throat surgery.

2/3 Skills

2/3/1 Practical skills (Patient Care)

- A. Provide extensive level of patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.
- p.s. Extensive level means in-depth understanding from basic science to evidence based clinical application and possession of skills to manage independently all problems in field of Ear Nose- Throat surgery.
- B. Provide extensive level of patient care for patients with all common diagnoses and for uncomplicated procedures related to Ear Nose- Throat surgery.
- C. Provide extensive level of patient care for non-routine, complicated patients and under increasingly difficult circumstances, while demonstrating compassionate, appropriate and effective care.
- D. Perform diagnostic and therapeutic procedures considered essential in the field of Ear Nose- Throat surgery.
- E. handles unexpected complications, while demonstrating compassion and sensitivity to patient needs and concerns.
- F. Communicate effectively and demonstrate caring and respectful behaviors when interacting with patients and their families in Ear Nose- Throat surgery related situations.
- G, Gather essential and accurate information about patients of Ear Nose- Throat surgery related conditions.
- H. Make informed decisions about diagnostic and therapeutic

interventions based on patient information and preferences, upto-date scientific evidence and clinical judgment for Ear – Nose- Throat surgery related conditions.

- I. Develop and carry out patient management plans for Ear Nose- Throat surgery related conditions.
- J. Counsel and educate patients and their families about Ear Nose- Throat surgery related conditions.
- K. Use information technology to support patient care decisions and patient education in all Ear Nose- Throat surgery related clinical situations.
- L. Perform competently all medical and invasive procedures considered essential for Ear Nose- Throat surgery related conditions / area of practices.
- M. Provide health care services aimed at preventing Ear Nose- Throat surgery related health problems.
- N. Lead health care professionals, including those from other disciplines, to provide patient-focused care in Ear Nose-Throat surgery related conditions.
- S. Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets. (Write and evaluate a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and evaluating comprehensive, timely and legible medical records).

2/3/2 General skills

Including:

- Practice-based Learning and Improvement
- Interpersonal and Communication Skills
- Professionalism
- Systems-based Practice

Practice-Based Learning and Improvement

A. Demonstrate the competency of continuous evaluation of different types of care provision to patients in the different area of Ear – Nose- Throat surgery.

B. Appraise scientific evidence.

- C. Continuously improve patient care based on constant self-evaluation and life-long learning.
- D. Participate in clinical audit and research projects.
- E. Practice skills of evidence-based Medicine (EBM).
- F. Educate and evaluate students, residents and other health professionals.
- G. Design logbooks.
- H. Design clinical guidelines and standard protocols of management.
- I. Appraise evidence from scientific studies related to the patients' health problems.
- J. Apply knowledge of study designs and statistical methods to the appraisal of clinical studies.
- K. Use information technology to manage information, access on-line medical information; for the important topics.

Interpersonal and Communication Skills

- N. Master interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals, including:-
- Present a case.
- Write a consultation note.
- Inform patients of a diagnosis and therapeutic plan completing and maintaining comprehensive.
- Timely and legible medical records.
- Teamwork skills.
- O. Create and sustain a therapeutic and ethically sound relationship with patients.
- P. Elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills.
- Q. Work effectively with others as a member or leader of a health care team or other professional group.

Professionalism

R. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society.

- S. Demonstrate a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices.
- T. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities.

Systems-Based Practice

- U. Work effectively in health care delivery settings and systems related to Ear Nose- Throat surgery including good administrative and time management.
- V. Practice cost-effective health care and resource allocation that does not compromise quality of care.
- W. Advocate for quality patient care and assist patients in dealing with system complexities.
- X. Design, monitor and evaluate specification of under and post graduate course and programs.
- Y. Act as a chair man for scientific meetings including time management.

3- Program Academic Reference Standards (ARS) (Annex 2)

Academic standards for Medical Doctorate (MD) degree in Ear, Nose & Throat Surgery

Assiut Faculty of Medicine developed MD degree programs' academic standards for different clinical specialties.

In preparing these standards, the General Academic Reference Standards for post graduate programs (GARS) were adopted. These standards set out the graduate attributes and academic characteristics that are expected to be achieved by the end of the program.

These standards were approved by the faculty council on 20/3/2010. These standards were revised and approved without changes by the Faculty Council on 23-9-2014.

These standards were re-revised and approved without changes by the Faculty Council on 27-11-2022

4- Program External References (Benchmarks)

- 1. ACGME (Accreditation Council for Graduate Medical Education).
- 2. (EBERHARD KARLS University www.uni-tuebingen.de.).

5- Program Structure

A. Duration of program: 4-6 years

B. Structure of the program:

Total number of credit points: = 420 CP

Master degree: 180 credit point

Didactic #: 37 (23.1%), practical 123 (76.9%), total 160 CP

Thesis and researches: 80 CP (33.3%)

First part

Didactic 10 (100%), practical 0 (0 %), total 10 CP

Second part

Didactic 24, (16.3 %), practical 123 (83.7 %), total 147 CP

Elective courses: 3 credit points

#Didactic (lectures, seminars, tutorial)

According the currently applied bylaws:

Total courses: 160 credit point

Compulsory courses: 157 credit point (98.1%)

Elective courses: 3 credit point (1.9%)

	Credit point	% from total
Basic science courses	10	4.1%
Humanity and social courses	3	1.2%
Speciality courses	147	61.3%
Others (Computer,)	-	0
Field training	123	51.3%
Thesis	40	16.7%
2 published researches	40	16.7%
Master degree		180

C- Program Time Table

Duration of program 4 years divided into

o Part 1

Program-related Basic science courses

Program-related Basic science courses

- Medical statistic
- Research methodology
- Medicolegal Aspects and Ethics in Medical Practice and Scientific Research

Students are allowed to sit the exams of these courses after 6 months from applying to the M D degree.

Students are allowed to sit the exams of the remaining Basic science courses after 12 months from applying to the MD degree.

Thesis and 2 published researches

For the M D thesis;

MD thesis subject should be officially registered within 1 year from application to the MD degree,
Discussion and acceptance of the thesis should not be set before 24 months from registering the M D subject;
It could be discussed and accepted either before or after passing the second part of examination

o Part 2

Program –related specialized science courses and ILOs Students are not allowed to sit the exams of these courses before 4 years from applying to the MD degree.

Two elective courses can be set during either the 1st or 2nd parts.

The students pass if they get 50% from the written exams and 60% from oral exams, 60% from clinical exams of each course and 60% of summation of the written exams, oral and clinical exams of each course

Total degrees 1700 marks.

500 marks for first part 1200 for second part Written exam 40% - 70%. Clinical and oral exams 30% - 60%.

D- Curriculum Structure: (Courses):

Levels and courses of the program:

Courses and student work load	Course			
list	Code	Didactic #	training	total
First Part				
Basic science courses (10 CP)				
Course 1: Medical Statistics	FAC309A	1		1
Course 2: Research	FAC309B	1		1
Methodology	FAC310C	1		1
Course 3: Medicolegal Aspects				
& Ethics in Medical Practice and				
Scientific Research				
Course 4: Anatomy	ENT330A	3.5	-	3.5
Course 5:pathology.	ENT330B	3.5	-	3.5
Elective courses*	3 CP			
- Elective course 1		1.5		1.5
- Elective course 2		1.5		1.5
Thesis	40 CP			
Published researches**	40 CP			
Second Part	Speciality co			
	Speciality Cli	nical Work (l	og Book) 12	23 CP
Speciality Courses				
Course 6: Ear, Nose and	ENT330C	24		24
Throat(E.N.T) Surgery:				
Unit 1 : Otology & Neurotology.				
Unit 2: Rhinology.				
Unit 3:				
Laryngotracheobronchology.				
Unit 4,5: Pharyngoesophageal ,				
Head and neck surgery.		100		100
Speciality Clinical Work (123	ENT326B	123		123
CP)		0.4	400	4.4=
Total of second part		24	123	147

• Units of Speciality course

	%		Core Credit points		
	from	Level			
Units' Titles' list	total	(Year)	Didactic	Training	Total
	Marks				
*Unit 1 : Otology	32%	1,2,3,4	7.3	37(11+11+11+4)	44.3
&Neurotology.					
Unit 2: Rhinology.	17%	1,2,3,4	3.8	19.5(6+6+6+1.5)	23.3
Unit3:					
Laryngotracheal	17%	1,2,3,4	3.8	19.5(6+6+6+1.5)	23.3
surgery.		, ,-,		,	
*Unit 4:					
Pharyngoesophageal	17%	1,2,3,4	3.8	19.5(6+6+6+1.5)	23.3
surgery.					
*Unit 5:Head and	17%	1,2,3,4	3.8	19.5(6+6+6+1.5)	23.3
neck surgery.	,,	_,_,_,	2.3		
Total No. of Units(5	100	4	22.5+1.5#=24	115+8#=123	147
units)					

#Didactic (lectures, seminars, tutorial)

Work load hours are scheduled depending on the type of activities and targeted competences and skills in different courses

^{*} Elective courses can be taken during either the 1st or 2nd parts. **Student work load calculation:**

Elective Courses#:

- Advanced medical statistics.
- Evidence based medicine.
- Advanced infection control.
- Quality assurance of medical education.
- Quality assurance of clinical practice.
- o -Hospital management

Two of the above mentioned courses are prerequisites for fulfillment of the degree.

3. Thesis / Researches:

40 CP are appointed to the completion and acceptance of the thesis.

**Another 40 points are appointed to acceptance or publication of one research from the thesis in international indexed medical journals or publication of 2 researches from the thesis in local specialized medical journals.

6. Courses Contents (Annex 1)

The competency based objectives for each course/module/rotation are specified in conjunction with teaching/training methods, requirements for achieving these objectives and assessment methods.

See Annex 1 for detailed specifications for each course/ module

Annex 6 II: Program Matrix

7-Admission requirements

- Admission Requirements (prerequisites) if any :
 - I. General Requirements:
 - Master degree in the speciality.
 - **II. Specific Requirements:**
 - Fluent in English (study language)

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VACATIONS AND STUDY LEAVE

The current departmental policy is to give working residents 3 weeks leave prior to first/ second part exams.

FEES:

As regulated by the postgraduate studies rules and approved by the faculty vice dean of post graduate studies and the faculty and university councils.

8-Progression and completion requirements

- ♣ Examinations of the first part (Medical statistic, Research methodology and Medicolegal Aspects and Ethics in Medical Practice and Scientific Research) could be set at 6 months from registering to the MD degree.
- ♣ Students are allowed to sit the exams of the remaining Basic science courses of the first part after 12 months from applying to the MD degree.
- Examination of the second part cannot be set before 4 years from registering to the degree.
- ♣ Discussion of the MD thesis could be set after 2 years from officially registering the MD subject, either before or after setting the second part exams.
- ♣ The minimum duration of the program is 4 years.

The students are offered the degree when:

- 1. Passing the exams of all essential, elective and specialized courses of this program as regulated by the post graduates approved rules by the faculty council.
- 2. Completing all scheduled CP and log book (minimum 80%).
- 3. Discussion and acceptance of the MD thesis.
- 4. Acceptance or publication of one research from the thesis in international indexed medical journals or publication of 2 researches from the thesis in local specialized medical journals.

9-Program assessment methods and rules (Annex IV)

Method	ILOs measured
Written examinations:	K & I
Structured essay questions	
Objective questions:	
MCQ	
Problem solving	
Clinical:	K ,I, P &G skills
Long/short cases	
OSCE	
Structured oral	K ,I &G skills
Logbook assessment	All
Research assignment	I &G skills

Weighting of assessments:

Courses			Degree	es	
First Dart	Course	Written	Oral an	id/or	Total
First Part	Code	Exam	Practical	Practical Exam	
Basic science courses:					
1) Course 1: Medical Statistics	FAC309A	35	15	-	50
2) Course 2: Research Methodology	FAC309B	35	15	-	50
3)Course 3Medicolegal Aspects and Ethics in Medical Practice and Scientific Research	FAC310C	35	15	-	50
4)Course 4: Anatomy 5)Course 5: Pathology	ENT330A ENT330B	100 100	75 75	- -	175 175
Total		355	145	-	500
	Second Pa	art			
	Course code	written	oral and operative Exam	clinical	Total
Speciality Courses:					
Course 6: Ear, Nose and Throat (E.N.T) surgery: Unit (1-5) 4 papers	ENT330A	480(120 for each paper)	240	480	1200
Total of the second part		480	240	480	1200
Elective course 1		50	50	-	100
Elective course 2		50	50	-	100

^{* 25%} of the oral exam for assessment of logbook

Total degree 1700

500 marks for first part

1200 for second part

Written exam 41.3% (500 marks).

Clinical /practical and oral exams 58.7% (700 marks

Elective courses 200

Lesson Examination system:

> First part:

- Written exam 2 hours in Medical Statistics and Research Methodology + oral examination
- Written exam 1 hours in Medicolegal Aspects and Ethics in Medical Practice and Scientific Research + oral examination
- Written exam 3 hours in E.NT Anatomy& Pathology + oral exam

> Second part:

Written exam four papers 3 hours for each in E.N.T.
 Surgery+ Oral exam+ Clinical/Practical exam

> Elective courses

- Written exam one paper 1 hour in Elective course 1 + Oral & Practical exam
- Written exam one paper 1 hour in Elective course 2 + Oral & Practical exam

10-Program evaluation

By whom	Method	sample
Quality Assurance Unit	Reports	#
	Field visits	
External Evaluator (s):According	Reports	#
to department council	Field visits	
External Examiner (s): According		
to department council		
Stakeholders	Reports	#
	Field visits	
	Questionnaires	
Senior students	Questionnaires	#
Alumni	Questionnaires	#

#Annex 5 contains evaluation templates and reports (Joined in the departmental folder).

11-Declaration

We certify that all of the information required to deliver this program is contained in the above specification and will be implemented. All course specifications for this program are in place.

Contributor	Name	Signature	Date
Program Principle Coordinator:	Prof.Dr. Fareid Hessein ElWeshay		
 Head of the Responsible Department (Program Academic Director): 	Prof.Dr. Ahmad Abo-Alwafa		

Annex 1, Specifications for Courses / Modules

Annex 1: specifications for courses/ modules

First Part

- 1) Course 1: Medical Statistics
- 2) Course 2: Research Methodology
- 3) Course 3: Medicolegal Aspects and Ethics in Medical Practice and Scientific Research
- 4) Course 4: Anatomy

Course 5: Pathology.

Course 1: Medical statistics

Name of department: Public Health and Community Medicine
Faculty of medicine
Assiut University
2022-2023

1. Course data

- Course Title: Medical statistics
- Course code: FAC309A
- ♣ Specialty: offered to all clinical and academic specialties
- Number of credit points: 1 credit point
- ♣ Department (s) delivering the course: Pubic Health and Community Medicine
- Coordinator (s):
 - Course coordinator: Prof. Farag Mohammed Moftah
 - Assistant coordinator (s):

Prof. Medhat Araby Khalil Saleh

- Date last reviewed: January -2022
- Requirements (pre-requisites) if any:
 - Completed Master degree in any of the academic or clinical departments of Medicine.

2. Course Aims

Enable gradute students to use statistical principles to improve their professional work and develop the concept of critical interpretation of data

3. Intended learning outcomes (ILOs):To be able to use statistical principals to manage data

A knowledge and understanding

ILOS	Methods of	Methods of
	teaching/	Evaluation
	learning	
A. List the types of variables	Lecture and	Written
, ,	discussion	examination
B. Identify the methods of data collection	Lecture and	Written
,	discussion	examination
C. Describe the different sampling	Lecture and	Written
strategies	discussion	examination
D. Identify types of tabular and graphic	Lecture and	Written
presentation of data	discussion	examination
E. Identify measures of central tendency	Lecture and	Written
and dispersion	discussion	examination
F. Identify the characters of normal	Lecture and	Written
distribution curve.	discussion	examination
G. Detect the difference between	Lecture and	Written
parametric and non-parametric tests	discussion	examination
H. Identify the concepts of correlation and	Lecture and	Written
regression	discussion	examination

B. intellectual

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Describe the normal curves.	Lecture& Discussions	Written examination
B. Describe and summarize data	Lecture& Discussions	Written examination
C. Select the proper test of significance	Lecture& Discussions	Written examination
D. Interpret the proper test of significance	Lecture& Discussions	Written examination
E. Describe the difference between parametric and non-parametric tests	Lecture& Discussions	Written examination

C. Practical skills

ILOs Methods of Method		
1203	teaching/	Evaluation
	learning	Lvaidation
		A :
A. Design data entry files.	Tutorial on	Assignments
,	SPSS	SPSS exam
B. Validate data entry.	Tutorial on	Assignments
and the same and the same of t	SPSS	SPSS exam
C. Manage data files.	Tutorial on	Assignments
e. Manage data mes.	SPSS	SPSS exam
D. Construct tables and graphs.	Tutorial on	Assignments
D. Construct tables and graphs.	SPSS	SPSS exam
E. Calculate measures of central	Tutorial on	Assignments
tendency and dispersion.	SPSS	SPSS exam
F. Select, apply and interpret the	Tutorial on	Assignments
proper test of significance.	SPSS	SPSS exam

D general skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Appraise scientific evidence	Discussions	Research assignment
B. Use information technology to manage information, access on-line medical information; for the important topics.	tutorial	Research and audits' assignment

4. Course contents (topic s/modules/rotation Course Matrix

Time Schedule: First Part

Topic	Covered ILOs			
	Knowledge A	Intellectual B	Practical skills C	General Skills D
Introduction	A-F	A-D	-	A&B
Tables and graphics	D	A-D	-	A&B
Sampling	С	-	-	A&B
Methodology of data collection	В	-	-	A&B
Type of variables	A	-	-	A&B
Proportion test& Chi-square test	E,F	C&D	-	A&B
Student T test& Paired T test	E,F	C&D	F	A&B
ANOVA test	E,F	C&D	F	A&B
Non parametric tests	E,F	C&D	F	A&B
Discrimination analysis factor analysis	E,F	C&D	-	A&B
SPSS Introduction	A-F	A-D	-	A&B
Data entry and cleaning of data	A	A-D	A-C	A&B
Transforming of variables	A	A&B	A-C	A&B
Descriptive statistics	D	A-D	D&E	A&B
Graphic presentation	D	A&B	D	A&B
Chi square and interpretation of results	E,F	C&D	F	A&B
Correlation Regression	E,F	C&D	F	A&B
Multiple and logistic Regression	E,F	C&D	F	A&B

5. Course Methods of teaching/learning

- 1. Lectures
- 2. Assignments
- 3. Discussions
- 4. Exercises
- 5. Tutorial on SPSS v.16

6. Course assessment methods:

i. Assessment tools:

- 1. Attendance and active participation
- 2. Assignment
- 3. Practical SPSS examination
- 4. Written exam
- **ii. Time schedule:** After 6 months from applying to the M D degree.
- iii. Marks: 50 (35 for written exam and 15 for practical exam).

7. List of references

i. Lectures notes

Department lecture notes

ii. Essential books

- Medical Statistics: Book by Ramakrishna HK 2016
 - Janet Peacock and Philip Peacock. Oxford Handbook of Medical Statistics (second edition.) Publisher: Oxford University Press, Print Publication Date: Nov 2010 Print ISBN-13: 9780199551286, Published online: Jun 2011. DOI: 10.1093/med/9780199551286.001.0001
- Leslie E. Daly MSc, PhD, Hon MFPHM,, Geoffrey J. Bourke MA, MD, FRCPI, FFPHM, FFPHMI, Interpretation and Uses of Medical Statistics, Fifth Edition, First published:1 January 2000, Print ISBN:9780632047635 |Online ISBN:9780470696750 |DOI:10.1002/9780470696750
- Marcello Pagano, Kimberlee Gauvreau: Principles of Biostatistics second edition published in 2000 by Brooks/Cole and then Cengage Learning. CRC Press, Feb 19, 2018 - Mathematics - 584 pages.

Iii- Recommended books

- Ji-Qian Fang (Sun Yat-Sen University, China) Handbook of Medical Statistics: https://doi.org/10.1142/10259 | September 2017.Pages: 852
- Robert H. Riffenburgh: Statistics in Medicine 4th Edition (2020). EvidenceEvidence Based Medicine How to practice and teach EBM.
- Discovering Statistics Using IBM SPSS Book by Andy Field, 2013.

iii. Periodicals, Web sites, etc

- iv. Periodicals, etc Statistics in Medicine Wiley Online Library
- v. **Web sites** https://www.phc.ox.ac.uk/research/medical-statistics

8. Signatures

Course Coordinator:	Head of the Department:
 Farag Mohammed Moftah 	- Prof. Eman Morsy
	Mohamed
Date: 10-1-2022	Date: 10-1-2022
Associated Coordinator:	
Prof. Medhat Araby Khalil Saleh	
Date : 10-1-2022	

Course 2: Research Methodology

Name of department: Public Health and Community Medicine
Faculty of medicine
Assiut University
2021-2022

1. Course data

- Course Title: Research methodology
- Course code: FAC309B
- Specialty: Offered to all clinical and academic specialties
- Number of credit points: 1 credit point
- Department (s) delivering the course: Department of public health
- Coordinator (s):
 - Course coordinator: Prof. Mahmoud Attia

Assistant coordinator (s): Prof. Ekram Mohamed

- Prof. Medhat Araby Khalil
- **♣ Date last reviewed:** January 2022
- Requirements (prerequisites) if any:
 - Completed Master degree in any of the academic or clinical departments of Medicine.

2. Course Aims

To provide graduate students with the skills of:

- planning and implementing sound research
- writing a scientific research proposal

3. Intended learning outcomes (ILOs)

A knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Explain differences between different	Lecture and	Written exam
study designs.	discussion	Log book
	Practical sessions	assignments
	Workshops	Practical exam
B. Identify sources and types of bias in	Lecture and	Written exam
research.	discussion	Log book
	Practical sessions	assignments
		Practical exam
C. Identify methods of data collection.	Lecture and	Written exam
	discussion	Log book
	Practical sessions	assignments
D. Select and design valid measurement	Lecture and	Written exam
tools for research.	discussion	Log book
	Practical sessions	assignments
	Workshops	Practical exam
E. Explain ethical issues in conducting	Lecture and	Written exam
research on human subjects.	discussion	Log book
	Practical sessions	assignments
	Workshops	
F. List the steps involved in proposal	Lecture and	Written exam
writing.	discussion	Log book
	Practical sessions	assignments
	Workshops	Practical exam
G. Identify a research problem within a	Lecture	Written exam
conceptual framework.	Discussion	Log book
Conceptual Trainework.		assignments

		Practical exam	
H. Use the web sources to do a literature	Practical tutorial on	Log book	
search	web	assignment	
I. Describe the rules of authorship in	Lecture and	Written exam	
scientific writing.	discussion	Log book	
	Practical sessions	assignments	
	Workshops		
J. Select the appropriate study design for	Lecture	Written exam	
the research question.	Practical sessions	Practical exam	
K. Minimize bias in designing research.	Lecture	Written exam	
L. Screening & theoretical background	Lectures	Written exam	
L. Screening & theoretical background		Practical exam	
M. Mention the basic ethics for conducting a	lectures	Written exam	
research and medicolegal principles relevant	seminar	Practical	
to data confidentiality.		exam	

B. intellectual

Competency and Skills	Methods of	Methods of
	teaching/	Evaluation
	learning	
A-Apply basic science & knowledge for	Discussions	Written exam
appraising scientific literature.	&seminars	Practical exam
B- Design research and present study data,	lecture	log book
in seminars.	seminar	assignments
C- Design suitable epidemiological study.	lecture	log book
	seminar	assignments
D-Design strategies for resolving ethical	lecture	Written exam
concerns in research, law, and regulations.	Workshops	log book
		assignments
E- Apply coherently synthesize ideas and	lecture	log book
integrate lateral and vertical thinking.	Workshops	assignments
F- Evaluate screening tests and interpreting	lecture	Written exam
their uses in different population.		Practical exam

C. Practical skills

Competency and	Methods of	Methods of
Skills	teaching/ learning	Evaluation
A- Conduct epidemiological studies, screening	lectures	written exam
and surveys.	seminar	log book
		assignments
B- Identify steps required in fielding the study.	Lecture	Assignments
		Written exam
C- Managing data collection team.	lectures	log book
	seminar	assignments
D- Identify steps required for calculation	Lecture	Assignments
sensitivity, specificity, positive predictive	Practical	Written exam
value, negative predictive value, accuracy of	sessions	Practical exam
a screening test.		
E- Be able to define and apply the	Lecture	Assignments
epidemiologic criteria of causality and be	Practical	Written exam
able to distinguish between a measure of	sessions	Practical exam
association and evidence of causality.		
F- Synthesize information from multiple	Lecture	Assignments
sources for research writing and the ability	Practical	Written exam
to perform paper critique.	sessions	Practical exam
G- Identify bias and confounding in	Lecture	Assignments
epidemiological study designs, their types	Practical	Written exam
and ways to control them in various types of	sessions	Practical exam
biases.		

D General skills

Practice-Based	Learning and Improvement			

ILOs	Methods of teaching/ learning	Methods of Evaluation
A- Scientific paper and proposal writing skills: be able to write an introduction, objectives and the methodological section.	Tutorial	Written examination
B- Learn authorship ethical rules.	Tutorial	Written examination
C- Perform practice-based improvement activities using a systematic methodology (audit, logbook, critical appraisal)	Lectures-Practicalsessions- Discussion- Readings	critical appraisal
D- Appraise evidence from scientific studies(journal club)	- Lectures -Practical sessions - Discussion - Readings	critical appraisal
E- Conduct epidemiological studies, screening and surveys.	- Lectures -Practical sessions - Discussion - Readings	attendance and participation
F- Facilitate training of junior students and other health care professionals in different screening activities.	Field work Participation in projects	attendance and participation

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
G- Maintain ethically sound relationship with	- Lectures	Written
community members.	-Practical sessions	exams
	- Discussion	
	- Readings	
H- Provide information using effective nonverbal,	- Lectures	Written
explanatory, questioning, and writing skills.	-Practical sessions	exams
	- Discussion	Practical
	- Readings	exams
I- Present results of researches in seminars.	- Lectures	Log book
	-Practical sessions	assignments
	- Discussion	
	- Readings	

Professionalism

ILOs	Methods of teaching/ learning	Methods of Evaluation
J- Demonstrate respect, compassion, and integrity to the needs of society.	LecturesDiscussionReadings	Written exams
K- Manage potential conflicts of interest encountered by practitioners, researchers, and organizations.	LecturesDiscussionReadings	Written exams
L- Design strategies for resolving ethical concerns in research, law, and regulations.	Lectures - Discussion - Readings	Written exams Practical exams
M- Demonstrate ways to control for confounding in the analysis phase of a study	Lectures - Discussion - Readings	Written exams Practical exams
N- Demonstrate a commitment to ethical principles including confidentiality of participants' information and informed consent.	Lectures - Discussion - Readings	Written exams
O- Assess ethical considerations in developing communications and promotional initiatives.	LecturesDiscussionReadings	Written exams

4. Course contents (topic s/modules/rotation Course Matrix

Time Schedule: First Part

Topic	Covered ILOs			
	Knowledge	Intellectual	Practical	General
			skills	Skills
	\mathbf{A}	В	C	D
Over view on research	A&E	A-D	A-C	C-G,
conduction and research				I,L&M-O
ethics				
How to write a research	F,I	Е	F	A-C&H
proposal				
Observational study design	A& D	B & C	D	E & F
Experimental study design	A& D	B & C	В	E & F
Evaluation of diagnostic tests	L	A	B& E	F
(Screening)				
Systematic reviews and meta	G, H & M	E& F	F	C, D
analysis				
Confounding, bias & effect	B & K	D	E & G	M
modification				

5. Course Methods of teaching/learning:

- 1. Lectures
- 2. Assignments
- 3. Discussion
- 4. Exercises

6. Course assessment methods:

i. Assessment tools:

- 1. Attendance and participation
- 2. Log book assignments
- 3. Written examination
- 4. Practical examination

ii. Time schedule: After 6 months from applying to the M D degree.

iii. Marks: 50 (35 for written exam and 15 for practical exam).

7. List of references

i. Lectures notes

Department lecture notes

ii. Essential books

- Research Design: Qualitative, Quantitative and Mixed Methods Approaches 4th Edition by John W. CreswellSAGE Publications, Inc; 4th edition (January 1, 2014)
- Research methodology: A step by step Guide for Beginners. Ranjit Kumar, 2020. Second edition https://books.google.com.eg/books?
- Medical Research Essentials Rania Esteitie, McGraw Hill Professional, third edition, Feb 5, 2014 - Medical - 104 pages
- Research Methodology in the Medical and Biological Sciences Petter Laake, Haakon Breien Benestad, Bjorn R. Reino Olsen, 4th edition, Academic Press, Nov 5, 2007 - Science - 512 pages

iv. Recommended books

- Research Methods in Education 7th Edition, by Louis Cohen, Lawrence Manion, Keith Morrison Publisher: Routledge; (April 22, 2011) www.routledge.com/textbooks/cohen7e.
- Research Methodology: A Practical and Scientific Approach Vinayak Bairagi, Mousami V. Munot · 2019, Research Methodology: A Practical and Scientific Approach - Google Books
- Based Medicine How to practice and teach EBM. David Sachett, Sharon E. Straus, W. Scott Richardson, William Rosenberg R.Brain Haynes
- Dissertation workshop open courseware JHSPH

8. Signatures

Course Coordinator:	Head of the Department:
Prof.Mahmoud Attia	Prof. Eman Morsy Mohamed
Date: 10-1-2022	Date: 10-1-2022

Ethics in Medical Practice and Scientific Research

Name of department:
Forensic medicine and clinical toxicology
Faculty of medicine
Assiut University
2022-2023

1. Course data

- Course Title: Medicolegal Aspects and Ethics in Medical Practice and Scientific Research
- Course code: FAC310C
- Speciality:General and special surgery (1st part), and Radiology
- ♣ Number of credit points: 1 credit point
- ♣ Department (s) delivering the course: Forensic Medicine and Clinical Toxicology
- Coordinator (s):
- Course coordinator: Prof. Ghada Omeran
- Date last reviewed: 6– 2022
- Requirements (prerequisites) if any :
 - > Completed Master degree

2. Course Aims

To describe the basic ethical and medicolegal principles and bylaws relevant to practice in the field of General and special surgery Rheumatology

3. Intended learning outcomes (ILOs):

A. knowledge and understanding

Competency and Skills	Methods of teaching/ learning	Methods of Evaluation
A. Mention principals of writing consent forms.	Lecture and discussion	Written & oral exam
B. Mention principals of Writing a death certificate	Lecture and discussion	Written & oral exam
C. Explain principals of medical reports.	Lecture and discussion	Written & oral exam
D. Mention principals of Dealing with wounds.	Lecture and discussion	Written & oral exam
E. Mention principals of firearm injuries.	Lecture and discussion	Written & oral exam
F. List indications of induced emesis, gastric lavage and samples collection.	Lecture and discussion	Written & oral exam

B. Intellectual

Competency and Skills	Methods of teaching/ learning	Methods of Evaluation
A. Design and present case, seminars in death certificate	Lecture and discussion	Written & oral exam
B. Design and present case, seminars in toxicological cases	Lecture and discussion	Written & oral exam

C. Practical skills

Competency and Skills	Methods of teaching/ learning	Methods of Evaluation
A. Identify medical ethics and ethics in research.	Lecture and discussion	Discussion
B. Prepare and write consent.	Lecture and discussion	Discussion
C. Identify medical responsibilities.	Lecture and discussion	Discussion
D. Write death certificate.	Lecture and discussion	Discussion and active participation
E. Deal with a case of Suspicious death	Lecture and discussion	Discussion and active participation
F. Write medical reports	Lecture and discussion	Discussion and active participation
G. Identify types of wounds and deal with them.	Lecture and discussion	Discussion and active

		participation
H. Identify types, distance and direction of firearm wounds and deal with them	Lecture and discussion	Discussion and active participation
I. Elicit death associated with surgical anesthesia.	Lecture and discussion	Discussion and active participation
J. Perform gastric lavage, induce emesis, and obtain samples	Lecture and discussion	Discussion and active participation

D. General Skills

Competency and Skills	Methods of teaching/ learning	Methods of Evaluation
A. Present a case.	Lecture and discussion	Global rating logbook
B. Write a consultation note	Lecture and discussion	Global rating logbook
C. Inform patients and maintaining comprehensive.	Lecture and discussion	Global rating logbook
D. Make timely and legible medical records	Lecture and discussion	Global rating logbook
E. Acquire the teamwork skills	Lecture and discussion	Global rating logbook

4. Course contents (topic s/modules/rotation Course Matrix

Time Schedule: First Part

Topic	Covered ILOs			
	Knowledge	Intellectual	Practical skills	General Skills
	A	В	C	D
 Death and death certificate. 	В	А	D	
2. Suspicious death	В		E	В
3. Death associated with	В		I	В
surgical anesthesia				
4. Medical reports	С	В	F	A,D,E
5. Toxicological Reports	F	В	J	A,E
6. Wounds	D		G	В
7. Firearm injuries	E		Н	В
8. Ethics in research			Α	
9. Medical ethics.	Α		A,B,C	C,E

5. Course Methods of teaching/learning:

- 1. Lectures.
- 2. Discussions.
- 3. Exercises.

6. Course assessment methods:

i. Assessment tools:

- 1. Written examination.
- 2. Attendance and active participation.
- 3. Oral examination.
- **ii. Time schedule:** After 6 months from applying to the M D degree.
- iii. Marks: 50 (35for written exam and 15 for oral exam).

7. List of references

i. Lectures notes

- Course notes.
- Staff members print out of lectures and/or CD copies.

ii. Essential books

- Bernard Knight and Pekka Saukko (2015: Knight Forensic Pathology. Hodder Arnold press
- Goldfrank, Lewis R.; Howland, Mary Ann; Hoffman, Robert S.; Nelson, Ewis S.; Lewin, Neal A (2019): Goldfrank's Toxicologic Emergencies, 11th ed. McGraw Hill / Medical.
 - Medical Ethics Manual. World medical association. Third edition 2015.
 - Medical ethics and law. Dominic Wilkinson, 3rdedition 2019.

iii. Recommended books

• Biswas Gautam (2021): Review of Forensic Medicine & Toxicology. 5th ed. Jaypee Brothers Medical Pub.

iv. Journal and web site

- Journals of all Egyptian Universities of Forensic Medicine and Clinical Toxicology.
- All International Journals of Forensic Medicine and Clinical Toxicology which available in the university network at www.sciencedirect.com. As:
 - Forensic Science International Journal.
 - Toxicology Letter.

v. others

8. Signatures

- Course Coordinator:	- Head of the Department:
Prof. Ghada Omeran	Prof. Randa Hussein Abdelhady
Date: 6-2022	Date: 6-2022

Course 4: Anatomy

Ear, Nose & Throat department

Faculty of Medicine Assiut University 2022-2023

1. Course data

- **Let Course Title: Anatomy**
- Course code: ENT330A
- Speciality ENT surgery
- Number of credit points:3.5 credit point for didactic(100%), 0CP for training, total 3,5 CP.
- Department (s) delivering the course: Department OF E.N.T surgery Faculty of Medicine- Assiut- EGYPT
- Course coordinator(s):
 - Course coordinator:

Prof. .Ezat Mohamed Saleh

- Assistant coordinator (s):
- Prof. Ahmed Abdel Aleem.
- Date last reviewed: 6-2022
- Requirements (prerequisites) if any :
 - > None
- Requirements from the students to achieve course ILOs are clarified in the joining log book.

2. Course Aims

2/1To acquire indepth the ENT Anatomy necessary for ENT surgery in clinical reasoning, diagnosis and management of ENT disorders.

3. Intended learning outcomes (ILOs):

A-Knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
 A- Illustrate detailed anatomy of the head & neck, with emphasis on Ear, Nose, paranasal sinuses, larynx. Pharynx, Esophagus & trachea. Temporal bone. Ear(external, middle,& inner). Facial nerve. Nose (nasal cavity & para nasal sinuses). Oral cavity (Tongue &Palate). Pharynx (nasopharynx, oropharynx,& hypopharynx). Parapharyngeal & retropharyngeal spaces. Larynx. Head and Neck embryology. Head and neck anatomy. Cranial nerves. Cervical trachea. Cervical oesophagus. Skull base. 	-Lectures.	-Written and oral examination Log book

B-Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Correlates the facts of anatomy with clinical reasoning, diagnosis and management of common diseases related to Otolaryngology head & neck surgery.	Didactic (lectures, seminars, tutorial)	-Written and oral examination -Log book

C-Practical skills Practical skills = 0 CP

D-General Skills Practice-Based Learning and Improvement

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Perform data management including data entry and analysis.	-Observation and supervision -Written and oral communication	Log book

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
B. Elicit information using effective nonverbal, explanatory, questioning, and writing skills.	-Observation and supervision -Written and oral communication	Log book

Professionalism

ILOs	Methods of teaching/ learning	Methods of Evaluation
C. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and	-Observation -Senior staff	Logbook
society	experience	

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
D. Work effectively in relevant health care delivery settings and systems.	-Observation -Senior staff experience	Logbook

4. Course contents (topic s/modules/rotation Course Matrix

First part

•	Covered ILOs			
Topic	Knowledge	Intellectual	Practical skill	General Skills
 Anatomy of the temporal bone. 	A	A	-	A-D
 Anatomy of the ear(external, middle,& inner). 	A	A	-	A-D
 Anatomy of the facial nerve. 	AA	A	-	A-D
 Anatomy of the nose (nasal cavity & para nasal sinuses). 	A	A	-	A-D
 Anatomy of the oral cavity (Tongue &Palate). 	A	A	-	A-D
 Anatomy of the pharynx (nasopharynx, oropharynx,& hypopharynx). 	A	A	-	A-D
 Anatomy of the parapharyngeal & retropharyngeal spaces. 	A	A	-	A-D
 Anatomy of the larynx. 	A	A	-	A-D
 Head and Neck embryology. 	A	A	-	A-D
Head and neck anatomy.	A	A	-	A-D
 Anatomy of the cranial nerves. 	A	A	-	A-D
Cervical trachea.	A	A	-	A-D
Cervical oesophagus.	A	A	-	A-D
Anatomy of the Skull base.	A	A	-	A-D

5. Course Methods of teaching/learning:

- 1. Didactic (lectures, seminars, tutorial).
- 2. Observation and Performance in operations.

- 3. Written & oral communication.
- 4. Senior staff experience.
- clinical round
- 6. outpatient clinic
- 7. work shop

6. Course Methods of teaching/learning: for students with poor achievements

Extra Didactic (lectures, seminars, tutorial) according to their needs.

7. Course assessment methods:

i. Assessment tools:

- 1. Written and oral examination
- 2. Assessment of practical skills.
- 3. Log book
- **ii. Time schedule:** After 12 months from applying to the M D degree.
- iii. Marks: 175

8. List of references

I. Lectures notes

- 1. Course notes
- 2. Staff members print out of lectures and/or CD copies.

II. Essential books

- i. Scott-Brown's Otorhinolaryngology and Head and Neck Surgery, Eighth Edition, 2018
- ii. Diseases of the ear a textbook of otology.

Dr.Stuart R. Mawson 1979.

iii. TEXT BOOK OF Clinical Otolaryngology 1st ed. 2021 Edition,

- iv. CUMMINGS Otolaryngology- head and neck surgery. Apr 22, 2020
- v. Paparella and Shumrick 's Otolaryngology 3rd, 1991).
- vi. Illustrated human anatomy for medical students (Head&Neck) 2016.
- vii. Principles of pathology (General &Special) Dr. Gamal Nada.

III. Recommended books

Periodicals:

- Archieves of Otolaryngology- head and neck surgery
- Acta Oto-laryngloica
- Clinical Otolaryngology
- Laryngoscope
- Journal of Laryngology and Otology
- Otolaryngologic clinics of North America
- Egyptian Journal of Otolaryngology
- Journal of Egyptian Society of Otolaryngology and related science.

Web sites, ... etc

- WWW. entnet.org
- www,otohns.net
- www,sinus.org
- www.alexorl.com.
- other: none

9. Signature

Course Coordinator:	Head of the Department:
Date:	Date:.

Course 5: Pathology.

Ear, Nose & Throat department

Faculty of Medicine Assiut University 2022-2023

1. Course data

- Course Title: Pathology
- Course code: ENT330B
- Speciality ENT surgery
- Number of credit points:3.5 credit point for didactic(100%), 0CP for training, total 3,5 CP.
- ♣ Department (s) delivering the course: Department OF E.N.T surgery Faculty of Medicine- Assiut- EGYPT
- Course coordinator(s):
 - Course coordinator:

Prof. .Ezat Mohamed Saleh

- Assistant coordinator (s):
- Prof. Ahmed Abdel Aleem.
- Date last reviewed: 6-2022
- Requirements (prerequisites) if any :
 - > None
- Requirements from the students to achieve course ILOs are clarified in the joining log book.

2. Course Aims

2/1To acquire indepth the ENT pathology necessary for ENT surgery in clinical reasoning, diagnosis and management of ENT disorders.

A.Knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
 A-Describe Pathologic Details & updated of: Ear diseases. Nasal & paranasal sinuses diseases. Oral & Salivary gland diseases. Pharyngeal diseases. Laryngeal diseases. Temporal bone diseases. Cerebellopontine angle diseases. Diseaeses of the crainial nerves. 	Didactic (lectures, seminars, tutorial)	Written and oral examination -Log book

B.Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Correlates the facts of Pathology with clinical reasoning, diagnosis and management of common diseases related to Otolaryngology head & neck surgery.	Didactic (lectures, seminars, tutorial)	-Written and oral examination -Log book

C. Practical skills
Practical skills = 0 CP

D-General Skills

Practice-Based Learning and Improvement

11.00	Methods of	Methods of
ILOs	teaching/	Evaluation
	learning	
	-Observation and	
A. Perform data management including data	supervision	Log book
entry and analysis.	-Written and oral	Log book
	communication	

Interpersonal and Communication Skills

W.O.	Methods of	Methods of
ILOs	teaching/	Evaluation
	learning	
	-Observation and	
B. Elicit information using effective nonverbal,	supervision	Log book
explanatory, questioning, and writing skills.	-Written and oral	LOG DOOK
	communication	

Professionalism

ILOs	Methods of teaching/ learning	Methods of Evaluation
C. Demonstrate respect, compassion, and integrity;	-Observation	
a responsiveness to the needs of patients and	-Senior staff	Logbook
society	experience	

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
D. Work effectively in relevant health care delivery settings and systems.	-Observation -Senior staff experience	Logbook

4. Course contents (topic s/modules/rotation Course Matrix

	Covered ILOs			
Topic	Knowledge	Intellectual	Practical skill	General Skills
 Ear diseases. 	A	A	-	A-D
 Nasal & paranasal sinuses diseases. 	A	A	=====	A-D
 Oral & Salivary gland diseases. 	A	-	•	-
 Pharyngeal diseases. 	A			
 Laryngeal diseases. 	A	A	-	A-D
 Temporal bone diseases. 	A	A	•	A-D
 Cerebellopontine angle diseases. 	A	A	-	A-D
 Diseaeses of the crainial nerves. 	A	A	-	A-D

At the first part

5. Course Methods of teaching/learning:

- Didactic (lectures, seminars, tutorial).
- Observation and Performance in operations.
- Written & oral communication.
- Senior staff experience.
- clinical round
- outpatient clinic
- work shop

6. Course Methods of teaching/learning: for students with poor achievements

Extra Didactic (lectures, seminars, tutorial) according to their needs.

7. Course assessment methods:

i. Assessment tools:

- Written and oral examination
- Assessment of practical skills.
- Log book
- **ii. Time schedule:** After 12 months from applying to the M D degree.

iii. Marks: 175

8. List of references

IV. Lectures notes

- Course notes
- Staff members print out of lectures and/or CD copies.

V. Essential books

- i. Scott-Brown's Otorhinolaryngology and Head and Neck Surgery, Eighth Edition, 2018
- ii. Diseases of the ear a textbook of otology. Dr.Stuart R. Mawson 1997.

- iii. TEXT BOOK OF Clinical Otolaryngology 1st ed. 2021 Edition,
- iv. CUMMINGS Otolaryngology- head and neck surgery.Apr 22, 2020
- v. Paparella and Shumrick 's Otolaryngology 3rd, 1991).
- vi. Illustrated human anatomy for medical students (Head&Neck) 2016.
- vii. Principles of pathology (General &Special) Dr. Gamal Nada.

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VI. Recommended books

Periodicals:

- Archieves of Otolaryngology- head and neck surgery
- Acta Oto-laryngloica
- Clinical Otolaryngology
- Laryngoscope
- Journal of Laryngology and Otology
- Otolaryngologic clinics of North America
- Egyptian Journal of Otolaryngology
- Journal of Egyptian Society of Otolaryngology and related science.

Web sites, ... etc

- WWW. entnet.org
- www,otohns.net
- www,sinus.org

- www.alexorl.com.
- other : none

9. Signature

Course Coordinator:	Head of the Department:
Date:	Date:

Second Part

Course 6 : E.N.T surgery

Name of department: E.N.T surgery.

Faculty of medicine
Assiut University
2022-2023

1. Course data

Course Title: Ear, Nose and Throat(E.N.T) surgery.

Course code: ENT330C

Speciality: Ear, Nose and Throat(ENT) surgery.

- **Number of** credit **points:** 147 credit point didactic 24 credit point (16.3%) practical 123 credit point (83.7%).
- Department (s) delivering the course: Department of ENT surgery Faculty of Medicine- Assiut- EGYPT.
- Coordinator (s):

Principle coordinator: Prof. Prof. Dr. Fareid Hessein El Weshay **Assistant coordinator:** Prof. Dr. Ahmed Abdel Aleem

- Date last review 6-2022
- Requirements (prerequisites) if any :
 - > None
- Requirements from the students to achieve course ILOs are clarified in the joining log book.

This course consists of 5 Modules (Units):

- .Module 1: Otology & Neurotology
- .Module 2: Rhinology
- .Module 3: Laryngotracheobronchology

Module 4,5: Pharyngoesophageal, Head and neck surgery

2. Course Aims

2/1To enable MD students to master high level of clinical skills, in addition to update and advanced medical knowledge, integration and interpretation of different investigations, professional competence & operative performance in the area of ENT surgery.

2/2 To provide candidates with enough general skills related to ENT surgery including, writing specialized medical reports, use of information technology in clinical decisions and research, teaching junior students and counseling patients and their families about ENT diseases and conditions.

2/3 To acquire indepth the surgical anatomical and pathological Background necessary for ENT surgery in clinical reasoning, diagnosis and management of ENT diseases.

3. Course intending learning outcomes (ILOs):

Course 6:Unit 1: Otology & Neurotology.

A-Knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
 A. Explain detailed update and evidence based etiology, clinical picture, diagnosis and management of the following common diseases and clinical conditions: 1. Congenital otological disorders. 2. Diseases of the External Ear. 3. Otitis Media and Middle Ear Effusions. 4. Chronic Otitis Media. 5. Cholesteatoma. 6. Cranial and Intracranial Complications of Acute and Chronic Otitis Media . 7. Otosclerosis . 8. Hereditary Hearing Impairment . 9. Trauma to the Middle Ear, Inner Ear, and Temporal Bone . 10. Diving medicine. 11. Occupational Hearing Loss . 12. Ototoxicity . 13. Sensorineural Hearing Loss . 14. Perilymphatic Fistulae . 15. Autoimmune Inner Ear Disease 16. Meniere's Disease, Vestibular Neuronitis, Paroxysmal Positional Vertigo. 17. Cerebellopontine Angle Tumors 18. Diseases of the temporal bone. 	-Didactic (lectures, seminars, tutorial) -Clinical rounds -Seminars -Clinical rotations -Service teaching	-OSCE at the end of each year -log book & portfolio - One MCQ examination at the second half of the second year and another one in the third year -Written and oral examination

19. 20. 21. 22. 23. 24. B. I	Presbyacusis Tinnitus and Hyperacusis Disorders of the facial nerve. Anterior skull base lesions.		-OSCE at the end of each
1. 2.	Molecular Biology of Hearing and Balance. Physiology of the Auditory and Vestibular Systems.	-Didactic (lectures,	year -log book & portfolio
3. 4.	Examination of the ear. Diagnostic Audiology, Hearing Aids, and Habilitation Options.	seminars, tutorial) -Clinical	- One MCQ examination at the
5. 6. 7.	Evaluation of the Vestibular (Balance) System . Imaging of the Temporal Bone . Diving medicine	rounds -Seminars -Clinical	second half of the second year
8. 9. 10.	Tinnitus and Hyperacusis Implantable middle ear hearing devices. Cochlear Implants	rotations -Service teaching	and another one in the third year
11.12.13.	Reconstruction of the ear. Plastic surgery of the ear. Surgery of the Skull Base.	teaching	-Written and oral
14.	Surgery of vertigo.		examination
C. I	Mention basics of the following rare diseases	-Didactic	-OSCE at the
	and conditions:	(lectures,	end of each
	Keratosis obturans.	seminars,	year
	Osteopetrosis.	tutorial)	-log book &
	Hereditary Hearing Impairment . Occupational Hearing Loss .	-Clinical rounds	portfolio - One MCQ
	Ototoxicity.	-Seminars	examination
	Sensorineural Hearing Loss .	-Clinical	at the
	Perilymphatic Fistulae .	rotations	second half
8.	Autoimmune Inner Ear Disease	-Service	of the
9.	Cerebellopontine Angle Tumors	teaching	second year

10. Diseases of the temporal bone.	and another
11. Facial nerve tumors.	one in the
12. Anterior skull base lesions.	third year
	-Written
	and oral
	examination
D. Explain the facts and principles of the relevant	
basic supportive sciences related to Otology &	
Neurotology.	
E. Explain the facts and principles of the relevant	
clinically supportive sciences related to Otology	
& Neurotology.	
F. Describe the basic ethical and medicolegal	
principles revenant to the Otology &	
Neurotology.	
G. Describe the basics of quality assurance to	
ensure good clinical care in Otology &	
Neurotology.	
H. Explain the ethical and scientific principles of	
medical research.	
I. Explain the impact of common health problems	
in the field of Otology & Neurotology on the	
society.	

B-Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Design and present case in common problem related to Otology & Neurotology.	-Clinical rounds -Senior staff experience	-Procedure and case presentation -Log book & Portfolio
B. Apply the basic and clinically supportive sciences which are appropriate to Otology & Neurotology related problems.		
C. Demonstrate an investigatory and analytic thinking "problem – solving "approaches to clinical situation related to Otology & Neurotology.		
D. Plan research projects.		
E. Write scientific papers.		
 F. Lead risk management activities as a part of clinical governs. a. Vertigo. b. Tinnitus. c. Sudden sensorineural hearing loss. d. Acute facial nerve paralysis. e. Cranial &intracranial complications of ear infections. f. Mortality in the ward G. Plain quality improvement activities in the 		
field of medical education and clinical practice		
in to Otology & Neurotology. H. Create and innovate plans, systems, and		
other issues for improvement of performance in to Otology & Neurotology.		

I	. Present and defend his / her data in front of	
	a panel of experts	
J.	Formulate management plans and alternative	
	decisions in different situations in the field of	
	Otology & Neurotology.	

C-Practical skills (Patient Care)

ILOs	Methods of teachinhg/ learning	Methods of Evaluation
A- Take history, examine and clinically diagnose different conditions related to Otology & Neurotology.	-Didactic (lectures, seminars, tutorial) -Clinical rounds Clinical rotations (service teaching)	-OSCE at the end of each year -log book & portfolio - One MCQ examination at the second half of the second year and another one in the third year -Clinical exam
 B-Order the following non invasive and invasive diagnostic procedures: Routine appropriate Lab investigations related Otology & Neurotology. X ray chest. X ray Temporal bone. CT Temporal bone brain. Temporal bone MRI Angiography. 	-Clinical round with senior staff -Observation -Post graduate teaching -Hand on workshops -Perform	- Procedure presentation - Log book - Chick list

 Biopsy taking. Culture & Sensitivity of discharge. Pre-operative embolization. Pathology reports. Aspiration or Drainage of mastoid abcess. Audiovestibular investigations: Pure tone audiograms. Speech audiogram. Tympanogram & Acoustic reflex. Auditory brain stem response. Electronystagmography. 	under supervision of senior staff	
C-Interpret the following non invasive and invasive diagnostic procedures: Routine appropriate Lab investigations related Otology & Neurotology. X ray chest. X ray Temporal bone. CT Temporal bone & brain. Temporal bone MRI Angiography. Biopsy taking. Culture & Sensitivity of discharge. Pre-operative embolization. Pathology reports. Aspiration or Drainage of mastoid abcess. Audiovestibular investigations: Pure tone audiograms. Speech audiogram. Tympanogram & Acoustic reflex. Auditory brain stem response. Electronystagmography.	-Clinical round with senior staff -Observation -Post graduate teaching -Hand on workshops -Perform under supervision of senior staff	- Procedure presentation - Log book - Chick list
D-Perform the following noninvasive and invasive diagnostic procedures:	-Clinical round with	- Procedure presentation

 Biopsy taking. Culture & Sensitivity of discharge. Pathology reports. Aspiration or Drainage of mastoid abscess. Aspiration or Drainage of auricular hematoma or abscess. Ear washing. Removal of foreign body from external auditory canal Simple removal of aural polyp. Simple myringotomy. 	senior staff -Observation -Post graduate teaching -Hand on workshops -Perform under supervision of senior staff	- Log book - Chick list
E-Prescribe the following noninvasive and invasive therapeutic procedures. - Proper treatment for conditions in A.A Ear washing. Removal of foreign body from external auditory canal Simple removal of aural polyp. Simple myringotomy. Myringotomy with insertion of pressure equalization tubes Mastoidectomy: Cortical. Radical. Modified radical. Tympanoplastic procedures: Myringoplasty. Tympanoplasty. Ossiculopasty. Meatoplasty & Conchomeatoplasty. Stapedectomy. Neurectomy: Tympanic. Chorda tympani.	-Observation -Post graduate teaching -Hand on workshops	- Procedure presentation - Log book - Chick list

Vestibular.		
Singular.		
Surgery of the facial nerve.		
Surgery of the vertigo.		
Skull base surgery.		
Cochlear implants.		
Excision of:		
Preauricular sinus or fistula.		
Osteoma or fibrous dysplasia.		
Lesions of the pinna.		
Glomus tumors.		
Malignant tumor of temporal		
bone.		
Crebellopontaine angle lesions.		
Internal auditory canal lesions		
F-Perform the following noninvasive and		
invasive therapeutic operations:		
Ear washing.		
Removal of foreign body from		
external auditory canal		
Simple removal of aural polyp.		
Simple myringotomy		
Myringotomy with insertion	-Observation	
pressure equalization tubes	-Post	- Procedure
Mastoidectomy:	graduate	presentation
Cortical.	teaching	- Log book
Radical.	-Hand on	- Chick list
Modified radical.	workshops	
Tympanoplastic procedures:		
Myringoplasty.		
Tympanoplasty.		
Ossiculopasty.		
Meatoplasty & Conchomeatoplasty.		
Stapedectomy.		
Neurectomy:		
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Tympanic.		
Chorda tympani.		
Vestibular.		
Singular.		
Surgery of the facial nerve.		
Surgery of the vertigo.		
Skull base surgery.		
Cochlear implants.		
Excision of:		
Preauricular sinus or fistula.		
Osteoma or fibrous dysplasia.		
Lesions of the pinna.		
Glomus tumors.		
Malignant tumor of temporal		
bone.		
Crebellopontaine angle lesions.		
Internal auditory canal lesions.		
G-Develop patient management plans for the		
following problems:		
Otitis externa. Otitis Madis and Middle For Effections.		
Otitis Media and Middle Ear Effusions.		
Chronic Otitis Media.		
Cholesteatoma.		
 Cranial and Intracranial Complications of 	-Clinical	
Acute and Chronic Otitis Media .	round with	
Otosclerosis .	senior staff	
 Hereditary Hearing Impairment . 		
 Trauma to the Middle Ear, Inner Ear, and 		
Temporal Bone .		
 Occupational Hearing Loss . 		
Ototoxicity .		
Sensorineural Hearing Loss .		
 Vertigo eg. Meniere's Disease, Vestibular 		
Neuronitis, Paroxysmal Positional Vertigo.		
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 Glomus tumors & other tumors of the ear. Presbyacusis Tinnitus and Hyperacusis Disorders of the facial nerve. Paediatric otological problems. H-Develop and carry out patient management		
 plans for the following problems: Otitis externa. Otitis Media and Middle Ear Effusions. Chronic Otitis Media. Cholesteatoma. Cranial and Intracranial Complications of Acute and Chronic Otitis Media . Otosclerosis . Hereditary Hearing Impairment . Trauma to the Middle Ear, Inner Ear, and Temporal Bone . Occupational Hearing Loss . Ototoxicity . Sensorineural Hearing Loss . Vertigo eg. Meniere's Disease, Vestibular Neuronitis, Paroxysmal Positional Vertigo. Glomus tumors & other tumors of the ear. Presbyacusis Tinnitus and Hyperacusis Disorders of the facial nerve. Paediatric otological problems. 	-Clinical round with senior staff	
 I-Counsel and educate patients and their family about Hospital acquired infections. Infective and neoplastic ear diseases. Hereditary Hearing Impairment . Occupational Hearing Loss . 	-Clinical round with senior staff	

 Ototoxicity . Recurrence of some ear diseases. Paediatric otological problems. J-Use information technology to support patient care decisions and patient education for the Otology & Neurotology related conditions. 	-Clinical round with senior staff	
 K-Provide health care services aimed at preventing the following conditions Delayed diagnosis of infective and neoplastic ear diseases. Hospital acquired infections. Hereditary Hearing Impairment . Occupational Hearing Loss . Ototoxicity . Recurrence of some ear diseases. Paediatric otological problems. 	-Clinical round with senior staff	
L-Work with health care professionals, including those from other disciplines, to provide patient-focused care for the mentioned in A.A and A.C	-Clinical round with senior staff	
M-Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets. (Write and evaluate a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and evaluating comprehensive, timely and legible medical records)		

D-General Skills

Practice-Based Learning and Improvement

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Perform practice-based improvement activities using a systematic methodology in the common problems (plain and conduct audit cycles) in conditions mentioned in A.A and A.C	-Simulations -Clinical round -Seminars -Lectures -Case presentation -Hand on workshops	- Global rating -Procedure & case presentation -Log book & Portfolios - Chick list
B. Locate, appraises, and assimilates evidence from scientific studies related to patients' health problems.	-Simulations -Clinical round -Seminars -Lectures -Case presentation -Hand on workshops	- Global rating -Procedure & case presentation -Log book & Portfolios - Chick list
C. Apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness		
D. Use information technology to manage information, access on-line medical information; and support their own education		
E. Lead the learning of students and other health care professionals.		

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Create and sustain a therapeutic and ethically sound relationship with patients	-Simulations -Clinical round -Seminars -Lectures -Case presentation -Hand on workshops	- Global rating -Procedure & case presentation -Log book & Portfolios - Chick list
G. Perform the following oral communications: a. Interpretation of the results of different investigations related to Otological & Neurotological diseases and discussion of different therapeutic options.		
H. Fill the following reports: • Patients' medical reports • Death report • Postoperative reports. • Pathological reports.		
I. Work effectively with others as a member or leader of a health care team as regard diagnosis and treatment of conditions mentioned in A.A and A.C		

Professionalism

ILOs	Methods of teaching/ Learning	Methods of Evaluation
J. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society that supersedes self-interest. K. Demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices.	- Observation - Senior staff experience - Case taking	-Objective structured clinical examination - Patient survey - 3600 global rating
L. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities.		

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
M. Work effectively in different health care delivery settings and systems.	- Observation - Senior staff experience	- 360o global rating
N. Practice cost-effective health care and resource allocation that does not compromise quality of care		- Check list evaluation of live or recorded performance
O. Advocate for quality patient care and assist patients in dealing with system complexities		- 360o global rating - Patient survey
P. Partner with health care managers and health care providers to assess, coordinate, and improve health care and predict how these activities can affect system performance		

Course 6:Unit 2: Rhinology.

A-Knowledge and understanding

W.O.	Methods of	Methods of
ILOs	teaching/	Evaluation
	learning	
A.Explain detailed update and evidence based	-Didactic	-OSCE at the
etiology, clinical picture, diagnosis and	(lectures,	end of each
management of the following common diseases	seminars,	year
and clinical conditions:	tutorial)	-log book &
1. Congenital sinonasal disorders.	-Clinical	portfolio
2. Olfactory disorders.	rounds	- One MCQ
3. Diseases of the external nose.	-Seminars	examination
4. Acquired Immune Deficiency Syndrome	-Clinical	at the
5. Infectious Diseases of the Upper Respiratory	rotations	second half
Tract.	-Service	of the
6. Allergic Rhinitis	teaching	second year
7. Epistaxis.		and another
8. Nasal septum diseases.		one in the
9. Acute and Chronic Nasal Disorders		third year
10. Sinusitis and Polyposis		-Written
11. Nasal granulomas(Infectious &Inflammatory).		and oral
12. Sinusitis & its complications.		examination
13. Fungal rhinosinusitis.		
14. Cysts related to nose & paranasal sinuses.		
15. Headache and Facial Pain		
16. Neoplasms of the Nose and Paranasal Sinuses		
17. Orbital diseases in rhinology.		
18. Nasal Reconstruction and Rhinoplasty		
19. Facial Fractures.		
20. Cerebrospinal rhinorrhea.		
21. Oroantral fistula.		
22. Paediatric rhinological problems.		

D. Montion the detailed principles of	Didoctic	OCCE at the
B. Mention the detailed principles of	-Didactic	-OSCE at the
Olfactory disorders.	(lectures,	end of each
Cellular Biology of the Immune System	seminars,	year
Acquired Immune Deficiency Syndrome	tutorial)	-log book &
Etiology of Infectious Diseases of the Upper	-Clinical	portfolio
Respiratory Tract	rounds	- One MCQ
 Imaging of the Nasal Cavities, Paranasal 	-Seminars	examination
Sinuses, Nasopharynx, Orbits,	-Clinical	at the
Infratemporal Fossa, Pterygomaxillary Fissure,	rotations	second half
Parapharyngeal Space, and Base of the Skull.	-Service	of the
 Diseases of the external nose. 	teaching	second year
Allergic Rhinitis		and another
• Epistaxis.		one in the
 Nasal septum diseases. 		third year
 Acute and Chronic Nasal Disorders 		-Written
Sinusitis and Polyposis		and oral
Nasal granulomas (Infectious		examination
&Inflammatory).		
Sinusitis & its complications.		
Fungal rhinosinusitis.		
Cerebrospinal rhinorrhea.		
 Cysts related to nose & paranasal sinuses. 		
Headache and Facial Pain		
Neoplasms of the Nose and Paranasal Sinuses		
Nasal Reconstruction and Rhinoplasty		
• Facial Fractures		
Reconstruction of the Maxilla.		
Paediatric rhinological problems.		
C.Mention basics of the following rare diseases and	-Didactic	-OSCE at the
conditions	(lectures,	end of each
1. Olfactory disorders	seminars,	year
2. Acquired Immune Deficiency Syndrome	tutorial)	-log book &
3. Non-healing nasal granulomas.	-Clinical	portfolio
4. Cystic fibrosis.	rounds	- One MCQ

5. Cerebrospinal rhinorrhea.	-Seminars	examination
6. Cysts related to nose & paranasal sinuses.	-Clinical	at the
7. Neoplasms of the Nose and Paranasal	rotations	second half
Sinuses.	-Service	of the
	teaching	second year
		and another
		one in the
		third year
		-Written
		and oral
		examination
D. Explain the facts and principles of the relevant		
basic supportive sciences related to rhinology.		
E-Explain the facts and principles of the relevant		
clinically supportive sciences related to rhinology.		
F-Describe the basic ethical and medicolegal		
principles revenant to rhinology.		
G-Describe the basics of quality assurance to		
ensure good clinical care in rhinology.		
H-Explain the ethical and scientific principles of		
medical research.		
I-Explain the impact of common health problems in		
the field of rhinology on the society.		

B-Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A-Design and present case in common problem related to rhinology.	-Clinical rounds -Senior staff experience	-Procedure and case presentation -Log book & Portfolio
B-Apply the basic and clinically supportive sciences which are appropriate to rhinology related problems.		
C-Demonstrate an investigatory and analytic thinking "problem – solving "approaches to clinical situation related to rhinology.		
D-Plan research projects.		
E-Write scientific papers.		
 F. Lead risk management activities as a part of clinical governs. Epistaxis. Facial pain & headache. Cranial &intracranial complications of sinonasal infections. Mortality in the ward 		
G. Plain quality improvement activities in the field of medical education and clinical practice in to rhinology.		
H. Create and innovate plans, systems, and other issues for improvement of performance in rhinology.		
I. Present and defend his / her data in front of a panel of experts		
J-Formulate management plans and alternative decisions in different situations in the field of rhinology.		

C-Practical skills (Patient Care)

ILOs	Methods of teachinhg/	Methods of Evaluation
A. Take history, examine and clinically diagnose different conditions related to rhinology.	-Didactic (lectures, seminars, tutorial) -Clinical rounds Clinical rotations (service teaching)	-OSCE at the end of each year -log book & portfolio - One MCQ examination at the second half of the second year and another one in the third year -Clinical exam
 B. Order the following non invasive and invasive diagnostic procedures Routine appropriate Lab investigations related to rhinology. X ray chest. X ray nose& paranasal sinuses. CT nose& paranasal sinuses& brain. MRI nose& paranasal sinuses. Angiography. Biopsy taking. Culture & Sensitivity of discharge. Rhinometry. Pre-operative embolization. Pathology reports. Olfactory investigations. Diagnostic sinuscopy. 	-Clinical round with senior staff -Observation -Post graduate teaching -Hand on workshops -Perform under supervision of senior staff	- Procedure presentation - Log book - Chick list

 C. Interpret the following non invasive and invasive diagnostic procedures Routine appropriate Lab investigations related to rhinology. X ray chest. X ray nose& paranasal sinuses. CT nose& paranasal sinuses& brain. MRI nose& paranasal sinuses. Angiography. Biopsy taking. Culture & Sensitivity of discharge. Rhinometry. Pre-operative embolization. Pathology reports. Olfactory investigations. Diagnostic sinuscopy. 	-Clinical round with senior staff -Observation -Post graduate teaching -Hand on workshops -Perform under supervision of senior staff	- Procedure presentation - Log book - Chick list
 D. Perform the following non invasive and invasive diagnostic procedures Biopsy taking. Culture & Sensitivity of discharge. Pathology reports. Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Diagnostic sinuscopy. 	-Clinical round with senior staff -Observation -Post graduate teaching -Hand on workshops -Perform under supervision of senior staff	- Procedure presentation - Log book - Chick list
 E. Prescribe the following non invasive and invasive therapeutic procedures. Prescribe proper treatment for conditions in A.A Aspiration or Drainage of septal 	-Observation -Post graduate teaching -Hand on	ProcedurepresentationLog bookChick list

haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy Simple removal of antrochoanal polyp Repair of nasal & Facial bones fractures. Calwell luc's operation Septoplasty & septorhinoplasty. Endoscopic sinonasal surgery. Orbital decompression. Transsphenoidal hypophysiectomy. External operations of frontal sinus. Ethmoidectomy. Maxillectomy. Dacrocystorhinostomy. Transfacial approaches for excision of sinonasal tumors. Surgery of choanal atresia. Surgery of choanal atresia. Surgery of cerebrospinal rhinorrhea. Craniofacial resection. F. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy Simple removal of antrochoanal polyp			
 Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy Simple removal of antrochoanal polyp Repair of nasal & Facial bones fractures. Calwell luc's operation Septoplasty & septorhinoplasty. Endoscopic sinonasal surgery. Orbital decompression. Transsphenoidal hypophysiectomy. External operations of frontal sinus. Ethmoidectomy. Maxillectomy. Dacrocystorhinostomy. Transfacial approaches for excision of sinonasal tumors. Surgery of choanal atresia. Surgery of cerebrospinal rhinorrhea. Craniofacial resection. F. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 	haematoma or abcess.	workshops	
 Antral puncture & lavage. Submucous resection Partial turbinectomy Simple removal of antrochoanal polyp Repair of nasal & Facial bones fractures. Calwell luc's operation Septoplasty & septorhinoplasty. Endoscopic sinonasal surgery. Orbital decompression. Transsphenoidal hypophysiectomy. External operations of frontal sinus. Ethmoidectomy. Maxillectomy. Dacrocystorhinostomy. Transfacial approaches for excision of sinonasal tumors. Surgery of choanal atresia. Surgery of epistaxis. Repair of cerebrospinal rhinorrhea. Craniofacial resection. F. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 	Removal of foreign body from the nose.		
 Submucous resection Partial turbinectomy Simple removal of antrochoanal polyp Repair of nasal & Facial bones fractures. Calwell luc's operation Septoplasty & septorhinoplasty. Endoscopic sinonasal surgery. Orbital decompression. Transsphenoidal hypophysiectomy. External operations of frontal sinus. Ethmoidectomy. Maxillectomy. Dacrocystorhinostomy. Transfacial approaches for excision of sinonasal tumors. Surgery of choanal atresia. Surgery of epistaxis. Repair of cerebrospinal rhinorrhea. Craniofacial resection. F. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 	Simple removal of nasal polyp.		
 Partial turbinectomy Simple removal of antrochoanal polyp Repair of nasal & Facial bones fractures. Calwell luc's operation Septoplasty & septorhinoplasty. Endoscopic sinonasal surgery. Orbital decompression. Transsphenoidal hypophysiectomy. External operations of frontal sinus. Ethmoidectomy. Maxillectomy. Dacrocystorhinostomy. Transfacial approaches for excision of sinonasal tumors. Surgery of choanal atresia. Surgery of epistaxis. Repair of cerebrospinal rhinorrhea. Craniofacial resection. F. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 	Antral puncture & lavage.		
 Simple removal of antrochoanal polyp Repair of nasal & Facial bones fractures. Calwell luc's operation Septoplasty & septorhinoplasty. Endoscopic sinonasal surgery. Orbital decompression. Transsphenoidal hypophysicetomy. External operations of frontal sinus. Ethmoidectomy. Maxillectomy. Dacrocystorhinostomy. Transfacial approaches for excision of sinonasal tumors. Surgery of choanal atresia. Surgery of epistaxis. Repair of cerebrospinal rhinorrhea. Craniofacial resection. F. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 	Submucous resection		
 Repair of nasal & Facial bones fractures. Calwell luc's operation Septoplasty & septorhinoplasty. Endoscopic sinonasal surgery. Orbital decompression. Transsphenoidal hypophysiectomy. External operations of frontal sinus. Ethmoidectomy. Maxillectomy. Dacrocystorhinostomy. Transfacial approaches for excision of sinonasal tumors. Surgery of choanal atresia. Surgery of epistaxis. Repair of cerebrospinal rhinorrhea. Craniofacial resection. F. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 	Partial turbinectomy		
 Calwell luc's operation Septoplasty & septorhinoplasty. Endoscopic sinonasal surgery. Orbital decompression. Transsphenoidal hypophysiectomy. External operations of frontal sinus. Ethmoidectomy. Maxillectomy. Dacrocystorhinostomy. Transfacial approaches for excision of sinonasal tumors. Surgery of choanal atresia. Surgery of epistaxis. Repair of cerebrospinal rhinorrhea. Craniofacial resection. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 	Simple removal of antrochoanal polyp		
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 Endoscopic sinonasal surgery. Orbital decompression. Transsphenoidal hypophysiectomy. External operations of frontal sinus. Ethmoidectomy. Maxillectomy. Dacrocystorhinostomy. Transfacial approaches for excision of sinonasal tumors. Surgery of choanal atresia. Surgery of epistaxis. Repair of cerebrospinal rhinorrhea. Craniofacial resection. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 	Calwell luc's operation		
 Orbital decompression. Transsphenoidal hypophysiectomy. External operations of frontal sinus. Ethmoidectomy. Maxillectomy. Dacrocystorhinostomy. Transfacial approaches for excision of sinonasal tumors. Surgery of choanal atresia. Surgery of epistaxis. Repair of cerebrospinal rhinorrhea. Craniofacial resection. F. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 	Septoplasty & septorhinoplasty.		
 Transsphenoidal hypophysiectomy. External operations of frontal sinus. Ethmoidectomy. Maxillectomy. Dacrocystorhinostomy. Transfacial approaches for excision of sinonasal tumors. Surgery of choanal atresia. Surgery of epistaxis. Repair of cerebrospinal rhinorrhea. Craniofacial resection. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 	Endoscopic sinonasal surgery.		
 External operations of frontal sinus. Ethmoidectomy. Maxillectomy. Dacrocystorhinostomy. Transfacial approaches for excision of sinonasal tumors. Surgery of choanal atresia. Surgery of epistaxis. Repair of cerebrospinal rhinorrhea. Craniofacial resection. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 	Orbital decompression.		
 Ethmoidectomy. Maxillectomy. Dacrocystorhinostomy. Transfacial approaches for excision of sinonasal tumors. Surgery of choanal atresia. Surgery of epistaxis. Repair of cerebrospinal rhinorrhea. Craniofacial resection. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 	Transsphenoidal hypophysiectomy.		
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 Dacrocystorhinostomy. Transfacial approaches for excision of sinonasal tumors. Surgery of choanal atresia. Surgery of epistaxis. Repair of cerebrospinal rhinorrhea. Craniofacial resection. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy Fraction of cerebrospinal rhinorrhea. Observation - Procedure presentation graduate teaching - Log book - Chick list Chick list Hand on workshops Partial turbinectomy 	Ethmoidectomy.		
 Transfacial approaches for excision of sinonasal tumors. Surgery of choanal atresia. Surgery of epistaxis. Repair of cerebrospinal rhinorrhea. Craniofacial resection. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 	Maxillectomy.		
sinonasal tumors. Surgery of choanal atresia. Surgery of epistaxis. Repair of cerebrospinal rhinorrhea. Craniofacial resection. F. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy	Dacrocystorhinostomy.		
 Surgery of choanal atresia. Surgery of epistaxis. Repair of cerebrospinal rhinorrhea. Craniofacial resection. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 	Transfacial approaches for excision of		
 Surgery of epistaxis. Repair of cerebrospinal rhinorrhea. Craniofacial resection. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 	sinonasal tumors.		
 Repair of cerebrospinal rhinorrhea. Craniofacial resection. F. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy - Observation - Procedure presentation - Log book teaching - Hand on workshops 	Surgery of choanal atresia.		
 Craniofacial resection. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy Cobservation -Procedure presentation -Log book teaching -Hand on workshops Chick list Partial turbinectomy 	Surgery of epistaxis.		
F. Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy -Observation -Post graduate teaching -Hand on workshops	Repair of cerebrospinal rhinorrhea.		
 Perform the following non invasive and invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 	Craniofacial resection.		
 invasive therapeutic operations: Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 	F. Perform the following non invasive and	-Observation	- Procedure
 Aspiration or Drainage of septal haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 		-Post	presentation
 haematoma or abcess. Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 		graduate	- Log book
 Removal of foreign body from the nose. Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 		teaching	- Chick list
 Simple removal of nasal polyp. Antral puncture & lavage. Submucous resection Partial turbinectomy 	Removal of foreign body from the nose.	-Hand on	
 Antral puncture & lavage. Submucous resection Partial turbinectomy 		workshops	
Submucous resectionPartial turbinectomy			
·			
·	Partial turbinectomy		
Repair of nasal & Facial bones fractures.			
■ Calwell luc's operation	Calwell luc's operation		

		1	
Septop	lasty & septorhinoplasty.		
Endosc	opic sinonasal surgery.		
Orbital	decompression.		
Transs	phenoidal hypophysiectomy.		
Externa	al operations of frontal sinus.		
■ Ethmoi	dectomy.		
Maxille	ectomy.		
Dacroc	ystorhinostomy.		
Transfa	icial approaches for excision of		
sinona	sal tumors.		
Surgery	y of choanal atresia.		
Surgery	y of epistaxis.		
Repair	of cerebrospinal rhinorrhea.		
Cranio	acial resection.		
G. Develo	p patient management plans for the	-Clinical	
	ng problems:	round with	
	genital sinonasal disorders.	senior staff	
	ctory disorders.		
	ases of the external nose.		
	uired Immune Deficiency Syndrome		
_	ctious Diseases of the Upper		
	piratory Tract.		
-	rgic Rhinitis		
7. Epis			
-	al septum diseases.		
	e and Chronic Nasal Disorders		
10.	Sinusitis and Polyposis		
11.	Nasal granulomas(Infectious		
	lammatory).		
12.	Sinusitis & its complications.		
13.	Fungal rhinosinusitis.		
14.	Cysts related to nose & paranasal		
sinu	-		
15.	Headache and Facial Pain		
16.	Neoplasms of the Nose and		

	Paranasal Sinuses		
17	7. Orbital diseases in rhinology.		
18	3. Nasal Reconstruction and		
	Rhinoplasty		
19). Facial Fractures.		
20). Cerebrospinal rhinorrhea.		
21	L. Oroantral fistula.		
22	2. Paediatric rhinological problems.		
H. De	evelop and carry out patient management	-Clinical	
	ans for the following problems	round with	
1.	Congenital sinonasal disorders.	senior staff	
2.	Olfactory disorders.		
3.	Diseases of the external nose.		
4.	Acquired Immune Deficiency Syndrome		
5.	Infectious Diseases of the Upper		
	Respiratory Tract.		
6.	Allergic Rhinitis		
7.	Epistaxis.		
8.	Nasal septum diseases.		
9.	Acute and Chronic Nasal Disorders		
10.	Sinusitis and Polyposis		
11.	Nasal granulomas(Infectious		
	&Inflammatory).		
12.	Sinusitis & its complications.		
13.	Fungal rhinosinusitis.		
14.	Cysts related to nose & paranasal sinuses.		
15.	Headache and Facial Pain		
16.	Neoplasms of the Nose and Paranasal		
	Sinuses		
17.	Orbital diseases in rhinology.		
18.	Nasal Reconstruction and Rhinoplasty		
19.	Facial Fractures.		
20.	Cerebrospinal rhinorrhea.		
21.	Oroantral fistula.		
22.	Paediatric rhinological problems.		

		-Clinical round	
	ounsel and educate patients and their family	with senior	
<u>at</u>	<u>oout</u>	staff	
1.	Congenital sinonasal disorders.	Stair	
2.	Olfactory disorders.		
3.	Diseases of the external nose.		
4.	Acquired Immune Deficiency Syndrome		
5.	Infectious Diseases of the Upper Respiratory		
	Tract.		
6.	Allergic Rhinitis		
7.	Epistaxis.		
8.	Nasal septum diseases.		
9.	Acute and Chronic Nasal Disorders		
10.	Sinusitis and Polyposis		
11.	Nasal granulomas(Infectious		
	&Inflammatory).		
12.	Sinusitis & its complications.		
13.	Fungal rhinosinusitis.		
14.	Cysts related to nose & paranasal sinuses.		
15.	Headache and Facial Pain		
16.	Neoplasms of the Nose and Paranasal		
	Sinuses		
17.	Orbital diseases in rhinology.		
18.	Nasal Reconstruction and Rhinoplasty		
19.	Facial Fractures.		
20.	Cerebrospinal rhinorrhea.		
21.	Oroantral fistula.		
22.	Paediatric rhinological problems.		
J. U	se information technology to support	-Clinical	
	atient care decisions and patient education	round with	
-	or the rhinology related conditions.	senior staff	
10	the minology related conditions.	Clinical	
K. <u>Pr</u>	rovide health care services aimed at	-Clinical	
pı	reventing the following conditions	round with	
•	Delayed diagnosis of infective and	senior staff	
	neoplastic sinonasal diseases.		
•	Hospital acquired infections.		
•	Headache and Facial Pain		
	Treaductic unia ructui rutti		

 Occupational nasal disorders . Recurrence of some nasal diseases. 		
L. Work with health care professionals, including those from other disciplines, to provide patient-focused care for the mentioned in A.A and A.C	-Clinical round with senior staff	
M. Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets. (Write and evaluate a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and evaluating comprehensive, timely and legible medical records)		

D-General Skills

Practice-Based Learning and Improvement

ILOs	Methods of teaching/ learning	Methods of Evaluation
A-Perform practice-based improvement activities using a systematic methodology in the common problems (plain and conduct audit cycles) in conditions mentioned in A.A and A.C	-Simulations -Clinical round -Seminars -Lectures -Case presentation -Hand on workshops	- Global rating -Procedure & case presentation -Log book & Portfolios - Chick list
B-Locate, appraises, and assimilates evidence from scientific studies related to patients'	-Simulations -Clinical	- Global rating -Procedure &

health problems.	round -Seminars -Lectures -Case presentation -Hand on workshops	case presentation -Log book & Portfolios - Chick list
C-Apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness		
D-Use information technology to manage information, access on-line medical information; and support their own education		
E-Lead the learning of students and other health care professionals.		

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F-Create and sustain a therapeutic and ethically sound relationship with patients	-Simulations -Clinical round -Seminars -Lectures -Case presentation -Hand on workshops	- Global rating -Procedure & case presentation -Log book & Portfolios - Chick list
G-Perform the following oral communications:		
a. Interpretation of the results of different investigations related to rhinological		

diseases and discussion of different therapeutic options	
 H-Fill the following reports: Patients' medical reports Death report Postoperative reports. Pathological reports. 	
I-Work effectively with others as a member or leader of a health care team as regard diagnosis and treatment of conditions mentioned in A.A and A.C	

Professionalism

ILOs	Methods of teaching/ Learning	Methods of Evaluation
J-Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society that supersedes self-interest.	- Observation - Senior staff experience - Case taking	-Objective structured clinical examination - Patient survey
K-Demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices.		- 3600 global rating
L-Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
M-Work effectively in different health care delivery settings and systems.	- Observation - Senior staff experience	- 360o global rating
N-Practice cost-effective health care and resource allocation that does not compromise quality of care		- Check list evaluation of live or recorded performance
O-Advocate for quality patient care and assist patients in dealing with system complexities		- 360o global rating- Patient survey
P-Partner with health care managers and health care providers to assess, coordinate, and improve health care and predict how these activities can affect system performance		

Course 5:Unit 3: Module 1:LARYNX, TRACHEA & BRONCHI.

A-Knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
 A-Explain detailed update and evidence based etiology, clinical picture, diagnosis and management of the following common diseases and clinical conditions 1. Congenital Disorders of the Larynx 2. Trauma to the Larynx 3. Laryngotracheal Stenosis in Adults 4. Infectious and Inflammatory Diseases of the Larynx 5. Neurogenic Disorders of the Larynx 6. Functional Disorders of the Larynx 7. Minimal pathological Disorders of the Larynx 8. Neoplasms of the Larynx 9. Disorders of Speech, and Language 10. Disorders of the trachea & bronchi. 11. Paediatrics laryngotracheal disorders. 	-Didactic (lectures, seminars, tutorial) -Clinical rounds -Seminars -Clinical rotations -Service teaching	-OSCE at the end of each year -log book & portfolio - One MCQ examination at the second half of the second year and another one in the third year -Written and oral examination
B. Mention the detailed principles of	-Didactic	-OSCE at the end of
1. Congenital Disorders of the Larynx	(lectures,	each year
2. Trauma to the Larynx	seminars,	-log book & portfolio
3. Laryngotracheal Stenosis in Adults	tutorial)	- One MCQ
4. Infectious and Inflammatory	-Clinical	examination at the
Diseases of the Larynx Nourganic Disorders of the Larynx	rounds -Seminars	second half of the
5. Neurogenic Disorders of the Larynx6. Functional Disorders of the Larynx	-Seminars -Clinical	second year and another one in the
6. Functional Disorders of the Larynx7. Minimal pathological Disorders of	rotations	third year
the Larynx	-Service	-Written and oral
8. Neoplasms of the Larynx	teaching	examination
9. Disorders of Speech, and Language	teaciiiig	CACIIIIIativii
10. Disorders of the trachea & bronchi.		

11. Paediatrics laryngotracheal disorders.		
 C-Mention basics of the following rare diseases and conditions 1. Neurogenic Disorders of the Larynx 2. Functional Disorders of the Larynx 3. Minimal pathological Disorders of the Larynx 4. Disorders of the trachea & bronchi. 	-Didactic (lectures, seminars, tutorial) -Clinical rounds -Seminars -Clinical rotations -Service teaching	-OSCE at the end of each year -log book & portfolio - One MCQ examination at the second half of the second year and another one in the third year -Written and oral examination
D-Explain the facts and principles of the	- couloming	
relevant basic supportive sciences related		
to Laryngotracheobronchology.		
E-Explain the facts and principles of the		
relevant clinically supportive sciences		
related to Laryngotracheobronchology		
F-Describe the basic ethical and		
medicolegal principles revenant to		
Laryngotracheobronchology.		
G-Describe the basics of quality assurance		
to ensure good clinical care in		
Laryngotracheobronchology.		
H-Explain the ethical and scientific		
principles of medical research.		
I-Explain the impact of common health		
problems in the field of		
Laryngotracheobronchology on the		
society.		

B-Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A-Design and present case in common problem related to Laryngotracheobronchology	-Clinical rounds -Senior staff experience	-Procedure and case presentation -Log book & Portfolio
B-Apply the basic and clinically supportive sciences which are appropriate to Laryngotracheobronchology related problems.		
C-Demonstrate an investigatory and analytic thinking "problem – solving "approaches to clinical situation related to Laryngotracheobronchology.		
D-Plan research projects.		
E-Write scientific papers.		
 F. Lead risk management activities as a part of clinical governs. g. Stridor. h. Respiratory distress in neonates, infants & young children. i. Mortality in the ward 		
G. Plain quality improvement activities in the		
field of medical education and clinical practice in to Laryngotracheobronchology.		
H. Create and innovate plans, systems, and other issues for improvement of performance in Laryngotracheobronchology		
I. Present and defend his / her data in front of a panel of experts		
J-Formulate management plans and alternative decisions in different situations in the field of Laryngotracheobronchology.		

C-Practical skills (Patient Care)

ILOs	Methods of teachinhg/ learning	Methods of Evaluation
A-Take history, examine and clinically diagnose different conditions related to Laryngotracheobronchology.	-Didactic (lectures, seminars, tutorial) -Clinical rounds Clinical rotations (service teaching)	-OSCE at the end of each year -log book & portfolio - One MCQ examination at the second half of the second year and another one in the third year -Clinical exam
 B-Order the following non invasive and invasive diagnostic procedures Routine appropriate Lab investigations related to Laryngotracheobronchology. X ray chest. X ray neck& larynx. CT neck& larynx MRI neck& larynx. Angiography. Biopsy taking Phoniatric consultation. Pre-operative embolization. Pathology reports. Diagnostic direct laryngoscopy. 	-Clinical round with senior staff -Observation -Post graduate teaching -Hand on workshops -Perform under supervision of senior staff	- Procedure presentation - Log book - Chick list
C-Interpret the following non invasive and invasive diagnostic procedures • Routine appropriate Lab investigations	-Clinical round with senior staff	ProcedurepresentationLog book

	T	T
related to Laryngotracheobronchology.	-Observation	- Chick list
X ray chest.	-Post	
X ray neck& larynx.	graduate	
• CT neck& larynx	teaching	
MRI neck& larynx.	-Hand on	
Angiography.	workshops	
Biopsy taking	-Perform	
Phoniatric consultation.	under	
Pre-operative embolization.	supervision	
Pathology reports.	of senior staff	
Diagnostic direct laryngoscopy.		
D-Perform the following non invasive and	-Clinical	- Procedure
invasive diagnostic procedures	round with	presentation
Biopsy taking	senior staff	- Log book
Pathology reports.	-Observation	- Chick list
Phoniatric consultation.	-Post	
	graduate	
Diagnostic direct laryngoscopy	teaching	
	-Hand on	
	workshops	
	-Perform	
	under	
	supervision	
	of senior staff	
E-Prescribe the following non invasive and	-Observation	- Procedure
invasive therapeutic procedures.	-Post	presentation
Prescribe proper treatment for conditions	graduate	- Log book
in A.A	teaching	- Chick list
 Tracheotomy 	-Hand on	
■ Endoscopic removal of foreign body from	workshops	
laryngotracheobroncheal tree.		
Laryngofissure.		
Laryngectomy (Partial &Total).		
Voice restoration after laryngectomy.		

 Surgery of laryngotracheal stenosis (Paediatrics& Adult). Phonosurgery & microlaryngeal surgery. Direct laryngoscopy (Diagnostic & therapeutic). 		
Tracheobronchoscopy :(Diagnostic & Therapeutic).		
 F-Perform the following non invasive and invasive therapeutic operations: Tracheotomy. Endoscopic removal of foreign body from laryngotracheobroncheal tree. Laryngofissure. Laryngectomy (Partial &Total). Voice restoration after laryngectomy. Surgery of laryngotracheal stenosis (Paediatrics& Adult). Phonosurgery & microlaryngeal surgery. Direct laryngoscopy (Diagnostic & therapeutic). Tracheobronchoscopy :(Diagnostic &Therapeutic). 	-Observation -Post graduate teaching -Hand on workshops	 Procedure presentation Log book Chick list
 G-Develop patient management plans for the following problems: Congenital Disorders of the Larynx Trauma to the Larynx Laryngotracheal Stenosis in Adults Infectious and Inflammatory Diseases of the Larynx Neurogenic Disorders of the Larynx Functional Disorders of the Larynx Minimal pathological Disorders of the Larynx Neoplasms of the Larynx 	-Clinical round with senior staff	

 9. Disorders of Speech, and Language 10. Disorders of the trachea & bronchi. 11. Paediatrics laryngotracheal disorders. 	
 H-Develop and carry out patient management plans for the following problems 1. Congenital Disorders of the Larynx 2. Trauma to the Larynx 3. Laryngotracheal Stenosis in Adults 4. Infectious and Inflammatory Diseases of the Larynx 5. Neurogenic Disorders of the Larynx 6. Functional Disorders of the Larynx 7. Minimal pathological Disorders of the Larynx 8. Neoplasms of the Larynx 9. Disorders of Speech, and Language 10. Disorders of the trachea & bronchi. 11. Paediatrics laryngotracheal disorders. 	-Clinical round with senior staff
 I-Counsel and educate patients and their family about Congenital Disorders of the Larynx Trauma to the Larynx Laryngotracheal Stenosis in Adults Infectious and Inflammatory Diseases of the Larynx Neurogenic Disorders of the Larynx Functional Disorders of the Larynx Minimal pathological Disorders of the Larynx Neoplasms of the Larynx Disorders of Speech, and Language Disorders of the trachea & bronchi. Paediatrics laryngotracheal disorders. 	-Clinical round with senior staff

J-Use information technology to support	-Clinical
patient care decisions and patient education	round with
for the Laryngotracheobronchology related	senior staff
conditions.	
K-Provide health care services aimed at	-Clinical
preventing the following conditions	round with
1. Congenital Disorders of the Larynx	senior staff
2. Trauma to the Larynx	
3. Laryngotracheal Stenosis in Adults	
4. Infectious and Inflammatory Diseases of	
the Larynx	
5. Neurogenic Disorders of the Larynx	
6. Functional Disorders of the Larynx	
7. Minimal pathological Disorders of the	
Larynx	
8. Neoplasms of the Larynx	
9. Disorders of Speech, and Language	
10. Disorders of the trachea & bronchi.	
11. Paediatrics laryngotracheal disorders.	
12. Occupational laryngeal disorders .	
13. Recurrence of some laryngeal diseases.	
L-Work with health care professionals,	-Clinical
•	round with
including those from other disciplines, to	senior staff
provide patient-focused care for the mentioned in A.A and A.C	
mentioned in A.A and A.C	
M-Write competently all forms of patient	
charts and sheets including reports evaluating	
these charts and sheets.(Write and evaluate a	
consultation note, Inform patients of a	
diagnosis and therapeutic plan, completing and	
evaluating comprehensive, timely and legible	
medical records)	

D-General Skills

Practice-Based Learning and Improvement

ILOs	Methods of teaching/ learning	Methods of Evaluation
A-Perform practice-based improvement activities using a systematic methodology in the common problems (plain and conduct audit cycles) in conditions mentioned in A.A and A.C	-Simulations -Clinical round -Seminars -Lectures -Case presentation -Hand on workshops	- Global rating -Procedure & case presentation -Log book & Portfolios - Chick list
B-Locate, appraises, and assimilates evidence from scientific studies related to patients' health problems.	-Simulations -Clinical round -Seminars -Lectures -Case presentation -Hand on workshops	- Global rating -Procedure & case presentation -Log book & Portfolios - Chick list
C-Apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness		
D-Use information technology to manage information, access on-line medical information; and support their own education		
E-Lead the learning of students and other health care professionals.		

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F-Create and sustain a therapeutic and ethically sound relationship with patients	-Simulations -Clinical round -Seminars -Lectures -Case presentation -Hand on workshops	- Global rating -Procedure & case presentation -Log book & Portfolios - Chick list
 G-Perform the following oral communications: b. Interpretation of the results of different investigations related to Laryngotracheobronchial diseases and discussion of different therapeutic options 		
 H-Fill the following reports: Patients' medical reports Death report Postoperative reports. Pathological reports. 		
I-Work effectively with others as a member or leader of a health care team as regard diagnosis and treatment of conditions mentioned in A.A and A.C		

Professionalism

ILOs	Methods of teaching/ Learning	Methods of Evaluation
J-Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society that supersedes self-interest.	ObservationSenior staffexperienceCase taking	-Objective structured clinical examination - Patient survey
K-Demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices.		- 360o global rating
L-Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		

Systems-Based Practice

Jystems Basea i ra		
ILOs	Methods of teaching/ learning	Methods of Evaluation
M-Work effectively in different health care delivery settings and systems.	- Observation - Senior staff	- 360o global rating
N-Practice cost-effective health care and resource allocation that does not compromise quality of care	experience	- Check list evaluation of live or recorded performance
O-Advocate for quality patient care and assist patients in dealing with system complexities		- 360o global rating
P-Partner with health care managers and health care providers to assess, coordinate, and improve health care and predict how these activities can affect system performance		- Patient survey

Course 6: Module 4,5:Oral cavity, Pharynx, Oesophageus, head & neck surgery.

A-Knowledge and understanding

ILOs	Methods of	Methods of
ILOS	teaching/	Evaluation
	learning	
A.Explain detailed update and evidence based	-Didactic	-OSCE at the
etiology, clinical picture, diagnosis and	(lectures,	end of each year
management of the following common diseases	seminars,	-log book &
and clinical conditions:	tutorial)	portfolio
1. Diseases of the nasopharynx.	-Clinical	- One MCQ
2. Diseases of the oropharynx.	rounds	examination at
3. Diseases of the hypopharynx.	-Seminars	the second half
4. Diseases of the cervical oesophagus.	-Clinical	of the second
5. Diseases of the thyroid & parathyroid glands.	rotations	year and
6. Diseases of the salivary glands.	-Service	another one in
7. Diseases of the cervical lymph nodes.	teaching	the third year
8. Congenital head & neck disorders.		-Written and
9. Traumatic head & neck disorders.		oral
10. Inflammatory head & neck disorders		examination
11. Neoplasic head & neck disorders.		
12. Paediatrics head & neck disorders.		
B. Mention the detailed principles of	-Didactic	-OSCE at the
1. Diseases of the nasopharynx.	(lectures,	end of each year
2. Diseases of the oropharynx.	seminars,	-log book &
3. Diseases of the hypopharynx.	tutorial)	portfolio
4. Diseases of the cervical oesophagus.	-Clinical	- One MCQ
5. Diseases of the thyroid & parathyroid glands.	rounds	examination at
6. Diseases of the salivary glands.	-Seminars	the second half
7. Diseases of the cervical lymph nodes.	-Clinical	of the second
8. Congenital head & neck disorders.	rotations	year and
9. Traumatic head & neck disorders.	-Service	another one in
10. Inflammatory head & neck disorders	teaching	the third year

11.	Neoplasic head & neck disorders.		-Written and
12.	Paediatrics head & neck disorders.		oral
			examination
C.Mention	basics of the following rare diseases and	-Didactic	-OSCE at the
conditions	= = = = = = = = = = = = = = = = = = = =	(lectures,	end of each year
1. Phar	yngeal pouch.	seminars,	-log book &
2. Disea	ases of the cervical oesophagus.	tutorial)	portfolio
3. Disea	ases of the parathyroid glands.	-Clinical	- One MCQ
4. Prim	ary neoplasic head & neck disorders.	rounds	examination at
		-Seminars	the second half
		-Clinical	of the second
		rotations	year and
		-Service	another one in
		teaching	the third year
			-Written and
			oral
			examination
D.Explain	the facts and principles of the relevant		
basic supp	ortive sciences related to		
Pharyngo	esophageal, head & neck surgery.		
E.Explain t	the facts and principles of the relevant		
clinically s	upportive sciences related to		
Pharyngo	esophageal, head & neck surgery		
F.Describe	the basic ethical and medicolegal		
principles	revenant to Pharyngoesophageal, head		
& neck sur	rgery		
G.Describe	e the basics of quality assurance to ensure		
good clinic	cal care in Pharyngoesophageal, head &		
neck surge	ery		
H.Explain medical re	the ethical and scientific principles of esearch.		
I.Explain t	he impact of common health problems in		
-	f Pharyngoesophageal , head & neck		
	the society.		

B-Intellectual outcomes

D-Intellectual out		
ILOs	Methods of teaching/ learning	Methods of Evaluation
A-Design and present case in common problem related to Pharyngoesophageal, head & neck surgery.	-Clinical rounds -Senior staff experience	-Procedure and case presentation -Log book & Portfolio
B-Apply the basic and clinically supportive sciences which are appropriate to Pharyngoesophageal, head & neck surgery related problems.		
C-Demonstrate an investigatory and analytic thinking "problem – solving "approaches to clinical situation related to Pharyngoesophageal, head & neck surgery DPlan research projects.		
E-Write scientific papers.		
F- Lead risk management activities as a part of clinical governs. 1.Cut throat. 2.Posttonsillectomy bleeding. 3.Mortality in the ward		
I-Plain quality improvement activities in the field of medical education and clinical practice in Pharyngoesophageal, head & neck surgery.		
J- Create and innovate plans, systems, and other issues for improvement of performance in Pharyngoesophageal, head & neck surgery		
K- Present and defend his / her data in front of a panel of experts		
L-Formulate management plans and alternative decisions in different situations in the field of Pharyngoesophageal, head & neck surgery.		

C-Practical skills (Patient Care)

ILOs	Methods of teachinhg/ learning	Methods of Evaluation
A-Take history, examine and clinically diagnose different conditions related to Pharyngoesophageal, head & neck surgery	-Didactic (lectures, seminars, tutorial) -Clinical rounds Clinical rotations (service teaching)	-OSCE at the end of each year -log book & portfolio - One MCQ examination at the second half of the second year and another one in the third year -Clinical exam
 B-Order the following non invasive and invasive diagnostic procedures Routine appropriate Lab investigations related to Pharyngoesophageal, head & neck surgery X ray chest. X ray Pharynx & neck CT Pharynx & neck. MRI Pharynx & neck. Neck ultrasonography. Angiography. Biopsy taking Phoniatric consultation. Pre-operative embolization. Pathology reports. Diagnostic direct hypopharyngoscopy. Diagnostic oesophagoscopy. 	-Clinical round with senior staff -Observation -Post graduate teaching -Hand on workshops -Perform under supervision of senior staff	- Procedure presentation - Log book - Chick list

Fine needle aspiration cytology.		
C-Interpret the following non invasive and invasive diagnostic procedures Routine appropriate Lab investigations related to Pharyngoesophageal, head & neck surgery X ray chest. X ray Pharynx & neck CT Pharynx & neck. MRI Pharynx & neck. Neck ultrasonography. Angiography. Biopsy taking Phoniatric consultation. Pre-operative embolization. Pathology reports. Diagnostic direct hypopharyngoscopy. Diagnostic oesophagoscopy. Fine needle aspiration cytology.	-Clinical round with senior staff -Observation -Post graduate teaching -Hand on workshops -Perform under supervision of senior staff	- Procedure presentation - Log book - Chick list
 D-Perform the following non invasive and invasive diagnostic procedures Biopsy taking Pathology reports. Phoniatric consultation. Diagnostic direct hypopharyngoscopy. Diagnostic oesophagoscopy. Fine needle aspiration cytology. 	-Clinical round with senior staff -Observation -Post graduate teaching -Hand on workshops -Perform under supervision of senior staff	- Procedure presentation - Log book - Chick list
E-Prescribe the following non invasive and invasive therapeutic procedures.	-Observation -Post	- Procedure presentation

 Prescribe proper treatment for conditions 	graduate	- Log book
in A.A	teaching	- Chick list
 Adenoidectomy. 	-Hand on	
• Tonsillectomy.	workshops	
 Uvulopalatopharyngoplasty & other snoring 		
operations.		
Repair of velopharyngeal valve		
incompetence		
Excision of nasopharyngeal tumors.		
Excision of oropharyngeal tumors.		
Hypopharyngolaryngectomy.		
Neck dissection.		
Recostruction of head & neck defects.		
Excision of thyroglossal , dermoid &		
branchial cysts or sinuses or fistulae.		
Thyroidectomy.		
Parotidectomy.		
 Submandibular sialadenectomy. 		
■ Direct hypopharyngoscopy(Diagnostic		
&Therapeutic).		
Oesophagoscopy(Diagnostic &Therapeutic).		
F-Perform the following non invasive and	-Observation	- Procedure
	-Post	presentation
	graduate	- Log book
-	teaching	- Chick list
-	-Hand on	
	workshops	
-		
 Excision of oropharyngeal tumors. Hypopharyngolaryngectomy. Neck dissection. Recostruction of head & neck defects. 	-Post graduate teaching -Hand on	presentation - Log book

branchial cysts or sinuses or fistulae.	
■ Thyroidectomy.	
■ Parotidectomy.	
Submandibular sialadenectomy.	
Direct hypopharyngoscopy(Diagnostic	
&Therapeutic).	
 Oesophagoscopy(Diagnostic &Therapeutic). 	
Clinical	
G-Develop patient management plans for the round with	
following problems.	
1. Diseases of the nasopharynx.	
2. Diseases of the oropharynx.	
3. Diseases of the hypopharynx.	
4. Diseases of the cervical oesophagus.	
5. Diseases of the thyroid & parathyroid	
glands.	
6. Diseases of the salivary glands.	
7. Diseases of the cervical lymph nodes.	
8. Congenital head & neck disorders.	
9. Traumatic head & neck disorders.	
10. Inflammatory head & neck disorders	
11. Neoplasic head & neck disorders.	
12. Paediatrics head & neck disorders.	
H-Develop and carry out patient management -Clinical	
plans for the following problems round with	
1. Diseases of the nasopharynx. senior staff	
2. Diseases of the oropharynx.	
3. Diseases of the hypopharynx.	
4. Diseases of the cervical oesophagus.	
5. Diseases of the thyroid & parathyroid	
glands.	
6. Diseases of the salivary glands.	
7. Diseases of the cervical lymph nodes.	
8. Congenital head & neck disorders.	
9. Traumatic head & neck disorders.	
10. Inflammatory head & neck disorders	

	1
11. Neoplasic head & neck disorders.	
12. Paediatrics head & neck disorders.	
I-Counsel and educate patients and their family	-Clinical
about	round with
1. Diseases of the nasopharynx.	senior staff
2. Diseases of the oropharynx.	
3. Diseases of the hypopharynx.	
4. Diseases of the cervical oesophagus.	
5. Diseases of the thyroid & parathyroid	
glands.	
6. Diseases of the salivary glands.	
7. Diseases of the cervical lymph nodes.	
8. Congenital head & neck disorders.	
9. Traumatic head & neck disorders.	
10. Inflammatory head & neck disorders	
11. Neoplasic head & neck disorders.	
12. Paediatrics head & neck disorders.	
J-Use information technology to support	-Clinical
patient care decisions and patient education	round with
for the Pharyngoesophageal, head & neck	senior staff
surgery related conditions.	
K-Provide health care services aimed at	-Clinical
preventing the following conditions	round with
1. Diseases of the nasopharynx.	senior staff
2. Diseases of the oropharynx.	
3. Diseases of the hypopharynx.	
4. Diseases of the cervical oesophagus.	
5. Diseases of the thyroid & parathyroid	
glands.	
6. Diseases of the salivary glands.	
7. Diseases of the cervical lymph nodes.	
8. Congenital head & neck disorders.	
9. Traumatic head & neck disorders.	
10. Inflammatory head & neck disorders	

11. Neoplasic head & neck disorders.12. Paediatrics head & neck disorders.		
L-Work with health care professionals, including those from other disciplines, to provide patient-focused care for the mentioned in A.A and A.C	-Clinical round with senior staff	
M-Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets. (Write and evaluate a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and evaluating comprehensive, timely and legible medical records)		

D-General Skills

Practice-Based Learning and Improvement

ILOs	Methods of teaching/ learning	Methods of Evaluation
A-Perform practice-based improvement activities using a systematic methodology in the common problems (plain and conduct audit cycles) in conditions mentioned in A.A and A.C	-Simulations -Clinical round -Seminars -Lectures -Case presentation -Hand on workshops	- Global rating -Procedure & case presentation -Log book & Portfolios - Chick list
B-Locate, appraises, and assimilates evidence from scientific studies related to patients'	-Simulations -Clinical round	- Global rating -Procedure & case presentation

health problems.	-Seminars -Lectures -Case presentation -Hand on workshops	-Log book & Portfolios - Chick list
C-Apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness		
D-Use information technology to manage information, access on-line medical information; and support their own education		
E-Lead the learning of students and other health care professionals.		

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F-Create and sustain a therapeutic and ethically sound relationship with patients	-Simulations -Clinical round -Seminars -Lectures -Case presentation -Hand on workshops	- Global rating -Procedure & case presentation -Log book & Portfolios - Chick list
G-Perform the following oral communications:		
Interpretation of the results of different investigations related to pharyngeosphageal ,head &neck diseases and discussion of		

different therapeutic options	
H-Fill the following reports:	
Patients' medical reports	
Death report	
Postoperative reports.	
Pathological reports.	
I-Work effectively with others as a member or	
leader of a health care team as regard diagnosis	
and treatment of conditions mentioned in A.A	
and A.C	

Professionalism

ILOs	Methods of teaching/ Learning	Methods of Evaluation
J-Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society that supersedes self-interest.	ObservationSenior staffexperienceCase taking	-Objective structured clinical examination - Patient survey
K-Demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices.		- 360o global rating
L-Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
M-Work effectively in different health care delivery settings and systems.	Observation -Senior staff experience	- 360o global rating
N-Practice cost-effective health care and resource allocation that does not compromise quality of care		- Check list evaluation of live or recorded performance
O-Advocate for quality patient care and assist patients in dealing with system complexities		- 360o globalrating- Patient survey
P-Partner with health care managers and health care providers to assess, coordinate, and improve health care and predict how these activities can affect system performance		

4. Course contents (topic s/modules/rotation Course Matrix

Time Schedule: Second part Unit 1: Otology & Neurotology.

	Offic 1. Otology & Net		Covere	d ILOs	
	Topic	Knowledg	Intellectu	Practical	General
		е	al	skill	Skills
1.	Congenital	A,D-H	A-J	A-I,K,M	A-F,I-M
	otological disorders.				
2.	Diseases of the	A,D-I	A-J	A-M	A-E
	External Ear.				
3.	Otitis Media and	A,B,E-I	A-J	A-J,L-M	A-P
	Middle Ear				
	Effusions.				
4.	Chronic Otitis	A,B,D-I	A-E,G-I	A-M	A-P
	Media.				
5.	Cholesteatoma.	A,D-I	A-E,G-I	A-M	A-P
6.	Cranial and	A,B,D-I	A-E,G-I	A-M	A-P
	Intracranial				
	Complications of				
	Acute and Chronic				
	Otitis Media .				
7.	Otosclerosis.	A,B,D-I	A-E,G-I	A-M	A-P
8.	Hereditary Hearing	A,B,D-I	A-E,G-I	A-M	А-Р
	Impairment .				
9.	Trauma to the	A,B,D-I	A-L	A-M	А-Р
	Middle Ear, Inner				
	Ear, and Temporal				
	Bone.				
10.	Diving medicine.	A,B,D-I	A-E,G-I	A-F,I-M	A-P

11.	Occupational	A-I	A-I	A-M	
	Hearing Loss.				
12.	Ototoxicity .	A-I	A-E,G-I	A-M	A-P
13.	Sensorineural	A-I	A-I	A-M	A-P
	Hearing Loss.				
14.	Perilymphatic	A-I	A-E,G-I	A-F,I-M	A-P
	Fistulae .				
15.	Autoimmune Inner	A-I	A-E,G-I	A-F,I-M	A-P
	Ear Disease				
16.	Meniere's	A,B,D-I	A-L	A-M	A-P
	Disease, Vestibular				
	Neuronitis,				
	Paroxysmal				
	Positional Vertigo.				
17.	Cerebellopontine	A-I	A-E,G-I	A-F,I-M	A-P
	Angle Tumors				
18.	Diseases of the	A-I	A-E,G-I	A-F,I-M	A-P
	temporal bone.				
19.	Glomus tumors &	A,B,D-I	A-E,G-I	A-M	A-P
	other tumors of the				
	ear.				
20.	Presbyacusis	A,B,D-I	A-E,G-I	A-M	A-P
21.	Tinnitus and	A,B,D-I	A-I	A-M	A-P
	Hyperacusis				
22.	Disorders of the	A-I	A-I	A-M	A-P
	facial nerve.				
23.	Anterior skull base	A-I	A-E,G-I	A-F,I-M	A-P
	lesions.				
24.	Paediatrics	A,B,D-I	A-E,G-I	A-M	A-P
oto	logical problems.				

Unit 2: Rhinology.

J.	Covered ILOs					
Topic	Knowledge	Intellectual	Practical skill	General Skills		
 Congenital sinonasal disorders. 	A,D-I	A-I	A-L	A-P		
2. Olfactory disorders.	A –I	A-D,F-L	A-M	A-P		
3. Diseases of the external nose.	A,B,D-I	F -I	A-L	A-P		
4. Acquired Immune Deficiency Syndrome	A-I	A-D,F-I	AM	A-P		
5. Infectious Diseases of the Upper Respiratory Tract.	A,D-I	A-D,F-I	A-L	A-P		
6. Allergic Rhinitis	A,B,D-I	A-I	A-L	A-P		
7. Epistaxis.	A,B,D-I	A-I	A-L	A-P		
8. Nasal septum diseases.	A,D-I	F-I	A-M	A-P		
9. Acute and Chronic Nasal Disorders	A,B,D-I	A-D,F-I	A-L	A-P		
10. Sinusitis and Polyposis	A,B,D-I	A-I	A-L	A-P		
11. Nasal granulomas(Infectious &Inflammatory).	A-I	A-D,F-I	A-M	A-P		
12. Sinusitis & its complications.	A,B,D-I	A-L	A-L	A-P		
13. Fungal rhinosinusitis.	A,B,D-I	F-I	A-L	A-P		
14. Cysts related to nose & paranasal sinuses.	A-I	A-D,F-I	A-L	A-P		
15. Headache and Facial	A,B,D-I	F-I	A-L	A-P		

Pain				
16. Neoplasms of the Nose	A-I	A-D,F-I	A-L	A-P
and Paranasal Sinuses	, , ,			
17. Orbital diseases in	A,D-I	A-D,F-I	A-L	A-P
rhinology.	A,D-1			
18. Nasal Reconstruction	A,B,D-I	A-D,F-I	A-L	A-P
and Rhinoplasty	A,0,0-1			
19. Facial Fractures.	A,B,D-I	F-I	A-L	A-P
20. Cerebrospinal	A-I	A-D,F-I	A-L	A-P
rhinorrhea.	A-1			
21. Oroantral fistula.	A,D-I	A-D,F-I	A-L	A-P
22. Paediatric rhinological	A,B,D-I	A-D,F-I	A-L	A-P
problems	A,D,D-I			

Unit 3:Larynx ,Trache & Bronchi.

	Topic	Covered ILOs			
		Knowledge	Intellectual	Practical	General
				skill	Skills
1.	Congenital Disorders of the Larynx	A-I	A-O	A-L	A-E
2.	Trauma to the Larynx	A,B,D-I	A-D,H-I	A-M	A-P
3.	Laryngotracheal Stenosis in Adults	A,B,D-I	A-L	A-M	A-P
4.	Infectious and Inflammatory Diseases of the Larynx	A-I	A-D,H-I	A-L	А-Р
5.	Neurogenic Disorders of the Larynx	A-I	A-D,H-I	A-L	A-E
6.	Functional Disorders of the Larynx	A-I	A-D,H-I	A-L	A-E
7.	Minimal pathological Disorders of the Larynx	A-I	A-D,H-I	A-L	A-P
8.	Neoplasms of the Larynx	A,B,D-I	A-D,H-I	A-M	A-P
9.	Disorders of Speech, and Language	A,B,D-I	A-D,H-I	A-L	A-P
10.	Disorders of the trachea & bronchi.	A-I	A-D,H-I	A-M	A-P
11.	Paediatrics laryngotracheal disorders.	A,B,D-I	A-L	A-L	A-P

Module4,5: Oral cavity ,Pharynx ,Oesophagus , Head and neck surgery.

	Topic	Covered ILOs				
		Knowledge	Intellectual	Practical skill	General Skills	
1.	Diseases of the nasopharynx.	A,B,D-I	A-L	A-M	A-P	
2.	Diseases of the oropharynx.	A,B,D-I	A-D,I-L	A-M	A-P	
3.	Diseases of the hypopharynx.	A-I	A-D,I-L	A-M	A-P	
4.	Diseases of the cervical oesophagus.	A-I	D-L	A-M	A-P	
5.	Diseases of the thyroid & parathyroid glands.	A-I	A-D,I-L	A-M	A-P	
6.	Diseases of the salivary glands.	A-B,D-I	A-D,I-L	A-M	A-P	
7.	Diseases of the cervical lymph nodes.	A-B,D-I	A-D,I-L	A-M	A-P	
8.	Congenital head & neck disorders.	A-I	A-D,I-L	A-M	A-P	
9.	Traumatic head & neck disorders.	A-I	A-D,I-L	A-M	A-P	
10.	Inflammatory head & neck disorders	A-B,D-I	A-D,I-L	A-M	A-P	
11.	Neoplasic head & neck disorders.	A-I	A-D,I-L	A-M	A-P	
12.	Paediatrics head & neck disorders.	A-I	A-D,I-L	A-M	A-P	

5. Course Methods of teaching/learning:

- 1. Didactic (lectures, seminars, tutorial).
- 2. Observation and Performance in operations.
- 3. Written & oral communication.
- 4. Senior staff experience.
- 5. clinical round
- 6. outpatient clinic
- 7. work shop

6. Course Methods of teaching/learning: for students with poor achievements

Extra Didactic (lectures, seminars, tutorial) according to their needs.

7. Course assessment methods:

- i. Assessment tools:
 - 1. Written, clinical, operative and oral examination
 - 2. Assessment of practical skills.
 - 3. Log book
- ii. Time schedule: At the end of the second part
- iii. Marks: 1200(480 written+240 oral +480 clinical operative)

8. List of references

- VII. Lectures notes
 - 1. Course notes
 - 2. Staff members print out of lectures and/or CD copies.
- VIII. Essential books
 - 1- Scott-Brown's Otorhinolaryngology and Head and Neck Surgery, Eighth Edition, 2018
 - 2- Diseases of the ear a textbook of otology.
 - Dr.Stuart R. Mawson 1997.

- **3-** TEXT BOOK OF Clinical Otolaryngology 1st ed. 2021 Edition,
- 4- CUMMINGS Otolaryngology- head and neck surgery. Apr 22, 2020
- 5- Paparella and Shumrick's Otolaryngology 3rd, 1991).
- 6- Illustrated human anatomy for medical students (Head&Neck) 2016.
- 7- Principles of pathology (General & Special) Dr. Gamal Nada.
- Q. Recommended books

Periodicals:

- 1. Archieves of Otolaryngology- head and neck surgery
- 2. Acta Oto-laryngloica
- 3. Clinical Otolaryngology
- 4. Laryngoscope
- 5. Journal of Laryngology and Otology
- 6. Otolaryngologic clinics of North America
- 7. Egyptian Journal of Otolaryngology
- 8. Journal of Egyptian Society of Otolaryngology and related science.

Web sites, ... etc

- 1. WWW. entnet.org
- 2. www,otohns.net
- 3. www,sinus.org
- 4. www.alexorl.com.
- 5. other: none

9. Signature

Course Coordinator:	Head of the Department:
Date:	Date:

ANNEX 2 Program Academic Reference Standards (ARS)

1- Graduate attributes for medical doctorate in Ear nose and throat surgery

The Graduate (after residence training and medical doctorate years of study) must:

- 1- Demonstrate competency and mastery of basics, methods and tools of scientific research and clinical audit in ENT surgery
- **2-** Have continuous ability to add knowledge to ENT surgery through research and publication.
- **3-** Appraise and utilise relevant scientific knowledge to continuously update and improve clinical practice.
- **4-** Acquire excellent level of medical knowledge in the basic biomedical, behavioural and clinical sciences, medical ethics and medical jurisprudence and apply such knowledge in patient care and scientific research.
- **5-** Function as a leader of a team to provide patient care that is appropriate, effective and compassionate for dealing with health problems and health promotion.
- **6-** Identify and create solutions for health problems in ENT surgery.
- **7-** Acquire an in depth understanding of common areas of ENT surgery, from basic clinical care to evidence based clinical application, and possession of required skills to manage independently all problems in these areas.

- 8- Demonstrate leadership competencies including interpersonal and communication skills that ensure effective information exchange with individual patients and their families and teamwork with other health professions, the scientific community and the public.
- **9-** Function as teacher in relation to colleagues, medical students and other health professions.
- **10-** Master decision making capabilities in different situations related to ENT surgery.
- 11- Show leadership responsiveness to the larger context of the health care system, including e.g. the organisation of health care, partnership with health care providers and managers, practice of cost-effective health care, health economics, and resource allocations.
- 12- Demonstrate in depth awareness of public health and health policy issues including independent ability to improve health care, and identify and carryout systembased improvement of care.
- 13- Show model attitudes and professionalism.
- 14- Demonstrate commitment for lifelong learning and maintenance of competence and ability for continuous medical education and learning in subsequent stages and in ENT surgeryor one of its subspecialties.
- **15-** Use recent technologies to improve his practice in ENT surgery.
- **16-** Share in updating and improving clinical practice in ENT surgery.

2- Competency based Standards for medical doctorate in Ear nose and throat surgery

22.1- Knowledge and understanding

By the end of the program, the graduate should demonstrate satisfactory knowledge and understanding of

- **2-1-A-** Established, updated and evidence- based theories, basics and developments of ENT surgery and relevant sciences.
- **2-1-B-** Basics, methods and ethics of medical research.
- **2-1-C-** Ethical and medicolegal principles of medical practice related to ENT surgery.
- 2-1-D- Principles and measurements of quality in ENT Surgery.
- **2-1-E-** Principles and efforts for maintainace and improvements of public health.

2- Intellectual skills

By the end of the program, the graduate should be able to demonstrate the following

- **2-2-A-** Application of basic and other relevant science to solve ENT surgeryrelated Problems.
- 2-2-B- Problem solving based on available data.
- 2-2-C- Involvement in research studies related to ENT surgery.
- 2-2-D- Writing scientific papers.
- 2-2-E- Risk evaluation in the related clinical practice.
- 2-2-F- Planning for performance improvement in ENT surgery.
- 2-2-G- Creation and innovation in ENT surgery.
- 2-2-H- Evidence based discussion.
- **2-2-I-** Decision making in different situations related to Otolaryngeal -head neck surgery.

2.3- Clinical skills

By the end of the program, the graduate should be able to

Competency-based outcomes for Patient Care:-

- 2-3-A- MD students must be able to provide extensive level of patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health extensive level means in depth understanding and from basic science to evidence based clinical application and possession of skills to manage independently all problems in ENT surgery.
- **2-3-B-** Master patient care skills relevant to ENT surgeryfor patients with all diagnoses and procedures.
- **2-3-C-** Write and evaluate reports for situations related to the ENT surgery.

2.4- General skills

- By the end of the program, the graduate should be able to Learning and Improvement
- 2-4-A-Master practice-based learning and improvement skills that involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence, improvements in patient care and risk management
- **2-4-B** Use competently all information sources and technology to improve his practice.
- 2-4-C- Master skills of teaching and evaluating others.
 - Competency-based objectives for Interpersonal and Communication Skills
- **2-4-D-**Master interpersonal and communication skills that result in effective information exchange and teaming with patients, their families, and other health professionals.

Competency-based objectives for Professionalism

- **2-4-E-**Master Professionalism behavior, as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.
 - Competency-based objectives for Systems-based Practice:
- **2-4-F-**Demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively use system resources to provide care that is of optimal value.
- 2-4-G- Participate in improvement of the education system.
- **2-4-H-** Demonstrate skills of leading scientific meetings including time management
- **2-4-O-** Demonstrate skills of self and continuous learning.

Annex 3, Methods of teaching/learning

Annex 3, Methods of teaching/learning

	Patient care	Medical knowledge	Practice- based learning/ Improvement	Interpersonal and communication skills		Systems- based practice
Didactic (lectures, seminars, tutorial)	X	X		X	X	X
journal club,	х	х	x			
Educational prescription	Х	х	х	х	х	Х
Present a case (true or simulated) in a grand round	v	х	х	х	х	
Observation and supervision	x		х	х	х	х
conferences		х	х	х		х
Written assignments	X	x	X	X	х	х
Oral assignments	х	х	х	х	х	х

Teaching methods for knowledge

- Didactic (lectures, seminars, tutorial)
- journal club
- Critically appraised topic
- Educational prescription (a structured technique for following up on clinical questions that arise during rounds and other venues).
- Present a case (true or simulated) in a grand round
- Others

Teaching methods for patient care

- Observation and supervision /Completed tasks procedure/case logs
- On-the-job" training without structured teaching is not sufficient for this skill (checklists).
- Simulation is increasingly used as an effective method for skill/ teamwork training.

Teaching methods for other skills

- Written communication (e.g., orders, progress note, transfer note, discharge summary, operative reports, and diagnostic reports).
- Oral communication (e.g., presentations, transfer of care, interactions with patients, families, colleagues, members of the health care team) and/or non verbal skills (e.g., listening, team skills)
- Professionalism, including medical ethics, may be included as a theme throughout the program curriculum that includes both didactic and experiential components (e.g., may be integrated into already existing small group discussions of vignettes or case studies and role plays, computer-based modules) and may be modeled by the faculty in clinical practice and discussed with the resident as issues arise during their clinical practice.

Annex 4, Assessment methods

Annex 4, ILOs evaluation methods for MD students.

	Practical skills	К	Intellectu al	General skills			
Method	Patient care	К	I	Practice- based learning/ Improveme nt	communica	Professionali	Systems- based practice
Record review	x	X	Х		х	X	X
Checklist	x				х		
Global rating	Х	Х	Х	х	х	х	х
Simulations	x	x	x	x	x	x	
Portfolios	х	х	х	х	х		
Standardized oral examination	х	х	Х	Х	Х		X
Written examination	х	X	Х	х			X
Procedure/ case log	х	X					
OSCE	х	X	Х	Х	Х	х	X

Annex 4, Glossary of MD students assessment methods

- Record Review Abstraction of information from patient records, such as medications or tests ordered and comparison of findings against accepted patient care standards.
- Chart Stimulated Recall Uses the MD doctor's patient records in an oral examination to assess clinical decision-making.
- Mini clinical evaluation: Evaluation of Live/Recorded Performance (single event) – A single resident interaction with a patient is evaluated using a checklist. The encounter may be videotaped for later evaluation.
- Standardized Patients (SP) Simulated patients are trained to respond in a manner similar to real patients. The standardized patient can be trained to rate MD doctor's performance on checklists and provide feedback for history taking, physical examination, and communication skills. Physicians may also rate the MD doctor's performance.
- Objective Structured Clinical Examination (OSCE) A series of stations with standardized tasks for the MD doctors to perform. Standardized patients and other assessment methods often are combined in an OSCE. An observer or the standardized patient may evaluate the MD doctors.
- ❖ Procedure or Case Logs MD doctors prepare summaries of clinical experiences including clinical data. Logs are useful to document educational experiences and deficiencies.
- PSQs Patients fill out Patient Survey questionnaires (PSQs) evaluating the quality of care provided by MD doctors.
- Case /problems assess use of knowledge in diagnosing or treating patients or evaluate procedural skills.

- Models: are simulations using mannequins or various anatomic structures to assess procedural skills and interpret clinical findings. Both are useful to assess practice performance and provide constructive feedback.
- ❖ 360 Global Rating Evaluations MD doctors, faculty, nurses, clerks, and other clinical staff evaluate MD doctors from different perspectives using similar rating forms.
- ❖ Portfolios A portfolio is a set of project reports that are prepared by the MD doctors to document projects completed during the MD study years. For each type of project standards of performance are set. Example projects are summarizing the research literature for selecting a treatment option, implementing a quality improvement program, revising a medical student clerkship elective, and creating a computer program to track patient care and outcomes.
- ❖ Examination MCQ A standardized examination using multiplechoice questions (MCQ). The in-training examination and written board examinations are examples.
- ❖ Examination Oral Uses structured realistic cases and patient case protocols in an oral examination to assess clinical decision-making.
- Procedure or Case Logs MD doctors prepare summaries of clinical experiences including clinical data. Logs are useful to document educational experiences and deficiencies.
- PSQs Patients fill out Patient Survey questionnaires (PSQs) evaluating the quality of care provided by MD doctors.

Annex 5, program evaluation tools

By whom	Method	sample	
Quality Assurance Unit	Reports	#	
Quanty Assurance offic	Field visits	π	
External Evaluator (s):According to			
department council	Reports	#	
External Examiner (s): According to	Field visits	#	
department council			
	Reports		
Stakeholders	Field visits	#	
	Questionnaires		
Senior students	Questionnaires	#	
	Questionnaires	Ħ	
Alumni	Questionnaires	#	
	Questionnaires	#	

Annex 6, program Correlations:

مصفوفة توافق المعايير القومية القياسية العامة لبرامج الدكتوراه مع المعايير الأكاديمية المعتمدة من كلية الطب – جامعة أسيوط لدرجة المعايير الأكاديمية الدكتوراه في جراحة الأنف والأذن

1- Graduate attributes

Faculty ARS	NARS
1- Demonstrate competency and mastery of basics, methods and tools of scientific research and clinical audit in ENT surgery.	1-إتقان أساسيات و منهجيات البحث العلمي
2- Have continuous ability to add knowledge new developments to ENT surgerythrough research and publication.	2-العمل المستمر علي الإضافة للمعارف في مجال التخصص
3- Appraise and utilise scientific knowledge to continuously update and improve clinical practice and relevant basic sciences.	3-تطبيق المنهج التحليلي والناقد للمعارف في مجال التخصص و المجالات ذات العلاقة
4- Acquire excellent level of medical knowledge in the basic biomedical, clinical, behavioural and clinical sciences, medical ethics and medical jurisprudence and apply such knowledge in patient care and scientific	4-دمج المعارف المتخصصة مع المعارف ذات العلاقة مستنبطا و مطورا للعلاقات البينية بينها
5- Function as a leader of a team to provide patient care that is appropriate, compassionate for dealing effective and with health Problems and health promotion.	5-إظهار وعيا عميقا بالمشاكل الجارية و النظريات الحديثة في مجال التخصص
7- Acquire an in depth understanding of common areas of speciality, from basic clinical care to evidence based clinical application, and possession of skills to manage independently all problems in these areas.	
6- Identify and create solutions for health problems in ENT surgery.	6-تحديد المشكلات المهنية و إيجاد حلولا مبتكرة لحلها
5- Function as a leader of a team to	7 القان نطاقا واسعا من المهارات المهنية

provide patient care that is appropriate, effective and compassionate for dealing with health problems and health promotion. 7- Acquire an in depth understanding of common areas of ENT surgery, from basic clinical care to evidence based clinical application, and possession of skills to manage independently all problems in these areas.	في مجال التخصص
8 - Share in updating and improving clinical practice in ENT surgery Function as teacher in relation to colleagues, medical students and other health professions.	8- التوجه نحو تطوير طرق و أدوات و أساليب جديدة للمزاولة المهنية
9- Use recent technologies to improve his practice in ENT surgery.	9-استخدام الوسائل التكنولوجية المناسبة بمارسته المهنية
 8- Demonstrate leadership competencies including interpersonal and communication skills that ensure effective information exchange with individual patients and their families and teamwork with other health professions, the scientific community and the public. 5- Function as a leader of a team to provide patient care that is appropriate, effective and compassionate for dealing with health problems and health promotion. 	10-التواصل بفاعلية و قيادة فريق عمل في سياقات مهنية مختلفة
10- Master decision making capabilities in different situations related to ENT surgery.	11-اتخاذ القرار في ظل المعلومات المتاحة
11- Show leadership responsiveness to the larger context of the health care system, including e.g. the organisation of health care, partnership with health care providers and managers, practice of cost-effective health care, health economics, and resource allocations.	12-توظيف الموارد المتاحة بكفاءة و تنميتها والعمل على إيجاد موارد جديدة

12- Demonstrate in depth awareness of public health and health policy issues including independent ability to improve health care, and identify and carryout system-based improvement of care.	13-الوعي بدوره في تنمية المجتمع والحفاظ على البيئة
13- Show model attitudes and professionalism.	14-التصرف بما يعكس الالتزام بالنزاهة و المصداقية و قواعد المهنة
14- Demonstrate commitment for lifelong learning and maintenance of competence and ability for continuous medical education and learning in subsequent stages and in ENT surgeryor one of its subspecialties. 15- Use recent technologies to improve his practice in ENT surgery.	15-الالتزام بالتنمية الذاتية المستمرة و نقل علمه و خبراته للآخرين

2- Academic standards

Faculty ARS	NARS
2.1. A- Established, updated and evidence- based theories, basics and developments of ENT surgeryand relevant sciences.	1-2-أ- النظريات و الأساسيات والحديث من المعارف في مجال التخصص والمجالات ذات العلاقة
2.1. B- Basic, methods and ethics of medical research.	1-2-ب -أساسيات و منهجيات و أخلاقيات البحث العلمي و أدواته المختلفة
2.1. C- Ethical and medicologal principles of medical practice related to ENT surgery.	2-1-ج- المبادئ الأخلاقية و القانونية للممارسة المهنية في مجال التخصص
2.1. D- Principles and measurements of quality in ENT surgery.	2-1-د مبادئ و أساسيات الجودة في الممارسة المهنية في مجال التخصص

2.1. E- Principles and efforts for maintains and	2-1-هـ - المعارف المتعلقة بآثار ممارسته		
improvements of public health.	المهنية على البيئة وطرق تنمية		
	البيئة وصيانتها		
2.2. A- Application of basic and other relevant	2-2-أ -تحليل و تقييم المعلومات في مجال		
science to solve ENT surgeryrelated problems.	التخصص و القياس عليها و		
·	الاستنباط منها		
2.2.B- Problem solving based on available data.	2-2-ب -حل المشاكل المتخصصة استنادا		
	علي المعطيات المتاحة		
2.2.C- Involvement in research studies related to	2-2-ج -إجراء دراسات بحثية تضيف إلى		
ENT surgery	المعارف		
2.2. D- Writing scientific papers.	2-2-د- صياغة أوراق علمية		
2.2. E- Risk evaluation in the related clinical	2-2—ه تقييم المخاطر في الممارسات		
practice.	المهنية		
2.2.F- Planning for performance improvement in	2-2-و -التخطيط لتطوير الأداء في مجال		
ENT surgery	التخصص		
2-2-G- Creation and innovation in the ENT	2-2-ز - الابتكار /الإبداع		
surgery.			
2.2. H- Evidence – based discussion.	2-2-ح- الحوار والنقاش المبني علي		
	البراهين والأدلة		
2.2.I- Discussion making in different situations	2-2-ط -اتخاذ القرارات المهنية في سياقات		
related to ENT surgery.	مهنية مختلفة		

2.3. A- MD students must be able to provide	2-3-أ - إتقان المهارات المهنية الأساسية و	
extensive level of patient care that is	الحديثة في مجال التخصص	
compassionate, appropriate, and effective	العديدة في مجان التعصص	
for the treatment of health problems and		
the promotion of health extensive level		
means in depth understanding and from		
basic science to evidence – based clinical		
application and possession of skills to		
manage independently all problems in ENT		
surgery.		
2.3. B- Master patient care skills relevant to		
ENT surgeryor patients with all		
diagnoses and procedures.		
2.3. C- Write and evaluate reports for situations	2-3-ب- كتابة و تقييم التقارير المهنية.	
related to the field of ENT surgery.	,	
2.4.A-Master practice-based learning and	2-3-ج -تقييم و تطوير الطرق و الأدوات	
improvement skills that involves	القائمة في مجال التخصص	
investigation and evaluation of their own	العالمة في مجال التحصيص	
patient care, appraisal and assimilation of		
scientific evidence, improvements in		
patient care and risk management		
2.4.B- Use competently all information sources	2-3-د - استخدام الوسائل التكنولوجية بما	
and technology to improve his practice.	يخدم الممارسة المهنية	
2.4.A-Master practice-based learning and	2-3-هـ -التخطيط لتطوير الممارسة المهنية	
improvement skills that involves		
investigation and evaluation of their own	وتنمية أداء الآخرين	
•		
investigation and evaluation of their own		
investigation and evaluation of their own patient care, appraisal and assimilation of		

II-Program ARS versus program ILOs

Comparison between ARS- ILOS for medical doctorate

(ARS)	(ILOs)
2-1- Knowledge and understanding	2-1- Knowledge and understanding
2-1-A- Established, updated and evidence-based Theories, Basics and developments of ENT surgeryand relevant sciences.	2-1-A- Demonstrate in-depth knowledge and understanding of theories, basics and updated biomedical, clinical epidemiological and socio behavioral science relevant to his speciality as well as the evidence – based application of this knowledge to patient care.
2-1-B Basic, methods and ethics of medical research.	2-1-B- Explain basics, methodology, tools and ethics of scientific medical, clinical research.
2-1-C- Ethical and medicologal principles of medical practice related to ENT surgeryfield.	2-1-C- Mention ethical, medico logical principles and bylaws relevant to his practice in the field of ENT surgery.
2-1-D- Principles and measurements of quality in the ENT surgery.	2-1-D- Mention principles and measurements of quality assurance and quality improvement in medical education and in clinical practice of ENT surgery.
2-1-E-Principles and efforts for maintains and improvements of public health.	2-1-E- Mention health care system, public health and health policy, issues relevant to this speciality and principles and methods of system — based improvement of patient care in common health problems of the field of ENT surgery.
2-2-Intellectual skills: 2-2-A-Application of basic and other relevant science to solve ENT surgery. related problems.	2-2- Intellectual skills: 2-2-A- Apply the basic and clinically supportive sciences which are appropriate to ENT surgeryrelated conditions / problem / topics.

2-2-B-Problem solving based on available data.	2-2-B- Demonstrate an investigatory and analytic thinking "problem – solving "approaches to clinical situation related to ENT surgery.		
2-2-C- Involvement in research studies related to the ENT surgery.	2-2-C- Plain research projects.		
2-2-D Writing scientific papers.	2-2-D- Write scientific paper.		
2-2-E-Risk evaluation in the related clinical practice.	2-2-E- Participate in clinical risk management as a part of clinical governance.		
2-2-F-Planning for performance improvement in the ENT surgeryfield.	2-2-F- Plan for quality improvement in the field of medical education and clinical practice in his speciality.		
2-2-G-Creation and innovation in the speciality field.	2-2-G- Create / innovate plans, systems, and other issues for improvement of performance in his practice.		
2-2-H-Evidence – based discussion.	2-2-H- Present and defend his / her data in front of a panel of experts.		
2-2-I-Decision making in different situations related to ENT surgeryfields.	2-2-I- Formulate management plans and alternative decisions in different situations in the field of ENT surgery		

continuous

(ARS)

2-3- Clinical skills:

- 2-3-A- MD students must be able to provide extensive level of patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health extensive level means in depth understanding and from basic science to evidence based clinical application and possession of skills to manage independently all problems in his field of practice.
- 2-3-B- Master patient care skills relevant to ENT surgeryfor patients with all diagnoses and procedures.

continuous

(ILOs)

2/3/1/Practical skills (Patient care :)

- 2-3-1-A- Provide extensive level of patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. p.s. Extensive level means in-depth understanding from basic science to evidence based clinical application and possession of skills to manage independently all problems in field of practice.
- 2-3-1-B- Provide extensive level of patient care for patients with all common diagnoses and for uncomplicated procedures related to ENT surgery
- 2-3-1-C- Provide extensive level of patient care for non-routine, complicated patients and under increasingly difficult circumstances, while demonstrating compassionate, appropriate and effective care.
- 2-3-1-D- Perform diagnostic and therapeutic procedures considered essential in the field of ENT surgery
- 2-3-1-E- Handles unexpected complications, while demonstrating compassion and sensitivity to patient needs and concerns.
- 2-3-1-F- Communicate effectively and demonstrate caring and respectful behaviors when interacting with patients and their families in the ENT

- surgeryrelated situations.
- 2-3-1-G- Gather essential and accurate information about patients of the ENT surgeryrelated conditions.
- 2-3-1-H Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence and clinical judgment for the ENT surgeryrelated conditions.
- 2-3-1-I- Develop and carry out patient management plans for ENT surgeryrelated conditions.
- 2-3-1-J- Counsel and educate patients and their families about ENT surgeryrelated conditions.
- 2-3-1-K- Use information technology to support patient care decisions and patient education in all ENT surgeryrelated clinical situations.
- 2-3-1-L- Perform competently all medical and invasive procedures considered essential for the ENT surgeryrelated conditions / area of practices.
- 2-3-1-M- Provide health care services aimed at preventing the ENT surgeryrelated health problems.
- 2-3-1-N- Lead health care professionals, including those from other disciplines, to provide patient-focused care in ENT surgeryrelated conditions.

- 2-3-C- Write and evaluate reports for situations related to the field ENT surgery.
- 2-3-1-O- Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets. (Write and evaluate a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and evaluating comprehensive timely and legible medical records).

2-4- General skills

2-4-A- Master practice-based learning and improvement skills that involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence, improvements in patient care and risk management

2/3/2 General skills

- 2-3-2-A- Demonstrate the competency of continuous evaluation of different types of care provision to patients in the different area of ENT surgery
- 2-3-2-B- Appraise scientific evidence.
 - 2-3-2-C- Continuously improve patient care based on constant self-evaluation and <u>life-long</u> learning.
- 2-3-2-D. Participate in clinical audit and research projects.
- 2-3-2-E- Practice skills of evidence-based Medicine (EBM).
- 2-3-2-G- Design logbooks.
- 2-3-2-H- Design clinical guidelines and standard protocols of management.
- 2-3-2-I- Appraise evidence from scientific studies related to the patients' health problems.

2.4.0	2 2 2 1 A
2-4-B- Use competently all information source and technology to improve his practice.	2-3-2-J- Apply knowledge of study designs and statistical methods to the appraisal of clinical studies.
	2-3-2-K- Use information technology to manage information, access on- line medical information; for the important topics.
2-4-C- Master skills of teaching and evaluating others.	2-3-2-F- Educate and evaluate students, residents and other health professionals.
2-4-D- Master interpersonal and communical Skills that result in effective information exchange and teaming with patients, their families, and other health professionals.	2-3-2-N- Master interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals, including:- • Present a case. • Write a consultation note.
	 Inform patients of a diagnosis and therapeutic plan Completing and maintaining comprehensive. Timely and legible medical records. Teamwork skills.
	2-3-2-O- Create and sustain a therapeutic and ethically sound relationship with patients.
	2-3-2-P- Elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills.
	2-3-2-Q- Work effectively with others as a member or leader of a health care team or other professional group.
2-4-E- Master Professionalism behavior, as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and	2-3-2-R- Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society.

sensitivity to a diverse patient population.	2-3-2-S- Demonstrate a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices.
	2-3-2-T- Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities.
2-4-F- Demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively use system resources to provide care that is of optimal value.	2-3-2-U- Work effectively in health care delivery settings and systems related to ENT surgeryincluding good administrative and time management.
2-4-G- Participate in improvement of the education system.	2-3-2-V- Practice cost-effective health care and resource allocation that does not compromise quality of care.
	2-3-2-W- Advocate for quality patient care and assist patients in dealing with system complexities.
	2-3-2-X- Design, monitor and evaluate specification of under and post graduate courses and programs.
2-4-H- Demonstrate skills of leading scientific meetings including time management	2-3-2-Y- Act as a chair man for scientific meetings including time management 2-3-2-U- Work effectively in health care delivery settings and systems related to ENT surgeryincluding good administrative and time management.

III-Program matrix Knowledge and understanding

Course	2/1/A	2/1/B	2/1/C	2/1/D	2/1/E
Course 1 : Medical statistics		✓			
Course 2 : Research Methodology		√			
Course 3: Medicolegal Aspects and Ethics in Medical Practice and Scientific Research			\		
Course 4 : Anatomy	✓				
Course 5: Pathology.	✓				
Course 6: " ENT surgery "	√	✓	✓	✓	√

Intellectual

Course	2/2/A	2/2/B	2/2/C	2/2/D	2/2/E	2/2/F	2/2/G	2/2/H	2/2/1
Course 1 : Medical statistics			√	√				✓	
Course 2 : Research Methodology			✓	√				✓	
Course 3: Medicolegal Aspects and Ethics in Medical Practice and Scientific Research								√	
Course 4 : Anatomy	✓	✓							
Course 5: Pathology.	√	√							
Course 6 : " ENT surgery "	✓	✓	✓	✓	✓	✓	✓	✓	√

Practical Skills (Patient Care)

Course	2/3/1/A	2/3/1/B	2/3/1/C	2/3/1/D	2/3/1/E	2/3/1/F	2/3/1/G	2/3/1/H
Course 1 : Medical statistics								
Course 2 : Research Methodology								
Course 3: Medicolegal Aspects and Ethics in Medical Practice and Scientific Research				√				√
Course 4 : Anatomy								
Course 5: Pathology.								
Course 6 : " ENT surgery "	✓	✓	✓	✓	✓	✓	✓	✓

Practical Skills (Patient Care)

Course	2/3/1/I	2/3/1/J	2/3/1/K	2/3/1/L	2/3/1/M	2/3/1/N	2/3/1/0
Course 1 : Medical statistics							
Course 2 : Research Methodology							
Course 3: Medicolegal Aspects and Ethics in Medical Practice and Scientific Research	√	√					
Course 4 : Anatomy							
Course 5: Pathology.							
Course 6 : " ENT surgery	✓	✓	✓	✓	√	✓	✓

General Skills

Course	2/3/2/ A	2/3/2/ B	2/3/2/ C	2/3/2/ D	2/3/2/ E	2/3/2/ F	2/3/2/ G	2/3/ 2/H
Course 1 : Medical statistics		✓						
Course 2 : Research Methodolog Y		✓		✓	✓			
Course 3: Medicolegal Aspects and Ethics in Medical Practice and Scientific Research								
Course 4 : Anatomy			✓	✓				
Course 5: Pathology.			✓	✓				
Course 6 : " ENT surgery	✓	✓	✓	✓	✓	✓	✓	✓

General Skills

Course	2/3/2/I	2/3/2/J	2/3/2/K	2/3/2/L	2/3/2/M	2/3/2/N	2/3/2/0	2/3/2/P
Course 1 : Medical statistics	✓	√	√					
Course 2 : Research Methodology	✓	✓						
Course 3: Medicolegal Aspects and Ethics in Medical Practice and Scientific Research				√				
Course 4 : Anatomy			✓	√				
Course 5: Pathology.			√	√				
Course 6 : " ENT surgery	✓	✓	✓	✓	✓	✓	✓	✓

General Skills

Course	2/3/2/Q	2/3/2/R	2/3/2/S	2/3/2/T	2/3/2/U	2/3/2/V	2/3/2/W	2/3/2/Q
Course 1 : Medical								
statistics								
Course 2 :								
Research								
Methodology								
Course 3:								
Medicolegal								
Aspects and Ethics								
in Medical								
Practice								
and Scientific								
Research								
Course 4:	√		√					
Anatomy	•		•					
Course 5:	√		√					
Pathology.	v							
Course 6: "ENT	√	./	√	./	√	./	√	✓
surgery "	v	V	·	v	v	·	v	V

Annex 7, Additional information:

Department information:

The department of ENT surgery in Assuit faculty of medicine consists of:

- Otology & neurotology division.
- Rhinology division.
- Head & neck surgery division.
- Endoscopies (Diagnostic & Therapeutic).
- Audiology unit.
- Phoniatric unit.

Staff members:

- Prof. Mostafa Osman Ramadan.
- Prof. Mohamed Abdel-Allah Mohamed.
- Prof. Mohamed Abdel Aziz El Derwy.
- Prof. Ali Ragaie Abd ELhakim.
- Prof. Ahmed Abdel Hay El houssiny.
- Prof. Mahmoud Ragib Alsherief.
- Prof. Hussin Fareed Weshahe.
- Prof. Mahmed Shaker Abdel all.
- Prof. Mohamed Mohamed Kamal.
- Prof. Ahmed Abdel Aleem Abdel Whab.
- Prof. Ezzat Mohammed Saleh.
- Prof. Mahmed Azzam Abdel Razik.
- Prof. Ahmed Abo el wafa.
- Prof. Usama Rashad El Shreif.
- Dr. Hamza El shsaffy Ahmed.

- Dr. Mohamed Mahmoud Salem.
- Dr. Mohamed Mostafa Osman.
- Dr. Mohamed Mahmoud Roshdii.

Opportunities within the department:

- Scientific Library
- Seminar room with data show
- Electronic Library of Scientific Seminars, case presentations.
- Data base filing of all the cases, procedures and out patient clinic data.

Department quality control insurance for completing the program:

- **Lesson** Evaluation by the Department head and staff members.
- Regular assessments.
- Log book monitoring.
- Recent equipments and Specialized Units.

(end of the program specifications)