



كلية الطب
جامعة أسيوط



Faculty of Medicine
Quality Assurance Unit

***Master (MSC) Degree Program and Courses Specifications for
Family Medicine***

(According to currently applied **Credit points by laws**)

FAMILY MEDICINE
Faculty of medicine
Assiut University
2022-2023

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**كلية الطب
وحدة ضمان الجودة**

**Faculty of Medicine
Quality Assurance Unit**

Master degree of Family Medicine

A. Basic Information

- + Program Title: Family Medicine.**
- + Nature of the program: Single.**
- + Responsible Department: Family Medicine Department**
- + Program Academic Director (Head of the Department):
Prof. Dalia Galal Mahran**
- Coordinator (s):**
 - Principle coordinators:**
- + coordinator (s): Prof. Dalia Galal Mahran**
- + Internal evaluators:**
 - Professor Deyaa Eldein Abdelaal Elnashar Professor of obstetrics and Gynecology, Faculty of Medicine Assuit University.**
 - Professor Hanaa Abd Ellatif Mohammad ,Professor of pediatrics, , Faculty of Medicine Assuit University.**
- + External evaluator**
- + Dr.Said Salah Abdel Gelil,Family Medicine- Faculty of Medicine, Cairo 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: 13 courses**
-  **first part: 6 courses**
-  **second part; 6 courses**
-  **elective course :1**

B. Professional Information

1- Program aims

1/1. To develop competent family physician capable of providing high quality of comprehensive medical care based on the available medical evidence.

1/2. Be able to adequately diagnose, manage and treat common health problems faced in the primary health care field.

1/3. Capable of providing effective comprehensive and continuing health care for individuals, families and community through the development of excellent problem solving skills.

1/4. Apply acceptable principles and practices related to health service planning, organization, administration, research, and quality assurance at the level of primary health care.

1/5. Recognize the social, cultural and psychological factors which influence health and disease.

1/6. Determine the disease patterns of the community and subsequently implement and evaluate the most cost-effective care programs (prevention and/or health education).

1/7. Conduct researches to identify prevalence and risk factors of prevalent and important health problems within the family.

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

2/1 Knowledge and understanding:

A- Explain the essential facts and principles of relevant basic sciences including **Basics of Family Medicine, Community and Family Medicine, Pharmacology and Research Methodology and Medical Statistics** related to *Family Medicine*.

B-Mention essential facts of clinically supportive sciences including **Emergency care medicine and Radiodiagnosis and Trumatology** related to *Family Medicine*.

- A. Demonstrate sufficient knowledge of etiology, clinical picture, diagnosis, prevention and treatment **of the** common diseases and situations related to *family Medicine*.
- B. Give the recent and update developments in the pathogenesis, diagnosis, prevention and treatment of common diseases related to *Family Medicine*.
- C. Mention the basic ethical and medicolegal principles **that should be applied in practice and are** relevant to the *Family Medicine*.
- D. Mention the basics **and standards** of quality assurance to ensure good clinical **practice in the field of** *Family Medicine*.
- E. Mention the ethical and scientific principles of medical research **methodology**.
- F. State the impact of common health problems in the field of *Family Medicine* on the society **and how good clinical practice improves these problems**.

2/2 Intellectual outcomes

- A. Correlate the facts of relevant basic and clinically supportive sciences with clinical reasoning, diagnosis and management of common diseases of the **Family Medicine**.
- B. Demonstrate an investigatory and analytic thinking approach (problem solving) to common clinical situations related to **Family Medicine**
- C. Design and /or present a case or review (through seminars/journal clubs.) in one or more of common clinical problems relevant to the **Family Medicine** field.
- D. Formulate management plans and alternative decisions in different situations in the field of the **Family Medicine**.

2/3 Skills

2/3/1 Practical skills (Patient Care)

- A. Obtain proper history and examine patients in caring and respectful behaviors.
- B. Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment for common conditions related to **Family Medicine**.
- C. Carry out patient management plans for common conditions related to **Family Medicine**.
- D. Use information technology to support patient care decisions and patient education in common clinical situations related to **Family Medicine**.
- E. Perform competently non invasive and invasive procedures considered essential for the **Family Medicine**.

- F. Provide health care services aimed at preventing health problems related to **Family Medicine**.
- G. Provide patient-focused care in common conditions related to **Family Medicine**, while working with health care professionals, including those from other disciplines
- H. Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets (Write a consultation note, inform patients of a diagnosis and therapeutic plan, completing and maintaining 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. Perform practice-based improvement activities using a systematic methodology (share in audits **and risk management activities** and use logbooks).
- B. Appraises evidence from **scientific** studies.
- C. Conduct epidemiological Studies and surveys.
- D. Perform data management including data entry and analysis and using **information technology to manage information, access on-line medical information; and support their own education.**

- E. Facilitate learning of students and other health care professionals **including their evaluation and assessment.**

Interpersonal and Communication Skills

- F. Maintain therapeutic and ethically sound relationship with patients.
- G. Elicit information using effective nonverbal, explanatory, questioning, and writing skills.
- H. Provide information using effective nonverbal, explanatory, questioning, and writing skills.
- I. Work effectively with others as a member of a health care team or other professional group.

Professionalism

- J. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society
- K. Demonstrate a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent, business practices
- L. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities

Systems-Based Practice

- M. Work effectively in relevant health care delivery settings and systems **including good administrative and time management.**
- N. Practice cost-effective health care and resource allocation that does not compromise quality of care.
- O. Assist patients in dealing with system complexities.

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

Academic standards for master degree **Family Medicine**

Assiut Faculty of Medicine developed master 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 17-6-2009. These standards were revised and approved without changes by the Faculty Council on 23-9-2014. These standards were recently revised and reapproved without changes by the Faculty Council on 27-11-2022.

4- Program External References (Benchmarks)

1. ACGME (Accreditation Council for Graduate Medical education).

http://www.acgme.org/acWebsite/navPages/nav_Public.asp.

2- Family medicine curriculum in Saudi Arabia

3- Recommended curriculum Guidelines for Family Practice residents, American Academy of Family Physicians.
<http://www.aafb.org/>

5. Program Structure and Contents

A. Duration of program: 3 – 5 years

B. Structure of the program:

Total number of credit points 180 CP

Didactic **40 CP** (25%), practical **120 CP** (75%). Total **160 CP** (100%)

First part

Didactic **16 CP** (40%), practical **24 CP** (60 %). Total **40CP** (100 %).

Second part

Didactic **24 (20 %)** practical **96 (80 %)**. Total **120CP** (100%)

Research 20 points

According the currently applied by laws:

Compulsory courses: **98.75%**

Optional courses: **- 0**

Elective courses: **1.25%.**

	Points	% from total
▪ Basic courses	19	11.87
▪ Humanity and social courses	5	3.13
▪ Specialized courses	134	83.75
▪ Others (Computer, ...)	2	1.25
▪ Field training	120	75

C. Program Time Table

A. Duration of program 3 years maximally 5 years divided into

○ Part 1: (One year)

Program-related essential courses and ILOs + elective courses

Students are allowed to sit the exams of these courses after 12 months from applying to the M Sc degree.

○ Thesis

For the M Sc thesis;

MSc thesis subject should be officially registered within 6 months from application to the MSc degree,

Discussion and acceptance of the thesis could be set after 12 months from registering the MSc subject;
It should be discussed and accepted before passing the second part of examination)

- **Part 2 (2 years)**

Program –related specialized science courses and ILOs

Students are not allowed to sit the exams of these courses before 3 years from applying to the MSc degree.

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

Total degrees **1900** marks.

700 marks for first part

1200 for second part

Written exam 40% - 70%.

Clinical and oral exams 30% - 60%.

D. Curriculum Structure: (Courses):

✚ courses of the program:

courses	Course Code	Core Credit points		
		Didactics	Training	total
First Part				
Academic basic Courses (8CP) Course 1: Basics of Family medicine\$ Course 2: Public health and Community medicine Course 3: Pharmacology Course 4: Research methodology and medical Statistics.	FAM233A§	2	2	4
	FAM209A	1.5	0.5	2
	FAM206	1	-	1
	FAM209B	0.5	0.5	1
General clinical courses (6 CP points) - Course 5: Emergency Care medicine. - Course 6 : Trumatology and Radiodiagnosis	FAM233B#	3(2+1)	6(5+1)	9
	FAM233C#	3(2.5+0.5)	4(3+1)	7
Elective courses*	2CP			

Clinical Work (10 CP) Course 5: Emergency Care medicine. - Course 6 : Trumatology and Radiodiagnosis	FAM233B#		<u>10</u>	
	FAM233C#		6	
Specialized Clinical Work (14 CP) Family medicine Courses training including ; 1-Training on family filing in family medicine centers. 2 - Internal medicine related to family medicine. 3- Obstetric and gynecology & family planning related to family medicine. 4- Pediatrics related to family medicine.	FAM218		<u>14</u>	
	FAM224		2	
	FAM225		4	
			4	
Thesis	20 CP			
Second Part	Specialized courses 24 CP Specialized Clinical Work (log Book) 96 CP			
<u>Specialized Courses(6</u>		24(didactics)	96(training)	120CP

<u>courses)</u> <u>Family medicine courses</u> <u>including:</u> 1- Internal medicine related to family medicine. 2-Dermatology, venerology and andrology & Neurology and Psychiatry related to family medicine. 3- Obstetrics and gynecology & family planning related to family medicine. 4- Pediatrics related to family medicine. 5- Surgery related to family medicine.(General surgery, orthopedic and Urology) 6-ENT surgery& Ophthalmology related to family medicine.				
	FAM218	6	24	30
	FAM233D#	1+1	4+4	5+5=10
	FAM224	5	20	25
	FAM225	5	20	25
	FAM233E#	4(2.5+1+0.5)	16(10+4+2)	20
	FAM233F#	2(1+1)	8(4+4)	(5+5)
Specialized Clinical			96	

Work in second part (96 CP for 6 courses)				
Total CP for courses		40	120	160

* Elective courses can be taken during either the 1st or 2nd parts.

Student work load calculation:

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

\$Course1: Basics of Family medicine FAM233A\$;Family medicine department, Faculty of Medicine, Cairo University will share in teaching with family department, Faculty of Medicine, Assuit University.

Elective Courses#:

- Medical statistics.
- Evidence based medicine.
- Medicolegal Aspects and Ethics in Medical Practice and Scientific Research
- Quality assurance of medical education
- Quality assurance of clinical practice.
- Hospital management

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

Thesis:

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

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

7-Admission requirements

Admission Requirements (prerequisites) if any :

I. General Requirements:

- a. MBBCh Degree from any Egyptian Faculties of Medicine
- b. Equivalent Degree from medical schools abroad approved by the Ministry of Higher Education

II. Specific Requirements:

- Fluent in English (study language).



VACATIONS AND STUDY LEAVE

The current departmental policy is to give working residents **1/2-3** week leave prior to first/ second part exams respectively.

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 could be set at 12 months from registering to the **MSc** degree.
-  Examination of the second part cannot be set before **3** years from registering to the degree.

- ✚ Discussion of the MSc thesis could be set after 1 year from officially registering the MSc subject before setting the second part exams.
- ✚ The minimum duration of the program is 3 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 MSc thesis.

9- Program assessment methods and rules (Annex IV)

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

Weighting of assessments:

Courses		Degrees			
First Part	Course code	Written Exam	Oral Exam	Practical / Clinical Exam	Total
First part					
Basic academic Courses:					
Course 1: Basics of Family Medicine (time: 3hours)	FAM233A\$	125	75	-	200
- Course2: Public Health and Community medicine (time: 2hours)	FAM209A	50	50	-	100
Course 3: Pharmacology(time: 1 hour)	FAM206	25	25	-	50
Course 4 : Research methodology and medical Statistics time: 1h(½ hour for each)	FAM209B	25(15+10)	25(15+10)	-	50
General					

clinical courses					
Course 5: Emergency care medicine/time:3 h(1.5+1.5 hour)	FAM233B#	60(40+20)	30(20+10)	60(40+20)	150
Course 6: Trumatology and Radiodiagnosis time:3hours(2.5h +0.)5h	FAM233C#	60(50+10)	30(25+5)	60(50+10)	150
Second Part					
Specialized Courses:					
Family medicine courses (6 papers) Course 7: Internal medicine related to family medicine. (<u>paper 1/ time 3 hours</u>)	FAM218	120	60	120	300
Course 8: - Dermatology, venerology and andrology& Neurology and Psychiatry related to family medicine /paper2 time 2hours (1h+1h)	FAM233D#	40(20+20)	20(10+10)	40(20+20)	100
Course 9: Obstetrics and gynecology & family planning related to family medicine.	FAM224	125	50	75	250

<u>(Paper 3/time 3 hours)</u> Course10 : Pediatrics related to family medicine. (Paper 4 /time 3 hours) Course 11: Surgery related to family medicine. (General surgery, orthopedic and Urology) (paper 5/ time 3hours) Course 12: -ENT surgery& Ophthalmology related to family medicine (paper 6/time2hours(1h +1h)	FAM225	125	50	75	250
	FAM233E#	75 (50+15+10)	45 (25+15+5)	80 (50+20+10)	200
	FAM233F#	40(20+20)	20(10+10)	40(20+20)	100
Second part (6 papers/ time 16hours)	6 Courses	530	240	430	1200
Elective course					

10-Program evaluation

By whom	method	Sample
Quality Assurance Unit	Reports Field visits	#
External Evaluator (s):According to department council External Examiner (s): According to department council	Reports Field visits	#
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
<ul style="list-style-type: none"> Program Principle Coordinator: 	Professor. Dalia Galal Mahran		
<ul style="list-style-type: none"> Head of the Responsible Department (Program Academic Director): 	Professor. Dalia Galal Mahran		

Annex 1, Specifications for Courses / Modules

Course 1: Basics of Family Medicine

- **Name of department: Family Medicine**
- **Faculty of medicine**
- **Assiut University**
- **2020-2021/2021-2022.**

I. Course data

- + Course Title: *Basics of Family Medicine*.
- + Course code: FAM233A§
- + Specialty: Family Medicine.
- + Number of credit points (CP): Didactic teaching 2 CP (50%); practical 2 CP (50%).total 4 CP (100%).
- + Department (s) delivering the course: Family Medicine department, Faculty of medicine- Assiut University in collaboration with Family Medicine department, Faculty of medicine- Cairo University.
- + **Coordinator (s):**
 - **Course coordinator: Prof . Dalia Galal Mahran**
 - **Assistant coordinator: Lecturer: Shaimaa Mohammad Khalaf**
- + Date last reviewed: August/ 2020.
- + Requirements (prerequisites) if any : none
- + Requirements from the students to achieve course ILOs are clarified in the joining log book.

Course Aims

This **Course** is considered to be an introductory course about family medicine residence program, as well as;

2/1- To provide the resident with the essential knowledge and facts and required essential practical professional skills which are necessary and appropriate to manage common health problems in family and health care system.

2/2- To orient the family medicine resident with the concepts, required skills and health care methods of the program as well as to enable them to appreciate the importance of family medicine and its role in the health care system and prepare them to what they should expect out of the program and what is required for them.

3. Intended learning outcomes (ILOs):

A-Knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Describe the basic concepts and principles of role of family medicine in health care system in community health including the following:	-Lectures Didactics seminars	-Written and oral examination - Log book

<ul style="list-style-type: none"> ○ Introduction to the system of PHC delivery of Egypt. ○ patterns of care and levels of practice ○ definitions related to family medicine ○ Introduction to the role of Family Physician worldwide and in Egypt ○ family health team ○ Introduction to Medical Ethics <ul style="list-style-type: none"> ○ The family life cycle ○ Medical Consultations: Theory, principles and practice ○ Communication skills: Principles and practice ○ Evidence Based Medicine ○ Vaccination Schedule ○ Recommended screening. ○ Referral to secondary Preventive activities and referral system ○ Medical records ○ Dealing with angry and demanding 	<p>An open discussion about the program, its components, process of training and evaluation and to respond to student questions and listen to their views.</p> <p>Lecture with audiovisual aids.</p> <p>Group discussion.</p>	
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<p>patients & Breaking bad news</p> <ul style="list-style-type: none"> ○ Smoking cessation. <p>❖ Specialty in Family Medicine: i.e.;</p> <ul style="list-style-type: none"> ○ Concepts, principles and methods of PHC and Family Medicine. ○ Introduction of the residency program, its history, development, content and requirements. ○ The role of PHC and Family Medicine in promoting the health of the people ○ The future career of the residents ○ Introduction to the system of PHC delivery of Egypt. ○ Introduction to the role of Family Physician worldwide and in Egypt ○ Introduction to Medical Ethics ○ Medical Consultations: Theory, principles and practice ○ Communication skills: Principles and practice ○ Behavioral and social sciences ○ Team work and team spirit. ○ The system of primary health care in family medicine; i.e.; <ul style="list-style-type: none"> ▪ Medical records ▪ Referral to secondary care ▪ Preventive activities ▪ health education 	<p>Problem oriented seminars.</p> <p>Visits to health centers.</p>	
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<ul style="list-style-type: none"> ▪ immunization ▪ Learning how to learn 		
<p>B. Demonstrate the principles and techniques of health education in health practice which are appropriate to management of common health problems and patient and their family counseling , including the following:</p> <ul style="list-style-type: none"> ❖ The need of health education for individuals, families, groups and the community. ❖ The principles and techniques of health education. ❖ The importance of social-cultural factors in health education. ❖ Choice and application of appropriate health education methods in specific situations. ❖ Local beliefs, values, attitudes and practices as related to health educational needs. ❖ Preparation and use of health educational aids. <p>Planning, implementation and evaluation of health education.</p>	<p>Lectures, problem oriented seminars, group discussions, role playing, use of audiovisual aids, Demonstrations and practical sessions.</p>	<p>Written exam Oral exam</p>
<p>C. Describe the principles and basic concepts of Health care management which are appropriate and necessary for family</p>	<p>Lectures. Small group discussions.</p>	<p>Written exam Oral</p>

<p>physician to manage health problems and provide health care for patients and their families and fulfilling their management and supervisory role in the future of his field including the following:.</p> <ul style="list-style-type: none"> ❖ The role of the leader of a health team. ❖ Management plan design of the available and potential resources. ❖ Management Evaluation of primary health care services. ❖ Managerial capabilities in primary health care setting 	<p>Exercises.</p> <p>Role playing.</p> <p>Field visits (with exposure to different management systems)</p>	<p>examination</p>
<p>D. illustrate the basic concepts and knowledge of family medicine which are necessary in practice including the following:</p> <ul style="list-style-type: none"> ○ Introduction to the system of PHC delivery of Egypt. ○ patterns of care and levels of practice ○ definitions related to family medicine ○ Introduction to the role of Family Physician worldwide and in Egypt ○ family health team ○ Introduction to Medical Ethics ○ The family life cycle ○ Medical Consultations: 		

<p>Theory, principles and practice</p> <p>o Communication skills:</p> <p>Principles and practice</p> <ul style="list-style-type: none"> o Evidence Based Medicine o Vaccination Schedule o Recommended screening. o Referral to secondary Preventive activities and referral system o Medical records o Dealing with angry and demanding patients & Breaking bad news o Smoking cessation. 		
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B-Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Correlates the facts of relevant basic sciences with diagnosis, prevention and control of common communicable and non- communicable diseases related to family medicine.	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative assessment sheet

	club - Community campaign	
B. Demonstrate an investigatory and analytic thinking (problem solving) approaches to common health problems and situations related to Family Medicine	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative assessment sheet
C. Design and present seminars in common family health problems	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative assessment sheet
D-Formulate management plans and alternative decisions in different situations in the field of the Family medicine	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative assessment sheet

	campaign	
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C-Practical skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Measuring the Level of Health in a Population ;using Epidemiological Measures (Indicators) of Health and Disease in a Community	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign - Problem solving - Case studies 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative assessment sheet
B. Perform the following procedures in the field: including; Assessing “Health Status” and “Health Needs” and Community diagnosis	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative assessment sheet

	<ul style="list-style-type: none"> - Community campaign - Problem solving - Case studies 	
<p>C. Prescribe the following procedures in the field: as;</p> <p>Personnel Management and Human Resource Development in community.</p>	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign - Problem solving - Case studies 	<ul style="list-style-type: none"> - written exam - oral exam - log book - formative assessment sheet
<p>D. Carry out Planning and Evaluation of; intervention Health Services , Programs related to Family Medicine</p>	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign - Problem solving - Case 	<ul style="list-style-type: none"> - written exam - oral exam - log book - formative assessment sheet

	studies	
E. Use information technology to support community diagnosis decisions and patient education in common filed situations related to Family Medicine	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign - Problem solving - Case studies 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative assessment sheet
F. Provide community-focused care in common conditions related to Family Medicine	<ul style="list-style-type: none"> - Lectures - -field visits 	<ul style="list-style-type: none"> - written exam
G. Provide health care services aimed at preventing health community problems.	<ul style="list-style-type: none"> - Discussion - Readings 	<ul style="list-style-type: none"> - oral exam
H. Write competently all forms of paper critique.	<ul style="list-style-type: none"> - Seminars - Critical appraisal - Journal club - Community campaign - Problem solving - Case studies 	<ul style="list-style-type: none"> - log book formative assessment sheet

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(audit, logbook)	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative assessment sheet
B. Appraises evidence from scientific studies(journal club)	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative assessment sheet
C. Conduct epidemiological studies community diagnosis and surveys.	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative assessment sheet
D. Perform data management including data entry and analysis.	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion 	<ul style="list-style-type: none"> - written exam - oral exam

	<ul style="list-style-type: none"> - Readings - Seminars - Critical appraisal - Journal club - Community campaign 	- log book formative assessment sheet
E. Facilitate learning of junior students and other community health leaders.	<ul style="list-style-type: none"> - field visits - Discussion - Readings - Seminars - Community campaign 	Formative assessment sheet

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Maintain ethically sound relationship with family members .	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative assessment sheet
G. Elicit information using effective nonverbal, explanatory, questioning, and writing skills.	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative

	appraisal - Journal club - Community campaign	assessment sheet
H. Provide information using effective nonverbal, explanatory, questioning, and writing skills.	- Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign	- written exam - oral exam - log book formative assessment sheet
I. Work effectively with others as a member of a family health care team.	- Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign	- written exam - oral exam - log book formative assessment sheet
J. Present a family health problems in seminar	- Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign	- written exam - oral exam - log book formative assessment sheet

K. Write a report in field visit work	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative assessment sheet
L. Counsel patients and families about: - Some health problems <hr/>	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative assessment sheet

Professionalism

ILOs	Methods of teaching/ learning	Methods of Evaluation
M. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of community	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative assessment sheet
N. Demonstrate a commitment to ethical principles including provision or withholding of diagnosis, confidentiality of information, informed consent.	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative assessment sheet
O. Demonstrate sensitivity and responsiveness to community culture, age, gender, and disabilities	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative assessment sheet

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
P. Work effectively in collaboration with family health care members, settings and systems.	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative assessment sheet
Q. Practice cost-effective health care and resource allocation that does not compromise quality of care.	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative assessment sheet
R. Assist community members in dealing with health system complexities.	<ul style="list-style-type: none"> - Lectures - -field visits - Discussion - Readings - Seminars - Critical appraisal - Journal club - Community campaign 	<ul style="list-style-type: none"> - written exam - oral exam - log book formative assessment sheet

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

Time Schedule: First Part

Topic	Covered ILOs			
	Knowledge A	Intellectual B	Practical skill C	General Skills D
<p>An Introductory knowledge to family medicine</p> <ul style="list-style-type: none"> ❖ Definition of the role of Family Medicine in the health of the people. ❖ Common principles of communication Skills and consultation models used, relationship and ethics in any professional setting. ❖ Positive attitude towards the specialty, the profession and other professionals in the primary health care 	A	A&B	-	A-E

<p>❖ Specialty in Family Medicine: i.e.;</p> <ul style="list-style-type: none"> ○ Introduction to the system of PHC delivery of Egypt. ○ patterns of care and levels of practice ○ definitions related to family medicine ○ Introduction to the role of Family Physician worldwide and in Egypt ○ family health team <p>○ Introduction to Medical Ethics</p> <ul style="list-style-type: none"> ○ The family life cycle <p>○ Medical Consultations:</p> <p>Theory, principles and practice</p> <ul style="list-style-type: none"> ○ Communication skills: <p>Principles and practice</p> <ul style="list-style-type: none"> ○ Evidence Based Medicine ○ Vaccination Schedule ○ Recommended screening. ○ Referral to secondary Preventive activities and referral system 	A,B, C,D	A-D	-A- H	A-R
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<ul style="list-style-type: none"> ○ Medical records ○ Dealing with angry and demanding patients & Breaking bad news ○ Smoking cessation. ○ The system of primary health care in family medicine; i.e.; <ul style="list-style-type: none"> ▪ Medical records ▪ Referral to secondary care ▪ immunization ▪ Learning how to learn 				
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5. Methods of teaching/learning:

- Didactic (lectures, seminars, tutorial)
- -field visits
- Discussion
- Readings
- Seminars
- Critical appraisal
- Journal club
- Community campaign
- Observation and supervision
- Written & oral communication
- Senior staff experience
- Other didactic activities in department.
- Other practical training in department & field.

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

1. Extra Didactic (lectures, seminars, tutorial) according to their needs
2. extra training activities

7. Assessment methods:

i. Assessment tools:

- 1-** Written and oral examination
- 2-** Log book
- 3-** formative assessment sheet

ii. Time schedule: At the end of the first part

iii. Marks: 200marks

first paper; written exam (125 marks) time in 3 hours + and (75marks) oral exam.

8. List of references

1. CURRENT Diagnosis & Treatment in Family Medicine, 4th Edition (4th ed.), Jeannette E. South-Paul, Samuel C. Matheny, Evelyn L. Lewis (2015)
2. Textbook of Family Medicine, 9th Edition, Robert Rakel David Rake (2016)
3. Oxford Handbook of General Practice, Fourth Edition , Chantal Simon ,Hazel Everitt , Françoise van Drop (2014).
4. Primary health care: bridging the gap between theory and practice by Stott NCH,2012.
5. Hutchison's Clinical Methods E-Book: An Integrated Approach to Clinical Practice. Elsevier Health Sciences; by Glynn M, Drake WM,2017.

6. General Practice Companion Handbook. Sydney: McGraw Hill; by Murtagh J, Leggat PA. John Murtagh's 2007.
7. Bridging the gap between theory and practice. Springer Science & Business Media; by Stott NCH. Primary health care: 2012.

Journals and Websites:

1. American Family Physician site: www.aafp.org
2. Canadian family Physician
3. American Family Physician Management
4. British Journal of General Practice
5. Family Practice
6. Journal of Family Practice

9. Signatures

Course Coordinator: Prof. Dalia Galal Mahran	Head of the Department: Prof. Dalia Galal Mahran
Date:	Date:

Course 2: Public Health and Community Medicine

- Name of department: Family Medicine
- Faculty of medicine
- Assiut University
- **2020-2021/2021-2022.**

1. Course data

- ✚ Course Title: public health and Community Medicine.
- ✚ Course code: FAM209A.
- ✚ Specialty: Family Medicine.
- ✚ Number of credit **points(CP)**: Didactic teaching 1.5CP(75%) ;practical 0.5 CP (50%).total **2 CP (100%)**.
- ✚ Department (s) delivering the course: public Health and Community Medicine department in conjunction with Family Medicine, Faculty of medicine- Assiut University.
- ✚ Coordinator (s):
 - Course coordinator:
Professor/ Dalia Galal Mahran
 - Assistant coordinator (s) :
Lecturer: Shaimaa Mohammad Khalaf
- ✚ Date last reviewed: August /2020.
- ✚ General requirements (prerequisites) if any: None.
- ✚ Requirements from the students to achieve course ILOs are clarified in the joining log book.

2. Course Aims

2.1- The rotation in community medicine should enable the family physician to acquire the necessary clinical, epidemiological and research knowledge and professional skills, as well as to provide comprehensive health services to the individuals and families in the community and to diagnose community health problems.

2/2- The PHC physician is also expected to acquire the professional and practical skills to be able to plan for health services and provide promotive, preventive and rehabilitative services in addition to the curative services.

3. Intended learning outcomes (ILOs)

A-Knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
<p>A. Describe the necessary facts and knowledge of the basic concepts and principles of epidemiology and understanding basic skills of the application of these basic concepts in the epidemiology study related to family medicine including:</p> <ul style="list-style-type: none"> • Introduction to epidemiology & basics in general epidemiology . 	<p>Lectures/discussions.</p> <p>Seminars.</p> <p>Small group discussions.</p> <p>Assigned readings and class presentations.</p>	<p>Written & Oral examination</p>
B. Mention the basic knowledge	Lectures	Written

<p>of nutrition which are necessary to family physician in practice including the following:</p> <ul style="list-style-type: none"> ❖ General principles of nutrition, including: <ul style="list-style-type: none"> ○ The roles of dietary components: carbohydrates, fats, proteins, vitamins, minerals, water and fiber ○ Dietary reference intakes ○ Nutritional content of foods ○ Dietary recommendations, understanding the benefits and nutritional issues throughout the life cycle) ❖ Nutritional assessment <ul style="list-style-type: none"> ○ Medical and social history, physical examination ○ Anthropometrics (height, weight, body mass index [BMI], head circumference and body-fat distribution [waist circumference and waist-to-hip ratios]) ○ Ordering and evaluating laboratory tests (inpatient and outpatient) ❖ Nutritional issues for 		<p>exam</p> <p>Oral exam</p>
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<p>specific populations, including:</p> <ul style="list-style-type: none"> ○ Infants (e.g., breastfeeding, bottle-feeding, adding solids, allergy prevention, calcium). ○ Children (e.g., picky eating, pica, snacks, calcium) ○ Adolescents (e.g., healthy choices, eating disorders, calcium) ○ Adults (e.g., portion size, habits, convenience foods, energy balance, calcium) ○ Pregnancy (e.g., weight gain, folic acid, iron, calcium) ○ Lactation (e.g., nutritional needs, support, counseling) ○ Elderly (e.g., psychosocial issues, co-morbid conditions, swallowing disorders, iatrogenic factors, calcium, Vitamin D) ○ Athletes (e.g., eating disorders, overtraining, energy balance). 		
C. Mention the basic knowledge	Lectures	Written examination

<p>of nutrition which are necessary to family physician in practice including the following:</p> <p>Therapeutic Nutrition</p>	<p>Seminars Case study Field visits</p>	<p>Oral exam</p>
<p>D. Demonstrate occupational and environmental health principle and facts which are essential for clinical reasoning of common health problem in family including the following:</p> <ul style="list-style-type: none"> ❖ The importance of the environment to the health and well-being of individuals and families. ❖ Environmental health hazards. ❖ Preventive and remedial measures. ❖ The process of providing statutory control of the environment. ❖ The concepts and functions of occupational health services. ❖ Planning for occupational health programs at company, regional and national levels. ❖ The statutory rights and obligations of employers and employees. ❖ The methods of assessments of the working environment. 	<p>Lectures Seminars Case study Field visits</p>	<p>Written examination Oral exam</p>

❖ Different methods of control of occupational hazards.		
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B-Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Evaluate health programs.	Lecture Practical exercises & Discussion	Assignments
B. Formulate an intervention implementation to solve a certain health problems in the community.	Reading Publications Seminars	Written& oral exam Assignments
C. Participate in clinical risk management as a part of clinical governance.		
D. Plan for quality improvement in the field of medical education and professional practice in public health & community medicine.		
E. Present and defend his/her data in front of a panel of experts.		
F. Plan Local, regional and national resources to assist patients and their families in the development and maintenance of healthy lifestyles and disease prevention		

C-Practical skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Carry out medical research.	Lectures Workshop Discussion	Assignments
B. Acquire the skills of critical appraisal of different scientific publications	Lectures workshops	Assignments
C. Conduct public health surveillance.	Lectures Reading Field visits	Written and oral exam
D. Prepare the steps of an outbreak investigation	Lectures Reading Field visits	Written and oral exam
E. Use information technology to support practical decisions in Common conditions related to public health and community and family medicine and students education in public health & related practical skills for the followings: - Program & policy evaluation. - Analytic methods for Public health practice.		
F. Provide health care services aimed at preventing the public health & community medicine problems and related conditions like; - Disability - Communicable diseases. - Over population. - Risky behaviors.	Field visits	Observation Logbook

- Sexually transmitted diseases. - Malnutrition.		
G. Work with health care professionals, including those from other disciplines, to provide practical/laboratory-focused care in specialty related conditions for the following: Therapeutic nutrition		
H. Write and evaluate competently all forms of professional reports, paper critique related to public health & community medicine.		

D-General Skills

Practice-Based Learning and Improvement

ILOs	Methods of teaching/ learning	Methods of Evaluation
<p>A. Perform practice-based improvement activities using a systematic methodology (share in audit and risk management activities and use logbook). Like;</p> <ul style="list-style-type: none"> ▪ Discussion of reports about surveillance and assessment of the population's health and common health problems. ▪ Discussion of evidence assessment the effectiveness of interventions, health programs and services to improve population health and 	<p>Field visits Research Case study discussion</p>	<p>Seminars Reports Discussion</p>

<p>wellbeing.</p> <ul style="list-style-type: none"> ▪ Discussion of policy strategy Development and implementation for population health and wellbeing. 		
<p>B. Appraises evidence from scientific studies(journal club)</p> <p>* Researches and evidence based practice and internet updates about the conditions mentioned above in A.A</p>	<p>Analyzing policy Developing legislative proposals</p>	<p>Discussion</p>
<p>C. Conduct epidemiological Studies and surveys.</p>	<p>Designing & implementing public health program</p>	<p>Discussion with the professionals</p>
<p>D. Perform data management including data entry and analysis using information technology to manage information, access on-line medical information; and support their own education.</p>	<p>in service training Work performance Work Organization</p>	<p>Observation Log book</p>
<p>E. Facilitate learning of junior students and other health care professionals including their evaluation and assessment.</p>	<p>Specialized dissertation on a major Public health problem Lectures Practical sessions Reading</p>	<p>Seminars Discussion Paper critique</p>

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Maintain an ethically sound relationship with people	Practice Field visits	Observation Log book
G. Elicit information using effective nonverbal, explanatory, questioning, and writing skills.		
<p>H. Provide information using effective nonverbal, explanatory, questioning, and writing skills, including the following oral communications:</p> <ul style="list-style-type: none"> • Communication and counseling for nutritional deficiency problems. <p>Communicate with students, a staff member, a leader & a client</p>		
I. Work effectively with others professional group as a member or leadership of a health care team as regard management of common health problems of the above mentioned conditions in A.A		
J. Present a report in common health problems mentioned above in AA	Lectures Training Work shops Field visits	Observation Discussion
<p>K. Write a report about;</p> <ul style="list-style-type: none"> • In epidemiology survey. • Health care services 	Practice	Observation

<ul style="list-style-type: none"> • Program evaluation. • Policy strategy and implementation for population health and wellbeing. 		
<u>L. Council people about;</u> Common health problems and community health services and resources.		

Professionalism

ILOs	Methods of teaching/ Learning	Methods of Evaluation
M. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society that supersedes self-interest.	Practice	1. Objective structured clinical examination 2. Community survey
N. Demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices.	Lectures Work shops	360o global rating
O. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities	Lectures Practice	Observation

Systems-Based Practice

ILOs	Methods of teaching / learning	Methods of Evaluation
P. Work effectively in different health care delivery settings and systems as well as 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.	Lectures Practical sessions Work shop Internet navigations Field visits Problem-based learning	A. 360o global rating Observation Log book
Q. Practice cost-effective health care and resource allocation that does not compromise quality of care.	Lectures Work shops	1. Check list evaluation of live or recorded performance
R. Advocate for quality patient care and assist patients in dealing with system complexities.	Self reading Research Internet navigation	- 360o global rating -Patient survey

4. Contents (topic s/modules/rotation)

Course Matrix

Time Schedule: First Part

Topic	Covered ILOs			
	Knowledge	Intellectual	Practical skill	General Skills
Introduction to epidemiology& basics in general epidemiology	A	A-D	B	A-E
Occupational Health & Environmental Health	A,D	A-F	A-H	A-Q
Screening program	A	A-F	A-H	A-R
General principles of nutrition - Nutritional assessment	B	A-F	A-H	A-R
Therapeutic Nutrition	C	A-F	A-H	A-R

5. Methods of teaching/learning:

- Lectures.
- Practical sessions
- Other Training activities
- Other didactic activities in department.

- Self Reading
- seminars
- Work shops
- Field work & visits
- Discussions
- Exercises
- Workshops
- role playing,
- use of audiovisual aids, Demonstrations
- Case study

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

- Lectures.
- Practical sessions
- Other Training activities
- Other didactic activities in department.
- Self Reading
- seminars
- Work shops
- Field work & visits
- Discussions
- Exercises
- Workshops.
- role playing,
- use of audiovisual aids, Demonstrations
- Case study.

7. Assessment methods:

i. Assessment tools:

1. Practical examination
2. Attendance and active participation
3. Assignments

4. written exam
5. logbook
6. Objective structured clinical examination
7. Community survey
8. 360o global rating
9. Observation
10. Check list evaluation of live or recorded performance
11. patient survey

ii. Time schedule: at the end of 1st part

iii. Marks: 100 marks

Written exam 50 marks, second paper, 2 hours in time+ oral exam 50 marks

8. List of references

1. Lectures notes

1. Department lecture notes
2. Note of the Egyptian Society of Public Health

2. Essential books

1. Public health and preventive medicine. 15th edit. Appleton-Century-Crofts; by Maxcy-Rosenau, Last JM, Chin J, Fielding JE, Frank AL. 2010.
2. Park's textbook of preventive and social medicine. 18th edit. Preventive Medicine in Obstet, Paediatrics and Geriatrics. By Park K. Ms Banarsidas Bhanot; 2007.
3. Basic epidemiology. 2nd edit. By Bonita R, Beaglehole R, Kjellström T.; 2006.

3. Recommended books

1. Short textbook of preventive and social medicine. Jaypee Brothers Medical Publishers; by Prabhakara

GN. 2010.

2. Epidemiology in medical practice. Jones & Bartlett Publishers; by Churchill, Livingstone. 2014.

3. Periodicals, Web sites

- Dissertation workshop open courseware JHSPH
 - International Journal of epidemiology
 - ECMA periodicals
 - www. Who.org
 - www.cdc.org

4. Others: Library

9. Signatures

Unit Coordinator: Prof . Dalia Galal Mahran	Head of the Department: Prof . Dalia Galal Mahran
Date:	Date:

Course 3 (Pharmacology)

- Name of department: Family medicine
- Faculty of medicine
- Assiut University
- **2020-2021/2021-2022.**

1. Course data

- ✚ Course Title: pharmacology.
- ✚ Course code: FAM206.
- ✚ Specialty: family medicine
- ✚ Number of **credit points**: 1 credit point for didactic teaching; 0 credit points for training (0%); total 1 CP (100%)
- ✚ Department (s) delivering the course: pharmacology in conjunction with Family Medicine department
- ✚ Coordinator (s):
 - Course coordinator: Professor: Dalia Galal Mahran
 - Assistant coordinator (s) :
Assistant professor Hanan Sharaf
- ✚ Date last reviewed: August/2020.
- ✚ General requirements (prerequisites) if any :None
- ✚ Requirements from the students to achieve course ILOs are clarified in the joining log book.

2. Course Aims

The student should acquire the professional knowledge and facts of pharmacology which are necessary to **manage and treat common health problems faced the Family Physician.**

3. Intended learning outcomes (ILOs):

A-Knowledge and understanding

ILOs	Methods of teaching/ learning	<i>Methods of Evaluation</i>
A. Describe the Principles of pharmacology including the following: <i>1. General pharmacology:</i> a. Pharmacokinetics of drugs b. Factors affecting absorption and transmembrane passage of drugs c. Factors affecting distribution of drugs d. Metabolism of drugs e. Elimination of drugs 2. Drugs restrictions, adverse drug reaction and interaction 3. Drugs and pregnancy and lactation 4. Selection of analgesics 5. Selection of antimicrobials 6. Essential drugs	<ul style="list-style-type: none"> • Lecture with audiovisual aids. • Group discussion. • Problem oriented seminars 	Examination <ul style="list-style-type: none"> • Written • Oral exam. Continuous assessment <ul style="list-style-type: none"> • Attendance • Participation • Reports Log book

B Intellectual Outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Apply acceptable principles and practices of pharmacology with clinical reasoning, diagnosis and pharmacological management of common diseases and health problems related to family medicine	Didactic <ul style="list-style-type: none"> • Lectures • Seminars • Tutorial • Lecture with audiovisual aids. • Group discussion. • Problem oriented seminars 	Examination <ul style="list-style-type: none"> • Written • Oral exam. Continuous assessment <ul style="list-style-type: none"> • Attendance • Participation • Reports • Log book

C Practical skills

Practical: 0 hours

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 using information technology to manage pharmacological information, access on-line	Continuous assessment during the rotation including: <ul style="list-style-type: none"> • Observation • Supervision 	Continuous assessment <ul style="list-style-type: none"> • Attendance • Participation • Reports • Log book

<p>medical information; and support their own education, as regards to the following topics:</p> <ul style="list-style-type: none"> - General and specific treatments of poisoning and overdoses - Treatment protocols of (Example Appendix 1) (Algorithm 1: Detection and diagnosis of hypertension) 		
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Interpersonal and Communication Skills

ILOs	Methods of teaching/ Learning	Methods of Evaluation
B. Elicit information using effective nonverbal, explanatory, questioning, and writing skills.	<ul style="list-style-type: none"> • Lecture with audiovisual aids • Group discussion • Problem oriented seminars 	<p>Written and oral examination and Continuous assessment during the rotation including:</p> <ul style="list-style-type: none"> • Observation • Supervision • Attendance • Participation • Reports • Log book
C. Write a report in common condition mentioned in A.A	Supervise report writing	Students will be appraised twice during the rotation by the senior staff

Professionalism

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

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
E. Work effectively in relevant health care delivery settings and systems, i.e.; health service planning, organization, administration, research, and quality assurance (Q.A.) at the level of the primary health care delivery system.	- Observation -Senior staff experience	Logbook

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

Time Schedule: First Part

Course Matrix

Topic	Covered ILOs			
	Knowledge A	Intellectual B	Practical skill C	General Skills D
1. General pharmacology: a. Pharmacokinetics of drugs b. Factors affecting absorption and transmembrane passage of drugs c. Factors affecting distribution of drugs d. Metabolism of drugs e. Elimination of drugs	A	A	-	A
2. Drugs restrictions, adverse drug reaction and interaction 3. Drugs and pregnancy and lactation	A	A	-	A-E

4.Selection of analgesics	A	A	-	A-E
5. Selection of antimicrobials	A	A	-	A-E
6. Essential drugs	A	A	-	A-E

5. Course Methods of teaching/learning:

- 1 Didactic (lectures, seminars, tutorial)
- 2 Observation and supervision
- 3 Written & oral communication
- 4 Senior staff experience
- 5 Supervise report writing
- 6 Lecture with audiovisual aids
- 7 Group discussion
- 8 Problem oriented seminars

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

1. Extra Didactic (lectures, seminars, tutorial) according to their needs
2. Extra Laboratory work according to their needs

7. Course assessment methods:

i. Assessment tools:

1. Written examination
2. Oral examination
3. Logbook (Continuous assessment for Attendance ,Participation and Reports).

ii. **Time schedule:** At the end of the first part

iii. **Marks:** 50 Marks; written exam , time 1 hour(25 marks)+ oral exam (25 marks).

8. List of references

1. Lectures notes

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

2. Essential books

1. Basic and clinical pharmacology. By Katzung BG
Mc Graw Hill; 2012.

3. Recommended book

2. Katzung & Trevor's Pharmacology. by Anthony
Trevors, Katzung. 2009.

4. Periodicals, Web sites, ... etc

- American Journal of Family Medicine
- BMJ
- NEJM

5. Others EMD (Cochrane Database)

9. Signature

Course Coordinator: Prof . Dalia Galal Mahran	Head of the Department: Prof . Dalia Galal Mahran
Date:	Date:

Course 4: Research Methodology and Medical Statistics

I. Course data

- + Course Title: **Research Methodology and Medical Statistics**
- + Course code: FAM209B
- + Specialty: Family Medicine
 - Department (s) delivering the course: Public health and Community Medicine Department, **Faculty of medicine, Assiut University in conjunction with Family Medicine Department**
- + Number credit **points(1 CP):** Didactic teaching 25 CP(100%); practical 0.5 CP (50%).total **1 CP (100%)**.
- + Coordinator (s):
 - + **Course coordinator:** Prof. Dalia Galal Mahran
 - + **Assistant Coordinator:**
Lecturer: Shaimaa Mohammad Khalaf
- + Date last reviewed: August/2020
- + General requirements (prerequisites) if any :
 - **General Requirements:** Requirements from the students to achieve course ILOs are clarified in the joining log book.

2. Course Aims

- To provide Resident in family medicine with professional knowledge and skills to be well trained in Research Methodology and statistics to prepare them for their future career. As, Research is considered a strong tool at all levels of the health system as well as Applying these researches can be used to improve patient's health care.

3. Course intended learning outcomes (ILOs):

A-Knowledge and understanding

ILOs	Methods of teaching/ learning	<i>Methods of Evaluation</i>
A- Outline the following Definition and concepts in Research Methodology and medical statistics: <ul style="list-style-type: none"> • -Variables, their types and the scales of measurements. • Descriptive statistics for different types of variables. • Screening, sensitivity ,specificity, predictive values, reliability and yield of screening test • incidence, prevalence, risk, relative risk and odds ratio 	lectures seminar	written exam tasks log book assignments oral exam
B- Describe the following principles in biostatistics and epidemiological methods: <ul style="list-style-type: none"> • study design, uses, and limitations 	lectures seminar	written exam tasks log book assignments oral exam
C- List the following biostatistics and epidemiological facts: <ul style="list-style-type: none"> - Types of study designs. - examples of different types of variables 	lectures seminar	<i>written exam tasks log book assignments</i>

		oral exam
D- Illustrate the following biostatistics and epidemiological facts and values: <ul style="list-style-type: none"> • Value of screening tests, sensitivity, specificity, and predictive values. • Rationale for Statistics in Medicine. • Rationale for selecting certain study design. 	lectures seminar	<i>written exam</i> <i>tasks</i> <i>log book</i> <i>assignments</i> oral exam
E. State updated and evidence based Knowledge of <ul style="list-style-type: none"> - Statistical analysis - Study design applied. 	lectures seminar	written exam tasks log book assignments oral exam
F. Mention the basic ethics for conducting a research and medicolegal principles relevant to data confidentiality .	lectures seminar	written exam tasks log book assignments oral exam
G. Mention the basics of quality control in conducting researches	lectures seminar	written exam tasks log book assignments oral exam
H. Describe the various types and steps of health – related research which are necessary to complete the research as follows; <ul style="list-style-type: none"> • Complete the various steps necessary for the preparations of a good 	Lecturers Group exercises Skills of using computer	written exam tasks log book assignments oral exam

<p>research proposal.</p> <ul style="list-style-type: none"> • Preparation a complete health – related research proposal. • Analysis and interpretation of the results. 		
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B-Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Analyze and interpret given data related to common health problems using Research Methodology and Medical statistics	lectures seminar	written exam tasks log book assignments oral exam
B. Demonstrate an investigatory and analytic thinking (problem solving) in common clinical situations related to Family medicine using research Methodology and Medical statistics.	lectures seminar	written exam tasks log book assignments oral exam
C. Design research and present study data , in seminars	lectures seminar	written exam tasks log book assignments oral exam
D-Formulate management plans and alternative decisions in different situations using research Methodology and Medical statistics in the field of the Family Medicine .	lectures seminar	written exam tasks log book assignments

		oral exam
E- Discuss the impact of population growth on development and health issues.	lectures seminar	written exam tasks log book assignments oral exam

C-Practical skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
A-Examine data using statistical test of the following: - Different types of variables. - Frequency distribution to a given data and its interpretation	lectures seminar	written exam tasks log book assignments oral exam
B -Interpret the following research Methodology and Medical statistics data: - results of significant statistical tests	lectures seminar	written exam tasks log book assignments oral exam
C -Conduct epidemiological Studies and surveys	lectures seminar	Written exam tasks log book assignments oral exam
D-Measure disease risk factors	lectures seminar	written exam tasks log book

		assignments oral exam
E-Compute sensitivity, specificity, and predictive values of a screening test	lectures seminar	Written exam tasks log book assignments oral exam
F- Interpret sensitivity, specificity, and predictive values of a screening test	lectures seminar	Written exam tasks log book assignments oral exam
G- Design suitable epidemiological study.	lectures seminar	Written exam tasks log book assignments oral exam
H-Managing data collection team	lectures seminar	Written exam tasks log book assignments oral exam
I-Summarize and present data.	lectures seminar	Written exam tasks log book assignments oral exam
J-Use information technology to support data management	lectures seminar	Written exam tasks

		log book assignments oral exam
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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(audit, logbook, critical appraisal)	<ul style="list-style-type: none"> - Lectures - Practical sessions - Discussion - Readings - Community campaign 	Critical appraisal
B- Appraise evidence from scientific studies(journal club)	<ul style="list-style-type: none"> - Lectures - Practical sessions - Discussion - Readings - Community campaign 	critical appraisal
C- Conduct epidemiological Studies and surveys.	<ul style="list-style-type: none"> - Lectures - Practical sessions - Discussion - Readings - community campaign 	attendance and participation
D- Perform data management including data entry and analysis.	Summer field work. participation in projects	attendance and participation

E- Facilitate training of family physician and other health care professionals.	Summer field work. participation in projects	attendance and participation
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Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F- Maintain ethically sound relationship with community members.	<ul style="list-style-type: none"> - Lectures - Practical sessions - Discussion - Readings - Community campaign 	<p>Written exams</p> <p>Oral exams</p> <p>Practical exams</p>
G- Provide information using effective nonverbal, explanatory, questioning, and writing skills.	<ul style="list-style-type: none"> - Lectures - Practical sessions - Discussion - Readings - Community campaign 	<p>Written exams</p> <p>Oral exams</p> <p>Practical exams</p>
H- Work effectively with others as a member of a health care team or other professional group.	<ul style="list-style-type: none"> - Lectures - Practical sessions - Discussion - Readings - Community campaign 	<p>Written exams</p> <p>Oral exams</p> <p>Practical exams</p>
I- Present results of researches in seminars	<ul style="list-style-type: none"> - Lectures - Practical sessions - Discussion - Readings 	<p>Written exams</p> <p>Oral exams</p> <p>Practical</p>

	- Community campaign	exams
J- Write a report on summer field work	- Lectures - Practical sessions - Discussion - Readings - Community campaign	Written exams Oral exams Practical exams

Professionalism

ILOs	Methods of teaching/ learning	Methods of Evaluation
K- Demonstrate respect, compassion, and integrity to the needs of society	- Lectures - Practical sessions - Discussion - Readings - Community campaign	Written exams Oral exams Practical exams
L- Demonstrate a commitment to ethical principles including confidentiality of participants' information and informed consent	- Lectures - Practical sessions - Discussion - Readings - Community campaign	Written exams Oral exams Practical exams
M- Demonstrate sensitivity and responsiveness to population culture, age, gender, and disabilities	- Lectures - Practical sessions - Discussion - Readings - Community campaign	Written exams Oral exams Practical exams

Systems-Based Practice

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

4. Course Matrix: Contents (topic s/modules/rotation) Course Matrix

Time Schedule: First Part

Topic	Covered ILOs			
	Knowledge	Intellectual	Practical skill	General Skills
introduction to statistics..	A	A	A-C	A
basic statistical concepts	B-E	A,B	A-D,F,J	A
presentation of data	A-C	B,C	A-D,G,H	A
measures of central tendency	A-C	C,D	A,C,J	B-G,L-N
measures of dispersion	A-C	A-E	B,C	B,C,L-M
significance tests for quantitative variables	E-G	B-D	F,G,H	C,D,F-L
significance tests for qualitative variables	E-G	B-D	A-C	B-G,L-N
correlation	E-G	A-E	A-D	A,F,F-L
introduction to epidemiologic methods	A-C	A-C	B,C	A,B,C,F-I
sources of data and data collection	A-C	A-E	A-D	B-G,L-N
sampling techniques	C-F	A,B	B,C	A,F,L-N
sample size calculation	C-F	A-E	C-J	B-G,L-N
study design, research proposal	C-H	C	A,C-J	A,B,C,H-L
screening	C-G	A-E	B,F-J	A,D,H,L,N

5. Course Methods of teaching/learning:

- Lectures, **seminars**
- Group exercises
- Skills of using computer
- -Practical sessions
- - Discussion
- - Readings
- - Community **campaign**
- -**Observation and supervision**
- -**Written and oral communication**
- - Summer field work.
- - Participation in projects

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

More;

- Lectures, **seminars**
- Group exercises
- Skills of using computer
- -Practical sessions
- - Discussion
- - Readings
- - Community **campaign**
- -**Observation and supervision**
- -**Written and oral communication**
- - Summer field work.
- - Participation in projects.

7. Course assessment methods:

i. **Assessment tools:**

- **written exam**
- **Oral exam**

- **Practical exams**
- Log book
- critical appraisal
- attendance and participation
- tasks
- assignments
- Quizzes

ii. Time schedule:- at the end 1st part

ii. marks: 50 marks

**Written exam; 25 marks (15+10 marks), 1 hour in time +
oral exam; 25 marks (15+10 marks).**

8. List of references

1.Lectures notes

2. Essential books

1. Public health and preventive medicine. 15th edit.
Appleton-Century-Crofts; byMaxcy-Rosenau, Last
JM, Chin J, Fielding JE, Frank AL. 2010.
2. Park's textbook of preventive and social medicine.
18th edit. Preventive Medicine in Obstet, Paediatrics
and Geriatrics. By Park K. Ms Banarsidas Bhanot;
2007.
3. Basic epidemiology. 2nd edit. By Bonita R,
Beaglehole R, Kjellström T.; 2006.

3.Recommended books

4. Short textbook of preventive and social medicine.
Jaypee Brothers Medical Publishers; Prabhakara GN.
by 2010.

5. Epidemiology in medical practice. By Churchill, Livingstone Jones & Bartlett Publishers; 2014.

4. Periodicals, Web sites

- International Journal of epidemiology
- ECMA periodicals
- [www. Who.org](http://www.who.org)
- www.cdc.org

9. Signatures

Course Coordinator: Prof . Dalia Galal Mahran	Head of the Department: Prof . Dalia Galal Mahran
Date:	Date:

Course 5: Emergency Care Medicine

✚ It is divided into 2 units:

- Unit 1: **General emergency care** in medicine.
- Unit 2: Comprehensive advanced life support care (emergency critical care in ICU).

Course 5: Emergency Care Medicine

Course 5; unit 1: General emergency care in medicine.

1. Unit data

- ✚ Course Title: Emergency care medicine.
- ✚ Unit title: **General emergency care** in medicine.
- ✚ Course code: FAM233B#.
- ✚ Specialty: Family medicine.
- ✚ Number of **credit points (CP)**: Didactic teaching 2 CP (28.6%); 5 CP for training (71.4%); and total 7 CP (100%).
- ✚ Department (s) delivering the course: general medicine Emergency Unit& critical care units/ Internal medicine department, in collaboration with Family Medicine Department- Faculty of Medicine- Assiut University.
- ✚ Coordinator (s):
 - Course coordinator: Professor Dalia Galal Mahran
 - Assistant Coordinator: Professor: Ahmad Thabet Farrag
- ✚ Date last reviewed: August/2020.
- ✚ General requirements (prerequisites) if any :
 - Training practice should be provided in General medicine Emergency Unit& critical care units/ Internal Medicine Department Faculty of Medicine- Assiut University.
- ✚ Requirements from the students to achieve course ILOs are clarified in the joining log book.

2. Unit Aims

At the end of training practice, the family physician should be qualified to:

2/1- provide first-hour emergency care (diagnose emergent conditions, including etiology and risk assessment, and stabilize the patient for definitive care) in a variety of settings; in rural and remote settings, in pre-hospital settings via emergency medical services, other locations where initial medical treatment of illness takes place or inpatient hospital settings.

2/2- Acquire a field of practice based on sufficient knowledge and professional skills required for the prevention, diagnosis, assessment and management of acute and urgent aspects of illness, life threatening conditions, health problem with significant risk of morbidity and injury affecting patients of all age groups with a full spectrum of undifferentiated physical and behavioral disorders, as well as stabilize the patient for definitive medical care.

3. Unit Intended learning outcomes (ILOs):

A- Knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
<p>A. Describe the etiology, clinical picture, diagnosis, appropriate investigations findings and management of the following acute and urgent aspects of illness, life threatening conditions, significant health problems ; and first- hour emergency care in family medicine including:</p> <ul style="list-style-type: none"> ❖ Early intervention: <ul style="list-style-type: none"> ○ Pre-hospital emergency care. ○ Understanding of emergency medical system concepts and disaster medicine. ❖ Time management in emergencies: <ul style="list-style-type: none"> ○ Prioritization and triage ○ Principles of simultaneous triage of patients with serious medical illness ○ Efficient resource utilization ○ Immediate access to consultants ○ Rapid access to information. ○ Clinical diagnosis and approach to common emergency conditions in General medicine Emergency Units including: <ul style="list-style-type: none"> ● Chest pain ● ECG & ABG ● Acute abdomen. ● Coma. ● Asthma (Adult /Child) 	<ul style="list-style-type: none"> -Lectures - Practical sessions -Discussions - Readings Tutorial Seminars Report discussion. 	<ul style="list-style-type: none"> -Log book - -Written exams -Oral exams MCQ

<ul style="list-style-type: none"> • Acute Respiratory distress • Abnormal breathing. • Pulmonary embolism and pneumothorax • Hypersensitivity reactions/anaphylaxis • Endocrine emergencies. • Basics in Toxicologic emergencies: <ul style="list-style-type: none"> as • accidental or intended poisonings ingestion including diagnosis and treatments protocols and antidotes • Bites and stings ○ Diagnostic investigations interpretation of mentioned conditions above including: <ul style="list-style-type: none"> ○ Electrocardiograms ○ Roentgenographic identification of emergencies situations as chest x-ray ○ Monitors 		
<p>B. Mention the principles of general first- hour emergency care including (diagnostic, therapeutic, preventive and assessment tools)in the following emergent conditions:</p> <ul style="list-style-type: none"> ❖ Early intervention: <ul style="list-style-type: none"> ○ Pre-hospital emergency care. ○ Understanding of emergency medical system concepts and disaster medicine. ❖ Time management in emergencies: <ul style="list-style-type: none"> ○ Prioritization and triage ○ Principles of simultaneous triage of patients with serious medical illness ○ Efficient resource utilization 		

<ul style="list-style-type: none"> ○ Immediate access to consultants ○ Rapid access to information. ○ Shock management ○ Resuscitation ○ Airway management techniques ○ Initiation of vascular access ○ Artificial circulation ○ General and specific treatments of poisoning and overdoses ○ Treatment protocols of common emergent conditions in General medicine Emergency Units. 		
<p>C. State update and evidence based Knowledge of the following first aid measures and first hour management care of emergent conditions in emergency care:</p> <ul style="list-style-type: none"> ❖ Early intervention: <ul style="list-style-type: none"> ○ Pre-hospital emergency care. ○ Understanding of emergency medical system concepts and disaster medicine. ❖ Time management in emergencies: <ul style="list-style-type: none"> ○ Prioritization and triage ○ Principles of simultaneous triage of patients with serious medical illness ○ Efficient resource utilization ○ Immediate access to consultants ○ Rapid access to information. ○ Clinical diagnosis and approach to common emergency conditions in General medicine Emergency Units including: <ul style="list-style-type: none"> ❖ Chest pain ❖ Ischemic heart disease (acute 		

<p>myocardial infarction, cardiogenic shock, unstable angina)</p> <ul style="list-style-type: none"> ❖ Acute abdomen. ❖ Chocking. ❖ Asthma (Adult /Child) ❖ Acute Respiratory distress ❖ Abnormal breathing. ❖ Pulmonary embolism and pneumothorx ❖ Coma. ❖ GIT Bleeding or bleeding from other orifices. ❖ Endocrine emergencies. ❖ Burns ❖ Hypersensitivity reactions/anaphylaxis ❖ Basics in Toxicologic emergencies: as <ul style="list-style-type: none"> - accidental or intended poisonings - ingestion including diagnosis and treatments protocols and antidotes ❖ Bites and stings ❖ Diagnostic investigations interpretation of mentioned conditions above including: <ul style="list-style-type: none"> ○ Electrocardiograms ○ Roentgenographic identification of emergencies situations as chest x-ray 		
D. Memorize the facts and principles of the relevant basic and clinically supportive sciences related to General emergency care in medicine.		
E. Mention the basic ethical and medicolegal principles revenant to General emergency care in medicine.		
F. Mention the basics of quality assurance to ensure good General emergency care in medicine in his field		

G. Mention the ethical and scientific principles of medical research		
H. State the impact of common health problems of General emergency care in the field of family medicine on the society.		

B- Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Correlates the facts of relevant basic and clinically supportive sciences with clinical reasoning, diagnosis and management of common acute emergent and life threatening conditions related to emergency care in family medicine .	-Clinical rounds -Senior staff experience	case presentation log book
B. Demonstrate an investigatory and analytic thinking (problem solving) approaches to common emergent and life threatening conditions and situations related to emergency care in family medicine .	-Lectures - Practical sessions -Discussions - Readings Tutorial Seminars Report discussion.	-Log book -- Written exams -Oral exams MCQ
C. Design and present cases , seminars in common e emergent and life threatening conditions and problems		
D-Formulate management plans and alternative decisions in different situations in the field of the emergency care in family medicine .		

C- Practical skills (Patient Care)

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Obtain proper history and examine patients in caring and respectful behaviors.	Didactic -Lectures -Clinical rounds -Seminars -Clinical rotations (service teaching)	- OSCE - Log book & portfolio -Case presentation Clinical exam
B. Order the following non invasive &invasive diagnostic procedures for the conditions mentioned in AA.including: - Electrocardiograms - Blood laboratory chemistry and hematologic studies - Radiologic imaging of: Common conditions and risky significant health problems in general emergency care unit.	Clinical round with senior staff. Observation Postgraduate teaching	Cases presentations - Log book & portfolio
C. Interpret the following non invasive&invasive diagnostic procedures for the conditions mentioned in A.A. including: - Electrocardiograms - Blood laboratory chemistry and hematologic studies - Radiologic imaging of: common cases in emergency		
D. Perform the following therapeutic procedures as a first hour emergency care of mentioned emergencies above including: ❖ Primary emergency management according to emergency protocols for emergency		

<p>patients</p> <p>❖ first aid measures in:</p> <ul style="list-style-type: none"> ○ Acute respiratory problems, including airway management ○ Cardiac arrest ○ Ischemic heart disease ○ Cardiovascular pharmaceuticals and their use ○ Shock (hypovolemic, restrictive, neurogenic, cardiogenic, septic, etc.) ○ Toxicologic emergencies. ○ Referral to other subspecialty emergency units(ENT Surgery ,surgery,trumatology, neurology , psychiatry units,..etc) ○ Referral to other in- patients hospital critical emergency units or intensive care units. 		
<p>E. Prescribe the following non invasive& invasive therapeutic procedures as a first hour emergency care :</p> <ul style="list-style-type: none"> ○ Airway management ○ . Hemodynamic techniques <p>- Arterial catheter insertion and blood gas sampling</p> <ul style="list-style-type: none"> ○ Diagnostic and therapeutic procedures <p>Control of epistaxis</p> <ul style="list-style-type: none"> ○ Management of acute cardiorespiratory arrest in all age groups and implementation of the skills of ACLS (Advanced Cardiac Life Support) to lead a team resuscitative effort 		
<p>F. Carry out patient management plans for common conditions related to general first hour</p>	<p>Clinical rounds with</p>	

emergency care in family medicine.	senior staff	
G. Use information technology to support patient care decisions and patient education in common clinical situations related to general first hour emergency care in family medicine.		
H. Provide health care services aimed at preventing health problems related to general first hour emergency care in family medicine like: Common emergencies discussed above		
I. Provide patient-focused care in common conditions related to general first hour emergency care in family medicine, while working with health care professionals, including those from other disciplines like: Common conditions in emergencies		
J. Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets.(Write a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and maintaining medical records, referral report to advanced emergency care units).		

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(audit, logbook)	Observation -Written& oral communication	logbook
B. Appraises evidence from scientific studies(journal club)	Journal clubs - Discussion in	

C. Conduct epidemiological Studies and surveys.	seminars and clinical rounds	
D. Perform data management including data entry and analysis.		
E. Facilitate learning of junior students and other health care professionals.		

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Maintain therapeutic and ethically sound relationship with patients.	-Simulations -Clinical round seminars -Lectures -Case presentations	Case presentation Log book Portfolios
G. Elicit information using effective nonverbal, explanatory, questioning, and writing skills.		
H. Provide information using effective nonverbal, explanatory, questioning, and writing skills.		
I. Work effectively with others as a member of a health care team or other professional group.		
J. Present a case in common health problems related to emergency	Clinical round seminars	OSCE Clinical Exam
K. Write a report in -in-Patients medical records and chart. - Referral report to inpatient hospital advanced emergency care units.	Senior staff experience	
L. Council patients and families about prevention and proper management of common emergency health problems related to family medicine		

Professionalism

ILOs	Methods of teaching/ learning	Methods of Evaluation
M. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society	Observation of senior staff experience -Case taking	1- Objective structured clinical examination 2- Patient survey
N. Demonstrate a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent, business practices		
O. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		Objective structured clinical examination

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
P. Work effectively in relevant health care delivery settings and systems.	Observation of senior staff experience Case taking	Chick list evaluation of live or recorded performance Patient survey
Q. Practice cost-effective health care and resource allocation that does not compromise quality of care.		
R. Assist patients in dealing with system complexities.		

	4. Contents (topic s/modules/rotation Unit Matrix)
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Time Schedule: First Part

Topic	Covered ILOs			
	Knowledge	Intellectual	Practical skills	General Skills
❖ Early intervention: <ul style="list-style-type: none"> ○ Pre-hospital emergency care. ○ Understanding of emergency medical system concepts and disaster medicine. 	A-C	C	G	A,D,E
❖ Time management in emergencies: <ul style="list-style-type: none"> ○ Prioritization and triage ○ Principles of simultaneous triage of patients with serious medical illness ○ Efficient resource utilization ○ Immediate access to consultants ○ Rapid access to information. 	A-H			
❖ Clinical diagnosis and approach to common emergency conditions in				

General medicine Emergency Units including:		A-D	A-J	A-R
<ul style="list-style-type: none"> • Chest pain • ECG & ABG • Acute abdomen. • Coma. • Asthma (Adult /Child) • Acute Respiratory distress • Abnormal breathing. • Pulmonary embolism and pneumothorx • Hypersensitivity reactions/anaphylaxis • Endocrine emergencies. • Basics in Toxicologic emergencies: <p>as</p> <ul style="list-style-type: none"> • accidental or intended poisonings ingestion including diagnosis and treatments protocols and antidotes • Bites and stings <p>❖ Diagnostic investigations interpretation of mentioned conditions above including:</p> <ul style="list-style-type: none"> ○ Electrocardiograms ○ Roentgenogra 				

phic identification of emergencies situations as chest x-ray ○ Monitors				
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5. Methods of teaching/learning:

1. Didactic (lectures, seminars, tutorial)
2. Case presentation
3. Direct observation
4. journal club,
5. Clinical rounds
6. Senior staff experience
7. Case log
8. Observation and supervision
9. Hand on workshop
10. Simulations

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

3. Extra lectures
4. Extra training

7. Assessment methods:

i. Assessment tools:

1. Clinical examination
2. oral examination
3. Written examination
4. Objective structure clinical examination (OSCE)
5. Portfolios

6. Procedure/case Log book
7. Simulation
8. Record review (report)
9. Patient survey
10. 360o global rating
11. Check list evaluation of live or recorded performance

ii. Time schedule: At the end of the first part

iii. Marks: written exam 40 marks , 1.5h in time+ Oral 20+ practical 40 + total 100

8. List of references

i. Lectures notes

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

1.Lectures notes

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

2.Essential books

1. Marx J, Walls R, Hockberger R. Rosen's emergency medicine-concepts and clinical practice. Elsevier Health Sciences; 2013.
2. CURRENT Diagnosis & Treatment in Family Medicine, 4th Edition (4th ed.), Jeannette E. South-Paul, Samuel C. Matheny, Evelyn L. Lewis (2015)
3. Textbook of Family Medicine, 9th Edition, Robert Rakel David Rake (2016)
4. Oxford Handbook of General Practice, Fourth

Edition , Chantal Simon ,Hazel Everitt ,
Françoise van Drop (2014).

3. Recommended books

3. Clinical Procedures in Emergency Medicine E-Book.
by Roberts JR, Hedges JR. Roberts and Hedges'
Elsevier Health Sciences; 2013.
4. Atlas of emergency medicine. by Knoop KJ, Stack LB,
Storow AB. Univerza v Ljubljani, Medicinska
fakulteta; 2010.

4. Periodicals, Web sites, ... etc

- The American Board of Emergency Medicine
www.abem.org
- The American College of Emergency Physicians
www.acep.org
- The Centers for Disease Control www.cdc.gov
- The Centers for Disease Control-Emergency
Preparedness and Response
<http://emergency.cdc.gov/>

5.Others

None

9. Signatures

Unit Coordinator: Prof . Dalia Galal Mahran	Head of the Department: Prof . Dalia Galal Mahran
Date:	Date:

Course 5: Emergency Care Medicine

Course5; unit 2: Comprehensive advanced life support care (emergency critical care in ICU).

1. Unit data

- + Course Title: Emergency care medicine.
- + Unit title: Comprehensive advanced life support care (emergency critical care in ICU).
- + Course code: FAM233B#.
- + Specialty: Family medicine
- + Number of **credit points (CP)**: Didactic teaching 1 CP (50%); 1 CP for training (50%); and total 2 CP (100%).

- + Department (s) delivering the course: intensive care units/ anesthesia department in collaboration with Family Medicine Department- Faculty of Medicine- Assiut University.
- + Coordinator (s):
 - Course coordinator: Professor Dalia Galal Mahran
 - Assistant coordinator (s) Professor: Ahmad Thabet Farrag
- + Date last reviewed: August/2020.

- + General requirements (prerequisites) if any :
 - Training practice should be provided in intensive care units/ anesthesia department -Faculty of Medicine- Assiut University.
- + Requirements from the students to achieve course ILOs are clarified in the joining log book.

2. Unit Aims

At the end of training practice, the family physician should be able to:

2/1- Provide comprehensive Advanced life support and advanced emergency care in diagnosed emergent conditions, and comprehensive advanced definitive life support care) in inpatient hospital emergency medical systems as well as providing continuous comprehensive Advanced life support care in acute or chronic wide variety of life threatening conditions.e.g. Toxicology, surgical, cardiac, neurology, oncology, trumatology, etc .

2/2- Acquire a broad field of sufficient knowledge and advanced procedural skills as well as advanced techniques used for advanced life support skills of many specialists e.g. the ability to resuscitate a patient, manage a difficult airway (anesthesia), consultation of other emergent subspecialties , in treating, diagnosing and managing a wide array of illnesses and conditions, both chronic and acute in continuous monitoring pattern.

3. Unit Intended learning outcomes (ILOs):

A-Knowledge and understanding

ILOs	Methods of teaching/ learning	<i>Methods of Evaluation</i>
<p>A. Describe the etiology, clinical picture, diagnosis and management including appropriate investigations findings and management of the following life threatening and critically ill conditions, significant health problems in family medicine as well as comprehensive advanced life support care, as follows:</p> <ul style="list-style-type: none"> • Basic life support(CPR) • Advanced life support. • Cardiac Arrest • Airway evaluation and management. • Oxygen Therapy • Ventilation <ul style="list-style-type: none"> • Tracheal intubation • Critical care • Acid base balance • Shock: <ul style="list-style-type: none"> Evaluation -Different types -Management <p>❖ Advanced Diagnostic tools, ICU tools and procedures:</p> <ul style="list-style-type: none"> ○ Ventilators, 	<p>-Lectures - Discussions - Readings Didactic Seminar Tutorial</p>	<p>-Log book - -Written exams -Oral exams MCQ</p>

<ul style="list-style-type: none"> ○ DC ○ Electrocardiograms ○ Roentgenographic identification of emergencies situations as chest x-ray ○ Monitors 		
<p>B. Mention the principles of comprehensive advanced life support care i.e. (diagnostic, therapeutic, preventive tools) in the following conditions:</p> <ul style="list-style-type: none"> ○ Shock management ○ Resuscitation ○ Airway management techniques ○ Initiation of vascular access ○ Artificial circulation ○ Treatment protocols of common life threatening conditions in ICU. ○ 		
<p>C. State update and evidence based Knowledge of comprehensive advanced life support care in the following :</p> <ul style="list-style-type: none"> ❖ Early intervention in CPR Room. ❖ Cardiopulmonary resuscitation care ❖ Understanding of emergency medical system concepts and disaster medicine ❖ Time management in emergencies <ul style="list-style-type: none"> ○ Prioritization and triage ○ Principles of simultaneous triage of patients with serious medical illness ○ Efficient resource utilization ○ Immediate access to consultants ○ Rapid access to information <p>a. situations as chest x-ray</p>		

<ul style="list-style-type: none"> ❖ Monitors Management of acute life threatening situations in critical ill patient in CPR& comprehensive advanced life support care of the following threatening conditions and subsequent significant risky complications and comorbidity : <ul style="list-style-type: none"> ❖ Basic life support(CPR) ❖ Advanced life support. ❖ Cardiac Arrest ❖ Airway evaluation and management. ❖ Oxygen Therapy ❖ Ventilation ❖ Tracheal intubation ❖ Critical care ❖ Acid base balance ❖ Shock: <ul style="list-style-type: none"> -Evaluation -Different types -Management ❖ Advanced Diagnostic tools, ICU tools and procedures: <ul style="list-style-type: none"> ○ Ventilators, ○ DC ○ Electrocardiograms ○ Roentgenographic identification of emergencies situations as chest x-ray ○ Monitors 		
<p>D. Memorize the facts and principles of the relevant basic and clinically supportive sciences related to comprehensive advanced life support care.</p>		

E. Mention the basic ethical and medicolegal principles relevant to the comprehensive advanced life support care.		
F. Mention the basics of quality assurance to ensure good comprehensive advanced life support care in his field		
G. Mention the ethical and scientific principles of medical research		
H. State the impact of common health problems in the comprehensive advanced life support care field of family medicine on the society.		

B-Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Correlates the facts of relevant basic and clinically supportive sciences with clinical reasoning, diagnosis and management of common situations in emergency family medicine related to comprehensive advanced life support care.	-Clinical rounds -Senior staff experience	case presentation -log book -Problem solving -Clinical exam -Case reports
B. Demonstrate an investigatory and analytic thinking (problem solving) approaches to common clinical situations related to comprehensive advanced life support care.	-Lectures -Discussions - Readings Didactic Seminar Tutorial.	-Log book --Written exams -Oral exams
C. Design and present cases , seminars in common critical life threatening problems in family medicine		
D-Formulate management plans and alternative decisions in different situations in the family physician field related to comprehensive advanced life support care.		

C-Practical skills (Patient Care)

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Obtain proper history and examine patients in caring and respectful behaviors.	Didactic -Lectures -Clinical rounds -Seminars -Clinical rotations (service teaching)	-OSCE Log book & portfolio -Case presentation Clinical exam
B. Order the following non invasive& invasive advanced diagnostic procedures used in comprehensive advanced life support care: - Electrocardiograms - Blood laboratory chemistry and hematologic studies. - CVP. - etc	Clinical round with senior staff. Observation Postgraduate teaching	Cases presentations -- Log book & portfolio
C. Interpret the following non invasive& Invasive basic and advanced diagnostic procedures: - Electrocardiograms - Blood laboratory chemistry and hematologic studies. - CVP....etc		
D. Perform the following non invasive&/invasive therapeutic procedures ❖ Primary emergency care management in CPR room according to emergency and comprehensive advanced life support care protocols for emergency		

<p>critical ill patients</p> <p>❖ first aid measures and comprehensive advanced life support care in:</p> <ul style="list-style-type: none"> • Basic life support(CPR) • Advanced life support. • Cardiac Arrest • Airway evaluation and management. <ul style="list-style-type: none"> • Oxygen Therapy • Ventilation • Tracheal intubation • Critical care • Acid base balance • Shock: <ul style="list-style-type: none"> Evaluation -Different types -Management 		
<p>E. Prescribe the non invasive & invasive advanced therapeutic procedures in the following :</p> <ul style="list-style-type: none"> ○ Airway management ○ . Hemodynamic techniques ○ Arterial catheter insertion and blood gas sampling ○ Central venous access (e.g. jugular, femoral, subclavian) ○ Venous cut-down ○ Management of acute cardiorespiratory arrest in all age groups and implementation of the skills of ACLS (Advanced Cardiac Life Support) to lead a team resuscitative effort 		
<p>F. Carry out patient management plans for common situations and critical life</p>	<p>Clinical rounds with senior staff</p>	

threatening conditions in family medicine related to the comprehensive advanced life support care.		
G. Use information technology to support patient care decisions and patient education in common life threatening emergencies& situations in family medicine related to comprehensive advanced life support care		
H. Provide health care services aimed at preventing health problems in family medicine related to comprehensive advanced life support care like: Common life threatening emergencies discussed above		
I .Provide patient-focused care in common conditions related to comprehensive advanced life support care, while working with health care professionals, including those from other disciplines like: Common life threatening emergencies.		
J .Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets.(Write a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and maintaining 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(audit, logbook)	Observation -Written& oral communication	Logbook
B. Appraises evidence from scientific studies(journal club)	Journal clubs - Discussion in	
C. Conduct epidemiological Studies and surveys about Common life threatening emergencies care quality.	seminars and clinical rounds	
D. Perform data management including data entry and analysis.		
E. Facilitate learning of junior students and other health care professionals.		

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Maintain therapeutic and ethically sound relationship with patients.	-Simulations -Clinical round seminars	Case presentation Log book Portfolios Clinical Exam
G. Elicit information using effective nonverbal, explanatory, questioning, and writing skills.	-Lectures -Case presentations	
H. Provide information using effective nonverbal, explanatory, questioning, and writing skills.		

I. Work effectively with others as a member of a health care team or other professional group.		
J. Present a case in common health problems related to emergency	Clinical round seminars	
K. Write a report in -Patients medical records - Consultation note. - Death report	Senior staff experience	
L. Council patients and families about prevention and proper management of common life threatening emergencies.		

Professionalism

ILOs	Methods of teaching/ learning	Methods of Evaluation
M. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society	Observation of senior staff experience -Case taking	1- Objective structured clinical examination 2- Patient survey
N. Demonstrate a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent, business practices		
O. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		Objective structured clinical examination

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
P. Work effectively in relevant health care delivery settings and systems.	Observation of senior staff experience Case taking	Log book.
Q. Practice cost-effective health care and resource allocation that does not compromise quality of care.		Check list evaluation of live or recorded performance
R. Assist patients in dealing with system complexities.		Patient survey

4. Contents (topic s/modules/rotation Unit Matrix

Time Schedule: First Part

Topic	Covered ILOs			
	Knowledge	Intellectual	Practical skills	General Skills
❖ Early intervention: ○ Understanding of emergency medical system concepts and disaster medicine.	A,C	C	G	A-E
❖ Time management in emergencies: ○ Prioritization and triage ○ Principles of simultaneous triage of patients with serious medical illness ○ Efficient resource	A,C	C	G	A-E

utilization <ul style="list-style-type: none"> ○ Immediate access to consultants ○ Rapid access to information 				
❖ Management of acute life threatening situations in critical ill patient in CPR& comprehensive advanced life support care of the following threatening conditions and subsequent significant risky complications and comorbidity : <ul style="list-style-type: none"> • Basic life support(CPR) • Advanced life support. • Cardiac Arrest • Airway evaluation and management. <ul style="list-style-type: none"> • Oxygen Therapy • Ventilation • Tracheal intubation • Critical care • Acid base balance • Shock: Evaluation -Different types	A-H	A-D	A-J	A-R
	A,C	C,D	B-E	D,E

-Management ❖ Advanced Diagnostic tools, ICU tools and procedures: ○ Ventilators, ○ DC ○ Electrocardiograms ○ Roentgenographic identification of emergencies situations as chest x-ray ○ Monitors				
Treatment protocols of common life threatening conditions in ICU.	C	C	G	A-E

5. Methods of teaching/learning:

- Didactic (lectures, seminars, tutorial)
- Case presentation
- Direct observation
- journal club,
- Clinical rounds
- Senior staff experience
- Case log
- Observation and supervision
- Hand on workshop
- Simulations

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

- Extra lectures
- Extra training

7. Assessment methods:

i. Assessment tools:

- Clinical examination
- oral examination
- Written examination
- Objective structure clinical examination (OSCE)
- Portfolios
- Procedure/case Log book
- Simulation
- Record review (report)
- Patient survey
- 360o global rating
- Check list evaluation of live or recorded performance

ii. Time schedule: At the end of the first part

iii. Marks: : written exam 20 marks , 1 h in time+ Oral 10+ practical 20 + total 50 marks.

8. List of references

1.Lectures notes

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

2.Essential books

5. Marx J, Walls R, Hockberger R. Rosen's emergency medicine-concepts and clinical practice. Elsevier Health Sciences; 2013.
6. CURRENT Diagnosis & Treatment in Family Medicine, 4th Edition (4th ed.), Jeannette E. South-Paul, Samuel C. Matheny, Evelyn L. Lewis (2015)
7. Textbook of Family Medicine, 9th Edition, Robert Rakel David Rake (2016)
8. Oxford Handbook of General Practice, Fourth

Edition , Chantal Simon ,Hazel Everitt ,
Françoise van Drop (2014).

3. Recommended books

3. Clinical Procedures in Emergency Medicine E-Book.
by Roberts JR, Hedges JR. Roberts and Hedges'
Elsevier Health Sciences; 2013.
4. Atlas of emergency medicine. by Knoop KJ, Stack LB,
Storror AB. Univerza v Ljubljani, Medicinska
fakulteta; 2010.

4. Periodicals, Web sites, ... etc

- The American Board of Emergency Medicine
www.abem.org
- The American College of Emergency Physicians
www.acep.org
- The Centers for Disease Control www.cdc.gov
- The Centers for Disease Control-Emergency
Preparedness and Response
<http://emergency.cdc.gov/>

5.Others

None

9. Signatures

Unit Coordinator: Prof . Dalia Galal Mahran	Head of the Department: Prof . Dalia Galal Mahran
Date:	Date:

Course (6): Traumatology and Radiodiagnosis

❖ It is divided into 2 units (modules);

- Module 1: traumatology.
- Module 2: radiodiagnosis.

Course (6): Traumatology and Radiodiagnosis

Course 6; unit 1: Traumatology

- Name of department: Traumatology unit – Orthopedic department.
- Faculty of medicine
- Assiut University
- **2020-2021/2021-2022**

1. Unit data

- + Course Title: Traumatology and Radiodiagnosis.
- + Unit code: traumatology .
- + Course code: FAM233C#.
- + Specialty: family medicine.
- + Number of **credit points (CP)**: Didactic 2.5 CP (41.7 %) practical 3 CP (58.3%).total 5.5 **CP (100%)**.
- + Department (s) delivering the course: traumatology unit- Orthopedic department in collaboration with Family Medicine Department
- + Coordinator (s):
 - Course coordinator: Professor: Dalia Galal Mahran
 - Assistant coordinator (s) Assistant professor: Mahmoud Yousef Badran
 - Date last reviewed: August /2020.
- + General requirements (prerequisites) if any :none
- + Requirements from the students to achieve course ILOs are clarified in the joining log book.

2. Unit Aims

2/1- To acquire the principles knowledge and facts and concerned professional practical skills for providing primary and continuing comprehensive health care for proper diagnosis and management of traumatized patient and life threaten conditions in traumatized patient .

3. Intended learning outcomes (ILOs)

A-Knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
<p>A. Describe the etiology, clinical picture, diagnosis and management of the following trauma conditions and clinical situations commonly dealt with family physician in primary health care settings, including the following:</p> <ul style="list-style-type: none">• Full Knowledge of ATLS protocols.• Primary emergency of common problems and assistance role in minor intervention in traumatology according to ATLS protocols for Polytrauma patients.• Principles of soft tissue coverage for open fractures and wound defects.• Mechanism of bone and soft tissue healing.• Biomechanics of fractures and fixation.• Classification of fractures and soft	<p>Didactic; -Lectures -Clinical rounds -Seminars -Clinical rotations (service teaching)</p>	<p>-log book & portfolio - MCQ -Oral and written exam</p>

<p>tissue injuries.</p> <ul style="list-style-type: none"> • Complications of fractures. • Causes of pathological fractures • Principles of non operative fracture treatment. • Casting indications, types, technique and complications • Principles and indications for amputations. • · Definition , indication and care of internal and external fixation. • <u>principles of Poly trauma</u> <ul style="list-style-type: none"> · Physiology of polytrauma, hemorrhage and shock. · Primary and surgical management of open fractures. • primary non-operative and operative management of : mentioned fractures of the upper limb and lower limb & fractures of the pelvis and acetabulum. • Pediatric fractures. 		
<p>B. Mention the current and updated of following principles related to traumatology:</p> <ul style="list-style-type: none"> • Poly trauma • Anatomy of the spine, lower and upper limbs, pelvis and acetabulum. • Physiology of polytrauma, hemorrhage and shock, fluid and electrolyte imbalance and metabolic response to trauma 		

<p>C. State update and evidence based Knowledge and facts related to traumatology i.e.;</p> <ul style="list-style-type: none"> • Biomechanics of fractures and fixation • Classification of fractures and soft tissue injuries • Principles of non operative fracture treatment • Principles of internal fixation • Principles of external fixation. 		
D. Memorize the facts and principles of the relevant basic and clinically supportive sciences related to traumatology.		
E. Mention the basic ethical and medicolegal principles relevant to traumatology.		
F. Mention the basics of quality assurance to ensure good clinical care in traumatology		
G. Mention the ethical and scientific principles of medical research.		
H. State the impact of common health problems in the field of traumatology in family medicine on the society.		

B-Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Correlates the facts of relevant basic and clinically supportive sciences with clinical reasoning, diagnosis and management of common trauma conditions related to family medicine.	Clinical rounds Senior staff experience	case presentation Log book Problem solving.
B. Demonstrate an investigatory and analytic thinking (problem solving) approaches to common clinical situations in traumatology related to family medicine.		
C. Design and present cases , seminars in common traumatology problems.		
D-Formulate management plans and alternative decisions in different truma situations in the field of family medicine.		

C-Practical skills (Patient Care)

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Obtain proper history and examine patients in caring and respectful behaviors.	-Didactic; -Lectures -Clinical rounds -Seminars -Clinical rotations (service teaching)	OSCE -log book & portfolio - MCQ examination
B. Order, perform and interpret the following non invasive and invasive diagnostic procedures: -Routine appropriate Lab investigations related to conditions mentioned in A.A -X rays. -CT - MRI	Clinical round with senior staff Observation Post graduate teaching Hand on workshops	-Procedure presentation - Log book - Chick list
<u>C. Interpret the findings of non invasive and invasive diagnostic procedures mentioned in C.B.</u>		
<u>D. Perform the following non invasive and invasive diagnostic and therapeutic procedures i.e.</u> • Primary emergency		

<p>management according to ATLS protocols for Polytrauma patients</p> <ul style="list-style-type: none"> • Primary and surgical management of open fractures • primary non-operative and operative management of : mentioned fractures of the upper limb and lower limb & fractures of the pelvis and acetabulum • Management and assistance in minor emergency in mentioned common problems in traumatology. • Pediatric fractures. 		
<p>E. Carry out patient management plans for common conditions related to traumatology and family medicine i.e.</p> <ul style="list-style-type: none"> • Primary emergency management according to ATLS protocols for Polytrauma patients. • Primary and surgical management of open fractures • primary non-operative and operative management of : mentioned fractures of the upper limb and lower limb & fractures of the pelvis and acetabulum • Management and assistance 	<p>Clinical round with senior staff</p>	

<p>in minor emergency in mentioned common problems in traumatology.</p> <ul style="list-style-type: none"> • Pediatric fractures. 		
<p>F. Use information technology to support traumatized patient care decisions and patient education in common clinical situations related to traumatology and family medicine .</p>		
<p>G-Provide health care services aimed at preventing health problems related to traumatology and family medicine.</p>		
<p>H-Provide patient-focused care in common conditions related to traumatology , while working with health care professionals, including those from other disciplines like: Conditions mentioned in A.A.</p>		
<p>I. Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets.(Write a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and maintaining medical records and referral reports)</p>		

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(audit, logbook)	-Case log -Observation and supervision -Written & oral communication	Procedure/case presentation -Log book and Portfolios
B. Appraises evidence from scientific studies(journal club)	-Journal clubs - Discussions in seminars and clinical rounds	
C. Conduct epidemiological Studies and surveys.		
D. Perform data management including data entry and analysis.		
E. Facilitate learning of junior students and other health care professionals.	Clinical rounds Senior staff experience	

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Maintain 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 and
G. Elicit information using effective nonverbal, explanatory, questioning, and writing skills.		
H. Provide information using effective nonverbal, explanatory, questioning, and writing skills.		
I. Work effectively with others as a member of a health care team or other professional group.		
J. Present a case in common problems related to traumatology.	Clinical round Seminars	Clinical Exam
K. Write a report : -Patients medical report -Referral report	Senior staff experience	Chick list
L. Council patients and families about: -common conditions and health problems in traumatology and family medicine	Clinical round with senior staff	

Professionalism

ILOs	Methods of teaching/ learning	Methods of Evaluation
M. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society	Observation Senior staff experience Case taking	1. Objective structured clinical examination 2. Patient survey
N. Demonstrate a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent, business practices		1. 360o global rating
O. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		1. Objective structured clinical examination 2. 360o global rating

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
P. Work effectively in relevant health care delivery settings and systems.	Observation Senior staff experience	1. 360o global rating
Q. Practice cost-effective health care and resource allocation that does not compromise quality of care.		1. Check list evaluation of live or recorded performance
R. Assist patients in dealing with system complexities.		1. 360o global rating 2. Patient survey

4. Contents (topic s/modules/rotation Unit Matrix

Time Schedule: First Part

Topic	Covered ILOs			
	Knowledge	Intellectual	Practical skills	General Skills
• Full Knowledge of ATLS protocols.	A	C	-	A-B,D,E
• Primary emergency of common problems and assistance role in minor intervention in traumatology according to ATLS protocols for Polytrauma patients.	A	C	-	A-B,D,E-R
• Principles of soft tissue coverage for open fractures and wound defects.	A	C	-	A-B,D,E
• Mechanism of bone and soft tissue healing.	A	C	-	A-B,D,E
• Biomechanics of fractures and fixation.	A-H	A-D	A-J	A,B,D,E
• Classification of fractures and soft tissue injuries.	A-H	A-D	A-J	A-E
• Complications of fractures.	A-H	A-D	A-J	A-E
• Causes of pathological fractures	C	C	-	D
• Principles of non operative fracture treatment.	A,C	A-D	A-J	A-E
• Casting indications, types, technique and complications	A	C,D	-	D

<ul style="list-style-type: none"> Principles and indications for amputations. 	A	A-D	-	D
<ul style="list-style-type: none"> Definition , indication and care of internal and external fixation. 	A	C	-	D
<ul style="list-style-type: none"> <u>principles of Poly trauma</u> <ul style="list-style-type: none"> Physiology of polytrauma, hemorrhage and shock. 	A	A-D	A-J	D
<ul style="list-style-type: none"> <ul style="list-style-type: none"> Primary and surgical management of open fractures. 	A,C	A,C	-	D,E
<ul style="list-style-type: none"> management of open fractures. 	A,C	C	-	D,E
<ul style="list-style-type: none"> primary non-operative and operative management of : mentioned fractures of the upper limb and lower limb & fractures of the pelvis and acetabulum. 	A,C	C	-	D,E
<ul style="list-style-type: none"> Pediatric fractures. 	A,C	C	-	D,E-R

5. Methods of teaching/learning:

- Didactic (lectures, seminars, tutorial)
- Case presentation
- Direct observation
- journal club,
- Clinical rounds
- Senior staff experience
- Case log
- Observation and supervision
- Hand on workshop
- Simulations

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

- Extra lectures
- Extra training

7. Assessment methods:

i. Assessment tools:

- Clinical examination
- oral examination
- Written examination
- Objective structure clinical examination (OSCE)
- Portfolios
- Procedure/case Log book
- Simulation
- Record review (report)
- Patient survey
- 360o global rating
- Check list evaluation of live or recorded performance

ii. Time schedule: At the end of the first part

iii. Marks: 125 marks

written exam (50 marks), 2 hours in time+ Oral exam (25 marks)+ Practical clinical exam (50 marks).

8. List of references

1.Lectures notes

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

2. Essential books

1. Textbook of emergency medicine: emergency care as practiced at the Massachusetts General Hospital. Williams & Wilkins; 2000.
2. Orthopaedic Trauma and Emergency Fracture Management. By White TO, Mackenzie SP, Gray AJ. McRae's Elsevier Health Sciences; 2015.
3. Clinical orthopaedic examination. By McRae R. Churchill Livingstone/Elsevier,; 2010.

3. Recommended books

4. Principles of orthopaedic practice by Lazar R.. Ed. Edited by Roger Dee, Lawrence C. Hurst, Martin A. Gruber, and Stephen A. Kottmeier. New York M-H 2000, editor. LWW; 2000.
5. Textbook or Orthopedics by CR W. Wheeless. 2011. 2011.

4. Periodicals, Web sites, ... etc

- Orthopedics Hyper guide
- Orthoteers, orthopedics training materials

1. **Others:** None

9. Signatures

Unit Coordinator: Prof . Dalia Galal Mahran	Head of the Department: Prof . Dalia Galal Mahran
Date:	Date:

Course (6) :Unit 2: Radiodiagnosis

- Name of department: Family medicine in collaboration with diagnostic radiology department
- Faculty of medicine
- Assiut University
- **2020-2021/2021-2022**

1. unit data

- + Course Title: Traumatology and Radiodiagnosis
- + Unit title : Radiodiagnosis.
- + Course code: FAM233C#
- + Specialty: family medicine
- + Number of **credit points (CP)**: Didactic 0.5 CP (33.3 %) practical 1cp (66.7%).total 1.5CP (100%).
- + Department (s) delivering the course: diagnostic radiology in collaboration with Family Medicine department.
- + Coordinator (s):
 - Course coordinator: Professor: Dalia Galal Mahran
Assistant coordinator (s)
Assistant prof. Hanan Sharaf
 - Date last reviewed: August/2020.
- + General requirements (prerequisites) if any :none.
- + Requirements from the students to achieve course ILOs are clarified in the joining log book.

2. Unit Aims

- The candidate should acquire the professional knowledge and facts and satisfactory practical professional skills of radiodiagnosis which are necessary to manage and treat common health problems faced the Family Physician in primary health care settings and, health-risk assessments and screening services and preventive health services.

3. Intended learning outcomes (ILOs):

A-Knowledge and understanding

ILOs	Methods of teaching/ learning	<i>Methods of Evaluation</i>
A- Describe the anatomic and pathological principles entity of radio diagnosis : <ul style="list-style-type: none"> • Plain X-ray • Urinary tract imaging with and without contrast. • Barium swallow, meal and enema. • Ultrasonography of the abdomen. • Computed tomography 	Didactic; Lectures Seminars	-OSCE -log book - written exam -Oral exam.
B. Mention the basic ethical and medicolegal principles that should be applied in practice and are relevant to Radiodiagnosis in family medicine.		
C. Illustrate the different investigative radio diagnostic procedures related to common health problems and clinical		

situations in family medicine.		
D. State hazards and common health problems of exposure to different radiological modalities.		

B-Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Correlates the facts of relevant basic and clinically supportive sciences with clinical reasoning, diagnosis and management of common health problems and conditions related to radiodiagnosis and Family Medicine.	Seminars -Clinical rounds Senior staff experience	-Logbook and Portfolios and case presentation Written exam
B. Demonstrate an investigatory and analytic thinking (problem solving) approaches to common clinical situations related to radiodiagnosis and Family Medicine.		
C. Design and present seminars in Radiology related to radiodiagnosis and Family Medicine.		

C-Practical skills (Patient Care)

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Obtain proper brief history and examination data of patients in caring and respectful behaviors.	-Didactic; -Lectures -Clinical rounds	-OSCE -log book & portfolio -Oral Exam.

	-Seminars -Clinical rotations (service teaching)	
<p>B. Order the following non invasive& invasive diagnostic procedures.</p> <ul style="list-style-type: none"> • Plain X-ray • urinary tract imaging with and without contrast. • Barium swallow, meal and enema. • Ultrasonography of the abdomen. • Computed tomography 	<p>Clinical round with senior staff Observation Post graduate teaching</p>	<p>-Procedure presentation - Log book - Chick list</p>
<p>C. Interpret the following non invasive & Invasive diagnostic procedures .i.e.;</p> <ul style="list-style-type: none"> • Plain X-ray • Urinary tract imaging with and without contrast. • Barium swallow, meal and enema. • Ultrasonography of the abdomen. • Computed tomography. 	<p>Clinical round with senior staff</p>	<p>-Procedure presentation - Log book - Chick list</p>

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(audit, logbook)	-Case log -Observation and supervision -Written & oral communication	Procedure/case presentation -Log book and Portfolios
B. Appraises evidence from scientific studies(journal club)	-Journal clubs - Discussions in seminars and clinical rounds	
C. Conduct epidemiological Studies and surveys.		
D. Perform data management including data entry and analysis.		
E. Facilitate learning of junior students and other health care professionals.	Clinical rounds Senior staff experience	

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Maintain therapeutic and ethically sound relationship with patients.	Clinical round Seminars Lectures Case presentation	Global rating Procedure/case presentation Log book Portfolios Chick list
G. Elicit information using effective nonverbal, explanatory, questioning, and writing skills.		
H. Work effectively with others as a member of a primary and preventive health care team or other professional group.		
I. Present seminar in common problems related to general diseases	Clinical round Seminars	Clinical Exam
J. Write a report to subspecialist ; i.e.; -Patients X ray report. -Abdominal Ultrasonography report	Senior staff experience	Chick list
K. Council patients and families, simply about: -Result of radiological investigations. - techniques and tools of radiodiagnosis.	Clinical round with senior staff	

Professionalism

ILOs	Methods of teaching/ learning	Methods of Evaluation
L. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society	Observation Senior staff experience Case taking	1. Objective structured clinical examination 2. Patient survey
M. Demonstrate a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent, business practices		1. 360o global rating
N. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		1. Objective structured clinical examination 2. 360o global rating

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
O. Work effectively in relevant health care delivery settings and systems.	Observation Senior staff experience	1. 360o global rating
P. Practice cost-effective health care and resource allocation that does not compromise quality of care.		1. Check list evaluation of live or recorded performance

4. Contents (topic s/modules/rotation Unit Matrix

Time Schedule: First Part

Topic	Covered ILOs			
	Knowledge A	Intellectual B	Practical skill C	General Skills D
X-ray of the bone	A-D	A-C	A-C	A-P
Plain urinary tract with and without contrast	A-D	A-C	A-C	A-P
Barium swallow, meal and enema	A-D	A-C	A-C	A-P
Ultrasonography of the abdomen	A-D	A-C	A-C	A-P
Computed tomography	A-D	A-C	A-C	A-P

5. Methods of teaching/learning:

1. Didactic (lectures, seminars, tutorial)
2. Outpatient
3. Inpatient
4. Case presentation
5. Direct observation
6. journal club
7. Critically appraised topic.
8. Educational prescription

9. Clinical rounds
10. Clinical rotation
11. Senior staff experience
12. Case log
13. Observation and supervision
14. Written & oral communications
15. Simulation
16. Hand on work shop
17. Service teaching
18. Perform under supervision of senior staff
19. Postgraduate teaching

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

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

7. Assessment methods:

i. Assessment tools:

1. Oral examination
2. Written examination
3. Objective structure clinical examination (OSCE)
4. Procedure/case Log book and Portfolios

ii. Time schedule: At the end of first part

iii. Marks: 25 marks

written exam in 1 hour (10marks)+Oral exam (5 marks),+ OSCE, Procedure/case Logbook and Portfolios (10 marks).

8. List of references

1. Lectures notes

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

2. Essential books

1. Margolis S. Oxford Handbook of General Practice. Aust J Gen Pract. 2014
2. Davidson's Principles and Practice of Medicine E-Book. By Ralston SH, Penman ID, Strachan MWJ, Hobson R. Elsevier Health Sciences; 2018.
3. Hoffbrand's essential haematology. By Hoffbrand AV, Steensma DP. John Wiley & Sons; 2019.
4. Brenner and Rector's The Kidney E-Book. By Taal MW, Chertow GM, Marsden PA, Skorecki K, Alan SL, Brenner BM. Elsevier Health Sciences; 2015.
5. Differential diagnosis in abdominal ultrasound. By Bisset RAL, Khan AN, others. Elsevier India; 2012.

3. Recommended books

1. Oxford handbook of clinical haematology. By Provan D, Baglin T, Dokal I, De Vos J. OUP Oxford; 2015.
2. Harrison's Principles of Internal Medicine, Braunwald E, Isselbacher KJ, Wilson JD, Martin JB, Kasper D, Hauser SL, et al. 15th. 2010;

4. Periodicals, Web sites, ... etc

- American Journal of internal Medicine
- New England Journal of Medicine

- American Journal of Gastroenterology
- BMJ
- Egyptian Heart Journal

5. Others

None

9. Signatures

Unit Coordinator: Prof . Dalia Galal Mahran	Head of the Department: Prof . Dalia Galal Mahran
Date:	Date:

Specialized Courses of Family medicine

- **Name of Department: Family Medicine department**
- **Faculty of medicine**
- **Assiut University.**
- **2020-2021/2021-2022.**
- **The second part and specialized courses composed of 6 courses as follows;**

- 1- Internal medicine related to family medicine.
- 2- Dermatology, venerology and andrology & Neurology and Psychiatry related to family medicine.
- 3- Obstetrics and gynecology & family planning related to family medicine
- 4- Pediatrics related to family medicine.
- 5- Surgery related to family medicine.(General surgery, orthopedic and Urology)
- 6- ENT surgery & Ophthalmology related to family medicine.

- **Credit points(CP): Didactics;24CP(17.9%) Practical CP;110 CP(82.3%),14CP in first part for 3 courses(course 7,9,10) and 96 CP in second part for training on 6 courses,and total CP;134CP(100%).**
- These courses are delivered in collaboration with family medicine department and corresponding other departments in faculty of medicine, Assuit university.
- Training in first part will be conducted in family medicine centers for training on family filing related to general filing (2CP), internal medicine(4CP), Obstetrics and gynecology & family planning (4CP),and pediatrics (4CP)related to family medicine.

Course 7: Internal medicine related to family medicine.

1. Course data

- + **Course Title: : Internal medicine related to family medicine.**
- + **Course code: FAM218.**

- + **Specialty: Family medicine**

+ **Number of **credit points (CP)**: 6 CP for didactics teaching (17.6%) and 28 CP for training (82.4%) and 34 CP for total(100%).**

- + **Department (s) delivering the course: Internal Medicine department in collaboration with Family Medicine Department.**

- + **Coordinator (s):**

- **Course coordinator: Professor: Dalia Galal Mahran**
Assistant coordinator (s)

Professor: Ahmad Thabet Farrag

Assistant prof. Hanan Sharaf

- **Date last reviewed: August/ 2020.**

- + **General requirements (prerequisites) if any :**

- + **Requirements from the students to achieve course ILOs are clarified in the joining log book.**

2. Course Aims

2/1- To acquire the principles knowledge and facts and concerned practical skills for diagnosis, providing primary and continuing comprehensive health care for diagnosis ,medical treatment and monitoring of common medical diseases running in families.

2/2- to deliver a range of sufficient knowledge and professional skills for providing acute(emergencies), chronic and preventive medical care services in common diagnosed medical diseases running in family .

2/3- to provide sufficient knowledge and professional skills for preventive care, including routine checkups, health-risk assessments, and screening tests, and personalized counseling on maintaining a healthy lifestyle as regard to internal medicine field.

3. Intended learning outcomes (ILOs):

A- Knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
<p>A-Describe the etiology, clinical picture, diagnosis and management(primary and preventive)health care of the following medical diseases and clinical conditions:</p> <p>Pulmonary:</p> <ul style="list-style-type: none"> -Bronchial asthma -COPD <p>Hepatology</p> <ul style="list-style-type: none"> - Hepatitis -Liver cirrhosis 	<ul style="list-style-type: none"> -Lectures -Tutorials - seminars -Discussions - Readings 	<ul style="list-style-type: none"> -OSCE -Log book -Written exams Problem solving MCQ -Oral exams

<ul style="list-style-type: none"> -Gall stones and acute cholecystitis -Choledocholithiasis and cholangitis <p>Cardiology:</p> <ul style="list-style-type: none"> -Congestive Heart failure -Coronary artery disease -Hypertension -hyperlipidemia <p>- Haematology</p> <ul style="list-style-type: none"> -Lymphomas -Acute and chronic leukemia -platelet and Bleeding disorders -Anemia <p>- Endocrinology</p> <ul style="list-style-type: none"> -Diabetes mellitus - Common endocrine disorders: - Hyperthyroidism - Hypothyroidism -Adrenal insufficiency - Cushing syndrome - Hyperaldosteronism -Pheochromocytoma <p>Gastroenterology</p> <ul style="list-style-type: none"> -Constipation - Acute and chronic diarrhea - Esophagitis - GERD -Dysphagia -peptic ulcer. -Irritable bowel disease -Inflammatory bowel disease <p>Renal diseases</p> <ul style="list-style-type: none"> -Acute renal failure - chronic kidney disease 		
B.Mention the principles and facts of (diagnostic, primary therapeutic lines and preventive tools)		

<p>related to medical conditions mentioned above as regards to the following:</p> <ul style="list-style-type: none"> ○ The principles of changes in the normal range of laboratory values and other investigations including medical imaging. ○ Principles of hazards in drug treatment, drug interactions and new advances in therapeutics relevant to common internal medicine health problems mentioned above. ○ Principle use of clinical bedside measurements and instruments in primary health care as inhalers, ophthalmoscope, glucotest, ECG, use of sphygmomanometer, aspiration of joints, .etc. ○ Principles of common radiological investigations and findings. ○ Principles of Central venous line placement and indication. ○ Principles of Noninvasive mechanical ventilation and indications. ○ Principles of Airway management ○ Principles of Endotracheal intubations ○ Principles of Hemodynamic monitoring 		
<p>C. State update and evidence based Knowledge of</p> <p>the etiology, clinical picture, diagnosis and management of common medical diseases and clinical conditions running in families ; mentioned above in AA.</p>		
<p>D. Memorize the facts and principles of the relevant basic and clinically supportive sciences of common internal medicine health problems related to family medicine.</p>		
<p>E. Mention the basic ethical and medico legal</p>		

principles relevant to common internal medicine health problems in family medicine.		
F. Mention the basics of quality assurance to ensure good clinical care in his field		
G. Mention the ethical and scientific principles of medical research		
H. State the impact of common internal medicine health problems in the field of family medicine on the society.		

B-Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Correlates the facts of relevant basic and clinically supportive sciences with clinical reasoning, diagnosis and management of common medical diseases related to family medicine	-Clinical rounds. -Seminars. - Discussion. -Senior staff experience	Case presentation log book Problem solving Written exam,
B. Demonstrate an investigatory and analytic thinking (problem solving) approaches to common medical and clinical situations related to family medicine .		
C. Design and present cases, seminars in common medical health problems related to family medicine .		
D-Formulate management plans and alternative decisions in different situations in the field of common medical health problems related to family medicine .		

C-Practical skills (Patient Care)

ILOs	Methods of teaching/ learning	Methods of Evaluation
<p>A. Obtain proper history and examine patients in caring and respectful behaviors.</p>	<p>Didactic -Lectures -Clinical rounds -Seminars -Clinical rotations (service teaching)</p>	<p>- Log book & portfolio - Case presentation</p>
<p>B. Order the following non invasive& invasive diagnostic procedures related to medical conditions in family medicine including:</p> <ul style="list-style-type: none"> ○ Laboratory investigations and other diagnostic investigations related to conditions mentioned above including <ul style="list-style-type: none"> ○ Medical imaging. ○ Endoscopic procedures ○ appropriate routine Laboratory investigations ○ Abdominal Ultrasonography ○ CT abdomen ○ Urine analysis ○ CBC, Blood film. ○ Liver function tests ○ Abdominal Ultrasonography ○ Platelets function. ○ Coagulation profile. ○ Blood gases 	<p>Clinical round with senior staff. Observation Postgraduate teaching</p>	<p>Cases presentations -- Log book & portfolio Clinical exam OSCE</p>
<p>C. Interpret the following findings of non invasive diagnostic procedures related to medical</p>		

<p>conditions in family medicine including:</p> <ul style="list-style-type: none"> ○ Routine appropriate lab investigations related to conditions mentioned in A.A ○ X ray chest ○ ECG ○ Abdominal Ultrasonography ○ Urine analysis. ○ Hemodynamic monitoring ○ Blood gases. 		
<p>D. Perform the following non invasive therapeutic procedures related to conditions mentioned above</p> <ul style="list-style-type: none"> ○ Non invasive mechanical ventilation ○ Airway management ○ Homodynamic monitoring 		
<p>E. Prescribe the non invasive & invasive therapeutic procedures related to mentioned medical conditions in family medicine and referral to concerned subspecialties, lab, medical comprehensive health care centers in clinical situations Like;</p> <ul style="list-style-type: none"> ○ Therapeutic intervention with medical imaging and Endoscopic techniques. ○ Endotracheal intubation. ○ Non invasive mechanical ventilation. ○ Airway management. ○ Joint aspiration. 		
<p>F. Carry out patient management plans for common conditions related to medical conditions in family medicine as regard to primary and preventive health care, health - risk assessment and screening, and personalized counseling on</p>	<p>Clinical rounds with senior staff</p>	

maintaining a healthy lifestyle.		
G. Use information technology to support patient care decisions and patient education in common health problems and clinical situations related to family medicine		
H. Provide health care services aimed at preventing common medical health problems related to family medicine mentioned above in AA.		
I. Provide patient-focused care in common medical health problems and clinical conditions related to family medicine, while working with health care professionals, including those from other disciplines like: dietitian, physical therapy, other subspecialty		
J. Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets, as(Write a consultation note, Inform patients of diagnosis and therapeutic plan, completing and maintaining 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(audit, logbook)	Observation -Written& oral communication Journal clubs - Discussion in seminars and clinical rounds	Log book Portfolio
B. Appraises evidence from scientific studies(journal club)		
C. Conduct epidemiological Studies and surveys.		
D. Perform data management including data entry and analysis.		
E. Facilitate learning of junior students and other health care professionals.		

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Maintain therapeutic and ethically sound relationship with patients.	-Simulations -Clinical round seminars -Lectures -Case presentations - discussion.	Case presentation Log book Portfolios
G. Elicit information using effective nonverbal, explanatory, questioning, and writing skills.		
H. Provide information using effective nonverbal, explanatory, questioning, and writing skills.		
I. Work effectively with others as a member of a health care team or other professional group.		
J. Present a case in health problems related to the internal medicine	Clinical round seminars	Clinical Exam
K. Write a report in -Patients medical records - Death report	Senior staff experience	
L. Council patients and families about prevention and proper management of the common medical health problems in family medicine.		

Professionalism

ILOs	Methods of teaching/ learning	Methods of Evaluation
M. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society	-Observation of senior staff experience -Case taking	1- Objective structured clinical examination 2- Patient survey

N. Demonstrate a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent, business practices		
O. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		Objective structured clinical examination

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
P. Work effectively in relevant health care delivery settings and systems.	Observation of senior staff experience Case taking	Chick list evaluation of live or recorded performance
Q. Practice cost-effective health care and resource allocation that does not compromise quality of care.		
R. Assist patients in dealing with system complexities.		Patient survey

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

Time Schedule: Second part

Topic	Covered ILOs			
	Knowledge	Intellectual	Practical skills	General Skills
Common diseases in internal medicine including: <ul style="list-style-type: none"> ○ Pulmonary: <ul style="list-style-type: none"> -Bronchial asthma -COPD ○ Hepatology <ul style="list-style-type: none"> -Hepatitis -Liver cirrhosis -Gall stones and acute cholecystitis -Choledocholithiasis and cholangitis ○ Cardiology: <ul style="list-style-type: none"> -Congestive Heart failure -Coronary artery disease -Hypertension -hyperlipidemia ○ Haematology <ul style="list-style-type: none"> -Lymphomas -Acute and chronic leukemia -platelet and Bleeding disorders -Anemia ○ Endocrinology <ul style="list-style-type: none"> -Diabetes mellitus - Common endocrine disorders: 	A-H	A-D	A-J	A-R

<ul style="list-style-type: none"> - Hyperthyroidism - Hypothyroidism -Adrenal insufficiency - Cushing syndrome - Hyperaldosteronism -Pheochromocytoma <ul style="list-style-type: none"> ○ Gastroenterology -Constipation - Acute and chronic diarrhea - Esophagitis - GERD -Dysphagia -peptic ulcer. -Irritable bowel disease -Inflammatory bowel disease ○ Renal diseases <ul style="list-style-type: none"> -Acute renal failure - chronic kidney disease 				
<ul style="list-style-type: none"> ○ The principles of changes in the normal range of laboratory values and other investigations including medical imaging. ○ Principles of hazards in drug treatment, drug interactions and new advances in therapeutics relevant to common internal medicine health problems mentioned above. ○ Principle use of clinical 	B	C	-	D,E
	B	C	-	D,E

bedside measurements and instruments in primary health care as inhalers, ophthalmoscope, glucotest, ECG, use of sphygmomanometer, aspiration of joints, .etc.	B	C	-	D,E
○ Principles of common radiological investigations and findings.	B	C	-	D,E
○ Principles of Central venous line placement and indication.	B	C	-	D,E
○ Principles of Noninvasive mechanical ventilation and indications.	B	C	-	D,E
○ Principles of Airway management	B	C	-	D,E
○ Principles of Endotracheal intubations	B	C	-	D,E
○ Principles of Hemodynamic monitoring	B	C	-	D,E

5. Methods of teaching/learning:

- Didactic (lectures, seminars, tutorial)
- Outpatient
- Inpatient

- Case presentation
- Direct observation
- journal club
- Critically appraised topic.
- Educational prescription
- Clinical rounds
- Clinical rotation
- Senior staff experience
- Case log
- Observation and supervision
- Written & oral communications
- Simulation
- Hand on work shop
- Service teaching
- Perform under supervision of senior staff
- Postgraduate teaching

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

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

7. Course assessment methods:

i. Assessment tools:

- Oral examination
- Clinical examination
- Written examination
- Objective structure clinical examination (OSCE)
- Procedure/case Log book and Portfolios
- Simulation
- Record review (report)
- Patient survey
- 360o global rating
- Check list evaluation of live or recorded performance
- MCQ Exam

ii. Time schedule: At the end of second part

iii. Marks: **300 marks,**

Written exam (3 hours in time, 120 marks)

+ Oral exam +investigations (60 marks)

+clinical exam (120 marks).

8. List of references

1.Lectures notes

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

2.Essential books

1. First aid for the family medicine boards. By Le T, Mendoza M, Coffa D, Saint-Hilaire L McGraw Hill Professional; 2018.

2. Cecil Textbook of Medicine 22 edition. by Friedman S, Schiano T, Goldman L, Ausiello D Saunders; 2014.
3. Davidson's Principles and Practice of Medicine E-Book. By Ralston SH, Penman ID, Strachan MWJ, Hobson R. Elsevier Health Sciences; 2018.
4. Oxford Handbook of General Practice. By Margolis S. Aust J Gen Pract. 2014;43(9):652.

3. Recommended books

1. Harrison's Principles of Internal Medicine, 15th. by Braunwald E, Isselbacher KJ, Wilson JD, Martin JB, Kasper D, Hauser SL, et al.2010;

4.Periodicals, Web sites, ... etc

- American Journal of internal Medicine
- New England Journal of Medicine

5.Others

None

9. Signatures

Course Coordinator: Prof . Dalia Galal Mahran	Head of the Department: Prof . Dalia Galal Mahran
Date:	Date:

Course 8: Dermatology, venerology and andrology & Neurology and Psychiatry related to family medicine.

It is divided into 2 units:

- Unit 1; Dermatology, venerology and andrology related to family medicine.
- Unit 2; Neurology and Psychiatry related to family medicine.

Course (8); Unit (1): Dermatology, Venereology and Andrology related to family medicine

I. Unit data

- Course Title: Dermatology, venerology and andrology & Neurology and Psychiatry related to family medicine.
- Unit title : Dermatology, Venereology and Andrology related to family medicine
- Course code: FAM233D#
- Specialty: Family Medicine
- Number of credit points(CP): total; 5 credit points(100%); total ; 5 CP(100%); 1 CP for didactic teaching(20%) and 4 CP for training(80%).
- Department (s) delivering the course: Dermatology, Venereology & Andrology - Faculty of Medicine- Assiut University in conjunction with Family Medicine Department.
- Coordinator (s): Professor: Dalia Galal Mahran
- Assistant coordinator:
Professor: Emad Abd El-Raheem Taha
- Date last reviewed: August/ 2020
 - Requirements (prerequisites) if any : NONE.
- Requirements from the students to achieve course ILOs are clarified in the joining log book.

2. unit Aims

2/1- To acquire the principles knowledge and facts and concerned practical skills for diagnosis, providing primary and continuing comprehensive health care for diagnosis and monitoring of common clinical conditions and health problems(i.e. Infectious, occupational, and environmental diseases) related to Dermatology, Venereology and Andrology in family medicine.

A-Knowledge and understanding

ILOs	Methods of teaching/ learning	<i>Methods of Evaluation</i>
<p>A. Describe the etiology, clinical picture, diagnosis and management of the following diseases and clinical Dermatology, Venereology and Andrology conditions related to family medicine:</p> <p>❖ Dermatological conditions and diseases related to family medicine,</p> <ul style="list-style-type: none"> o Neonatal eczema and neonatal nevi (vascular – pigmented) o Pruritis. o Eczematous skin conditions including atopic and contact dermatitis o Cutaneous erythemas(Psoriasis, lichen plannus) o Occupational dermatoses(eczema-physical dermatitis) o photosensitivity (photocontact-solar urticarial) o Cutaneous infections including, viral, bacterial, parasitic, and fungal skin diseases with special concern to leprosy and other chronic infections in our community. o Drug reactions. o Diseases of connective tissue and subcutaneous 	<p>Didactic;</p> <ul style="list-style-type: none"> -Lectures -Clinical rounds -Seminars -Clinical rotations (service teaching) 	<ul style="list-style-type: none"> -OSCE at the end of each year -log book & portfolio - MCQ examination -Oral and written exam

<p>fat(Systemic lupus-cutaneous lupus(dicoid lupus)</p> <ul style="list-style-type: none"> o Acne vulgaris o Alopecia o Skin affection in systemic diseases (liver-kidney-thyroid-vitamin deficiency) o Nail disorders(nutritional-liver-kidney-fungal infection) o Disorders of lips and oral cavity <p>- Principles for diagnosis of common disorders in andrology and sexual transmitted diseases:</p> <p>basics of:</p> <ul style="list-style-type: none"> o Introduction to male infertility o Aetiology of male infertility o Diagnosis of male infertility. o Aetiology of erectile dysfunction o Diagnosis of Erectile dysfunction o Ejaculatory disorders o Introduction to STDs o Male genital system inflammations o Female genital system inflammations o Gonorrhea o Chlamydia o Chancroid o Granuloma inguinal o Syphilis o HIV o Herpes Simplex o Genital warts o Molluscum contagiosum o Genital candidiasis o Genital trichomoniasis 		
<p>B. Outline the principles of (diagnostic, therapeutic and preventive tools and health services) for the mentioned conditions above related to Dermatology, Venereology and Andrology</p> <p>In family medicine.</p>		
<p>C. State update and evidence based Knowledge of mentioned conditions above related to Dermatology, Venereology and Andrology in family medicine</p>		
<p>D. Memorize the facts and principles of the relevant basic and clinically supportive sciences related to Dermatology, Venereology and Andrology in family medicine</p>		

E. Mention the basic ethical and medicolegal principles that should be applied in practice and are relevant to the Dermatology, Venereology and Andrology in family medicine		
F. Mention the basics and standards of quality assurance to ensure good clinical practice in the field of Dermatology, Venereology and Andrology in family medicine		
G. Mention the ethical and scientific principles of medical research methodology.		
H. State the impact of common health problems in the field of Dermatology, Venereology and Andrology in family medicine on the society and how good clinical practice improve these problems.		

B-Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
<p>A. Correlates the facts of relevant basic and clinically supportive sciences with clinical reasoning, diagnosis and management of common diseases in Dermatology, Venereology and Andrology related to family medicine including the following"</p> <ul style="list-style-type: none"> • Various dermatological disorders • Dermatopathological examination of different skin diseases • Fungal skin diseases • Cutaneous cosmetic problems related various skin diseases • Dermatologic surgical procedures • Basic Andrology • Male infertility • Sexology • Sexually transmitted diseases 	<p>Clinical rounds</p> <p>Senior staff experience</p>	<p>Procedure/case presentation</p> <p>Log book</p>
B-Demonstrate an investigatory and analytic thinking (problem solving) approaches to common clinical situations related to Dermatology, Venereology and Andrology related to family medicine		

C-Design and /or present a case or review (through seminars/journal clubs.) in one or more of common clinical Dermatology, Venereology and Andrology problems relevant to the field of family medicine.		
D-Formulate management plans and alternative decisions in different situations in the field of dermatology, venereology and andrology in family medicine.		

C-Practical skills (Patient Care)

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Obtain proper history and examine patients in caring and respectful behaviors.	-Didactic; -Lectures -Clinical rounds -Seminars -Clinical rotations (service teaching)	- OSCE at the end of each year -log book & portfolio - MCQ examination
B.Order the following non invasive diagnostic procedures for conditions mentioned above in AA <ul style="list-style-type: none"> ○ fungal culture ○ Bacteriological swab ○ Trichogram ○ Urine analysis ○ Hormonal profile ○ sperm function tests 	Clinical round with senior staff Observation Post graduate teaching Hand on workshops	-Procedure presentation - Log book - Chick list
C-Interpret the following non invasive/invasive diagnostic procedures <ul style="list-style-type: none"> I- skin biopsy II- testicular biopsy 	Clinical round with senior staff	Procedure presentation - Log book - Chick list
D-Perform the following non invasive and invasive diagnostic procedures <ul style="list-style-type: none"> ○ Cutaneous laboratory tests as scrapings and obtaining hair, nail and tissue specimens for 	-Clinical round with senior staff -Perform under supervision of	-Procedure presentation - Log book - Chick list

<p>direct mycological examination</p> <ul style="list-style-type: none"> ○ Skin biopsy taking ○ Wood's light examination ○ -Bacteriological swab ○ -Trichogram 	senior staff	
E-Prescribe the following non invasive &invasive therapeutic procedures that mentioned in C.D		
<p>F. Carry out patient management plans for common conditions related to dermatology, venereology and andrology in family medicine including the following:</p> <ul style="list-style-type: none"> ○ Leprosy ○ Autoimmune connective tissue diseases ○ Urticaria, eczema and atopic dermatitis ○ Vitiligo and pigmentary disorders ○ Tuberculosis ○ Psoriasis ○ Acne vulgaris and post acne scar ○ Female sexual dysfunction. ○ Sexually transmitted diseases ○ Comedo extraction ○ Simple suturing technique ○ Electric cauterization ○ Cryotherapy ○ Intralesional injection. 	Clinical round with senior staff	
G-Use information technology to support patient care decisions and patient education in common clinical situations related to dermatology, venereology and andrology in family medicine		
<p>H. Provide health care services aimed at preventing health problems related to related to dermatology, venereology and andrology in family medicine like:</p> <ul style="list-style-type: none"> - Bacterial infection - Fungal infection - Parasitic infection - Mycobacterial infection - Sexually Transmitted diseases 		

<p>I. Provide patient-focused care in common conditions related to dermatology, venereology and andrology in family medicine, while working with health care professionals, including those from other disciplines like Histopathology ,Psychologist ,educator and counselor for skin and sex hygiene, psychiatrist,in the following common conditions like;</p> <ul style="list-style-type: none"> ○ Various dermatological disorders ○ Dermatopathological examination of different skin diseases ○ Fungal skin diseases ○ Cutaneous cosmetic problems related various skin diseases ○ Dermatologic surgical procedures ○ Basic Andrology ○ Male infertility ○ Sexology and sex education. ○ Sexually transmitted diseases 		
<p>J. 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)</p>		

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 (share in audit and risk management activities and use logbook)	-Case log -Observation and supervision -Written & oral communication	Procedure/case presentation -Log book and Portfolios
B. Appraises evidence from scientific studies(journal club) * Researches and evidence based practice and internet updates about the conditions mentioned above in A.A.	-Journal clubs - Discussions in seminars and clinical rounds	
c. Conduct epidemiological Studies and surveys.		
D. Perform data management including data entry and analysis using information technology to manage information, access on-line medical information; and support their own education.		
E. Facilitate learning of junior students and other health care professionals including their evaluation and assessment.	Clinical rounds Senior staff experience	

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Maintain 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. Elicit information using effective nonverbal, explanatory, questioning, and writing skills.		
H. Provide information using effective nonverbal, explanatory, questioning, and writing skills.		
I. Work effectively with others as a member of a health care team or other professional group as regard diagnosis and treatment of the above mentioned conditions in A.A		
J. Present a case in Common problems of dermatology , venereology and andrology in family medicine		
K .Write a report i.e. <ul style="list-style-type: none"> - Skin biopsy report - laser report - chemical peeling report - microdermabrasion report - semen analysis - testicular biopsy reports. - Referral to subspecialties. 		
L. <u>Council patients and families about</u> <ul style="list-style-type: none"> ○ Various dermatological disorders ○ Dermatopathological examination of different skin diseases ○ Fungal skin diseases ○ Cutaneous cosmetic problems related 		

various skin diseases <ul style="list-style-type: none"> ○ Dermatologic surgical procedures ○ Basic Andrology ○ Male infertility ○ Sexology and sex education. ○ Sexually transmitted diseases 		
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Professionalism

ILOs	Methods of teaching/ Learning	Methods of Evaluation
M. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society.	Observation Senior staff experience Case taking	1. Objective structured clinical examination 2. Patient survey
N. Demonstrate a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent, business practices		1. 360o global rating
O. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
P. Work effectively in relevant health care delivery settings and systems including good administrative and time management.	Observation Senior staff experience	1. 360o global rating 1. Check list evaluation of live or recorded performance Patient survey
Q. Practice cost-effective health care and resource allocation that does not compromise quality of care		
R. Assist patients in dealing with system complexities.		

4. Unit contents (topic s/modules/rotation)

Unit Matrix

Time Schedule: Second part

Topic	Covered ILOs			
	Knowledge	Intellectual	Practical skill	General Skills
Module 1: Dermatology				
Neonatal eczema and neonatal nevi (vascular –pigmented)	D	A	-	D
Pruritis	D	A	-	D
Eczematous skin conditions including atopic and contact dermatitis	D	A	-	D
o Cutaneous erythemas(Psoriasis, lichen plannus)	A,D	A-D	A-D,G-J	A-G,I-P
Cutaneous erythemas	A,D	A-J	A-D,G-J	A-G,I-P
Occupational dermatoses(eczema-physical dermatitis)	A,B	C	A	C,L,P-R
photosensitivity (photocontact-solar urticaria)	A,B	A	A,C	A,C,D,H
Cutaneous infections including, viral, bacterial, parasitic, and fungal skin diseases with special concern to leprosy and other chronic infections in our community.	A,B	-	A,I	C,D
Drug reactions	A,B	-	A,I	C,D
o Diseases of connective tissue and subcutaneous fat(Systemic lupus-cutaneous lupus(dicoid lupus	A,B	-	A,I	C,D
o Acne vulgaris	A-H	-	A,F,I	C,D
o Alopecia	A-H	C	A,F,I	A,G
Nail disorders(nutritional-liver-kidney-fungal infection)	A,B	A-D	A	A

Disorders of lips and oral cavity	A,B	A-D	A,B,D,J	A
basics for diagnosis of common disorders in andrology:	A,B	A-D	A-D, H ,J	A
Introduction to male infertility	A-H	A-D	A,D,J	-
Aetiology of male infertility	A-H	A-D	A	-
Diagnosis of male infertility	A-H	A	A,C,F,G	-
Aetiology of erectile dysfunction	A-H	D	A,C,G, I	A
Diagnosis of Erectile dysfunction	A-H	D	A-J	-
Ejaculatory disorders	A-H	D	A-J	-
Introduction to STDs	A-H	A	A,C,I	H
Male genital system inflammations	A-H	D	A,I	A
Female genital system inflammations	A-H	D	A,I	M
Genodermatosis	A-H	D	A,I	M
Gonorrhea	A-H	D	A,G, I	H
Chlamydia	A-H	D	A,C,I	H
Mycoplasma	A-H	D	A,C,I	H
Chancroid	A-H	A,D	A,C,G, I	G,H,M
Granuloma inguinal	A,B	B,D	A-D,G,I	A,G,M
Syphilis	A,B,C	D	A,B,C,I	G
HIV	A,B	A,D	A,C,I	-
Herpes Simplex	A,B	D	A,I	A,M
Genital warts	A,B	D	A-J	A,M
Molluscum contagiosum	A,B,C	D	A,D,I	A,G
Genital candidiasis	A,B	D	A-D,F-G,I	A,G
Genital trichomoniasis	A,B	D	A,C,I	G

5. Methods of teaching/learning

- Didactic (lectures, seminars, tutorial)
- Outpatient
- Inpatient
- Case presentation

- Direct observation
- journal club
- Critically appraised topic.
- Educational prescription
- Clinical rounds
- Clinical rotation
- Senior staff experience
- Case log
- Observation and supervision
- Written & oral communications
- Simulation
- Hand on work shop
- Service teaching
- Perform under supervision of senior staff
- Postgraduate teaching

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

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

7 .Assessment methods

i. Assessment tools:

1. Written clinical and oral examination
2. problem solving
3. Log book
4. MCQ

ii. **Time schedule:** At the end of the second part

iii. **Marks: 50 marks**

**Written exam, 1 hour in time (20 mark) + oral exam (10 mark)
+ clinical exam (20 mark)**

8. List of references

1. Lectures notes

- Hard or soft copies from lectures by staff members of the Dep. of Dermatology, Venereology & Andrology
- Principles of Dermatology, Venereology & Andrology Book by Staff Members of the Department of Dermatology, Venereology & Andrology -Assiut University

2. Essential books

1. CURRENT Diagnosis & Treatment in Family Medicine, 4th Edition (4th ed.), Jeannette E. South-Paul, Samuel C. Matheny, Evelyn L. Lewis (2015)
2. Textbook of Family Medicine, 9th Edition, Robert Rakel David Rake (2016)
3. Oxford Handbook of General Practice , Fourth Edition , Chantal Simon ,Hazel Everitt , Françoise van Dorp (2014)
4. First aid for the family medicine boards. By Le T, Mendoza M, Coffa D, Saint-Hilaire L McGraw Hill Professional; 2018.

3. Recommended books

1. ABC of Dermatology. J Morris-Jones R. John Wiley & Sons; 2019.
2. Diseases of the Skin E-Book. James WD, Elston D, Berger

- T. Andrew's Elsevier Health Sciences; 2011.
4. Rook's textbook of dermatology Griffiths C, Barker J, Bleiker TO, Chalmers R,. John Wiley & Sons; 2016.
 5. Infertility in the Male. Lipshultz LI, Howards SS, Niederberger CS. Cambridge University Press; 2009.

4.Periodicals, Web sites, ... etc

- Journal of American Academy of Dermatology.
- British Journal of dermatology.
- Archive of Dermatology

5.others

Periodic Journal clubs and scientific meetings arranged in the Department of Dermatology, Venereology & Andrology

9. Signatures

Unit Coordinator: Prof . Dalia Galal Mahran	Head of the Department: Prof . Dalia Galal Mahran
Date:	Date:

Course 8; unit 2: Neurology and Psychiatry related to family medicine.


I. Unit data


 **Course Title: Dermatology, venerology and andrology& Neurology and Psychiatry related to family medicine.**

 **Unit title: Neurology and Psychiatry related to family medicine.**

 **Course code: FAM233D#.**


 **Specialty: is Family Medicine.**

 **Number of credit points(CP):1credit point for didactic teaching(20%)(i.e. 0.4CP for neurology and 0. 6 CP for psychiatry) and 4 Credit points for training(80%) and total 5 CP(100%).**

 **Department (s) delivering the course: Neurology and Psychiatry department in collaboration with Family Medicine Department.**

- Course coordinator: Prof: Dalia Galal Mahran
Assistant coordinator (s): Assistant Prof. Mohammad Mostafa Ahmad

 **Date last reviewed: August / 2020.**

 **Requirements (prerequisites) if any :**

Requirements from the students to achieve course ILOs are clarified in the joining log book.

2. Unit Aims

2/1- To acquire the principles knowledge and facts and concerned practical skills for diagnosis, providing primary and continuing comprehensive health care for diagnosis and monitoring of common neuropsychiatric disorders running in families.

2/2- to deliver a range of sufficient knowledge and professional skills for providing acute, chronic and preventive medical care services in common diagnosed neuropsychiatric running in family .

2/3- to provide sufficient knowledge and professional skills for preventive care, including routine checkups, health-risk assessments, and screening tests, and personalized counseling on maintaining a healthy lifestyle as regard to neuropsychiatry field.

3. Intended learning outcomes (ILOs)

A-Knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
<p>A. Describe the etiology, clinical picture, clinical diagnosis and primary and preventive management care principles of the following common Neuropsychiatric disorders running in family in practice:</p> <ul style="list-style-type: none"> • Common symptoms and signs in neurology and psychiatry. • Principles of general and special psychology. • Common Disorders diagnosed in infancy, childhood or adolescence in neurology Psychiatry including; <p>. Psychiatry</p> <ol style="list-style-type: none"> 1. Mental health symptoms and signs 2. Generalized anxiety disorder (GAD) 3. Panic disorder 4. Obsessive-compulsive disorder (OCD) 5. Somatization and Body dysmorphic disorder (BDD) 	<p>-Lectures</p> <p>- Practical sessions</p> <p>-Discussions</p> <p>- Readings</p>	<p>-OSCE</p> <p>-Log book -</p> <p>-Written exams</p> <p>-Oral exams</p>

6. Chronic stress and Post-traumatic stress disorder (PTSD) 7. Depression 8. Schizophrenia and mania 9. Acute delirium and Dementia 10. Eating disorders 11. Sleep-wake disorders 12. Drug misuse disorders Neurology 1. Migraine headache and Non-migraine headache 2. Seizures 3. Stroke 4. Peripheral neuropathy		
B. Mention the principles of (diagnostic, primary therapeutic care and preventive tools) of common neuropsychiatric disorders mentioned above.		
C. State update and evidence based Knowledge of . The etiology, clinical picture, diagnosis and management of common neuropsychiatric disorders mentioned above.		
D. Memorize the facts and principles of the relevant basic and clinically supportive sciences related to common neuropsychiatric disorders mentioned above(including general and special psychology, pathology and psychopathology).		
E. Mention the basic ethical and medicolegal principles relevant to the common neuropsychiatric disorders mentioned above.		
F. Mention the basics of quality assurance to ensure good clinical care in his field.		
G. Mention the ethical and scientific principles of medical research.		
H. State the impact of common health problems in the field of neuropsychiatry related to family medicine on the society.		

B-Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Correlates the facts of relevant basic and clinically supportive sciences with clinical reasoning, diagnosis and management of common family health problems related to common neuropsychiatric disorders mentioned above.	-Clinical rounds -Senior staff experience	/case presentation log book
B. Demonstrate an investigatory and analytic thinking (problem solving) approaches to common clinical situations related to common neuropsychiatric disorders in family, mentioned above.		
C. Design and present cases , seminars in common family health problem in neuropsychiatric disorders mentioned above.		
D-Formulate management plans and alternative decisions in different situations in the field of common neuropsychiatric disorders related to family medicine mentioned above.		

C- Practical skills (Patient Care)

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Obtain proper history and examine patients in caring and respectful behaviors.	Didactic -Lectures -Clinical rounds -Seminars -Clinical rotations (service teaching)	- Log book & portfolio - Case presentation

<p>B. Order the following non invasive diagnostic procedures</p> <ul style="list-style-type: none"> -laboratory investigations and other investigations including x ray imaging. 	<p>Clinical round with senior staff. Observation Postgraduate teaching</p>	<p>Cases presentations -- Log book & portfolio</p>
<p>C. Interpret the investigation reports findings of non invasive diagnostic procedures related to PRIMARY management and prevention of conditions mentioned in A.A (As detect abnormality in reports and referral to subspecialists)i.e.</p> <ul style="list-style-type: none"> - Routine appropriate lab investigations -X ray - -EEG - CT BRAIN. - MRI BRAIN &SPINE. 		
<p>D. Perform the non invasive diagnostic and therapeutic procedures in primary health care, follow up and regular check up of family members for conditions mentioned above. i.e. Laboratory, neuroimaging studies.</p>		
<p>E. Prescribe the following non invasive therapeutic procedures including;</p> <ul style="list-style-type: none"> - Migraine, - Bell's palsy, - Propagated seizure. - Radicular pain. - Diabetic neuropathy. - Drug induced movement disorders (principle lines of treatment). - Vertigo. - follow up of stable neuropsychiatric disorders mentioned above in AA. 		
<p>F. Carry out patient management plans for treating</p>	<p>Clinical</p>	

and preventing common neuropsychiatric disorders related to family medicine mentioned above.	rounds with senior staff	
G. Use information technology to support patient health care decisions and patient education in common clinical situations related common neuropsychiatric disorders related to family medicine mentioned above.		
H. Provide health care services aimed at preventing health problems in common neuropsychiatric disorders related to family medicine mentioned above.		
I. Provide patient-focused care(primary and preventive health care) in common neuropsychiatric disorders related to family medicine mentioned above, while working with health care professionals, including those from other disciplines like: Common health problems related to family medicine Including risk assessment, screening, personal counseling, and designing proper lifestyle .		
J. Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets.(Write a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and maintaining 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(audit, logbook)	Observation -Written& oral communication	LOG BOOK
B. Appraises evidence from scientific studies(journal club)	Journal clubs - Discussion in seminars and clinical rounds	
C. Conduct epidemiological Studies and surveys.		
D. Perform data management including data entry and analysis.		
E. Facilitate learning of junior students and other health care professionals.		

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Maintain therapeutic and ethically sound relationship with patients.	-Simulations -Clinical round seminars -Lectures -Case presentations	Case presentation Log book Portfolios
G. Elicit information using effective nonverbal, explanatory, questioning, and writing skills.		
H. Provide information using effective nonverbal, explanatory, questioning, and writing skills.		
I. Work effectively with others as a member of a health care team or other professional group.		
J. Present a case in health problems related to common neuropsychiatric disorders related to	Clinical round seminars	Clinical Exam

family medicine.		
K. Write a report in -Patients medical records - PATIENT CHART - referral to subspecialty or emergency room.	Senior staff experience	
L. Council patients and families about prevention and proper management of common neuropsychiatric disorders related to family medicine mentioned above.		

Professionalism

ILOs	Methods of teaching/ learning	Methods of Evaluation
M. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society	-Observation of senior staff experience -Case taking	1- Objective structured clinical examination 2- Patient survey
N. Demonstrate a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent, business practices		Objective structured clinical examination
O. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
P. Work effectively in relevant health care delivery settings and systems.	Observation of senior staff experience Case taking	Chick list evaluation of live or recorded performance
Q. Practice cost-effective health care and resource allocation that does not compromise quality of care.		
R. Assist patients in dealing with system complexities.		Patient survey

4. Unit contents (topic s/modules/rotation)

Unit Matrix

Time Schedule: second Part

Topic	Covered ILOs			
	Knowledge	Intellectual	Practical skill	General Skills
Mental health symptoms and signs	A,B	A,B	A-F	A-C,E
Generalized anxiety disorder (GAD)	A,D	A	-	A-C,E
Panic disorder	A-H	A-D	A-J	A-R
Obsessive–compulsive disorder (OCD)	A-H	A-D	A-J	A-R
Somatization and Body dysmorphic disorder (BDD)	A-H	A-D	A-J	A-R
Chronic stress and Post-traumatic stress disorder (PTSD)	A-H	A-D	A-J	A-R
Depression	A-H	A-D	A-J	A-R
Schizophrenia and mania	A-H	A-D	A-J	A-R
Acute delirium and Dementia	A-H	A-D	A-J	A-R
Eating disorders	A-H	A-D	A-J	
Sleep-wake disorders	A-H	A-D	A-J	A-R
Drug misuse disorders	A-H	A-D	A-J	A-R
Migraine headache and Non-migraine headache	A-H	A-D	A-J	A-R
Seizures	A-H	A-D	A-J	A-R
Stroke	A-H	A-D	A-J	A-R
Peripheral neuropathy	A-H	A-D	A-J	A-R

5. Methods of teaching/learning

- . Didactic (lectures, seminars, tutorial)
- Outpatient
- Inpatient
- Case presentation
- Direct observation

- journal club
- Critically appraised topic.
- Educational prescription
- Clinical rounds
- Clinical rotation
- Senior staff experience
- Case log
- Observation and supervision
- Written & oral communications
- Simulation
- Hand on work shop
- Service teaching
- Perform under supervision of senior staff
- Postgraduate teaching

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

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

7 .Assessment methods

i. Assessment tools:

- Written clinical and oral examination
- problem solving
- Log book
- MCQ

ii. Time schedule: At the end of the second part

iii. Marks: 50 Marks

Written exam , 1 hour in time (20 marks) + oral exam (10 mark) + clinical exam (20 mark)

8. List of references

1. Lectures notes

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

2. Essential books

1. CURRENT Diagnosis & Treatment in Family Medicine, 4th Edition (4th ed.), Jeannette E. South-Paul, Samuel C. Matheny, Evelyn L. Lewis (2015)
2. Textbook of Family Medicine, 9th Edition, Robert Rakel David Rake (2016)
3. Oxford Handbook of General Practice , Fourth Edition , Chantal Simon ,Hazel Everitt , Françoise van Dorp (2014).
4. First aid for the family medicine boards. By Le T, Mendoza M, Coffa D, Saint-Hilaire L McGraw Hill Professional; 2018.

3. Recommended books

1. Taylor's Manual of Family Medicine Paulman PM, Paulman AA, Jarzynka KJ, Falk NP. Lippincott Williams & Wilkins; 2015.
3. Brain's diseases of the nervous system. Oxford university press Oxford; By Donaghy M. 2014.
4. Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/clinical psychiatry. by Sadock BJ, Sadock VA. Lippincott Williams & Wilkins; 2011.
5. Adams And Victor's Principles Of Neurology. 9th ed by Adams RD, Victor M, Ropper AH. New York: McGraw-Hill Medical. 2012.

4. Periodicals for last 3-5 years, Web sites, ... etc

- Neurology.
- Lancet Neurology.
- Stroke.
- BMJ (Neurology, Neurosurgery and Psychiatry).
- European Journal of Neurology.
- Egyptian Journal of Neurology, Psychiatry and neurosurgery.
- Clinical Neurophysiology.
- American Journal of Psychiatry
- British journal of psychiatry.
- Archives of general psychiatry.

5.others: None

9. Signatures

Unit Coordinator: Prof . Dalia Galal Mahran	Head of the Department: Prof . Dalia Galal Mahran
Date:	Date:

Course 9: Obstetrics and Gynecology & family planning related to family medicine

1. Course data

- + Course Title: Obstetrics and Gynecology & family planning related to family medicine
- + Course code: FAM224.
- + Specialty :Family medicine.
- + Number of credit **points(CP)**: 29 credit points; total(100%) ; 5 CP(17.2%) for didactic teaching;24 CP for training(82.8%).
- + Department (s) delivering the course: Obstetrics and Gynecology Department , Faculty of Medicine- Assiut University in conjunction with Family Medicine Department
- + Coordinator (s):
 - Course coordinator:
Professor: Dalia Galal Mahran
 - Assistant coordinator (s)Assistant Prof. Aly Haroon
- + Date last reviewed: August/2020.
- + General requirements (prerequisites) if any: none.
- + Requirements from the students to achieve course ILOs are clarified in the joining log book.

2. Course Aims

2/1- To acquire the principles knowledge, facts and concerned practical skills for diagnosis, providing primary and continuing comprehensive health care for diagnosis ,medical treatment and monitoring of common diseases and health problems in Obstetrics and Gynecology & family planning and its impact socially, emotionally, and physically on woman health and family.

2/2- to deliver a range of sufficient knowledge and professional skills for providing acute(emergencies), chronic and preventive medical care services in common diagnosed diseases of Obstetrics and Gynecology & and common situations in family planning related to family medicine .

2/3- to provide sufficient knowledge and professional skills for preventive care, including routine checkups, health-risk assessments, immunization and screening tests, and personalized counseling on maintaining a healthy lifestyle as regard to woman health and family medicine field.

3. Intended learning outcomes (ILOs):

A-Knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
<p>A. Describe the etiology, clinical picture, diagnosis and management of the following diseases and clinical conditions in Obstetrics and Gynecology & family planning related to woman health and family medicine :</p> <p style="padding-left: 20px;">Obstetrics</p> <p style="padding-left: 20px;">- <u>Preconception issues:</u></p> <p style="padding-left: 40px;">- preconception risk assessment</p> <p style="padding-left: 40px;">- Preconception Lab Workup</p> <p style="padding-left: 40px;">- Preconception Interventions</p> <p style="padding-left: 20px;">- <u>First-trimester issues:</u></p>	<p>-Lectures</p> <p>- Practical sessions</p> <p>-Discussions</p> <p>- Readings</p>	<p>-Log book -</p> <p>-Written exams</p> <p>-Oral exams</p>

<ul style="list-style-type: none"> - Diagnosis of Pregnancy - First-Trimester Routine Prenatal Care - First-Trimester Fetal Development - Common Problems of the First Trimester: (Hyperemesis Gravidarum- First-trimester vaginal Bleeding- ectopic pregnancy- Hydatidiform molar pregnancy) <p><u>Second - and third -trimester issues:</u></p> <ul style="list-style-type: none"> -Second- and Third-Trimester Routine Prenatal Care - Second- and Third-Trimester Labs/Studies -Second- and Third-Trimester Counseling -Second- and Third-Trimester Fetal Development -Common Problems of the Second and Third Trimesters: (third-trimester Bleeding-IUGR-Gestational diabetes mellitus-macrosomia-polyhydramnios-oligohydramnios-preterm labor-premature rupture of membranes-Hypertensive disorders of pregnancy-cholestasis of pregnancy-Breech presentation-multiple-Gestation pregnancies) <p><u>Peripartum issues:</u></p> <ul style="list-style-type: none"> -Normal Labor and Delivery - Fetal Monitoring -Labor Arrest and Protraction Disorders -Pain Control During Labor and Delivery -Induction of Labor -Peripartum Complications (Group B streptococcus (GBs) infection-shoulder dystocia-Genital tract lacerations-chorioamnionitis) -Operative vaginal delivery(cesarean section- 		
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<p>vaginal Birth after c-section)</p> <ul style="list-style-type: none"> - meconium-stained amniotic Fluid -placental pathology <p><u>- Postpartum issues:</u></p> <ul style="list-style-type: none"> -Routine Postpartum Care -Postpartum complications: (postpartum endometritis-postpartum haemorrhage-retained placenta) -Breast- feeding issues. - Infections in Pregnancy - other medical issues in Pregnancy: (Depression in Pregnancy/Postpartum Depression-Thromboembolic Disease) <p>Gynecology</p> <ul style="list-style-type: none"> -Medications in Pregnancy <p>Menstrual disorders: (Dysmenorrhea-Abnormal Uterine Bleeding-Amenorrhea-Polycystic Ovarian Syndrome)</p> <ul style="list-style-type: none"> - Vulvovaginitis - chronic Pelvic Pain - Pelvic organ Prolapse - Family Planning . - Sexually transmitted infections. - Cervical cancer screening - Gynecologic cancers(Ovarian Cancer-Uterine Cancer-Cervical Cancer-Vulvar and Vaginal Cancer-Gestational Trophoblastic Neoplasia) - Menopause - - Sexual Violence - Sexual dysfunction - Infertility - Other gynecologic conditions: (Ovarian Mass-Fibroids-Endometriosis-Ovarian Torsion-Vulvodynia) 		
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<p>- Vulvar cutaneous conditions: (Lichen Sclerosus-Lichen Planus-Vulvar Lichen Simplex Chronicus)</p>		
<p>B.Mention the principles of ;diagnostic, therapeutic, preventive tools used in woman health care including the following:</p> <ul style="list-style-type: none"> ○ Obtaining vaginal and cervical cytology ○ Colposcopy ○ Cervical biopsy, polypectomy ○ Cryosurgery/ cautery for benign lesions ○ Dilatation and Curettage ○ Limited ultrasound examination and interpretation ○ Management of labor ○ Pudendal and local anaesthesia ○ Induction of labor ○ Neonatal resuscitation ○ Assistance in cesarean section ○ Oral contraceptive counseling and prescribing ○ Intrauterine contraceptive device counseling, insertion and removal ○ Diaphragm fitting and counseling ○ Insertion and removal of subcutaneous contraceptive implants and Counseling. ○ Injectable long term contraceptives and counseling. 		
<p>C. State update and evidence based Knowledge of principles in Obstetrics and Gynecology & family planning related to woman health and family medicine including the following:</p> <ul style="list-style-type: none"> ○ Antenatal care ○ High risk pregnancy ○ Referral in pregnancy and labor to higher care level 		

<ul style="list-style-type: none"> ○ Common gynecological problems and when to refer. ○ Selection of the most appropriate contraceptive methods for different situations (i.e. indications, contraindications, advantages and disadvantages). 		
D. Memorize the facts and principles of the relevant basic and clinically supportive sciences related to Obstetrics and Gynecology & family planning related to woman health and family medicine.		
E. Mention the basic ethical and medicolegal principles relevant to Obstetrics and Gynecology & family planning related to woman health and family medicine.		
F. Mention the basics of quality assurance to ensure good clinical care in his field		
G. Mention the ethical and scientific principles of medical research		
H. State the impact of common health problems in the field of Obstetrics and Gynecology & family planning related to woman health and family medicine. on the society.		

B- Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Correlates the facts of relevant basic and clinically supportive sciences with clinical reasoning, diagnosis and management of common diseases related to Obstetrics and Gynecology & family planning related to woman health and family medicine.	Seminars, Tutorial, -Clinical rounds -Senior staff	Problem solving, case presentation log book
B. Demonstrate an investigatory and analytic		

thinking (problem solving) approaches to common clinical situations related to Obstetrics and Gynecology & family planning related to woman health and family medicine.	experience	
C. Design and present cases , seminars in common problem of Obstetrics and Gynecology & family planning related to woman health and family medicine.		
D-Formulate management plans and alternative decisions in different situations in the field of the Obstetrics and Gynecology & family planning related to woman health and family medicine.		

C -Practical skills (Patient Care)

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Obtain proper history and examine patients in caring and respectful behaviors.	Didactic -Lectures -Clinical rounds -Seminars -Clinical rotations (service teaching)	OSCE - Log book & portfolio -Case presentation -Clinical round.
B. Order the following non invasive diagnostic procedures: ○ Laboratory investigations. ○ Radiological examination.	Clinical round with senior staff. Observation Postgraduate teaching	- Log book & portfolio
C. Interpret the following non invasive&invasive diagnostic procedures ○ Laboratory investigations for blood, urine... ○ Radiological examination. ○ Pathological reports.		

<p>D. Perform the following non invasive &invasive therapeutic procedures:</p> <ul style="list-style-type: none"> ○ Obtaining vaginal and cervical cytology ○ Colposcopy. ○ Cervical biopsy, polypectomy ○ Cryosurgery/ cautery for benign lesions ○ Dilatation and Curettage ○ Limited ultrasound examination and interpretation ○ Management of labor ○ Pudendal and local anaesthesia ○ Induction of labor ○ Neonatal resuscitation ○ Assistance in cesarean section ○ Oral contraceptive counseling and prescribing ○ Intrauterine contraceptive device counseling, insertion and removal ○ Diaphragm fitting and counseling ○ Insertion and removal of subcutaneous contraceptive implants and ○ counseling ○ Injectable long term contraceptives and counseling. 		
<p>E. Prescribe the following non invasive&invasive therapeutic procedures :</p> <ul style="list-style-type: none"> ○ Laboratory investigations for blood, urine... ○ Radiological examination. ○ Pathological reports. 		
<p>F. Carry out patient management plans for common conditions in Obstetrics and Gynecology & family planning related to woman health and family medicine.</p>	<p>Clinical rounds with senior staff</p>	
<p>G. Use information technology to support patient care decisions and patient education in common clinical situations in Obstetrics and Gynecology &</p>		

family planning related to woman health and family medicine.		
<p>H. Provide health care services aimed at preventing woman health problems in Obstetrics and Gynecology & family planning related to woman health and family medicine; like:</p> <ul style="list-style-type: none"> ○ Pregnancy and labor complications. ○ High risk pregnancy. ○ Referral in pregnancy and labor to higher care level. ○ Common gynecological problems. ○ contraceptive methods. 		
<p>I. Provide patient-focused care in common Obstetrics and Gynecology & family planning conditions related to woman health and family medicine, while working with health care professionals, including those from other disciplines like: radiologist, histopathology, radiologist;</p> <p>Common diseases in obstetrics & gynecology and contraception.</p>		
<p>J. Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets ;(Write a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and maintaining medical records).</p>		

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(audit, logbook)	Observation -Written& oral communication	Logbook

B. Appraises evidence from scientific studies(journal club)	Journal clubs - Discussion in seminars and clinical rounds	
C. Conduct epidemiological Studies and surveys.		
D. Perform data management including data entry and analysis.		
E. Facilitate learning of junior students and other health care professionals.		

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Maintain therapeutic and ethically sound relationship with patients.	-Simulations -Clinical round seminars -Lectures -Case presentations	Logbook Portfolio Clinical Exam
G. Elicit information using effective nonverbal, explanatory, questioning, and writing skills.	-Simulations -Clinical round seminars -Lectures -Case presentations	
H. Provide information using effective nonverbal, explanatory, questioning, and writing skills.		
I. Work effectively with others as a member of a health care team or other professional group.		
J. Present a case in antenatal care	Clinical round seminars	
K. Write a report in <ul style="list-style-type: none">○ case history and management○ woman health chart○ Referral report to subspecialty.	Senior staff experience	

L. Council woman and families about <ul style="list-style-type: none"> ○ Antenatal care ○ Pregnancy and labor complications ○ High risk pregnancy ○ Referral in pregnancy and labor to higher care level ○ Common gynecological problems. ○ contraceptive methods 		
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Professionalism

ILOs	Methods of teaching/ learning	Methods of Evaluation
M. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society	Observation of senior staff experience Case taking	Objective structured clinical examination Patient survey
N. Demonstrate a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent, business practices		
O. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		Objective structured clinical examination

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
P. Work effectively in relevant health care delivery settings and systems.	-Observation of senior staff	-360o global rating -Chick list

<ul style="list-style-type: none"> - First-Trimester Fetal Development - Common Problems of the First Trimester: (Hyperemesis Gravidarum- First-trimester vaginal Bleeding- ectopic pregnancy- Hydatidiform molar pregnancy) 	A-H	A-D	A-J	A-R
<u>Second - and third - trimester issues:</u>	A	C	-	D
<ul style="list-style-type: none"> -Second- and Third-Trimester Routine Prenatal Care 	A-H	A-D	A-C	A-J
<ul style="list-style-type: none"> - Second- and Third-Trimester Labs/Studies 	A-H	A-D	A-D	A-L
<ul style="list-style-type: none"> -Second- and Third-Trimester Counseling 	A	C,D	A-C	A-L
<ul style="list-style-type: none"> -Second- and Third-Trimester Fetal Development 	A-H	C,D	A-D	A-L
<ul style="list-style-type: none"> -Common Problems of the Second and Third Trimesters: (third-trimester Bleeding-IUGR- Gestational diabetes mellitus-macrosomia- polyhydramnios- oligohydramnios- preterm labor- premature rupture of membranes- 	A-H	C,D	A-C	A-R

<p>Hypertensive disorders of pregnancy-cholestasis of pregnancy-Breech presentation- multiple-Gestation pregnancies)</p> <p><u>Peripartum issues:</u></p> <ul style="list-style-type: none"> -Normal Labor and Delivery - Fetal Monitoring -Labor Arrest and Protraction Disorders -Pain Control During Labor and Delivery -Induction of Labor -Peripartum Complications (Group B streptococcus (GBs) infection-shoulder dystocia-Genital tract lacerations-chorioamnionitis) -Operative vaginal delivery(cesarean section-vaginal Birth after c-section) - meconium-stained amniotic Fluid -placental pathology <p><u>- Postpartum issues:</u></p> <ul style="list-style-type: none"> -Routine Postpartum Care -Postpartum complications: 	<p>A-H</p> <p>A</p> <p>A,C</p> <p>A</p> <p>A-H</p> <p>A</p>	<p>A-D</p> <p>C</p> <p>C</p> <p>C</p> <p>A-D</p> <p>C,D</p>	<p>A-E</p> <p>A-J</p> <p>D,E</p> <p>A-F</p> <p>A-J</p> <p>D-G</p>	<p>D, E</p> <p>D</p> <p>A-L</p> <p>D</p> <p>A-R</p> <p>A-L</p>
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(postpartum endometritis- postpartum haemorrhage-retained placenta) -Breast- feeding issues. - Infections in Pregnancy - other medical issues in Pregnancy: (Depression in Pregnancy/Postpartum Depression- Thromboembolic Disease) -Medications in Pregnancy Gynecology Menstrual disorders: (Dysmenorrhea- Abnormal Uterine Bleeding-Amenorrhea- Polycystic Ovarian Syndrome) - Vulvovaginitis - chronic Pelvic Pain - Pelvic organ Prolapse - Family Planning . - Sexually transmitted infections. - Cervical cancer screening - Gynecologic cancers(Ovarian Cancer-Uterine Cancer-				
	A-H	A-D	A-J	A-R
	A-H	A-D	A-J	A-R
	A-H	A-D	A-J	A-R
	A-H	A-D	A-J	A-R
	A-H	A-D	A-J	A-R
	A-H	A-D	A-J	A-R
	A-H	A-D	A-J	A-R

Cervical Cancer-Vulvar and Vaginal Cancer- Gestational Trophoblastic Neoplasia) - Menopause - - Sexual Violence - Sexual dysfunction - Infertility - Other gynecologic conditions: (Ovarian Mass- Fibroids-Endometriosis- Ovarian Torsion- Vulvodynia) - Vulvar cutaneous conditions: (Lichen Sclerosus- Lichen Planus-Vulvar Lichen Simplex Chronicus)	A-H A-H A-H A-H	A-D A-D A-D A-D	A-J A-J A-J A-J	A-R A-R A-R A-R
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5. Methods of teaching/learning:

1. Didactic ; Lectures
2. Clinical rounds
3. Seminars
4. Clinical rotations
5. (service teaching) Observation
6. Post graduate teaching
7. Hand on workshops
8. Perform under supervision of senior staff
9. Simulations

10. Case presentation
11. Case Taking

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

1. Didactic ; Lectures
2. Clinical rounds
3. Seminars
4. Clinical rotations
5. (service teaching) Observation
6. Post graduate teaching
7. Hand on workshops
8. Perform under supervision of senior staff
9. Simulations
10. Case presentation
11. Case Taking

7. Assessment methods:

i. Assessment tools:

- Clinical examination
- Written and oral examination
- Check list
- log book & portfolio
- Procedure/case presentation
- One MCQ examination in the second year and one in the third year
- Objective structured clinical examination
- Check list evaluation of live or recorded performance
- Patient survey
- 360o global rating

ii. Time schedule: At the end of the second part

iii. Marks: 250 marks,

125 mark for written exam; 3 hours in time +50 marks (oral exam) +75 marks (clinical exam) and investigations.

8. List of references

i. Lectures notes

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

iii. Essential books

- CURRENT Diagnosis & Treatment in Family Medicine, 4th Edition (4th ed.), Jeannette E. South-Paul, Samuel C. Matheny, Evelyn L. Lewis (2015)
- Textbook of Family Medicine, 9th Edition, Robert Rakel David Rake (2016)
- Oxford Handbook of General Practice , Fourth Edition , Chantal Simon ,Hazel Everitt , Françoise van Dorp (2014)

iii. Recommended books

- Williams Obstetrics, 25th Edition, By F. Gary Cunningham, Kenneth J. Leveno, Steven L. Bloom, Jodi S. Dashe, Catherine Y.et al (2018)

iv. Periodicals, Web sites, etc.

- Obstetrics and Gynaecology clinics of North America
- Best practice and clinical research of Obstetrics and Gynaecology
- Clinical Obstetrics and Gynaecology
- American college for Obstetrics and Gynaecology practical guidelines

v. Others: None

9. Signatures

Course Coordinator: Prof . Dalia Galal Mahran	Head of the Department: Prof . Dalia Galal Mahran
Date:	Date:

Course10 ; Pediatrics related to family medicine

1. Unit data

- + Course Title: Pediatrics related to Family medicine.
- + Course code: FAM225.
- + Specialty: Family medicine.
- + Number of credit points(CP): 29 credit points; total(100%) ; 5 CP(17.2%) for didactic teaching;24CP for training(82.8%).
- + Department (s) delivering the course: Pediatrics- Faculty of Medicine- Assiut University in conjunction with Family Medicine Department.
- + Coordinator (s):
 - Course coordinator: Professor: Dalia Galal Mahran
 - Assistant coordinator (s)
 - Assistant Prof. Hekma Saad Farghaly
 - Lecturer: Shaimaa Mohammad Khalaf
 - Date last reviewed: August/2020.
- + General requirements (prerequisites) if any : none.
- + Requirements from the students to achieve course ILOs are clarified in the joining log book.

2. Course Aims

2/1- To acquire the principles knowledge, facts and concerned practical skills for diagnosis, providing primary and continuing comprehensive health care for diagnosis ,medical treatment and monitoring of common diseases and health problems in pediatrics' and its impact socially, emotionally, and developmentally on child health and family .

2/2- to deliver a range of sufficient knowledge and professional skills for providing acute(emergencies), chronic and preventive medical care services in common diagnosed diseases of pediatrics in family medicine .

2/3- to provide sufficient knowledge and professional skills for preventive care, including routine checkups, health-risk assessments, and screening tests, and personalized counseling on maintaining a healthy lifestyle as regard to pediatrics field.

3. Intended learning outcomes (ILOs):

A -Knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
<p>A. Describe the etiology, clinical picture, diagnosis and management of the following common diseases and clinical conditions in pediatrics related to family medicine:</p> <ul style="list-style-type: none"> ○ . The normal neonate (assessment and care in The delivery room) and Common neonatal problems:- ○ (Birth trauma-Neonatal jaundice-necrotizing enterocolitis-neonatal sepsis –Transient tachypnea of newborn-meconium aspiration syndrome - Neonatal Cyanosis- Neonatal convulsions ○ Genetic and congenital disorders and 	<p>-Lectures Tutorial -Discussions - Readings</p>	<p>-OSCE -Log book - -Written exams -Oral exams</p>

<ul style="list-style-type: none"> ○ Failure to thrive ○ Indications, contraindications, administration and precautions of the immunizations necessary for infants and children according to the national schedule and the condition of the child ○ Establishment of breast feeding - Breast feeding problems. ○ Assessment of growth and development for infants and children and important factors affecting growth and development ○ Most important diseases in multiple systems as: <ul style="list-style-type: none"> -Cardiovascular:(VSD and ASD -Innocent murmurs-cyanotic heart disease-Rheumatic fever). -Respiratory disease: (common cold –allergic rhinitis-Respiratory distress-Apnea-apparent life threatening Events -Asthma-Epiglottitis –foreign body-croup-bronchiolitis-Pneumonia) -Gastrointestinal disease:(Vomiting -Diarrhea –Abdominal pain-colic-Pyloric stenosis-intestinal obstruction-Meckel diverticulum-GERD) -Endocrine:(Growth delay-Short stature –DM) --Hematology(Anemia-sickle cell disease--Leukemia –Lymphoma) -Neurology:(Microcephaly –Macrocephaly –Hearing loss -Cerebral palsy) -Common conditions:3h (Acute otitis media-Fever-seizures-meningitis -diaper dermatitis-parasitic infection-viral exanthema) ---The nutritional requirements and Nutritional assessment -the most common pediatric nutritional disorders and their management- 		
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<p>Protein-energy malnutrition</p> <p>-Psychosocial and behavioral troubles: (ADHD - Autism -Sleep troubles -Nocturnal enuresis and encopresis - School refusal and learning problems-temper tantrums-breath holding)</p> <p>-Child abuse.</p> <p>-INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS(IMCI)</p>		
<p>B. Mention the principles of Diagnostic, therapeutic, and preventive tools used in pediatrics ,and health care of child in family medicine including the following:</p> <ol style="list-style-type: none"> <i>1. Plot height, weight and head circumference and interpret</i> <i>2. Bladder catheterization and supra pubic aspiration</i> <i>3. Newborn resuscitation</i> <i>4. Lumbar puncture</i> <i>5. Venesection</i> <i>6. Calculation of maintenance and fluid and electrolyte requirements.</i> 		
<p>C. State update and evidence based Knowledge of the following</p> <ul style="list-style-type: none"> ○ The normal neonate (assessment and care in The delivery room) and Common neonatal problems:- ○ (Birth trauma-Neonatal jaundice-necrotizing enterocolitis-neonatal sepsis –Transient tachypnea of newborn-meconium aspiration 		

<p>syndrome - Neonatal Cyanosis- Neonatal convulsions</p> <ul style="list-style-type: none"> ○ Genetic and congenital disorders and ○ Failure to thrive ○ Indications, contraindications, administration and precautions of the immunizations necessary for infants and children according to the national schedule and the condition of the child ○ Establishment of breast feeding - Breast feeding problems. ○ Assessment of growth and development for infants and children and important factors affecting growth and development ○ Most important diseases in multiple systems as: ○ -Cardiovascular:(VSD and ASD -Innocent murmurs-cyanotic heart disease-Rheumatic fever). ○ -Respiratory disease: (common cold –allergic rhinitis-Respiratory distress-Apnea-apparent life threatening Events -Asthma-Epiglottitis – foreign body-croup-bronchiolitis-Pneumonia) ○ -Gastrointestinal disease:(Vomiting -Diarrhea ○ –Abdominal pain-colic-Pyloric stenosis-intestinal obstruction-Meckel diverticulum-GERD) ○ -Endocrine:(Growth delay-Short stature –DM) ○ --Hematology(Anemia-sickle cell disease-- Leukemia –Lymphoma) ○ -Neurology:(Microcephaly –Macrocephaly – Hearing loss -Cerebral palsy) ○ -Common conditions:3h ○ (Acute otitis media-Fever-seizures-meningitis ○ -diaper dermatitis-parasitic infection-viral 		
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<p>exanthema)</p> <ul style="list-style-type: none"> ○ ---The nutritional requirements and Nutritional assessment -the most common pediatric nutritional disorders and their management- Protein-energy malnutrition ○ -Psychosocial and behavioral troubles: ○ (ADHD - Autism -Sleep troubles -Nocturnal enuresis and encopresis - School refusal and learning problems-temper tantrums-breath holding) ○ -Child abuse. <p>-INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS(IMCI)</p>		
D. Memorize the facts and principles of the relevant basic and clinically supportive sciences related to pediatrics in family medicine		
E. Mention the basic ethical and medicolegal principles relevant to the pediatrics in family medicine .		
F. Mention the basics of quality assurance to ensure good clinical care in his field		
G. Mention the ethical and scientific principles of medical research		
H. State the impact of common health problems in pediatrics in the field of family medicine on the society.		

B-Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Correlates the facts of relevant basic and clinically supportive sciences with clinical reasoning, diagnosis and management of common diseases in pediatrics related to family medicine	-Clinical rounds -Practical sessions	Clinical exam problem solving
B. Demonstrate an investigatory and analytic thinking (problem solving) approaches to common clinical situations in pediatrics related to family medicine .	-Senior staff experience	case presentation log book
C. Design and present cases , seminars in common problem in pediatrics related to family medicine .		
D-Formulate management plans and alternative decisions in different situations in pediatrics in the field of family medicine		

C-Practical skills (Patient Care)

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Obtain proper history and examine patients in caring and respectful behaviors.	Didactic -Lectures -Clinical rounds -Seminars -Clinical rotations (service teaching	- Log book & portfolio -Case presentation Clinical exam, OSCE

<p>B. Order the following non invasive diagnostic procedures for conditions mentioned above in AA:</p> <ul style="list-style-type: none"> ○ Lab tests: Blood glucose level, serum calcium, sodium, potassium. ○ Bone aging. ○ Fundus examination. ○ Radiology: CT and MRI (brain, abdomen). ○ Hormonal assay: growth hormone, TSH, T3, T4, Insulin, cortisol level, ○ Chromosomal study. 	<p>Clinical round with senior staff. Observation Postgraduate teaching</p>	
<p>C. Interpret the following non invasive diagnostic procedures for conditions mentioned above in AA:</p> <ul style="list-style-type: none"> ○ Laboratory investigations. ○ Radiological investigations. 		
<p>D. Perform the following non invasive therapeutic procedures:</p> <ul style="list-style-type: none"> ○ Plot height, weight and head circumference and interpret ○ Bladder catheterization and supra pubic aspiration ○ Newborn resuscitation ○ Lumbar puncture ○ Venesection ○ Calculate maintenance and fluid and electrolyte requirements ○ Glucose level in urine and blood. ○ Fluid and electrolyte correction. 		
<p>E-Prescribe the following non invasive therapeutic procedures :</p> <ul style="list-style-type: none"> ○ Laboratory investigations for blood, urine... ○ Radiological examination. ○ Pathological reports. 		

F. Carry out patient management plans for common conditions in pediatrics related to family medicine .	Clinical rounds with senior staff	
G. Use information technology to support patient care decisions and patient and family education (as regard to counseling and required life style and nutrition) in common clinical situations related to pediatrics and family medicine .		
<p>H. Provide health care services aimed at preventing health problems related to pediatrics and family medicine. like:</p> <ul style="list-style-type: none"> -Congenital and inherited diseases on children - The most common pediatric nutritional disorders and their management. - Most important, common diseases in multiple systems as cardiovascular, respiratory, endocrinal, allergies, gastrointestinal, urologic and hematological. - Most important, common inflammations -Appropriate measures for health promotion as well as prevention of disease and injury in infant, children and adolescents. - Most important, common neonatal diseases 		
I. Provide patient-focused care in common conditions in pediatrics , related to family medicine, while working with health care professionals, including those from other disciplines like: Common conditions in pediatrics		
J. Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets.(Write a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and maintaining 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(audit, logbook)	Observation -Written& oral communication Journal clubs - Discussion in seminars and clinical rounds	LOGBOOK
B. Appraises evidence from scientific studies(journal club)		
C. Conduct epidemiological Studies and surveys.		
D. Perform data management including data entry and analysis.		
E. Facilitate learning of junior students and other health care professionals.		

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Maintain therapeutic and ethically sound relationship with patients.	-Simulations -Clinical round seminars -Lectures -Case presentations	Case presentation Log book Portfolios
G. Elicit information using effective nonverbal, explanatory, questioning, and writing skills.		
H. Provide information using effective nonverbal, explanatory, questioning, and writing skills.		
I. Work effectively with others as a member of a health care team or other professional group.		
J. Present a case in common health problems related to pediatrics	Clinical round seminars	Clinical Exam

K. Write a report in <ul style="list-style-type: none"> ○ Patients medical records ○ Referral report. ○ Growth chart and development. ○ Immunization chart. 	Senior staff experience	
L. Council patients and families about prevention and proper management of common pediatric health problems related to family medicine.		

Professionalism

ILOs	Methods of teaching/ learning	Methods of Evaluation
M. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society	Observation of senior staff experience -Case taking	1- Objective structured clinical examination
N. Demonstrate a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent, business practices		2- Patient survey
O. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		Objective structured clinical examination

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
P. Work effectively in relevant health care delivery settings and systems.	-Observation of senior staff experience -Case taking	-360o global rating -Chick list evaluation of live or recorded performance -Patient survey
Q. Practice cost-effective health care and resource allocation that does not compromise quality of care.		
R. Assist patients in dealing with system complexities.		

	4. Unit contents (topic s/modules/rotation 4.Course Matrix
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Time Schedule: Second part

Topic	Covered ILOs			
	Knowledge	Intellectual	Practical skills	General Skills
Management of the following common diseases and clinical conditions in pediatrics related to family medicine: <ul style="list-style-type: none"> ○ The normal neonate (assessment and care in The delivery room) and Common neonatal problems:- ○ (Birth trauma-Neonatal jaundice-necrotizing enterocolitis-neonatal sepsis –Transient tachypnea of newborn-meconium aspiration syndrome - Neonatal Cyanosis- Neonatal convulsions ○ Genetic and congenital disorders and ○ Failure to thrive ○ Indications, contraindications, administration and 	A-H	A-D	A-J	A-R

<p>precautions of the immunizations necessary for infants and children according to the national schedule and the condition of the child</p> <ul style="list-style-type: none"> ○ Establishment of breast feeding - Breast feeding problems. ○ Assessment of growth and development for infants and children and important factors affecting growth and development ○ Most important diseases in multiple systems as: <ul style="list-style-type: none"> -Cardiovascular:(VSD and ASD -Innocent murmurs-cyanotic heart disease-Rheumatic fever). -Respiratory disease: (common cold –allergic rhinitis-Respiratory distress-Apnea-apparent life threatening Events -Asthma-Epiglottitis –foreign body-croup-bronchiolitis-Pneumonia) -Gastrointestinal disease:(Vomiting -Diarrhea –Abdominal pain-colic-Pyloric stenosis-intestinal 				
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obstruction-Meckel diverticulum-GERD) -Endocrine:(Growth delay- Short stature –DM) --Hematology(Anemia-sickle cell disease--Leukemia – Lymphoma) -Neurology:(Microcephaly – Macrocephaly –Hearing loss - Cerebral palsy) -Common conditions (Acute otitis media-Fever- seizures-meningitis -diaper dermatitis-parasitic infection-viral exanthema) ---The nutritional requirements and Nutritional assessment -the most common pediatric nutritional disorders and their management- Protein-energy malnutrition -Psychosocial and behavioral troubles: (ADHD - Autism -Sleep troubles -Nocturnal enuresis and encopresis - School refusal and learning problems-temper tantrums- breath holding) -Child abuse. - INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS(IMCI).				
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5. Methods of teaching/learning:

- Didactic ; Lectures
- Clinical rounds
- Seminars
- Clinical rotations
- (service teaching) Observation
- Post graduate teaching
- Hand on workshops
- Perform under supervision of senior staff
- Simulations
- Case presentation
- Case Taking

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

- Didactic ; Lectures
- Clinical rounds
- Seminars
- Clinical rotations
- (service teaching) Observation
- Post graduate teaching
- Hand on workshops
- Perform under supervision of senior staff
- Simulations
- Case presentation
- Case Taking

7. Assessment methods:

i. Assessment tools:

- Clinical examination
- Written and oral examination
- Check list

- log book & portfolio
- Procedure/case presentation
- One MCQ examination in the second year and one in the third year
- Objective structured clinical examination
- Check list evaluation of live or recorded performance
- Patient survey
- 360o global rating

ii. Time schedule: At the end of the second part

**iii. Marks: 250 marks,
125 mark for written exam; 3 hours in time +50
marks (oral exam) +75 marks (clinical exam) and
investigations.**

8. List of references

i. Lectures notes

- Course notes
- Staff members print out of lectures and/or CD copies
- Fundamentals of Pediatrics, Book by Staff Members of the Department of Pediatrics-Assiut University

ii. Essential books

- CURRENT Diagnosis & Treatment in Family Medicine, 4th Edition (4th ed.), Jeannette E. South-Paul, Samuel C. Matheny, Evelyn L. Lewis (2015)
- Textbook of Family Medicine, 9th Edition, Robert Rakel David Rake (2016)
- Oxford Handbook of General Practice , Fourth Edition , Chantal Simon ,Hazel Everitt , Françoise van Dorp (2014)

iii. Recommended books

- CURRENT Diagnosis and Treatment Pediatrics, Twenty-Fifth Edition , By William W. Hay, Myron J. Levin, Robin R. Deterding, Mark J. Abzug (2019)

iv. Periodicals, Web sites, etc

- Pediatrics
- Pediatric clinics of North America

- American journal of pediatrics
- Websites :www.pediatrics.com

9. Signatures

Course Coordinator: Prof . Dalia Galal Mahran	Head of the Department: Prof . Dalia Galal Mahran
Date:	Date:

Course 11 Surgery related to family medicine.(General surgery, orthopedic and Urology)

1. Course data

 **Course title; Surgery related to family medicine.
(General surgery, orthopedic and Urology).**

 **It is divided into 3 units;**

- **Unit 1; General surgery related to family medicine.**
- **Unit 2; orthopedic surgery related family medicine.**
- **Unit 3;Urology related to family medicine.**

 **Course code:FAM233E#**

 **Credit points(CP):4CP for didactics (20%);16CP for training(80%),total CP;20CP(100%).**

- ❖ **unit 1: general surgery related to family medicine: total credit points: 12.5CP ,2.5CP for didactics and 10 CP for training**
- ❖ **unit 2: Orthopedic surgery related to family medicine total credit points: 5CP ,1CP for didactics and 4 CP for training**
- ❖ **unit 3: urology surgery related to family medicine: total credit points: 2.5CP ; 0.5CP for didactics and 2 CP for training**

Course 11; Unit (1):General Surgery related to family medicine

1. Unit data

- + Course Title: Surgery related to family medicine. .
- + Unit title: *General Surgery* related to family medicine.
- + Course code: FAM209E#.
- + Specialty: *Family Medicine*.
- + Number of credit points(CP): 12.5 credit points; total(100%) ; 2.5 CP(20%) for didactic teaching;10 CP for training(80%).

- + Department (s) delivering the course: Department Of *General Surgery* in collaboration with Family Medicine Department- Faculty of Medicine- Assiut University.
- + Coordinator (s):
 - Course coordinator: Prof. Dalia Galal Mahran
 - Assistant coordinator (s)
 - Lecturer: Ramy Abd Elraheem Hassan
 - Lecturer: Ahmad Aly Abd El- Motaleb
- + Date last reviewed: August/2020.
- + General requirements (prerequisites) if any :
 - None
- + Requirements from the students to achieve course ILOs are clarified in the joining log book.

2. Unit aims

- The rotation aims in Surgery department should help the family physicians in the following aspects in his practice:

2/1 - To acquire knowledge, skills and attitude that will enable them to provide a broad range of health services (primary, preventive and rehabilitative post surgery) to enable them to make clinical decisions related to common surgical problems encountered in the PHC setting; as regard to early and accurate surgical diagnosis; surgical emergencies, minor surgery, surgical care (i.e. preoperative and postoperative care and postoperative rehabilitation) and assistance in surgery .

2/2- At the end of surgery rotation, the family physician should acquire satisfactory knowledge and professional skills in the following eras; as aimed to:

2/2.1 -To enable candidates to acquire satisfactory level of clinical skills, bedside care skills, in addition to update medical knowledge as well as clinical experience and competence in the area of General Surgery and enabling the candidates of making appropriate referrals to a sub-specialist.

2/2.2-To Provide candidates with fundamental knowledge and skills of dealing with critically ill patients, with General Surgery diseases.

2/2.3-To demonstrates the ability to provide patient-centered care that is appropriate, compassionate, and effective for treatment of General Surgical health problems and the promotion of health.

2/2.4- To give opportunities to evaluate and manage a broad variety of General Surgery diseases on PHC level.

3. Intended learning outcomes (ILOs):

A- Knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
<p>A. Describe the etiology, clinical picture, diagnosis and management of the following diseases and surgical conditions commonly dealt with in primary health care settings in family medicine. including:</p> <ul style="list-style-type: none"> ○ Preoperative Evaluation ○ Perioperative Management ○ Postoperative Care ○ Surgical Infections ○ Wound Management ○ Acute Abdomen and Appendicitis ○ Small and large Bowel Obstruction ○ Breast Cancer ○ Obstructive jaundice ○ Anorectal Disorders ○ Abdominal Wall Hernias ○ Thyroid disease ○ Peptic ulcer ○ Varicose vein and DVT 	<p>Didactic;</p> <ul style="list-style-type: none"> -Lectures -Clinical rounds -Seminars -Clinical rotations (service teaching) 	<ul style="list-style-type: none"> -OSCE at the end of each year -log book & portfolio - MCQ examination at the second year -Oral and written exam
<p>B- Outline the updated principles of</p> <ul style="list-style-type: none"> • Common surgical health problems on PHC level 		
<p><u>C. State update and evidence based Knowledge of common surgical problem mentioned above in AA</u></p>		
<p>D. Memorize the basic and clinically supportive sciences which are appropriate to</p>		

surgical conditions mentioned above.		
E. Mention the basic ethical and medicolegal principles that should be applied in practice of common surgical problems and are relevant to family medicine.		
F. Mention the basics and standards of quality assurance to ensure good clinical practice in the field of common surgical problems in family medicine.		
G. Mention the ethical and scientific principles of medical research methodology.		
H. State the impact of common health problems in the field of common surgical problems in family medicine, on the society and how good clinical practice improves these problems.		

B- Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Correlates the facts of relevant basic and clinically supportive sciences with clinical reasoning, diagnosis and management of common surgical problems in related to family medicine.	-Didactic; -Lectures -Clinical rounds -Seminars -Clinical rotations (service teaching Clinical rounds Senior staff experience	Written exam, case presentation Log book
B. Demonstrate an investigatory and analytic thinking (problem solving) approaches to common surgical situations related to family medicine.		

C. Design and present cases , seminars in common surgical problem		
D-Formulate management plans and alternative decisions in different situations in the field of common surgical problems in family medicine.		

C-Practical skills (Patient Care)

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Obtain proper history and examine patients in caring and respectful behaviors.	-Didactic; -Lectures -Clinical rounds -Seminars -Clinical rotations (service teaching)	OSCE at the end of each year -log book & portfolio - One MCQ examination
B. Order the following non invasive &invasive diagnostic procedures <ul style="list-style-type: none"> • Radiological investigations for detection of surgical problems on primary health care level • Laboratory investigations. 	Clinical round with senior staff Observation Post graduate teaching Hand on workshops	-Procedure presentation - Log book - Chick list
<u>C. Interpret the following non invasive and invasive diagnostic procedures</u> <ul style="list-style-type: none"> • Radiological investigations for detection of surgical problems on primary health care level • Laboratory investigations. 		

<p>D. Perform non invasive &invasive therapeutic procedures , include the following:</p> <ul style="list-style-type: none"> ○ Proper management for conditions in AA. ○ Rapid assessment of acutely ill patient ○ Suturing and laceration repair ○ Incision and drainage of superficial abscesses ○ Wound debridement and wound management ○ Nasogastric tube insertion ○ Fine needle aspiration ○ Local anesthesia techniques 	<p>Clinical round with senior staff</p>	<p>Procedure presentation - Log book - Chick list</p>
<p>E. Prescribe the non invasive and invasive therapeutic procedures that mentioned in C.D.</p>		
<p>F. Carry out proper patient management plans of common mentioned surgical problems above including:</p> <ul style="list-style-type: none"> - Patients and their families counseling and education for common surgical problems mentioned above in AA related to family medicine. – Referral to other subspecialties or high qualified surgical center or rehabilitative health services. 	<p>Clinical round with senior staff -Perform under supervision of senior staff</p>	<p>Procedure presentation - Log book - Chick list</p>
<p>G-Use information technology to support patient care decisions and patient and family counseling and education for the above mentioned surgical conditions.</p>	<p>Clinical round with senior staff</p>	<p>-Procedure case presentation - Log book - Chick list</p>
<p>H. Provide health care services aimed at preventing the surgical conditions or Problems mentioned above and complications.</p>	<p>Clinical round with senior staff</p>	
<p>I. Provide patient-focused care in common conditions related to common mentioned surgical problems in</p>		

family medicine, while working with health care professionals, including those from other disciplines(radiologist, rehabilitation centers, and urology surgery like: • Conditions mentioned in A.A		
J-Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets.(Write a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and maintaining medical records, referral report)		

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 one of this course surgical problems.	-Case log -Observation and supervision -Written & oral communication	Procedure/case presentation -Log book and Portfolios
B. Appraises evidence from scientific studies(journal club)	-Journal clubs - Discussions in seminars and clinical rounds	
C. Conduct epidemiological Studies and surveys.		
D. Perform data management including data entry and analysis.		
E. Facilitate learning of junior students and other health care professionals.	Clinical rounds Senior staff experience	

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Maintain 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 and
G. Elicit information using effective nonverbal, explanatory, questioning, and writing skills.		
H. Provide information using effective nonverbal, explanatory, questioning, and writing skills.		
I. Work effectively with others as a member of a health care team or other professional group.		
J. Present a case in common problems related to General Surgery in family medicine.	Clinical round Seminars	Clinical Exam
K. Write a report : -Patients Surgical report. - Referral report to subspecialties.	Senior staff experience	Chick list
L. Council patients and families about the following surgical problems: <ul style="list-style-type: none"> ○ Preoperative Evaluation ○ Perioperative Management ○ Postoperative Care ○ Surgical Infections ○ Wound Management 	Clinical round with senior staff	

<ul style="list-style-type: none"> ○ Acute Abdomen and Appendicitis ○ Small and large Bowel Obstruction ○ Breast Cancer ○ Obstructive jaundice ○ Anorectal Disorders ○ Abdominal Wall Hernias ○ Thyroid disease ○ Peptic ulcer ○ Varicose vein and DVT 		
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Professionalism

ILOs	Methods of teaching/ learning	Methods of Evaluation
M. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society	Observation Senior staff experience Case taking	1. Objective structured clinical examination 2. Patient survey
N. Demonstrate a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent, business practices		1. 360o global rating
O. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		1. Objective structured clinical examination 2. global rating

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
P. Work effectively in relevant health care delivery settings and systems.	Observation Senior staff experience	1. 360o global rating
Q. Practice cost-effective health care and resource allocation that does not compromise quality of care.		1. Check list evaluation of live or recorded performance
R. Assist patients in dealing with system complexities.		1. 360o global rating 2. Patient survey

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

Time Schedule: Second part

Topic	Covered ILOs			
	Knowledge A	Intellectual B	Practical skillC	General SkillsD
Principle in general surgery				
Preoperative Evaluation	A-D	A-D	-	A-E
Perioperative Management	A-D	A-D	-	A-E
Postoperative Care	A,D-H	A-D	A-J	A-R
Surgical Infections	A,D	A-D	-	A-E
Wound Management	A,D	A-D	A-G	A-R
Acute Abdomen and Appendicitis	A-D	A-D	A-G	A-R
Small and large Bowel Obstruction	A-D	A-D	A-G	A-R
Breast Cancer	A,B-D	A-D	-	A-E

Obstructive jaundice	A-H	A-D	A-J	A-R
Anorectal Disorders	A-H	A-D	A-J	A-R
Abdominal Wall Hernias	A-D	A-D	A-J	A-E
Thyroid disease	A,D	A-D	A-J	A-R
Peptic ulcer	A,D	A-D	-	A-E
Varicose vein and DVT	A-H	A-D	A-J	A-R

5. Methods of teaching/learning:

- Didactic (lectures, seminars, tutorial)
- Outpatient
- Inpatient
- Case presentation
- Direct observation
- journal club
- Critically appraised topic.
- Educational prescription
- Clinical rounds
- Clinical rotation
- Senior staff experience
- Case log
- Observation and supervision
- Written & oral communications
- Simulation
- Hand on work shop
- Service teaching
- Perform under supervision of senior staff
- Postgraduate teaching

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

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

7. Assessment methods:

i. Assessment tools:

1. Oral examination
2. Clinical examination
3. Written examination
4. Objective structure clinical examination (OSCE)
5. Procedure/case Log book and Portfolios
6. Simulation
7. Record review (report)
8. Patient survey
9. 360o global rating
10. Check list evaluation of live or recorded performance
11. MCQ Exam

ii. Time schedule: At the end of second part

iii. Marks: 125 marks for general surgery

Written exam 50 marks, 1.5 h in time+ oral exam 25 marks+ clinical skills 50 marks.

8. List of references

i. Lectures notes

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

ii. Essential books

- CURRENT Diagnosis & Treatment in Family Medicine, 4th Edition (4th ed.), Jeannette E. South-Paul, Samuel C. Matheny, Evelyn L. Lewis (2015)
- Textbook of Family Medicine, 9th Edition, Robert Rakel David Rake (2016)

- Oxford Handbook of General Practice , Fourth Edition , Chantal Simon ,Hazel Everitt , Françoise van Dorp (2014)

iii. Recommended books

- Sabiston Textbook of Surgery , 20th Edition, by Courtney Townsend R. Daniel Beauchamp B. Mark Evers Kenneth Mattox (2016)

iv. Periodicals, Web sites, etc.

- American Journal of General Surgery
- European Journal of General surgery
- Egyptian Journal of General Surgery
- Journal of Hematology

9. Signatures

Unit Coordinator: Prof . Dalia Galal Mahran	Head of the Department: Prof . Dalia Galal Mahran
Date:	Date:

Course 11; Unit (2): Orthopedics surgery related to family medicine

1. Unit data

Course Title: Surgery related to family medicine.(General surgery, orthopedic and Urology)

- + **Unit title:** Orthopedics surgery related to family medicine.
- + **Course code:** FAM233E#.
- + **Specialty:** Family Medicine.
- + **Number of credit points(5CP):** Didactic teaching: 1 CP (20 %); practical 4 CP (80%);total 5CP(100%).

- + **Department (s) delivering the course:** Orthopedic surgery and traumatology Department in conjunction with family medicine.
- + **Coordinator (s):**
 - Course coordinator: Professor: Dalia Galal Mahran
 - Assistant coordinator (s): Lecturer: Ahmad Ekram
- + **Date last reviewed:** March/2020.
- + **General requirements (prerequisites) if any :**
 - + The candidate should complete the following rotations:
 - + Complete the course of traumatology and radiodiagnosis before rotation to orthopedic surgery+
 - + Complete rotation to surgery department
- + **Requirements from the students to achieve course ILOs are clarified in the joining log book.**

2. Unit Aims

-The rotation aims in orthopedics department should help the family physicians in the following aspects in his practice:
2/1 - To acquire sufficient and satisfactory knowledge, skills (diagnosis and attitude that will enable them to provide a broad range of health services (primary, preventive and rehabilitative post orthopedic surgery), as to enable them to make proper decisions related to common orthopedic problems including common fractures encountered in the PHC setting; as regard to early and accurate proper orthopedic diagnosis and proper used radiological diagnostic tools and proper management (i.e. application of diagnostic and therapeutic techniques and procedures); orthopedic emergencies, orthopedic care (i.e. preoperative and postoperative care and postoperative rehabilitation including; physiotherapy, occupational, and rehabilitation therapy in) and prompt referral to the specialist.

3. Intended learning outcomes (ILOs):

A -Knowledge and understanding

ILOs	Methods of teaching/ learning	<i>Methods of Evaluation</i>
<p>A. Describe the etiology, clinical picture, diagnosis and management of the following orthopedics diseases and clinical conditions commonly dealt with in primary health care settings in family medicine; Include the following :</p> <ul style="list-style-type: none"> • Neck pain • Low back pain • Shoulder problems • Elbow problems Wrist and hand problems • Hip and pelvis problems • Ankle and foot problems • Rickets and osteomalacia • Osteoporosis and treatment option • Osteoarthritis • Rheumatoid arthritis • Crystal-induced arthritis • Arthritis in children • Developmental dysplasia of the hip(DDH) 	<p>-Lectures - Practical sessions -Discussions - Readings</p>	<p>-OSCE -Log book -- Written exams -Oral exams</p>
<p>B. Mention the principles of (diagnostic, therapeutic and preventive tools)</p> <ul style="list-style-type: none"> ○ Complete joint and spine examination ○ Appropriate use and interpretation of X-rays in orthopedic problems. ○ Bandaging of sprained joint. ○ Safe transport of orthopedic trauma. ○ Safe and effective splinting of fracture. ○ Detection of skeletal deformities 		

C. State update and evidence based Knowledge of Common Orthopedic problems mentioned in AA		
D. Memorize the facts and principles of the relevant basic and clinically supportive sciences related to orthopedics problems in family medicine		
E. Mention the basic ethical and medicolegal principles relevant to the orthopedics problems in family medicine.		
F. Mention the basics of quality assurance to ensure good clinical care in his field		
G. Mention the ethical and scientific principles of medical research		
H. State the impact of common health problems in the field of orthopedics problems in family medicine on the society.		

B-Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Correlates the facts of relevant basic and clinically supportive sciences with clinical reasoning, diagnosis and management of common diseases related to orthopedics problems in family medicine	-Clinical rounds -Senior staff experience	Procedures/case presentation log book
B. Demonstrate an investigatory and analytic thinking (problem solving) approaches to common clinical situations related to orthopedics problems in family medicine.		
C. Design and present cases , seminars in common problem		
D-Formulate management plans and alternative decisions in different situations in the field of orthopedics problems in family medicine		

C-Practical skills (Patient Care)

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Obtain proper history and examine patients in caring and respectful behaviors.	Didactic -Lectures -Clinical rounds -Seminars -Clinical rotations (service teaching)	- Log book & portfolio - Case presentation
B. Order the following non invasive diagnostic procedures <ul style="list-style-type: none"> • Diagnostic radiology • CBC • Inflammatory markers (ESR + CRP) • Culture & sensitivity • Other blood tests related to joint diseases • Nerve conduction velocity • Electromyography 	Clinical round with senior staff. Observation Postgraduate teaching	Cases presentations -- Log book & portfolio
C. Interpret the following non invasive diagnostic procedures <ul style="list-style-type: none"> • Diagnostic radiology related to general orthopaedics • CBC • Inflammatory markers (ESR + CRP) • Culture & sensitivity • Other blood tests related to joint diseases • Nerve conduction velocity • Electromyography 		
D. Perform the following non invasive therapeutic procedures		

<ul style="list-style-type: none"> • Complete joint and spine examination • Appropriate use and interpretation of X-rays in orthopedic problems. • Bandaging of sprained joint. • Safe transport of orthopedic trauma. • Safe and effective splinting of fracture. 		
<p>E. Prescribe the following non invasive therapeutic procedures :</p> <ul style="list-style-type: none"> • Orthopedic prescriptions for medical bone disease • Plaster cast and proper positioning . 		
<p>F. Carry out patient management plans for common conditions related to orthopedics problems in family medicine.</p>	Clinical rounds with senior staff	
<p>G. Use information technology to support patient care decisions and patient education in common clinical situations related to orthopedics problems in family medicine</p>		
<p>H. Provide health care services aimed at preventing health problems related to orthopedics like:</p> <p>Common fractures</p> <p>Common orthopedic problems mentioned above.</p>		
<p>I. Provide patient-focused care in common conditions related to orthopedics problems in family medicine, while working with health care professionals, including those from other disciplines like: Common orthopedic conditions</p>		
<p>J. Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets.(Write a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and maintaining medical records)</p>		

D -Gera! Skills

Practice-Based Learning and Improvement

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Perform practice-based improvement activities using a systematic methodology(audit, logbook)	Observation -Written& oral communication	logbook
B. Appraises evidence from scientific studies(journal club)	Journal clubs - Discussion in seminars and clinical rounds	
C. Conduct epidemiological Studies and surveys.		
D. Perform data management including data entry and analysis.		
E. Facilitate learning of junior students and other health care professionals.		

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Maintain therapeutic and ethically sound relationship with patients.	-Simulations -Clinical round seminars -Lectures -Case presentations	Case presentation Log book Portfolios
G. Elicit information using effective nonverbal, explanatory, questioning, and writing skills.		

H. Provide information using effective nonverbal, explanatory, questioning, and writing skills.		
I. Work effectively with others as a member of a health care team or other professional group.		
J. Present a case in common health problems related to pediatrics	Clinical round seminars	Clinical Exam
K. Write a report in -Patients medical records - referral report	Senior staff experience	
L. Council patients and families about prevention and proper management of common health problems in orthopedics problems in family medicine .		

Professionalism

ILOs	Methods of teaching/ learning	Methods of Evaluation
M. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society	Observation of senior staff experience -Case taking	1- Objective structured clinical examination
N. Demonstrate a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent, business practices		2- Patient survey
O. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		Objective structured clinical examination

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
P. Work effectively in relevant health care delivery settings and systems.	Observation of senior staff experience Case taking	Chick list evaluation of live or recorded performance Patient survey
Q. Practice cost-effective health care and resource allocation that does not compromise quality of care.		
R. Assist patients in dealing with system complexities.		

4. Contents (topic s/modules/rotation Unit Matrix

Time Schedule: Second part

Topic	Covered ILOs			
	Knowledge	Intellectual	Practical skills	General Skills
❖ Common Orthopedic problems in family medicine like:	A-H	A-D	A-J	A-R
<ul style="list-style-type: none"> • Neck pain • Low back pain • Shoulder problems • Elbow problems Wrist and hand problems • Hip and pelvis problems • Ankle and foot problems 	A-H		A-J	

<ul style="list-style-type: none">• Rickets• osteomalacia• Osteoporosis and treatment options	A-H	A-D	A-J	A-R
<ul style="list-style-type: none">• Osteoarthritis• Rheumatoid arthritis• Crystal-induced arthritis	A	A-D	A-C	A-R
<ul style="list-style-type: none">• Arthritis in children• Developmental dysplasia of the hip(DDH)		C		D

<ul style="list-style-type: none"> ○ Complete joint and spine examination ○ Appropriate use and interpretation of X-rays in orthopedic problems. ○ Bandaging of sprained joint. ○ Safe transport of orthopedic trauma. ○ Safe and effective splinting of fracture. ○ Detection of skeletal deformities 	<p>B</p> <p>B</p> <p>B</p> <p>B</p>	<p>C</p> <p>C</p> <p>C</p> <p>C</p>	<p>D.E</p> <p>D,E</p> <p>D,E</p> <p>D,E</p>	<p>A-E</p> <p>A-E</p> <p>D,E</p> <p>D,E</p>

5. Methods of teaching/learning:

- Didactic (lectures, seminars, tutorial)
- Case presentation
- Direct observation
- journal club,
- Clinical rounds
- Senior staff experience
- Case log
- Observation and supervision

- Hand on workshop
- Simulations

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

- Extra lectures
- Extra training

7. Assessment methods:

i. Assessment tools:

- Clinical examination
- oral examination
- Written examination
- Objective structure clinical examination (OSCE)
- Portfolios
- Procedure/case Log book
- Simulation
- Record review (report)
- Patient survey
- 360o global rating
- Check list evaluation of live or recorded performance

ii. Time schedule: At the end of second part

iii. Marks: 50 marks;

Written exam; 1h in time; 15 marks+ oral exam 15marks+ clinical exam 20 marks.

8. List of references

i. Lectures notes

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

ii. Essential books

- CURRENT Diagnosis & Treatment in Family Medicine, 4th Edition (4th ed.), Jeannette E. South-Paul, Samuel C. Matheny, Evelyn L. Lewis (2015)
- Textbook of Family Medicine, 9th Edition, Robert Rakel David Rake (2016)
- Oxford Handbook of General Practice , Fourth Edition , Chantal Simon ,Hazel Everitt , Françoise van Dorp (2014)

iii. Recommended book

Campbell's Operative Orthopedics, 4-Volume Set , 13th Edition by By Frederick M Azar, MD, S. Terry Canale, MD and James H. Beaty, MD (2017)

iv. Periodicals, Web sites, etc.

- American Academy of Family Physicians.
- Orthopedics Hyper guide
- Online Journals
- PubMed





9. Signatures



Unit Coordinator: Prof . Dalia Galal Mahran	Head of the Department: Prof . Dalia Galal Mahran
Date:	Date:

Course 11; Unit (3): Urology surgery related to family medicine



1. Unit data

Course Title: Surgery related to family medicine.(General surgery, orthopedic and Urology)

-  **Unit title:** Urology surgery related to family medicine
-  **Course code:** FAM233E#.
-  **Specialty:** *Family Medicine.*
-  **Number of credit points(CP):** 2.5credit points; total(100%) ; 0.5 CP(20%) for didactic teaching;2 CP for training(80%).

-  **Department (s) delivering the course:** Department Of ***Urology*** in collaboration with Family Medicine Department- Faculty of Medicine- Assiut University.
-  **Coordinator (s):**
 - Course coordinator: Prof Dalia Galal Mahran
 - Assistant coordinator (s) : Lecturer: Eslam Farouk

- **Date last reviewed:** August/2020.

-  **General requirements (prerequisites) if any :**None
-  **Requirements from the students to achieve course ILOs are clarified in the joining log book.**

2. Unit aims

- The rotation aims in Urology department should help the family physicians in the following aspects in his practice:

2/1 - To acquire knowledge, skills and attitude that will enable them to provide a broad range of health services (primary, preventive urology diseases and complication and rehabilitative post urology surgery) to enable them to make clinical decisions related to common urologic problems encountered in the PHC setting; as regard to early and accurate urologic diagnosis and urologic emergencies , urology surgical care (i.e. preoperative and postoperative care and postoperative rehabilitation) and assistance in urology surgery .

2/2- At the end of Urologic rotation, the family physician should acquire satisfactory knowledge and professional skills in the following eras; as aimed to:

2/2.1 -To enable candidates to acquire satisfactory level of clinical skills, bedside care skills, in addition to update medical knowledge as well as clinical experience and competence in the area of urology and enabling the candidates of making appropriate referrals to a sub-specialist.

2/2.2-To Provide candidates with fundamental knowledge and skills of dealing with critically ill patients, with urologic diseases.

2/2.3-To demonstrates the ability to provide patient-centered care that is appropriate, compassionate, and effective for treatment of Urologic health problems and the promotion of health.

2/2.4- To give opportunities to evaluate and manage a broad variety of Urological diseases on PHC level.

3. Intended learning outcomes (ILOs):

A -Knowledge and understanding

ILOs	Methods of teaching/ Learning	Methods of <i>Evaluation</i>
<p>A. Describe the etiology, clinical picture, diagnosis and management of the following urology diseases and surgical conditions commonly dealt with in primary health care settings in family medicine. including:</p> <ul style="list-style-type: none"> • Renal stones • Haematuria, bladder and renal cancer • Urinary tract infection • Incontinence of urine • Urinary tract obstruction- obstructive anuria • Benign prostatic hypertrophy and Prostate cancer treatment • Testicular disease • Acute scrotum 	<p>Didactic; -Lectures -Clinical rounds -Seminars -Clinical rotations (service teaching)</p>	<p>-OSCE at the end of each year -log book & portfolio - MCQ examination at the second year -Oral and written exam</p>

<p>B- Outline the updated principles of</p> <ul style="list-style-type: none"> • Common urology diseases and surgical health problems on PHC level • Epidemiology of bilharziasis in Egypt • Common urogenital problems at PHC level • The most common cause of acute retention in different age groups. 		
<p><u>C. State update and evidence based Knowledge of common urology diseases and surgical problem mentioned above in AA</u></p>		
<p>D. Memorize the basic and clinically supportive sciences which are appropriate to urology diseases and surgical conditions mentioned above.</p>		
<p>E. Mention the basic ethical and medicolegal principles that should be applied in practice of common urological problems and are relevant to family medicine.</p>		
<p>F. Mention the basics and standards of quality assurance to ensure good clinical practice in the field of common urological problems in family medicine.</p>		
<p>G. Mention the ethical and scientific principles of medical research methodology.</p>		
<p>H. State the impact of common health problems in the field of common urological problems in family medicine, on the society and how good clinical practice improves these problems.</p>		

B -Intellectual outcomes

ILOs	Methods of teaching/ Learning	Methods of Evaluation
A. Correlates the facts of relevant basic and clinically supportive sciences with clinical reasoning, diagnosis and management of common surgical problems in related to family medicine.	<ul style="list-style-type: none"> -Didactic; -Lectures -Clinical rounds -Seminars -Clinical rotations (service teaching Clinical rounds Senior staff experience 	<p style="text-align: center;">Written exam, case presentation Log book</p>
B. Demonstrate an investigatory and analytic thinking (problem solving) approaches to common urological diseases and surgical situations related to family medicine.		
C. Design and present cases , seminars in common urological problem		
D-Formulate management plans and alternative decisions in different situations in the field of common urological problems in family medicine.		

C-Practical skills (Patient Care)

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Obtain proper history and examine patients in caring and respectful behaviors.	-Didactic; -Lectures -Clinical rounds -Seminars -Clinical rotations (service teaching)	OSCE at the end of each year -log book & portfolio - One MCQ examination
B. Order the following non invasive &invasive diagnostic procedures <ul style="list-style-type: none"> • Radiological investigations for detection of surgical problems on primary health care level • Laboratory investigations. <ul style="list-style-type: none"> - Prescription of antibiotics • medical treatment for common urogenital infections at the PHC level 	Clinical round with senior staff Observation Post graduate teaching Hand on workshops	-Procedure presentation - Log book - Chick list
<u>C. Interpret the following non invasive and invasive diagnostic procedures</u> <ul style="list-style-type: none"> • Radiological investigations for detection of surgical problems on primary health care level • Laboratory investigations. 		
D. Perform non invasive &invasive therapeutic procedures , include the following: <ul style="list-style-type: none"> ○ Proper management for conditions in AA. ○ Rapid assessment of emergencies in 	Clinical round with senior staff	Procedure presentation - Log book - Chick list

urology ○ Abdominal US ○ Incision and drainage of superficial abscesses ○ Wound debridement and wound management ○ Urethral catheterization ○		
E. Prescribe the non invasive and invasive therapeutic procedures that mentioned in C.D.		
F. Carry out proper patient management plans of common mentioned urological problems above including: - Patients and their families counseling and education for common urological problems mentioned above in AA related to family medicine. – Referral to other subspecialties or high qualified urological center or rehabilitative health services.	Clinical round with senior staff -Perform under supervision of senior staff	Procedure presentation - Log book - Chick list
G-Use information technology to support patient care decisions and patient and family counseling and education for the above mentioned urological conditions.	Clinical round with senior staff	-Procedure case presentation - Log book - Chick list
H. Provide health care services aimed at preventing the urological conditions or Problems mentioned above and complications.	Clinical round with senior staff	
I. Provide patient-focused care in common conditions related to common mentioned urological problems in family medicine, while working with health care professionals, including those from other disciplines(radiologist, nephrologists ; rehabilitation centers, and urology surgery like: ● Conditions mentioned in A.A		

J. Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets.(Write a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and maintaining medical records, referral report)		
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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 one of this course surgical problems.	-Case log -Observation and supervision -Written & oral communication	Procedure/case presentation -Log book and Portfolios
B. Appraises evidence from scientific studies(journal club)	-Journal clubs - Discussions in seminars and clinical rounds	
C. Conduct epidemiological Studies and surveys.		
D. Perform data management including data entry and analysis.		
E. Facilitate learning of junior students and other health care professionals.	Clinical rounds Senior staff experience	

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Maintain 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 and
G. Elicit information using effective nonverbal, explanatory, questioning, and writing skills.		
H. Provide information using effective nonverbal, explanatory, questioning, and writing skills.		
I. Work effectively with others as a member of a health care team or other professional group.		
J. Present a case in common problems related to Urology in family medicine.	Clinical round Seminars	Clinical Exam
K. Write a report : -Patients urologic report. - Referral report to subspecialties.	Senior staff experience	Chick list
L. Council patients and families about the following urological problems: - prevention of genitourinary infections. -Screening of common urogenital tumors -Congenital anomalies. - Varicocele -undescended testis - Complications of genitourinary bilharzias	Clinical round with senior staff	

Professionalism

ILOs	Methods of teaching/ learning	Methods of Evaluation
M. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society	Observation Senior staff experience Case taking	1. Objective structured clinical examination 2. Patient survey
N. Demonstrate a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent, business practices		1. 360o global rating
O. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		1. Objective structured clinical examination 2. global rating

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
P. Work effectively in relevant health care delivery settings and systems.	Observation Senior staff experience	1. 360o global rating
Q. Practice cost-effective health care and resource allocation that does not compromise quality of care.		1. Check list evaluation of live or recorded performance
R. Assist patients in dealing with system complexities.		1. 360o global rating 2. Patient survey

4. Contents (topic s/modules/rotation Unit Matrix

Time Schedule: Second part

Topic	Covered ILOs			
	Knowledge	Intellectual	Practical skills	General Skills
Renal stones	A-H	A-D	A-J	A-R
Haematuria, bladder and renal cancer	A-H	A-D	A-J	A-R
Urinary tract infection	A-H	A-D	A-J	A-R
Incontinence of urine	A-H	A-D	A-J	A-R
Urinary tract obstruction-obstructive anuria	A-H	A-D	A-J	A-R
-Benign prostatic hypertrophy and Prostate cancer treatment -Testicular disease,Acutescrotum	A-H	A-D	A-J	A-R

5. Methods of teaching/learning:

1. Didactic (lectures, seminars, tutorial)
2. Clinical rounds
3. Clinical rotations
4. Service teaching
5. Post graduate teaching
6. Hand on workshops
7. Perform under supervision of senior staff
8. Simulations
9. Senior staff experience
10. Case presentation
11. Outpatient

12. Inpatient
13. Direct observation
14. journal club,
15. Critically appraised topic
16. Educational prescription
17. Observation and supervision
18. Written & oral communications

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

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

7. Assessment methods:

i. Assessment tools:

1. Clinical examination
2. Written examination
3. One MCQ examination
4. Objective structure clinical examination (OSCE)
5. Procedure & case Log b& Portfolios
6. Simulation
7. Record review (report)
8. Patient survey
9. 360o global rating
10. Check list evaluation of live or recorded performance
11. . Oral examination

ii. **Time schedule:** At the end of the second part.

iii. **Marks: 25**

Written exam; 0.5h in time; 10 marks+ oral exam 5 marks+ clinical exam 10 marks

8. List of references

i. Lectures notes

i. Lectures notes

- Course notes
- Staff members print out of lectures and/or CD copies
- Principles of urology Book by Staff Members of the Department of urology Diseases-Assiut University

ii. Essential books

- CURRENT Diagnosis & Treatment in Family Medicine, 4th Edition (4th ed.), Jeannette E. South-Paul, Samuel C. Matheny, Evelyn L. Lewis (2015)
- Textbook of Family Medicine, 9th Edition, Robert Rakel David Rake (2016)
- Oxford Handbook of General Practice , Fourth Edition , Chantal Simon ,Hazel Everitt , Françoise van Dorp (2014)

iv. Periodicals, Web sites, etc.

- Journal of urology.
- Urologic clinics of North America
- European guide lines 2018,2019

9. Signatures

Unit Coordinator: Prof . Dalia Galal Mahran	Head of the Department: Prof . Dalia Galal Mahran
Date:	Date:

Course 12; ENT surgery& Ophthalmology related to family medicine.

It is divided into units;

- Unit 1 ENT surgery related to family medicine.
- Unit 2 Ophthalmology related to family medicine.

+ Course Title: ENT surgery& Ophthalmology related to family medicine.

+ Course code: FAM233F#

+ Specialty: Family medicine.

+ Number of **credit points (CP)**: Didactic 2CP (20 %) practical 8CP (80%);total 10**CP (100%)**.

Course 12; Unit1: ENT surgery related to family medicine.

1. Unit data

+ Course Title: Course 12; ENT surgery& Ophthalmology related to family medicine.

+ Unit Title: ENT surgery related to family medicine.

+ Course code: FAM233F#

+ Specialty: Family medicine.

+ Number of **credit points (CP)**: Didactic 1CP (20 %) practical 4CP (80%);total 5 **CP (100%)**.

Department (s) delivering the course: Otolaryngology - Head and Neck Surgery Department in collaboration with Family Medicine Department- Faculty of Medicine- Assiut University.

+ Coordinator (s):

- Course coordinator: Professor: Dalia Galal Mahran
- Assistant coordinator (s) :
- Lecturer: Mohamad Omar Ahmad

-Date last reviewed: August/2020

+ General requirements (prerequisites) if any :

+ **Complete rotation to surgery department**

+ Requirements from the students to achieve course ILOs are clarified in the joining log book.

2. Unit Aims

The rotation aims in Otolaryngology - Head and Neck Surgery department should help the family physicians in the following aspects in his practice:

2/1 - To acquire sufficient and satisfactory knowledge, skills (diagnosis and attitude that will enable them to provide a broad range of health services (primary, preventive and rehabilitative post ENT surgery), as to enable them to make proper decisions related to common **Otolaryngology – ENT** & audio vestibular problems in family medicine including common diseases, health problems and emergencies encountered in the PHC setting; as regard to early and accurate proper diagnosis and proper used diagnostic tools and proper management (i.e. application of diagnostic and therapeutic techniques and procedures); emergencies, audio vestibular care (including; physiotherapy, occupational, and rehabilitation therapy in) and prompt referral to the specialist.

3. Intended learning outcomes (ILOs):

A -Knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
A-Describe the etiology, clinical picture, diagnosis and management of the following common acute and chronic Otolaryngology – ENT and audio vestibular problems, diseases and clinical conditions; commonly dealt with in primary health care settings, including: <ul style="list-style-type: none">• Common cold – influenza• Pharyngitis- tonsillitis	-Lectures - Practical sessions -Discussions - Readings	<i>MCQ</i> -Log book - -Written exams -Oral exams

<ul style="list-style-type: none"> • Hoarseness and stridor • Sinusitis- Allergic Rhinitis • Earache – otitis externa • Otitis media • Deafness- Tinnitus • Vertigo • Epistaxis • Dysphagia • Tracheostomy • Adenoids • Caustic ingestion • Foreign bodies : (in nose – in the ear – swallowed F.B- inhaled F.B) • Bell's palsy 		
<p>B. Mention the principles of (diagnostic, therapeutic and preventive tools) of conditions mentioned in AA.</p> <ul style="list-style-type: none"> • Appropriate ENT examination • Ear wax removal • Nasal packing for control epistaxis • Removal of foreign body from nose and external ear. • Observation of tracheostomy and care patient with tracheostomy. • Audiogram interpretation 		
<p>C. State update and evidence based Knowledge of the following common Otolaryngology – ENT and audio vestibular problems</p> <ul style="list-style-type: none"> • Common cold – influenza • Pharyngitis- tonsillitis • Hoarseness and stridor 		

<ul style="list-style-type: none"> • Sinusitis- Allergic Rhinitis • Earache – otitis externa • Otitis media • Deafness- Tinnitus • Vertigo • Epistaxis • Dysphagia • Tracheostomy • Adenoids • Caustic ingestion • Foreign bodies : (in nose – in the ear – swallowed F.B- inhaled F.B) • Bell's palsy 		
D. Memorize the facts and principles of the relevant basic and clinically supportive sciences related to Otolaryngology – ENT and audio vestibular problems		
E. Mention the basic ethical and medicolegal principles relevant to the Otolaryngology – ENT and audio vestibular problems.		
F. Mention the basics of quality assurance to ensure good clinical care in his field		
G. Mention the ethical and scientific principles of medical research		
H. State the impact of common health problems in the field of family medicine on the society.		

B -Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Correlates the facts of relevant basic and clinically supportive sciences with clinical reasoning, diagnosis and management of common diseases related to Otolaryngology – ENT and audio vestibular problems.	-Clinical rounds -Senior staff experience	Procedures/case presentation log book
B. Demonstrate an investigatory and analytic thinking (problem solving) approaches to common clinical situations related to Otolaryngology – ENT		
C. Design and present cases , seminars in common problem		
D-Formulate management plans and alternative decisions in different situations in the field of the Otolaryngology – ENT		

C -Practical skills (Patient Care)

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Obtain proper history and examine patients in caring and respectful behaviors.	Didactic -Lectures -Clinical rounds -Seminars -Clinical rotations (service teaching)	- Log book & portfolio - Case presentation
B. Order the following non invasive diagnostic procedures <ul style="list-style-type: none"> • Diagnostic radiology • Laboratory investigations 	Clinical round with senior staff. Observation Postgraduate teaching	Cases presentations -- Log book & portfolio
C. Interpret the following non invasive diagnostic procedures <ul style="list-style-type: none"> • Diagnostic radiology related to general Otolaryngology • Other diagnostic tools used in outpatient clinic(ear, nose, larynx). • Audiogram • CBC • Inflammatory markers (ESR + CRP) • Culture & sensitivity • Other laboratory tests related to otolaryngology 		
D. Perform the following non invasive& invasive therapeutic procedures		

<ul style="list-style-type: none"> • Ear wax removal • Nasal packing for control epistaxis • Removal of foreign body from nose and external ear. • Tracheostomy and care patient with tracheostomy 		
<p>E. Prescribe the following non Invasive &invasive therapeutic procedures :</p> <ul style="list-style-type: none"> • Ear wax removal • Nasal packing for control epistaxis • Removal of foreign body from nose and external ear. • Tracheotomy and care patient with tracheotomy. • Audiogram 		
<p>F. Carry out patient management plans for common conditions related to otolaryngology- ENT& audiovestibular.</p>	Clinical rounds with senior staff	
<p>G. Use information technology to support patient care decisions and patient education in common clinical situations related to otolaryngology ENT& audiovestibular.</p>		
<p>H. Provide health care services aimed at preventing health problems related to otolaryngology ENT& audiovestibular.like:</p> <p>Common problems mentioned in AA</p>		
<p>I-Provide patient-focused care in common</p>		

conditions related to otolaryngology ENT& audiovestibular. , while working with health care professionals, including those from other disciplines like: Common conditions mentioned in AA		
J-Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets.(Write a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and maintaining medical records and referral to specialist).		

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(audit, logbook)	Observation -Written& oral communication	logbook
B. Appraises evidence from scientific studies(journal club)	Journal clubs - Discussion in seminars and clinical rounds	
C. Conduct epidemiological Studies and surveys.		
D. Perform data management including data entry and analysis.		
E. Facilitate learning of junior students and other health care professionals.		

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Maintain therapeutic and ethically sound relationship with patients.	-Simulations -Clinical round seminars -Lectures -Case presentations	Case presentation Log book Portfolios
G. Elicit information using effective nonverbal, explanatory, questioning, and writing skills.		
H. Provide information using effective nonverbal, explanatory, questioning, and writing skills.		
I. Work effectively with others as a member of a health care team or other professional group.		
J. Present a case in common health problems related to pediatrics	Clinical round seminars	Clinical Exam
K. Write a report in -Patients medical records - referral report	Senior staff experience	
L. Council patients and families about prevention and proper management of common pediatric health problems		

Professionalism

ILOs	Methods of teaching/ learning	Methods of Evaluation
M. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society	Observation of senior staff experience -Case taking	1- Objective structured clinical examination 2- Patient survey
N. Demonstrate a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent, business practices		
O. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		Objective structured clinical examination

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
P. Work effectively in relevant health care delivery settings and systems.	Observation of senior staff experience Case taking	Log book
Q. Practice cost-effective health care and resource allocation that does not compromise quality of care.		Check list evaluation of live or recorded performance
R. Assist patients in dealing with system complexities.		Patient survey

	4. Contents (topic s/modules/rotation Unit Matrix
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Time Schedule: Second part

Topic	Covered ILOs			
	Knowledge	Intellectual	Practical skills	General Skills
• Common cold – influenza	A-H	A-D	A-J	A-R
• Pharyngitis- tonsillitis	A-H	A-D	A-J	A-R
• Hoarseness and stridor	A-H	A-D	A-J	A-R
• Sinusitis- Allergic Rhinitis	A-H	A-D	A-J	A-R
• Earache – otitis externa	A-H	A-D	A-J	A-R
• Otitis media	A-H	A-D	A-E	A-R
• Deafness- Tinnitus	A-H	A-D	A-J	A-R
• Vertigo	A-H	A-D	A-J	A-R
• Epistaxis	A-H	A-D	A-J	A-R
• Dysphagia	A-H	A-D	A-J	A-R
• Tracheostomy	A-H	C	A-E	A-R
• Adenoids				
• Caustic ingestion				
• Foreign bodies : (in nose – in the ear – swallowed F.B- inhaled F.B)	A-H	C	A-G	A-L
• Bell's palsy	A-C	C	B,C	A-L

5. Methods of teaching/learning:

- Didactic (lectures, seminars, tutorial)
- Case presentation
- Direct observation
- journal club,
- Clinical rounds
- Senior staff experience
- Case log
- Observation and supervision
- Hand on workshop
- Simulations

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

- Extra lectures
- Extra training.

7. Assessment methods:

i. Assessment tools:

- Clinical examination
- oral examination
- Written examination
- Objective structure clinical examination (OSCE)
- Portfolios
- Procedure/case Log book
- Simulation
- Record review (report)
- Patient survey
- 360o global rating
- Check list evaluation of live or recorded performance

ii. Time schedule: At the end of second part

iii. Marks: 50 marks

Written exam, 1 hour in time (20 mark) + oral exam (10 mark) + clinical exam (20 mark)

8. List of references

i. Lectures notes

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

ii. Essential books

- CURRENT Diagnosis & Treatment in Family Medicine, 4th Edition (4th ed.), Jeannette E. South-Paul, Samuel C. Matheny, Evelyn L. Lewis (2015)
- Textbook of Family Medicine, 9th Edition, Robert Rakel David Rake (2016)
- Oxford Handbook of General Practice , Fourth Edition , Chantal Simon ,Hazel Everitt , Françoise van Dorp (2014).

iii. Recommended book

- Logan Turner's Diseases of the Nose, Throat and Ear, Head and Neck Surgery Paperback (2015)

iv. Periodicals, Web sites, etc.

9. Signatures

Unit Coordinator:	Head of the Department:
Date:	Date:

Course 12; unit (2): Ophthalmology related to family medicine

1. Unit data

- + Course Title: ENT surgery& Ophthalmology related to family medicine
- + Unit Title: Ophthalmology related to family medicine.
- + Course code: FAM233F#

- + Specialty: Family medicine
- + Number of **credit points (CP)**: Didactic 1CP (20 %) practical 4CP (80%);total 5 **CP (100%)**.

Department (s) delivering the course: Ophthalmology department in collaboration with Family Medicine Department- Faculty of Medicine- Assiut University.

- + **Coordinator (s):**
 - Course coordinator: Professor:Dalia Galal Mahran
 - Assistant coordinator (s):
Lecturer: Shaimaa Mohamad Khalaf
- + Date last reviewed: August/2020.
- + General requirements (prerequisites) if any :
 - + **Complete rotation to surgery department**
- + Requirements from the students to achieve course ILOs are clarified in the joining log book.

2. Unit Aims

The rotation aims in **Ophthalmology** department should help the family physicians in the following aspects in his practice:
2/1 - To acquire sufficient and satisfactory knowledge, skills (diagnosis and attitude that will enable them to provide a broad range of health services (primary, preventive of eye diseases and rehabilitative post eye surgery), as to enable them to make proper decisions related to common **acute and chronic Ophthalmology** problems in family medicine including common diseases, health problems and emergencies encountered in the PHC setting; as regard to early and accurate proper diagnosis and proper used diagnostic tools and proper management (i.e. application of diagnostic and therapeutic techniques and procedures); emergencies, eye care; postoperative or posttraumatic and rehabilitation health care and prompt timely referral to the specialist.

3. Intended learning outcomes (ILOs):

A - Knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Describe the etiology, clinical picture, diagnosis and management of the following acute and chronic ophthalmological diseases and clinical conditions commonly dealt with in primary health care settings, including; <ul style="list-style-type: none">• Red eye• - Impaired vision and eye pain• - common visual disturbances	-Lectures - Practical sessions -Discussions - Readings	MCQ -Log book - -Written exams -Oral exams

<ul style="list-style-type: none"> • - Cataract • - Glaucoma • - Exophthalmos • - Retinopathy due to systemic diseases • - Abnormal ocular mobility-strabismus (especially in children) • - Ocular emergencies (eye trauma, burns or corneal ulceration) • -VISION SCREENING AND OCULAR EXAMINATION • 		
<p>B. Mention the principles of (diagnostic,therapeutic and preventive tools) acute and chronic ophthalmological diseases seen in family medicine, including the following:</p> <ul style="list-style-type: none"> • Direct battery hand-held ophthalmoscope • Hand-held flash light for ophthalmic exam • Snellen's chart - Tumbling E. for adult • Allen's figures for children • Pin hole disc • Corneal foreign body removal • Visual field examination. • Proper funduscopy examination with the use of a direct ophthalmoscope and recognition of difference between normal appearance and major abnormalities, e.g. Papilloedema, Cupping nerve head, Diabetic retinopathy, 		

Hypertension and Retinal detachment, etc.		
<p>C. State update and evidence based Knowledge of ophthalmology conditions</p> <ul style="list-style-type: none"> • Red eye • - Impaired vision and eye pain • - common visual disturbances • - Cataract • - Glaucoma • - Exophthalmos • - Retinopathy due to systemic diseases • - Abnormal ocular mobility-strabismus (especially in children) • - Ocular emergencies (eye trauma, burns or corneal ulceration) • - VISION SCREENING AND OCULAR EXAMINATION 		
D. Memorize the facts and principles of the relevant basic and clinically supportive sciences related to ophthalmology and family medicine .		
E. Mention the basic ethical and medicolegal principles relevant to the ophthalmology in family medicine .		
F. Mention the basics of quality assurance to ensure good clinical care in his field		
G. Mention the ethical and scientific principles of medical research		
H. State the impact of common health problems in the field ophthalmology in family medicine on the society.		

B -Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Correlates the facts of relevant basic and clinically supportive sciences with clinical reasoning, diagnosis and management of common diseases related to ophthalmology in family medicine .	-Clinical rounds -Senior staff experience	case presentation log book
B. Demonstrate an investigatory and analytic thinking (problem solving) approaches to common clinical situations related to ophthalmology in family medicine .		
C. Design and present cases , seminars in common problem		
D-Formulate management plans and alternative decisions in different situations in the field of the ophthalmology in family medicine .		

C -Practical skills (Patient Care)

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Obtain proper history and examine patients in caring and respectful behaviors.	Didactic -Lectures -Clinical rounds -Seminars -Clinical rotations (service teaching)	- Log book & portfolio - Case presentation
B. Order the following non invasive diagnostic	Clinical	Cases

procedures - Appropriate laboratory investigations - Radiological investigations - Fundal examination - field examination	round with senior staff. Observation Postgraduate teaching	presentations -- Log book & portfolio
C. Interpret the following non invasive diagnostic procedures - Appropriate laboratory investigations - Radiological investigations -Fundal examination reports - Errors of refraction report		
D. Perform the following non invasive therapeutic procedures <ul style="list-style-type: none"> • Direct battery hand-held ophthalmoscope • Hand-held flash light for ophthalmic exam • Snellen's chart - Tumbling E. for adult • Allen's figures for children • Pin hole disc • Corneal foreign body removal • Visual field examination. • proper funduscopy examination with the use of a direct ophthalmoscope and recognition of difference between normal appearance and major abnormalities, e.g. Papilloedema, Cupping nerve head, Diabetic retinopathy, Hypertension and Retinal detachment, etc. 		
E. Prescribe the following non invasive therapeutic procedures :		

<ul style="list-style-type: none"> • Appropriate laboratory investigations • Radiological investigations • Appropriate fundal examination • Visual acuity measurement 		
F. Carry out patient management plans for common conditions related to ophthalmology in family medicine .	Clinical rounds with senior staff	
G. Use information technology to support patient care decisions and patient education in common clinical situations related to ophthalmology in family medicine .		
H. Provide health care services aimed at preventing health problems related to ophthalmology in family medicine . like: Common ophthalmologic condition seen in primary care setting		
I-Provide patient-focused care in common conditions related to ophthalmology , while working with health care professionals, including those from other disciplines like: Common emergencies in ophthalmology		
J-Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets.(Write a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and maintaining medical records and referral report)		

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(audit, logbook)	Observation -Written& oral communication	logbook
B. Appraises evidence from scientific studies(journal club)	Journal clubs - Discussion in seminars and clinical rounds	
C. Conduct epidemiological Studies and surveys.		
D. Perform data management including data entry and analysis.		
E. Facilitate learning of junior students and other health care professionals.		

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Maintain therapeutic and ethically sound relationship with patients.	-Simulations -Clinical round seminars -Lectures -Case presentations	Case presentation Log book Portfolios

G. Elicit information using effective nonverbal, explanatory, questioning, and writing skills.		
H. Provide information using effective nonverbal, explanatory, questioning, and writing skills.		
I. Work effectively with others as a member of a health care team or other professional group.		
J. Present a case in common health problems related to pediatrics	Clinical round seminars	Clinical Exam
K. Write a report in -Patients medical records - referral report	Senior staff experience	
L. Counsel patients and families about prevention and proper management of common pediatric health problems		

Professionalism

ILOs	Methods of teaching/ learning	Methods of Evaluation
M. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society	Observation of senior staff experience -Case taking	1- Objective structured clinical examination 2- Patient survey
N. Demonstrate a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent, business practices		
O. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		Objective structured clinical examination

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
P. Work effectively in relevant health care delivery settings and systems.	Observation of senior staff experience Case taking	Log book 360 global rating
Q. Practice cost-effective health care and resource allocation that does not compromise quality of care.		Check list evaluation of live or recorded performance
R. Assist patients in dealing with system complexities.		Patient survey

4. Contents (topic s/modules/rotation Unit Matrix

Time Schedule: Second part

Topic	Covered ILOs			
	Knowledge	Intellectual	Practical skills	General Skills
• Red Eye	A-,C-H	A-D	A-J	A-R
• Impaired vision	A-,C-H	A-D	A-J	A-R
• Eye pain	A-,C-H	A-D	A-J	A-R
• Common Visual disturbance	A-,C-H	A-D	A-J	A-R

<ul style="list-style-type: none"> • Cataract 	A-,C-H	A-D	A-J	A-R
<ul style="list-style-type: none"> • Glaucoma 	A-,C-H	A-D	A-J	A-R
<ul style="list-style-type: none"> • Exophthalmos 				
<ul style="list-style-type: none"> • Retinopathy due to systemic diseases 	A-,C-H	A-D	A-J	A-R
<ul style="list-style-type: none"> • Abnormal ocular mobility ,strabismus (especially in children) 	A-,C-H	A-D	A-J	A-R
<ul style="list-style-type: none"> • Ocular emergencies (eye trauma, burns or corneal ulceration) 	A-,C-H	A-D	A-G	A-E
<ul style="list-style-type: none"> • VISION SCREENING AND OCULAR EXAMINATION 	A-,C-H	A-D	A-J	A-R
<ul style="list-style-type: none"> • Direct battery hand-held ophthalmoscope 	B	C	D	D,E
<ul style="list-style-type: none"> • Hand-held flash light for ophthalmic exam 	B	C	D	D,E
<ul style="list-style-type: none"> • Snellen's chart - Tumbling E. for adult 	B	C	D	D,E
<ul style="list-style-type: none"> • Allen's figures for children 	B	C	D	D,E
<ul style="list-style-type: none"> • Pin hole disc 				

• Corneal foreign body removal	B	C	D	D,E
• Visual field examination.	B	C	D	D,E
• Proper funduscopic examination	B B	C C	D D	D,E D,E

5. Methods of teaching/learning:

- Didactic (lectures, seminars, tutorial)
- Case presentation
- Direct observation
- journal club,
- Clinical rounds
- Senior staff experience
- Case log
- Observation and supervision
- Hand on workshop
- Simulations

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

- Extra lectures
- Extra training

7. Assessment methods:

i. Assessment tools:

- Clinical examination

- oral examination
- Written examination
- Objective structure clinical examination (OSCE)
- Portfolios
- Procedure/case Log book
- Simulation
- Record review (report)
- Patient survey
- 360o global rating
- Check list evaluation of live or recorded performance

ii. Time schedule: At the end of the second year

iii. Marks: 50 marks

**Written exam, 1 hour in time (20 mark) + oral exam (10 mark)
+ clinical exam (20 mark)**

8. List of references

i. Lectures notes

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

ii. Essential books

- CURRENT Diagnosis & Treatment in Family Medicine, 4th Edition (4th ed.), Jeannette E. South-Paul, Samuel C. Matheny, Evelyn L. Lewis (2015)
- Textbook of Family Medicine, 9th Edition, Robert Rakel David Rake (2016)
- Oxford Handbook of General Practice , Fourth Edition , Chantal Simon ,Hazel Everitt , Françoise van Dorp (2014).

iii. Recommended books

- Principles and Practice in Ophthalmic Assisting: A Comprehensive Textbook by Janice K. Ledford COMT, Al Lens COMT (2017)

iv. Periodicals, Web sites, ... etc

- Journal of American Academy of Ophthalmology.
- British Journal of Ophthalmology.

v. Others : None

	9. Signatures
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Unit Coordinator: Prof . Dalia Galal Mahran	Head of the Department: Prof . Dalia Galal Mahran
Date:	Date:

ANNEX 2

Program Academic Reference Standards (ARS)

*1- Graduate attributes for master degree **in Family Medicine***

The Graduate (after residence training and master degree years of study) must:

- 1-** Have the capability to be a scholar, understanding and applying basics, methods and tools of scientific research and clinical audit in **Family Medicine**.
- 2-** Appraise and utilise scientific knowledge to continuously update and improve clinical practice in related **Family Medicine**.
- 3-** Acquire sufficient medical knowledge in the basic biomedical, clinical, behavioural and clinical sciences, medical ethics and medical jurisprudence and apply such knowledge in patient care in the field of **Family Medicine**.
- 4-** Provide patient care that is appropriate, effective and compassionate for dealing with common health problems and health promotion using evidence-based and updated information.
- 5-** Identify and share to solve health problems in his Family Medicine.
- 6-** Acquire all competencies –including the use of recent technologies- that enable him to provide safe, scientific, and ethical and evidence based clinical care including update use of new technology in **Family Medicine**.
- 7-** Demonstrate 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.

8- Function as supervisor, and trainer in relation to colleagues, medical students and other health professions.

9- Acquire decision making capabilities in different situations related to **Family Medicine**

10- Show 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.

11- Be aware of public health and health policy issues and share in system-based improvement of health care.

12- Show appropriate attitudes and professionalism.

13- Demonstrate skills of lifelong learning and maintenance of competence and ability for continuous medical education and learning in subsequent stages in **Family Medicine** or one of its subspecialties

2- Competency based Standards for clinical master degree graduates

2.1- Knowledge and understanding

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

2-1-A- Established basic, biomedical, clinical, epidemiological and behavioral sciences related conditions, problem and topics.

2-1-B- The relation between good clinical care of common health problems in the **Family Medicine** and the welfare of society.

2-1-C- Up to date and recent developments in common problems related to **Family Medicine**.

2-1-D- Ethical and medicolegal principles relevant to practice in **Family Medicine**.

2-1-E -Quality assurance principles related to the good medical practice in **Family Medicine**.

2-1-F- Ethical and scientific basics of medical research.

2.2- Intellectual skills:

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

2-2-A- Correlation of different relevant sciences in the problem solving and management of common diseases of **Family Medicine**.

2-2-B- Problem solving skills based on data analysis and evaluation (even in the absence of some) for common clinical situations related to **Family Medicine**.

2.2- C- Demonstrating systematic approach in studying clinical problems relevant to **Family Medicine**.

2-2-D- Making alternative decisions in different situations in **Family Medicine**.

2.3- Clinical skills

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

2-3-A - Provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.

2-3-B- Demonstrate patient care skills relevant to **Family Medicine** for patients with common diseases and problems.

2-3- C- Write and evaluate reports for situations related to the field of **Family Medicine**.

2.4- General skills

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

Competency-based outcomes for Practice-based Learning and Improvement

2-4-A- Demonstrate 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 all information sources and technology to improve his practice.

2-4-C- Demonstrate skills of teaching and evaluating others.

Competency-based objectives for Interpersonal and Communication Skills

2-4-D- Demonstrate 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- Demonstrate professionalism behaviors, 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- Demonstrate skills of effective time management.

2-4-H- 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	Professionalism	Systems- based practice
Didactic (lectures, seminars, tutorial)	X	X		X	X	X
journal club,	X	X	X			
Educational prescription	X	X	X	X	X	X
Present a case (true or simulated) in a grand round	X	X	X	X	X	
Observation and supervision	X		X	X	X	X
conferences		X	X	X		X
Written assignments	X	X	X	X	X	X
Oral assignments	X	X	X	X	X	X

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 Master Degree students.

Method	Practical skills	K	Intellectual	General skills			
	Patient care	K	I	Practice-based learning/Improvement	Interpersonal and communication skills	Professionalism	Systems-based practice
Record review	X	X	X		X	X	X
Checklist	X				X		
Global rating	X	X	X	X	X	X	X
Simulations	X	X	X	X	X	X	
Portfolios	X	X	X	X	X		
Standardized oral examination	X	X	X	X	X		X
Written examination	X	X	X	X			X
Procedure/ case log	X	X					
OSCE	X	X	X	X	X	X	X

Annex 4, Glossary of Master Degree doctors 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 MSc 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 MSc doctor's performance on checklists and provide feedback for history taking, physical examination, and communication skills. Physicians may also rate the MSc doctor's performance.
- ❖ Objective Structured Clinical Examination (OSCE) – A series of stations with standardized tasks for the MSc doctors to perform. Standardized patients and other assessment methods often are combined in an OSCE. An observer or the standardized patient may evaluate the MSc doctors.
- ❖ Procedure or Case Logs – MSc 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 a MSc 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 – MSc doctors, faculty, nurses, clerks, and other clinical staff evaluate MSc doctors from different perspectives using similar rating forms.
- ❖ Portfolios – A portfolio is a set of project reports that are prepared by the MSc doctors to document projects completed during the MSc 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 multiple-choice 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 – MSc 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 MSc doctors.

Annex 5, Program evaluation tools

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

Annex 6, Program Correlations:

مصفوفة توافق المعايير القومية القياسية العامة لبرامج الماجستير مع المعايير الأكاديمية المعتمدة من كلية الطب □ جامعة أسيوط لدرجة الماجستير في طب الأسرة

I- General Academic Reference Standards (GARS) versus Program ARS

1- Graduate attributes

Faculty ARS	NAQAEE General ARS for Postgraduate programs
1- Have the capability to be a scholar, understanding and applying basics, methods and tools of scientific research and clinical audit in <i>Family Medicine</i> .	1- إجادة تطبيق أساسيات و منهجيات البحث العلمي واستخدام أدواته المختلفة
2- Appraise and utilise scientific knowledge to continuously update and improve clinical practice in <i>Family Medicine</i> .	2- تطبيق المنهج التحليلي واستخدامه في مجال التخصص
3- Acquire sufficient medical knowledge in the basic biomedical, clinical, behavioural and clinical sciences, medical ethics and medical jurisprudence and apply such knowledge in patient care in <i>Family Medicine</i> .	3- تطبيق المعارف المتخصصة و دمجها مع المعارف ذات العلاقة في ممارسته المهنية
4- Provide patient care that is appropriate, effective and compassionate for dealing with common health problems and health promotion using evidence-based and update information.	4- إظهار وعيا بالمشاكل الجارية و الرؤى الحديثة في مجال التخصص
5- Identify and share to solve health problems in <i>Family Medicine</i> .	5- تحديد المشكلات المهنية و إيجاد حلول لها
6- Acquire all competencies that enable him to provide safe, scientific, ethical and evidence based clinical care including update use of new technology in <i>Family Medicine</i> .	6- إتقان نطاق مناسب من المهارات المهنية المتخصصة، واستخدام الوسائل التكنولوجية المناسبة بما يخدم ممارسته المهنية

<p>7- Demonstrate 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.</p> <p>8- Function as supervisor, and trainer in relation to colleagues, medical students and other health professions.</p>	<p>7-التواصل بفاعلية و القدرة على قيادة فرق العمل</p>
<p>9- Acquire decision making capabilities in different situations related to <i>Family Medicine</i>.</p>	<p>8-اتخاذ القرار في سياقات مهنية مختلفة</p>
<p>10- Show 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.</p>	<p>9- توظيف الموارد المتاحة بما يحقق أعلى استفادة و الحفاظ عليها</p>
<p>11- Be aware of public health and health policy issues and share in system-based improvement of health care.</p>	<p>10-إظهار الوعي بدوره في تنمية المجتمع و الحفاظ على البيئة في ضوء المتغيرات العالمية و الإقليمية</p>
<p>12- Show appropriate attitudes and professionalism.</p>	<p>11-التصرف بما يعكس الالتزام بالنزاهة و المصداقية و الالتزام بقواعد المهنة</p>
<p>13- Demonstrate skills of lifelong learning and maintenance of competence and ability for continuous medical education and learning in subsequent stages in <i>Family Medicine</i> or one of its subspecialties.</p>	<p>12-تنمية ذاته أكاديميا و مهنيا و قادرا علي التعلم المستمر</p>

2. Academic standard

Faculty ARS	NAQAAE General ARS for Postgraduate programs
2.1.A -Established basic, biomedical, clinical, epidemiological and behavioral sciences related conditions, problems and topics.	1-2-أ-النظريات و الأساسيات المتعلقة بمجال التعلم وكذا في المجالات ذات العلاقة.
2.1.B- The relation between good clinical care of common health problems in <i>Family Medicine</i> and the welfare of society.	1-2-ب-التأثير المتبادل بين الممارسة المهنية وانعكاسها علي البيئة.
2.1. C- Up to date and recent developments in common problems related to <i>Family Medicine</i> .	1-2-ج-التطورات العلمية في مجال التخصص.
2.1. D- Ethical and medicolegal principles relevant to practice in the <i>Family Medicine</i> .	1-2-د-المبادئ الأخلاقية و القانونية للممارسة المهنية في مجال التخصص.
2.1. E-Quality assurance principles related to the good medical practice in <i>Family Medicine</i> .	1-2-هـ- مبادئ و أساسيات الجودة في الممارسة المهنية في مجال التخصص
2.1. F- Ethical and scientific basics of medical research.	1-2-و- أساسيات وأخلاقيات البحث العلمي
2.2. A-Correlation of different relevant sciences in the problem solving and management of common diseases of <i>Family Medicine</i> .	2-2-أ- تحليل و تقييم المعلومات في مجال التخصص والقياس عليها لحل المشاكل
2.2. B- Problem solving skills based on data analysis and evaluation (even in the absence of some) for common clinical situations related to <i>Family Medicine</i> .	

2.2. B- Problem solving skills based on data analysis and evaluation (even in the absence of some) for common clinical situations related to <i>Family Medicine</i> .	2-2-ب- حل المشاكل المتخصصة مع عدم توافر بعض المعطيات
2.2. A-Correlation of different relevant sciences in the problem solving and management of common diseases of <i>Family Medicine</i> .	2-2-ج- الربط بين المعارف المختلفة لحل المشاكل المهنية
2.2. C- Demonstrating systematic approach in studying clinical problems relevant to the <i>Family Medicine</i> .	2-2-د- إجراء دراسة بحثية و /أو كتابة دراسة علمية منهجية حول مشكلة بحثية
2.4.A-Demonstrate 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	2-2-هـ- تقييم المخاطر في الممارسات المهنية في مجال التخصص
2.4.A-Demonstrate practice-based learning and Improvement skills that involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific improvements in patient evidence, care and risk management	2-2-و- التخطيط لتطوير الأداء في مجال التخصص
2.2.D- Making alternative decisions in different situations in the field of <i>Family Medicine</i> .	2-2-ز- اتخاذ القرارات المهنية في سياقات مهنية متنوعة
2.3.A- provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.	2-3-أ- إتقان المهارات المهنية الأساسية و الحديثة في مجال التخصص
2.3.B- Demonstrate patient care skills relevant to <i>Family Medicine</i> for patients with common	

diseases and problems.	
2.3.C- Write and evaluate reports for Situation related to <i>Family Medicine</i> .	2-3-ب- كتابة و تقييم التقارير المهنية
2.3.A- provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. 2.3.B- Demonstrate patient care skills relevant to that <i>Family Medicine</i> for patients with common diseases and problems.	2-3-ج- تقييم الطرق و الأدوات القائمة في مجال التخصص
2.4.D- Demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their families, and other health professionals.	2-4-أ- التواصل الفعال بأنواعه المختلفة
2.4.A-Demonstrate 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 all information sources and technology to improve his practice.	2-4-ب- استخدام تكنولوجيا المعلومات بما يخدم الممارسة المهنية
2.4.A-Demonstrate 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 all information sources and technology to improve his practice. 2.4.E-Demonstrate professionalism	2-4-ج- التقييم الذاتي وتحديد احتياجاته التعليمية الشخصية

behavior, as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.	
2.4.A-Demonstrate 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.	2-4-2-د- استخدام المصادر المختلفة للحصول على المعلومات و المعارف
2.4. C- Demonstrate skills of teaching and evaluating others.	2-4-2-هـ- وضع قواعد ومؤشرات تقييم أداء الآخرين
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.	2-4-2-و- العمل في فريق ، وقيادة فرق في سياقات مهنية مختلفة
2.4.G- Demonstrate skills of effective time management.	2-4-2-ز- إدارة الوقت بكفاءة
2.4.H- Demonstrate skills of self and continuous learning.	2-4-2-ح- التعلم الذاتي و المستمر

**Comparison between ARS and ILOS for master degree
in *Family Medicine***

(ARS)	(ILOs)
<p><u>2-1- Knowledge and understanding</u></p> <p>2-1-A- Established basic, biomedical, clinical, epidemiological and behavioral sciences related conditions, problem and topics.</p>	<p><u>2-1- Knowledge and understanding</u></p> <p>2-1-A- Explain the essential facts and principles of relevant basic sciences including: basics of Family Medicine, community medicine and public health ,Pharmacology and Research Methodology and Medical Statistics related to <i>Family Medicine</i>.</p> <p>2-1-B- Mention <u>essential facts</u> of clinically supportive sciences including Emergency care medicine and Radiodiagnosis and trumatology related to <i>Family Medicine</i>.</p> <p>2-1-C- Demonstrate sufficient knowledge of etiology, clinical picture, diagnosis, prevention and treatment of the common diseases and situations related to <i>Family Medicine</i>.</p>
<p>2-1-B The relation between good clinical care of common health problem in the <i>Family Medicine</i> and the welfare of society.</p>	<p>2-1-H- State the impact of common health problems in the field of <i>Family Medicine</i> on the society and how good clinical practice improve these problems.</p>
<p>2-1-C- Up to date and recent developments in common problems related to the field of <i>Family Medicine</i>.</p>	<p>2-1-C- Demonstrate sufficient knowledge of etiology, clinical picture, diagnosis, prevention and treatment of the common diseases and situations related to <i>Family Medicine</i>.</p> <p>2-1-D- Give the recent and update developments in the pathogenesis, diagnosis, prevention and treatment of common diseases related to <i>Family Medicine</i>.</p>
<p>2-1-D- Ethical and medicolegal Principles relevant to practice in the <i>Family Medicine</i> field.</p>	<p>2-1-E- Mention the basic ethical and medicolegal principles that should be applied in practice and are relevant to the field of <i>Family Medicine</i>.</p>

2-1-E- Quality assurance principles related to the good medical practice in the <i>Family Medicine</i> field.	2-1-F- Mention the basics and standards of quality assurance to ensure good clinical practice in the field <i>Family Medicine</i> .
2-1-F- Ethical and scientific basics of medical research.	2-1-G- Mention the ethical and scientific principles of medical research methodology.
<u>2-2- Intellectual skills:</u> 2-2-A- Correlation of different relevant sciences in the problem solving and management of common diseases of the <i>Family Medicine</i> .	<u>2-2- Intellectual skills:</u> 2-2-A- Correlate the facts of relevant basic and clinically supportive sciences with clinical reasoning, diagnosis and management of common diseases of the <i>Family Medicine</i> .
2-2-B- Problem solving skills based on data analysis and evaluation (even in the absence of some) for common clinical situations related to <i>Family Medicine</i> .	2-2-B- Demonstrate an investigatory and analytic thinking approach (problem solving) to common clinical situations related to <i>Family Medicine</i> .
2-2-C- Demonstrating systematic approach in studying clinical problems relevant to the <i>Family Medicine</i> field.	2-2-C- Design and /or present a case or review (through seminars/journal clubs.) in one or more of common clinical problems relevant to the <i>Family Medicine</i> field.
2-2-D Making alternative decisions in different situations in the field of the <i>Family Medicine</i> .	2-2-D- Formulate management plans and alternative decisions in different situations in the field of the <i>Family Medicine</i> .

continuous (ARS)	continuous (ILOs)
<p><u>2-3- Clinical skills:</u></p> <p>2-3-A- Provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.</p> <p>2-3-B- Demonstrate patient care skills relevant to that <i>Family Medicine</i> for patients with common diseases and problems.</p>	<p><u>2/3/1/Practical skills (Patient Care :)</u></p> <p>2-3-1-A- Obtain proper history and examine patients in caring and respectful behaviors.</p> <p>2-3-1-B- Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment for common conditions related to <i>Family Medicine</i>.</p> <p>2-3-1-C- Carry out patient management plans for common conditions related to <i>Family Medicine</i>.</p> <p>2-3-1-D- Use information technology to support patient care decisions and patient education in common clinical situations related to <i>Family Medicine</i>.</p> <p>2-3-1-E- Perform competently non invasive and invasive procedures considered essential for the <i>Family Medicine</i>.</p> <p>2-3-1-F- Provide health care services aimed at preventing health problems related to <i>Family Medicine</i>.</p> <p>2-3-1-G- Provide patient-focused care in common conditions related to <i>Family Medicine</i> while working with health care professionals, including those from other disciplines.</p>
<p>2-3-C- Write and evaluate reports for situations related to the field of <i>Family Medicine</i>.</p>	<p>-3-1-H Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets. (Write a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and maintaining medical records).</p>

<p><u>2-4- General skills</u></p> <p>2-4-A- Demonstrate 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</p>	<p><u>2/3/2 General skills</u></p> <p>2-3-2-A- Perform practice-based improvement activities using a systematic methodology (share in audits and risk management activities and use logbooks).</p> <p>2-3-2-B- Appraises evidence from scientific studies.</p> <p>2-3-2-C- Conduct epidemiological studies and surveys.</p>
<p>2-4-B- Use all information sources and technology to improve his practice.</p>	<p>2-3-2-C- Conduct epidemiological studies and surveys.</p> <p>2-3-2-D. Perform data management including data entry and analysis and using information technology to manage information, access on-line medical information; and support their own education.</p>
<p>2-4-C- Demonstrate skills of teaching and evaluating others.</p>	<p>2-3-2-E- Facilitate learning of students other health care professionals including their evaluation and assessment.</p>
<p>2-4-D- Demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their families, and other health professionals.</p>	<p>2-3-2-F- Maintain therapeutic and ethically sound relationship with patients.</p> <p>2-3-2-G- Elicit information using effective nonverbal, explanatory, questioning, and writing skills.</p> <p>2-3-2-H- Provide information using effective nonverbal, explanatory, questioning, and writing skills.</p> <p>2-3-2-I- Work effectively with others as a member of a health care team or other professional group.</p>

<p>2-4-E-Demonstrate professionalism behaviors, as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.</p>	<p>2-3-2-J- Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society.</p> <p>2-3-2-K- Demonstrate a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent, business practices.</p> <p>2-3-2-L-Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities.</p>
<p>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.</p>	<p>2-3-2-M-Work effectively in relevant health care delivery settings and systems including good administrative and time management</p> <p>2-3-2-N- Practice cost-effective health care and resource allocation that does not compromise quality of care.</p> <p>2-3-2-O- Assist patients in dealing with system complexities.</p>
<p>2-4-G- Demonstrate skills of effective time management</p>	<p>2-3-2-M-Work effectively in relevant health care delivery settings and systems including good administrative and time management</p>
<p>2-4-H- Demonstrate skills of self and continuous learning.</p>	<p>2-3-2-A- Perform practice-based improvement activities using a systematic methodology (share in audits and risk management activities and use logbooks).</p>

III-Program matrix A-Knowledge and Understanding

Course	Program covered ILOs							
	2/1/A	2/1/B	2/1/C	2/1/D	2/1/E	2/1/F	2/1/G	2/1/H
Course 1: - Basics of Family medicine	✓							
Course 2: Public health and Community medicine	✓							
Course 3: Pharmacology	✓							
Course 4: Research methodology and medical Statistics.	✓							
Course 5: Emergency care medicine.	✓	✓	✓	✓	✓	✓	✓	✓
Course 6: : Trumatology and Radiodiagnosis	✓	✓	✓	✓	✓	✓	✓	✓
Course 7: Internal medicine related to family medicine.	✓	✓	✓	✓	✓	✓	✓	✓
Course 8: Dermatology, venerology and andrology& Neurology and Psychiatry related to family medicine.	✓	✓	✓	✓	✓	✓	✓	✓
Course9: - Obstetrics and gynecology & family planning related to family medicine.	✓	✓	✓	✓	✓	✓	✓	✓
Course 10: - Pediatrics related to family medicine.	✓	✓	✓	✓	✓	✓	✓	✓
Course11: Surgery related to family medicine.(General surgery, orthopedic and Urology)	✓	✓	✓	✓	✓	✓	✓	✓
Course12: ENT surgery& Ophthalmology related to family medicine.	✓	✓	✓	✓	✓	✓	✓	✓

Intellectual

Course	Program covered ILOs			
	2/2/A	2/2/B	2/2/C	2/2/D
Course 1: - Basics of Family medicine	✓	✓	✓	✓
Course 2: Public health and Community medicine	✓			
Course 3: Pharmacology	✓	✓	✓	
Course 4: Research methodology and medical Statistics.	✓	✓	✓	✓
Course 5: Emergency care medicine.	✓	✓	✓	✓
Course 6: : Trumatology and Radiodiagnosis	✓	✓	✓	✓
Course 7: Internal medicine related to family medicine.	✓	✓	✓	✓
Course 8: Dermatology, venerology and andrology& Neurology and Psychiatry related to family medicine.	✓	✓	✓	✓
Course9: - Obstetrics and gynecology & family planning related to family medicine.	✓	✓	✓	✓
Course 10: - Pediatrics related to family medicine.	✓	✓	✓	✓
Course11: Surgery related to family medicine.)General surgery, orthopedic and Urology)	✓	✓	✓	✓
Course12: ENT surgery& Ophthalmology related to family medicine.	✓	✓	✓	✓

Practical Skills (Patient Care)

Course	Program covered ILOs							
	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: - Basics of Family medicine				✓	✓	✓	✓	✓
Course 2: Public health and Community medicine				✓	✓	✓	✓	✓
Course 3: Pharmacology								
Course 4: Research methodology and medical Statistics.				✓	✓			
Course 5: Emergency care medicine.	✓	✓	✓	✓	✓	✓	✓	✓
Course 6: : Trumatology and Radiodiagnosis	✓	✓	✓	✓	✓	✓	✓	✓
Course 7: Internal medicine related to family medicine.	✓	✓	✓	✓	✓	✓	✓	✓
Course 8: Dermatology, venerology and andrology& Neurology and Psychiatry related to family medicine.	✓	✓	✓	✓	✓	✓	✓	✓
Course9: - Obstetrics and gynecology & family planning related to family medicine.	✓	✓	✓	✓	✓	✓	✓	✓
Course 10: - Pediatrics related to family medicine.	✓	✓	✓	✓	✓	✓	✓	✓
Course11: Surgery related to family medicine.)General surgery, orthopedic and Urology)	✓	✓	✓	✓	✓	✓	✓	✓
Course12: ENT surgery& Ophthalmology related to family medicine.	✓	✓	✓	✓	✓	✓	✓	✓

General Skills

Course	Program covered ILOs							
	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: - Basics of Family medicine	✓	✓	✓	✓	✓	✓	✓	✓
Course 2: Public health and Community medicine	✓	✓	✓	✓	✓	✓	✓	✓
Course 3: Pharmacology				✓			✓	
Course 4: Research methodology and medical Statistics.	✓	✓	✓	✓	✓	✓	✓	✓
Course 5: Emergency care medicine.	✓	✓	✓	✓	✓	✓	✓	✓
Course 6: : Trumatology and Radiodiagnosis	✓	✓	✓	✓	✓	✓	✓	✓
Course 7: Internal medicine related to family medicine.	✓	✓	✓	✓	✓	✓	✓	✓
Course 8: Dermatology, venerology and andrology& Neurology and Psychiatry related to family medicine.	✓	✓	✓	✓	✓	✓	✓	✓
Course9: - Obstetrics and gynecology & family planning related to family medicine.	✓	✓	✓	✓	✓	✓	✓	✓
Course 10: - Pediatrics related to family medicine.	✓	✓	✓	✓	✓	✓	✓	✓
Course11: Surgery related to family medicine.)General surgery, orthopedic and Urology)	✓	✓	✓	✓	✓	✓	✓	✓
Course12: ENT surgery& Ophthalmology related to family medicine.	✓	✓	✓	✓	✓	✓	✓	✓

General Skills

Course	Program covered ILOs						
	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/O
Course 1: - Basics of Family medicine	✓	✓	✓	✓	✓	✓	✓
Course 2: Public health and Community medicine	✓	✓	✓	✓	✓	✓	✓
Course 3: Pharmacology		✓			✓		
Course 4: Research methodology and medical Statistics.	✓	✓	✓	✓	✓	✓	
Course 5: Emergency care medicine.	✓	✓	✓	✓	✓	✓	✓
Course 6: : Trumatology and Radiodiagnosis	✓	✓	✓	✓	✓	✓	✓
Course 7: Internal medicine related to family medicine.	✓	✓	✓	✓	✓	✓	✓
Course 8: Dermatology, venerology and andrology& Neurology and Psychiatry related to family medicine.	✓	✓	✓	✓	✓	✓	✓
Course9: - Obstetrics and gynecology & family planning related to family medicine.	✓	✓	✓	✓	✓	✓	✓
Course 10: - Pediatrics related to family medicine.	✓	✓	✓	✓	✓	✓	✓
Course11: Surgery related to family medicine.)General surgery, orthopedic and Urology)	✓	✓	✓	✓	✓	✓	✓
Course12: ENT surgery& Ophthalmology related to family medicine.	✓	✓	✓	✓	✓	✓	✓

(End of the program specifications)