



Assiut University



Faculty of medicine

Program Specification (2016/2017)

A- Basic Information

Program title: Medical Bachelor of medicine and surgery (M.B.B.Ch)

Program type: Single

Departments: The following are departments of faculty responsible for the program

- 1- Human anatomy and embryology
- 2- Histology
- 3- Medical physiology
- 4- Medical biochemistry
- 5- Pathology
- 6- Medical pharmacology
- 7- Medical microbiology and immunology
- 8- Medical Parasitology
- 9- Ophthalmology
- 10- Ear, nose and throat
- 11- Forensic medicine and clinical toxicology
- 12- Public health and Community medicine
- 13- Internal medicine
- 14- Tropical medicine and gastrointestinal tract
- 15- Neurology and psychiatry
- 16- Cardiovascular medicine
- 17- Dermatology and Venerology
- 18- Clinical pathology
- 19- Pediatrics
- 20- Obstetrics and gynecology
- 21- General surgery
- 22- Orthopedics
- 23- Urology
- 24- Brain and Neurosurgery
- 25- Plastic surgery
- 26- Cardiothorathic surgery
- 27- Vascular surgery
- 28- Anesthesia and intensive care
- 29- Chest diseases
- 30- Diagnostic radiology

Date of specifications approval: 9-2016

B- Professional Information

1- General aims of the program:-

The goal of undergraduate medical education in Assiut Faculty of Medicine to produce physicians who are prepared to serve the fundamental purposes of medicine. To this end, physicians must possess the attributes that are necessary to meet their individual and collective responsibilities to society.

- 1-1- Graduates must be compassionate sympathetic in caring for patients and must be honest in all professional dealings.
- 1-2- They must apply rules of medical ethics in medical education and practice of medicine.
- 1-3- Graduates must understand the scientific basis of medicine and be able to apply this understanding to the practice of medicine.
- 1-4- Graduate must have sufficient knowledge of the structure and function of the body and its systems and the structure and function of the body and its major organ systems and of the molecular, cellular, and biochemical mechanisms that maintain the body's homeostasis in order to prevent disease and to incorporate wisely modern diagnostic and therapeutic modalities in their practice.
- 1-5- They must engage in lifelong learning to stay current in their understanding of the foundations of scientific basis of medicine and be able to enroll in post graduate studies and researches.
- 1-6- They must be highly skilled in providing care to individual patients.
- 1-7- They must demonstrate appropriate communication, intellectual, clinical and practical skills that enable them to maintain normal health, provide primary health care and deal with common health problems in the society.
- 1-8- They must show appropriate attitudes and professionalism that enable them to work collaboratively with other physicians; other health care professionals and individuals representing a wide variety of community agencies and to function as members of a team addressing individual or population-based health care issues.
- 1-9- They must acquire basic administrative capabilities that enable them to use systematic approaches for promoting, maintaining, and improving the health of individuals and populations

2- Intended learning outcomes (ILOs)

2-1- Knowledge & understanding:

Before graduation the student should have demonstrated, the following knowledge outcomes:

- A.1- **Mention** principles of medical ethics
- A.2- **Define** the threats to medical professionalism posed by the conflicts of interest which can occur in the practice of medicine.
- A.3- **State the concepts** of medicolegal aspects of medical practice
- A.4- Develop the capacity to recognize common medical errors and malpractice
- A.5- Describe the normal structure and function of the body and of each of its major systems.
- A.6- **Define** different stages of the life cycle including the diagnosis of death and how these affect normal structure and function (**including effect of growth, development, and ageing on the individual and his family**)
- A.7- Mention the molecular, biochemical, and cellular mechanisms that are important in maintaining the body's homeostasis
- A.8- Mention the various causes (genetic, developmental, metabolic, toxic, microbiologic, autoimmune, neoplastic, degenerative, and traumatic) and mechanisms of diseases and the ways in which they operate on the body (pathogenesis)
- A.9- Describe the altered structure and function (pathology and pathophysiology) of the body and its major systems that are seen in various diseases and conditions and integrate it in clinical conditions.
- A.10- Define principles of pharmacological and non-pharmacological therapies, their efficacy in the management and symptomatic relief of diseases, and their adverse reactions and interactions
- A.11- Describe the etiology, pathogenesis, clinical features, complications, principles of diagnosis and differential diagnosis of common and life-threatening illnesses affecting the body and each of its major organ systems, presenting throughout the age spectrum.
- A.12- Describe principles of prevention and management (including the relative risks and benefits of treatment options) of common and life-threatening illnesses affecting the body and each of its major organ systems, presenting throughout the age spectrum.

- A.13- Mention indications and basics for invasive and noninvasive available interventions and appropriate use of informed consent and describe principles of pre-, peri and post-operative care
- A.14- Express sufficient knowledge about relieving pain and ameliorating the suffering of patients
- A.15- Mention principles of population health & health system including
- a. Determinant of health, principles of disease prevention and early detection of common community health problems.
 - b. Principles and organization of national health care system
 - c. Basics of health, patient's safety and safety procedures during clinical examination.
- A.16- Define a population, its demography, cultural and socioeconomic constitution, circumstances of living, and health status; and understand how to gather health information about this population in order to better serve its needs.
- A17- Define principles of disease surveillance and screening, communicable disease control, health promotion, and health needs assessment.
- A18 – State how population-based approaches to health care services can improve medical practice and understand the principles of clinical audit.
- A.19- Demonstrate an understanding of the power of the scientific method in establishing the causation of disease and efficacy of therapy
- A.20- Demonstrate an understanding of the need to engage in lifelong learning to stay abreast of relevant scientific advances
- A.21- Define basics of normal and abnormal human behavior and relationships between individuals and their family/partners, immediate social groups, and society.

2-2- Intellectual skills

- B.1- Integrate basic medical facts with clinical data
- B 2- Reason deductively in solving clinical problems (recognize, define and prioritize problems; analyze, interpret, objectively evaluate and prioritize information, and recognizing its limitations)
- B.3- Integrate the results of history, physical and laboratory test findings into a meaningful diagnostic formulation and set up differential diagnosis.
- B.4- Select and locate, when possible, the crucial pieces of missing clinical information, and determine how and when it is appropriate to act on incomplete information.
- B.5- Integrate verbal and statistical sources of medical knowledge with the facts of a specific clinical case
- B.6- Construct appropriate management strategies (both diagnostic and therapeutic) for patients with common conditions, both acute and chronic, including medical, psychiatric, and surgical conditions, and those requiring short- and long-term rehabilitation.

- B.7- Outline an initial course of management for stabilization of patients with serious conditions requiring critical care
- B.8- Classify factors that place individuals at risk for disease or injury, to select appropriate tests for detecting patients at risk for specific diseases or in the early stage of disease and to determine strategies for responding appropriately
- B.9- Retrieve, analyzes, and synthesizes, in simple examples, relevant and current data and literature, using information technologies and library resources, in order to solve a clinical problem (EBM)
- B.10- Propose clinical decisions utilizing methods, which integrate the best research evidence with clinical expertise and patient values (EBM)
- B.11- Recognize and cope with uncertainty by:
 - a- Accepting that uncertainty is unavoidable in the practice of medicine;
 - b- Using appropriate cognitive and intellectual strategies to deal with uncertainty when it arises
- B.12- Demonstrate simple insight into research and scientific method through:
 - a- Understanding and critical appreciation of methodology;
 - b- Choice and application of appropriate quantitative and qualitative methodologies

2-3- Skills

2-3-1- Professional and practical skills

Before graduation the student will have demonstrated, the following Skill outcomes:

- C.1- Examine and identify the normal anatomy of the body and of each of its major organ systems grossly and at microscopic level
- C.2- Perform tests showing the molecular, biochemical, and cellular mechanisms that are important in maintaining the body's homeostasis
- C.3- Examine and identify the macroscopic and microscopic criteria of the altered structure and function (pathology and pathophysiology) of the body and its major organ systems that are seen in various diseases and conditions
- C.4- Examine and identify macroscopically, microscopically and chemically various causes (genetic, developmental, metabolic, toxic, microbiologic, autoimmune, neoplastic, degenerative, and traumatic) of diseases
- C.5- Obtain an accurate medical history that covers all essential aspects of the history, including issues related to age, gender, and socio-economic status.
- C.6- Perform both a complete and an organ system specific examination, including a mental status examination, that is culturally sensitive and appropriate to age, gender, acute/chronic clinical condition and record patients' data appropriately.
- C.7- Read and Interpret the results of, commonly used diagnostic procedures and commonly-employed laboratory tests, including tests of blood and other body fluids, modalities, and other basic specific tests such as electrocardiography

- C.8- Identify the most frequent clinical, laboratory, radiological, and pathologic manifestations of common diseases to be able to formulate a meaningful diagnostic and treatment plan for patients with common diseases.
- C.9- Write safe prescriptions of different types of drugs and work out drug dosage based on patient age, weight and health state.
- C.10 – Diagnose patients with immediately life threatening cardiac, pulmonary, or neurological conditions regardless of etiology, and institute appropriate initial therapy
- C.11- Perform basic technical procedures in simulated practice during the program and in real practice at house officer year including:
- a) Perform venepuncture and collect blood samples.
 - b) Insert a cannula into peripheral veins.
 - c) Give intramuscular, subcutaneous and intravenous injections.
 - d) Perform suturing of superficial wounds and drain subcutaneous abscess
 - e) Demonstrate competency in cardiopulmonary resuscitation and basic life-support.
 - f) Administer compulsory childhood vaccines.
 - g) Perform and interpret basic bedside laboratory tests.
 - h) Perform and interpret ECG.
 - i) Administer basic oxygen therapy.
 - j) Perform and interpret basic respiratory function tests
 - k) Use a nebuliser for administration of inhalation therapy.
 - l) Insert a nasogastric tube.
 - m) Perform bladder catheterization.
 - n) Perform procedure of normal labor
 - o) Perform first aid measures for injured and critically ill patients
 - p) Adopt suitable measures for infection control
- C.12- Survey a population, its demography, cultural and socioeconomic constitution, circumstances of living, and health status; and gather health information about this population in order to better serve its needs
- C.13- Apply principles of disease surveillance and screening, communicable disease control, health promotion, and health needs assessment.

2-3-2- General and transferable skills

- D.1- Communicate effectively with patients, their families and the community through verbal, written and other non-verbal means of communication, respecting the differences in beliefs and backgrounds among patients and students
- D.2- Establish professional relationships with patients, their families (when appropriate) and community that are characterized by understanding (different cultural beliefs and values), trust, respect, empathy and confidentiality.
- D.3-Deliver information to the patient and family (as appropriate) in a human manner, and in such a way that it is easily understood and encourages discussion and promotes the patient's participation in decision-making.
- D.4- Gather information and develop and interpret a treatment plan, while considering the influence of factors such as the patient's age, gender, ethnicity, cultural and spiritual values, socioeconomic background, ethical conditions, and communication challenges. Treat all patients equally and avoiding stigmatizing any category regardless of beliefs, culture, and behaviors.

- D.5- Communicate in a cooperative manner with health professionals for effective patients management and be aware of and understand the national code of ethics
- D.6- Develop a care plan for a patient he/she has assessed, including investigation, treatment and continuing care, in collaboration with the members of the interdisciplinary team.
- D.7- Work efficiently through systems, collaborate with other members of the health care team, and accept appropriate responsibility for the health of populations as an effective team leader.
- D.8- Participate in community activities directed at improving health, utilizing the best evidence, effective teamwork and communication skills.
- D.9- Apply safety and infection control measures during practice
- D.10- Demonstrate compassionate treatment of patients and respect for their privacy and dignity and beliefs especially in situations of stress and grief and ensure confidentiality of patients' information.
- D11- Retrieve, manage, and manipulate information by all means, including electronically;
- D.12- Present information clearly in written, electronic and oral forms, and communicates ideas and arguments effectively
- D.13- Be reliable and responsible in fulfilling obligations and cope with changing work environment.
- D.14- Recognize and accept the limitations in his/her knowledge and clinical skills and refers patients at to appropriate health facility at an appropriate stage, and demonstrate a commitment to continuously improve his/her knowledge, ability and skills and leadership, always striving for excellence.(Adopt the principles of lifelong learning).
- D.15- Use computers efficiently. Analyze and use numerical data including the use of simple statistical methods.
- D.16- Effectively manages time and resources and set priorities and ensures cost effectiveness of the management
- D.17- Evaluate their work and that of others using constructive feed back.

3- Academic standards for the program:-

National Academic Reference Standards (NARS)

4- Benchmarks

Learning Objectives for Medical Student Education (Guidelines for Medical Schools) by the Association of American Medical Colleges –

5- Contents and Structure of the program

5.a Duration of the program: 6 years plus house officer year

5. b. Structure of the program

5.b.i. Total number of Hours:	Lectures	2320
	Practical/Clinical / tutorial	2464
	Total	4784
	No elective courses	

5.b.ii. Basic courses: 2100 (43.9%)

Other courses:

- (English language) 30 hours (0.63%)
- Human and social science courses: 60 hours (1.25%)
- Computer science Course 30 hours (0.63%)
- . 5.b.iii. Clinical year's courses: 2564 hours (53.59%)

5.b.iv. Clinical training and field visits:

- Clinical training in Assiut University Hospitals
- Community medicine field visits training at one of the villages of upper Egypt.
- Optional field training in summer for the first, second, and third years students
- Pre-employment compulsory house officer training at Assiut University Hospitals and other hospitals belong to ministry of health for one year

5.c. Levels of the program: not applicable

5.d. Courses of the program

COURSE	a 1	a 2	a 3	a 4	a 5	a 6	a 7	a 8	a 9	a 1 0	a 1 1	a 1 2	a 1 3	a 1 4	a 1 5	a 1 6	a 1 7	a 1 8	a 1 9	a 2 0	a 2 1			
Anatomy 1					X	X															X			
Histology 1					X	X																X		
Biochemistry 1						X	X	X	X													X		
Physiology 1					X	X	X															X		
English																						X		
Anatomy 2					X	X																X		
Histology 2					X	X																X		
Biochemistry 2						X	X	X	X													X		
Physiology 2					X	X	X															X		
Psychology																						X	X	
Human rights																						X	X	
Pharmacology										X				X								X	X	
Pathology						X		x	X		X											X	X	
Microbiology								X			X											X	X	
Parasitology								X			X											X	X	
Community								X				X			X	X	X	X	X	X	X	X	X	
Forensic	X	X	X	X		X		X							X							X	X	
ENT	X			X	X	X		X	X	X	X	X	X	X	X							X	X	
ophthalmology	X			X	X	X		X	X	X	X	X	X	X	X							X	X	
OB/GYN	X			X	X	X		X	X	X	X	X	x	x	X							X	X	
Pediatrics	X			X	X	X		X	X	X	X	X	x	x	X							X	X	X
Medicine	X			X	X	X		X	X	X	X	X	X	X	X							X	X	
Surgery	X			X	X	X		X	X	X	X	X	X	X	X							X	X	

COURSE	b1	b2	b3	b4	b5	b6	b7	b8	b9	b10	b11	b12
Anatomy 1	X											
Histology 1	X											
Biochemistry 1	X							X				
Physiology 1	X											
English												
Anatomy 2	X											
Histology 2	X											
Biochemistry 2	X							X				
Physiology 2	X											
Psychology												
Human rights												
Pharmacology	X											
Pathology	X							X				
Microbiology	X							X				
parasitology	X							X				
Community		X			X			X	X	X	X	X
Forensic	X	X										
ENT	X	X	X	x	x	x	x	x	X	X	X	
ophthalmology	X	X	X	x	x	x	x	x	X	X	X	
OB/GYN	X	X	X	x	x	x	x	x	x	x	X	
Pediatrics	X	X	X	x	x	x	x	x	X	X	X	
Medicine	X	X	X	x	x	x	x	x	x	x	X	
Surgery	X	X	X	x	x	x	x	x	X	X	X	

COURSE	C1	C2	C3	C4	C5	C6	C7	C8	C9	C10	C11	c12	c13
Anatomy 1	x												
Histology 1	x												
Biochemistry 1		x		X				X					
Physiology 1		x											
English													
Anatomy 2	x												
Histology 2	x												
Biochemistry 2		x		X				X					
Physiology 2		x											
Psychology													
Human rights													
Pharmacology									x				
Pathology			x	x				X					
Microbiology				x									
parasitology				x									
Community								X			X	X	X
Forensic				X			X	X					
Ear, nose and throat	X				X	X	X	X	X	X	X		
ophthalmology	X				X	X	X	X	X	X	X		
OB/GYN	X		X		X	X	X	X	X	X	X		
Pediatrics					X	X	X	X	X	X	X		
Medicine				X	X	X	X	X	X	X	X		
Surgery	X		X		X	X	X	X	X	X	X		

COURSE	d1	d2	d3	d4	d5	d6	d7	d8	d9	d10	d11	d12	d13	D14	d15	d16	D17
Anatomy 1											X	X	X	X	X	X	X
Histology 1											X	X	X	X	X	X	X
Biochemistry 1									X		X	X	X	X	X	X	X
Physiology 1											X	X	X	X	X	X	X
English											X						
Anatomy 2											X	X	X	X	X	X	X
Histology 2											X	X	X	X	X	X	X
Biochemistry 2									X		X	X	X	X	X	X	X
Physiology 2											X	X	X	X	X	X	X
Psychology																	
Human rights																	
Pharmacology											X	X	X	X	X	X	X
Pathology											X	X	X	X	X	X	X
Microbiology									X		X	X	X	X	X	X	X
parasitology											X	X	X	X	X	X	X
Community	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Forensic	X				X				X	X	X	X	X	X	X	X	X
Ear, nose and throat	X	X	X	X	X	X	X		X	X	X	X	X	X	X	X	X
ophthalmology	X	X	X	X	X	X	X		X	X	X	X	X	X	X	X	X
OB/GYN	X	X	X	X	X	X	X		X	X	X	X	X	X	X	X	X
Pediatrics	X	X	X	X	X	X	X		X	X	X	X	X	X	X	X	X
Medicine	X	X	X	X	X	X	X		X	X	X	X	X	X	X	X	X
Surgery	X	X	X	X	X	X	X		X	X	X	X	X	X	X	X	X

Level/Year of Program year one

Code No.	Course Title	No. of Units	No. of weeks	Total no. of hours			Program ILOs covered
				Lect.	practical	tutorial	
AMed01	Anatomy 1	6	30	120	120		A5,a6,a20,b1,c1, d11,d12 ,d13,d14, d15,d16,d17.
AMed03	Histology 1	10	30	60	60		A5,a6,a20,b1,c1,d11, d12 ,d13,d14, d15,d16,d17.
AMed05	Biochemistry	10	30	75	30	30	A6, a7,a8,a9,a20, b1,b8, c2,c4,c8, d9, d11, d12,d13,d14,d15,d16,d17.
AMed07	Physiology 1	7	30	150	30	30	A5,A6, a7,a20, b1 ,c2,d11, d12,d13,d14,d15,d16,d17.
AE01	English	1	30	30			A20, d11

Level/Year of Program year 2

Code No.	Course Title	No. of U	No. Of Weeks	Total no. of hours			Program ILOs covered
				Lect.	practical	tutorial	
AMed02	Anatomy 2	4	30	120	120		A5,a6,a20,b1,c1,d11, D12,d13,d14, d15,d16,d17.
AMed04	Histology 2	13	30	60	60		A5,a6,a20,b1,c1,d11, d12,d13,d14, d15,d16,d17.
AMed06	Biochemistry 2	11	30	75	30	30	A6, a7,a8,a9,a20, b1,b8, c2,c4,c8, d9, d11, d12,d13,d14,d15,d16,d17
AMed08	Physiology 2	8	30	150	30	30	A5,A6, a7,a20, b1 ,c2,d11, d12,d13,d14,d15,d16,d17.
AMed09	Psychology	1	30	30			A21.
L01	Human rights	1	30	30			A21.

Level/Year of Programme...year 3

Code No.	Course Title	No. of Units	No. Of weeks	Total no. of hours			Program ILOs covered
				Lect.	practical	tutorial	
AMed010	pharmacology	23	30	120	30	30	A10,a14,a19,a20,b1,c9,d11,d12,d13,d14,d15,d16, d17.
AMed011	Pathology	30	30	120	90	30	A6,a8,a9,,a11,a19,a20,b1,b8,c3,c4,c8d11,d12,d13,d14,d15,d16,d17
AMed012	Microbiology	8	30	90	60		A8, a11,a19,a20,b1,b8,c4,d9, d11,d12,d13,d14,d15,d16,d17
AMed013	Parasitology	2	30	60	60		A8,a11,a19,a20,b1,b8,c4,d11,d12,d13,d14,d15,d16,d17

Level/Year of Programme...year 4

Code No.	Course Title	No. of Units	No. Of weeks	Total no. of hours			Program ILOs covered
				Lect.	practical	tutorial	
AMed014a	Community health	18	32	128	32 + 8 Hours field visits	32	A8,a12,a15,a16,a17,a18,a19,a20,b2,b5,b8,b9,b10,b11,b12, ,c8,c11c12,c13,d1,d2,d3,d4,d5,d6,d7,d8,d9,d10,d11,d12,d13,d14,d15,d16,d17
AMed015	Ear, nose and throat	4	4	64	30		A1,a4,a5,a6,a8,a9,a10,a11,a12,a13,a14,a15,a19,a20,b1,b2,b3,b4,b5,b6,b7,b8,b9,b10,b11,c1,c5,c6,c7,c8,c9,c10,c11,d1,d2,d3,d4,d5,d6,d7,d9,d10,d11,d12,d13,d14,d15,d16,d17
AMed016	Ophthalmology	19	8	80	80		A1,a4,a5,a6,a8,a9,a10,a11,a12,a13,a14,a15,a19,a20,b1,b2,b4,b5,b6,b7,b8,b9,b10b11,c1,c5,c6,c7,c8,c9,c10,c11,d1,d2,d3,d4,d5,d6,d7,d9,d10,d11,d12,d13,d14,d15,d16,d17
AMed017	Forensic medicine	29	32	80	64		A1,a2,a3,a4,a8,a15,a19,a20,b1,b2,b12,c4,c7,c8d1,d5,d9,d10,d11,d12,d13,d14,d15,d16,d17

Level/Year of Programme...year 5.

Code No.	Course Title	No. of Units	No. Of weeks	Total no. of hours			Program ILOs covered
				Lect.	practical	tutorial	
AMed020	Internal Medicine	14	24	216	552		A1,a4,a5,a6,a8,a9,a10,a11, a12,a13,a14,a15,a19,a20,b1, b2,b3,b4,b5,b6,b7,b8,b9,b10, b11,c5,c6,c7,c8,c9,c10,c11,d1, d2,d3,d4,d5,d6,d7,d9,d10, d11,d12,d13,d14,d15,d16,d17
AMed019	Pediatrics	16	12	108	132		A1,a4,a5,a6,a8,a9,a10,a11,a12, a13,a14,a15,a19,a20,a21,b1,b2 ,b3, b4,b5,b6,b7,b8,b9,b10,b11,c5, c6,c7,c8,c9,c10,c11,d1,d2,d3,d 4, d5,d6,d7,d9,d10,d11,d12,d13,d 14,d15,d16,d17

Level /year of programme Year 6

Code No.	Course Title	No. of Units	No. Of weeks	Total no. of hours			Program ILOs covered
				Lect.	practical	tutorial	
AMed018	OB/GYN	20	12	108	274		A1,a4,a5,a6,a8,a9,a10,a11,a12,a 13,a14,a15,a19,a20,b1,b2,b3, b4,b5,b6,b7,b8,b9,b10,b11, ,c1,c3,c5,c6,c7,c8,c9,c10,c11,d 1,d2,d3,d4,d5,d6,d7,d9,d10,d11, d12,d13,d14,d15,d16,d17
AMed021	Surgery	27	24	216	360		A1,a4,a5,a6,a8,a9,a10,a11, a12,a13,a14,a15,a19,a20,b1,b2, b3,b4,b5,b6,b7,b8,b9,b10,b11, c1,c3,c5,c6,c7,c8,c9,c10,c11,d1 ,d2,d3,d4,d5,d6,d7,d9,d10,d11, d12,d13,d14,d15,d16,d17

6- Courses contents

Courses specifications (Annex)

7- Program admission requirements

The process of application, selection and approval for admission in all Egyptian State Universities is carried out through an admission office supervised by the Ministry of Higher Education. Applicants are classified according to their high school degree (Egyptian or international qualification) and they are ranked according to their high school grades. Students with the highest rank are prioritized for acceptance. Ninety five percent of admissions are reserved for those holding the Egyptian high (secondary) school certificate while the remaining 5% are reserved for recognized international and Arab qualifications (e.g. IGCSE, American High School Diploma, International Baccalaureate, or Arab High school degree etc.)

Applicants for medical school always have the highest degrees among high school graduates which may be an indication of their high learning capability

8- Regulations for progression and program completion

1- For **the first stage (the first three years of study)** the regulations for student progression are as follows:

- The student must attend more than 75% of the tutorials and laboratory exercises (practical hours) for each course, as a condition for taking the final examination in the attended courses. Based on the request of the council of the concerned department and the approval of the faculty council, the student who does not meet the 75% attendance will be deprived from taking the final examination. In this case, the student is considered to fail in the courses he deprived from taking their final examination.
- Methods of assessment include written, oral, and practical examinations. Both midterm and final evaluations are used. Marks allocated to midterm examinations constitute 20% of the total marks, **whereas the final written (including practical) and final oral examinations are given 80% of the total marks** . The student should achieve 60% of the total marks and 30% of the marks of the written examination for each course, to be considered completing this course. All courses are compulsory and the student should complete all courses in the second year to progress to the third year. The student is promoted to from the first to the second year if he succeeds in courses of his year or he fails in not more two courses in this year. The student can progress from this stage to the next stage of clinical years only if he succeeded in all courses of this stage
- Final examinations for each of the three years are held in two rounds (May and September). For those succeeding in the second round, their mark is reduced to that of the upper limit of "PASS" grade •.The mark and grade remain the same without change for the student who failed to appear for an examination due to an acceptable excuse.

2- **For the second stage (next three clinical years)**, the regulations for student progression are as follows:

- The student must attend more than 75% of the tutorials and clinical hours for each course, as a condition for taking the final examination in the attended courses. Based on the

request of the council of the concerned department and the approval of the faculty council, the student who does not meet the 75% attendance will be deprived from taking the final examination. In this case, the student is considered to fail the courses he deprived from taking their final examination.

- Methods of assessment include written, oral, and practical examinations. Both midterm and final evaluations are used. Marks allocated to midterm examinations constitute 20% of the total marks, **whereas the final written (including practical/clinical) and final oral examinations are given 80% of the total marks.** The student should achieve 60% of the total marks and 30% of the marks of the written examination for each course, to be considered completing this course. All courses are compulsory and students allowed to progress from one of these years to the other without restrictions provided that they will finally succeed in all the courses before graduation. Final examinations for each of the three years are held in two rounds per year. However, For those succeeding in any round of examinations other than the first, their mark is reduced to that of the upper limit of "PASS" grade •.The mark and grade remain the same without change for the student who failed to appear for an examination due to an acceptable excuse.

9- Student evaluation

9-A- student teaching methods

Teaching method	Definition of the method	Type of Learning objective/ILO
Brainstorming (within a lecture or class teaching)	* A list of ideas, thoughts, or alternative solutions that focus on a specific topic or problem is generated. Stimulates thought and creativity and is often used along with group discussions.	Knowledge ILOS
Interactive Presentation known as a lecture or illustrated lecture	* Verbal presentation of information by the teacher, in which presentation of content is supplemented with a variety of questions, interactions, visual aids, and instructional materials.	Knowledge ILOS
Discussion (within a lecture or class or lab teaching)	* Interactive process in which students share their ideas, thoughts, questions, and answers in a group setting with a facilitator.	Knowledge ILOS
Panel Discussion (within a lecture or class or lab teaching)	* Discussion related to the learning objectives presented by a panel of individuals or content experts).	Knowledge ILOS
Demonstration (within lab/ skill lab or bed side teaching)	* Method in which the teacher presents the steps necessary for the completion of a procedure or clinical task or activity.	Clinical/practical skills
Practical/ Clinical Simulation (within lab/ skill lab or bed side teaching) (suitable for emergency situations)	* A representation of a real or hypothetical patient management situation.	Clinical/practical skills
Facilitated Practice (within lab/ skill lab or bed side teaching)	* Opportunity for students to practice or apply (with models, simulated patients, or real patients) the content presented in theoretical sessions. The teacher explains procedures or routines, demonstrates tasks, models the correct performance of the skill, and observes and interacts with students while providing ongoing feedback	Clinical/practical skills
Role Play (within a lecture or class or lab teaching)	* (Learning activity in which students play out roles in a simulated situation that relates to one or more learning objectives).	Clinical/practical skills
Case Study (within a lecture or class or lab teaching)	* Method using realistic scenarios that focus on a specific Issue, topic, or problem. Students typically read, study, and react to the case study individually or in small groups.	Intellectual skills
Clinical/practical Simulation	* (A representation of a real or hypothetical patient management situation).	Intellectual skills
Facilitated Practice	* (Opportunity for students to practice or apply (with models, simulated patients, or real patients) the content presented in theoretical sessions. The teacher explains procedures or routines, demonstrates tasks, models the correct performance of the skill, and observes and interacts with students while providing ongoing feedback)	Intellectual skills

Teaching method	Definition of the method	Type of Learning objective/ILO
Individual or Group Tutorial (within a lecture or class or lab teaching)	* Study of information by one or more students under the Instruction of a tutor or mentor.	Intellectual skills
Role Play	* Learning activity in which students play out roles in assimilated situation that relates to one or more learning Objectives.	Intellectual skills
Case Study	* Method using realistic scenarios that focuses on a specific Issue, topic, or problem. Students typically read, study, and react to the case study individually or in small groups.	Communication and general skills and attitudes
Clinical/practical Simulation	* (A representation of a real or hypothetical patient management situation).	Communication and general skills and attitudes
Facilitated Practice	* (Opportunity for students to practice or apply (with models, simulated patients, or real patients) the content presented in theoretical sessions. The teacher explains procedures or routines, demonstrates tasks, models the correct performance of the skill, and observes and interacts with students while providing ongoing feedback).	Communication and general skills and attitudes
Individual or Group Tutorial	* Study of information by one or more students under the Instruction of a tutor or mentor	Communication and general skills and attitudes
Role Play	* Learning activity in which students play out roles in a simulated situation that relates to one or more learning Objectives.	Communication and general skills and attitudes
Field visits	* Learning situation outside the regular classroom, in which students travel to another location in a facility or outside The facility.	Communication and general skills and attitudes

9-B- Student Assessment methods:

Method	Definition	Type of ILOS tested	Suitable for
1-Drills, quizzes, and practice tests	* Drills are verbal question and answer during a classroom or practical session. Quizzes and practice tests are short versions of written examinations, and are designed to help and prepare students for a Summative assessment.	-Knowledge, intellectual	-Formative assessment
2-Written exercises	*Written exercises involve asking students to read and then answer questions to check their understanding of the reading. They can also involve asking students to read a case study, or view a video, slides, or photographs and then respond to related questions.	-Knowledge, intellectual,	-Formative assessment
3-Case studies, clinical scenarios, and patient management problems	*A brief case or situation is provided with information about a situation and several objective questions (e.g., multiple-choice, short-answer) are asked. The student reads the scenario and then answers the series of questions.	-Knowledge, intellectual,	-Formative assessment, Summative midterm and final examinations
4-Project reports	*The student completes a project (e.g., read a chapter or article, interview a patient) and then writes a report.	-Knowledge, intellectual, general	-Formative assessment, Summative midterm
5-Essay examinations	*An essay question can be written on any subject and is a common type of written examination. Essay questions are easy to write and can test the students' ability to organize and express ideas.	-Knowledge,	-Formative assessment, and final written examinations
6-Objective written examinations	*These include multiple-choice, true-false, matching, and short-answer assessment items. Note that teachers may work together to develop a Set or bank of test items linked to learning objectives so that different items can be used on each test.	-Knowledge, intellectual,	-Formative assessment, Summative midterm and final examinations

Method	Definition	Type of ILOS tested	Suitable for
7-Structured practical Examinations	*The structured practical examination can assess knowledge, skills, and attitudes. It is not really an assessment method but rather an administrative structure in which a variety of assessment methods can be incorporated. Typically students rotate through a series of stations Where they answer questions (orally or written), or perform tasks under observation.	-practical, intellectual, general	-Formative assessment, Summative midterm and final examinations
8-Oral interview examination	*Examiners interview one or more students about what they know about specific topics or what they would do in specific situations. This may take place in a classroom setting or when working with patients. Oral exams have poor reliability unless well structured with standardized questions and case studies.	-Knowledge, intellectual,	-Formative and Summative final examinations
9-Clinical rounds	*While making rounds in the patient ward, the teacher asks the students questions.	-Practical, intellectual, general	-Formative assessment
10-Direct observation	*The assessor observes a student performing a skill. This may take place in a simulated situation (e.g., role play, anatomic model) or with patients or during doing an experiment.	-Practical, intellectual, general	-Formative assessment, Summative midterm and final examinations
11-Structured feedback reports	*A structured feedback report is a standardized way to give feedback to students on their performance. Because a feedback report covers a period of time, the sustained performance is assessed rather than a “snapshot” obtained from an examination.	-all	-Formative assessment, Summative midterm

Method	Definition	Type of ILOS tested	Suitable for
12-Logbooks (casebooks), learning journals, and care plans	*The logbook (also called a casebook) contains a list of skills or tasks that students should be able to perform. These tasks are derived from learning objectives for the course. The students are responsible for learning how to do each of the tasks, and when they are ready, they can ask a teacher, tutor, or clinical instructor to assess their performance. Learning journals are documents that include a brief description of the problem encountered, care or management of the problem, and education received. After recording information regarding one or more patients, the student may be asked to write notes or a brief report. A care plan is used to document the patient's problems, care required, and expected outcomes.	-Practical, intellectual, general	-Formative assessment, Summative midterm
13-Structured clinical examinations	*Objective Structured Clinical Examination (OSCE) is a form of structured practical examination that can be used to assess knowledge, skills, and demonstrated attitudes. It is an approach to assessment that involves creating a series of stations through which students rotate and where they perform certain tasks.	-Practical, intellectual, general	-Formative assessment, Summative midterm and final examinations

10- Methods of program evaluation

Evaluator	Tool	Sample
1- Senior students	-Questionnaires -Review of assessment -Review of examination results	Students in the last year
2- Alumni	-Questionnaires - Group discussions	Recently graduated within 5 years
3- Stakeholders	-Questionnaires - Focus group discussions	1-Directors of ministry of health and population Hospitals, military hospitals, medical Insurance. 2-Administrative staff in the ministry of health (hospital, maternal and child Preventive sectors)
4-External Evaluator(s) (External Examiner(s))	-Reports	External examiners in Each course
5- Other (academic leaders of the faculty)	-Questionnaires - focus group discussions	Dean, Vice deans, directors of faculty Hospitals, heads of departments

Dean of the faculty: **Professor Tarek A El Gammal**

Vice dean for education and student affairs: **Professor Mohamed M Fathalla**

Coordinator: **Professor Heba M Saad Eldien**

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Date: **9- 2016**