

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ



Developing A Competency-Based Medical Curriculum, Kasr Alainy experience

Kasr Alainy Modular Program *K.A.M.P 2018/2019*



The Scientific day of the Department of Surgery
Kasr Alainy Faculty of Medicine
New Era of Surgical Education and Training

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Adult Learning Theories

A) Instrumental learning theories

These focus on individual experience.

- 1 Behavioural theories
- 2 Cognitive learning theories
- 3 Experiential learning (Kolb)**

B) Humanistic theories

These theories promote individual development and are more learner-centred

- 1 Andragogy theory (Knowles)**
- 2 Self-directed learning theory (Brookfield)

C) Transformative learning theory (Mezirow)

Transformative learning theory explores the way in which critical reflection can be used to challenge the learner's beliefs and assumptions

D) Social theories of learning context and community

- 1 Learning and thinking are social activities
- 2 Thinking and learning are structured by the tools available in specific situations
- 3 Thinking is influenced by the setting in which learning takes place

ANDRAGOGY

Tapping Into Prior Experience



6 Differences from children

1 Need for Knowledge: why they should learn.

2 Motivation: Adults are driven by internal motives. They will learn if they want to learn. “what’s-in-it-for-me”

3 Willingness: Comes from perceiving the relevance of the knowledge. They want to know how learning will help them better their lives, and they learn best when they know that the knowledge has immediate value for them.

4 Foundation or Experience: Adults bring with them rich reserves of experiences that form the foundation of their learning..

5 Self-Direction: Adults are self-directed individuals who want to take charge of the learning journey.

6 Orientation to Learning: Adults learn best when they “do.” Task-oriented learning (**PROBLEM CENTERED**)



Medical Education Development

Student-centred	—————	Teacher-centred
Problem-based	—————	Information-oriented
Integrated or		Subject or
interprofessional	—————	discipline-based
Community-based	—————	Hospital-based
Elective-driven	—————	Uniform
Systematic	—————	Opportunistic

SPICES model of educational strategies

Harden et al 1984



Medical Education Development

Competency-Based Medical Education

Integration

Milestones



INTEGRATION

“The organization of teaching matter to interrelate or unify subjects frequently taught in separate academic courses or departments” (Harden et al 1984)

Adult learning theories

adult learners' interest in meaningful learning

(Knowles 1980)

knowledge is most effective when the organization of that knowledge matches the way in which the knowledge is to be used

(Kaufman & Mann 2010)



Programs

Structure-Based



Outcome-Based (OBME)



Competency-Based (CBME)



Competency Based Medical Education (CBME)

COMPETENCY

The Intersection between *knowledge*, *skills*, *attitudes* and *values* as well as the mobilization of specific components in order to *transfer* them to a certain context or real situation, hence coming up with the best action/solution possible to address all different situations and problems that can emerge at any moment, making use of the available resources (Gómez del Pulgar, 2011)

The Proven Ability to use knowledge, skills and personal, social and/or methodological abilities, in work or study situations and in professional and personal development, (European Qualification Framework EQF, 2015)



Competency Based Medical Education (CBME)

Competency Unit (Area)

A stand alone function or functional area underlying some aspect of professional performance

Competency element (Key Competency)

A subsection of a competency unit, and contains examples of competent performance known as cues

Competency standards

Consists of Competency areas and competency elements

National competency standards for the registered nurse, Nursing and midwifery board of Australia (2006)



Competency Based Medical Education (CBME)

“An outcomes-based approach to the design, implementation, assessment and evaluation of a medical education program using an organizing framework of competencies”

Frank et al (2010)

“In a traditional educational system, the unit of progression is time and it is teacher-centered. In a CMBE system, the unit of progression is mastery of specific knowledge and skills and is learner-centered.”

Sullivan (1995)



Competency Based Medical Education (CBME)

Variable	Educational Program Approach	
	Structure/Process	Competency-based
Driving force for curriculum	Content-knowledge acquisition	Outcome-knowledge application
Driving force for process	Teacher	Learner
Path of learning	Hierarchical (Teacher→student)	Non-hierarchical (Teacher↔student)
Responsibility for content	Teacher	Student and Teacher
Goal of educ. encounter	Knowledge acquisition	Knowledge application
Typical assessment tool	Single subject measure	Multiple objective measures
Assessment tool	Proxy	Authentic (mimics real tasks of profession)
Setting for evaluation	Removed (gestalt)	"In the trenches" (direct observation)
Evaluation	Norm-referenced	Criterion-referenced
Timing of assessment	Emphasis on summative	Emphasis on formative
Program completion	Fixed time	Variable time

Carraccio, 2002.



MILESTONES

- They are significant points in learner development
- They provide narrative descriptors of competencies and key competencies along a developmental continuum
- They enable both learner and program determine individual trajectories of development in narrative terms
- They lay out a framework of observable behaviors and other attribute associated with development of skills, knowledge and behaviors

Holmboe et al (2016)

Accreditation Council for Graduate Medical Education "ACGME"

Available online at www.sciencedirect.com

ScienceDirect

Health Professions Education ■■■■■ ■■■■■ ■■■■■

www.elsevier.com/locate/hpe

Medical Education in Egypt: Historical Background, Current Status, and Challenges

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Abstract

Background: From its beginnings in 1827, an important goal of medical education in Egypt has been to qualify physicians who can provide high-quality health care services for their local community and other communities in the Middle East region.

Objective and method: To describe the historical background, current status, and future challenges of medical education in Egypt, the authors conducted an extensive internet search, and made electronic communications as well as site visits to gather relevant data. In the final phase, the authors organized and interpreted their data with emphasis on the historical background, features of the curricula, practices of quality, and accreditation, as well as the challenges encountered. The authors collected data from 27 medical schools, all of which are supervised by Egypt's Supreme Council of Universities.

Results: The findings showed that the undergraduate programs (UGMEs) of medical schools in Egypt can be broken down into three categories reflecting the status of reform: innovative, traditional, or in transition. Areas of reform have included the main features of curriculum, teaching and learning methods, and assessment tools. Postgraduate studies in medicine (PGSM) in Egypt take place under two systems: the academic system, offered by universities, and the professional Fellowship of Egyptian Board (FEB) program, offered by the Ministry of Health. There are many initiatives to establish a national regulatory system for continuing medical education, but none of these initiatives is yet well established.

Conclusion: While UGME reform in Egypt is progressing, improvements are still required in both PGSM and CME.

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Keywords: Egypt; Undergraduate medical education; Postgraduate medical education; Continuous medical education; Education reform

1. Introduction

Approximately 30% of Egyptians between 17 and 24 years of age attend university. Currently, nationwide, there are 25 public universities, 51 public non-university

Before 2009, the majority of medical schools in Egypt adopted *discipline-based curricula*, in which didactic large-group lectures and apprenticeship approaches to clinical teaching were the main methods of instruction. An exception was FOM-SCU, which since its establishment has applied an integrated curriculum that features innovative instructional methods, including simulation, early clinical exposure, and project-based learning, in addition to problem-based learning (PBL) and community-based education (CBE).⁶ The PBL parallel track at Al-Mansoura Faculty of Medicine began in 2006, the integrated curriculum at Alexandria Faculty of Medicine in 2009, the modular parallel track at Ain Shams University in 2014, and the Integrated Program of Kasr Al-Ainy (IPKA) in 2015; all of these are alternative models using student-centered teaching approaches

Abdel Aziz et al (2018)

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I.P.K.A.



**Integrated Program of Kasr Alainy
Faculty of Medicine - Cairo University**

Credit Points

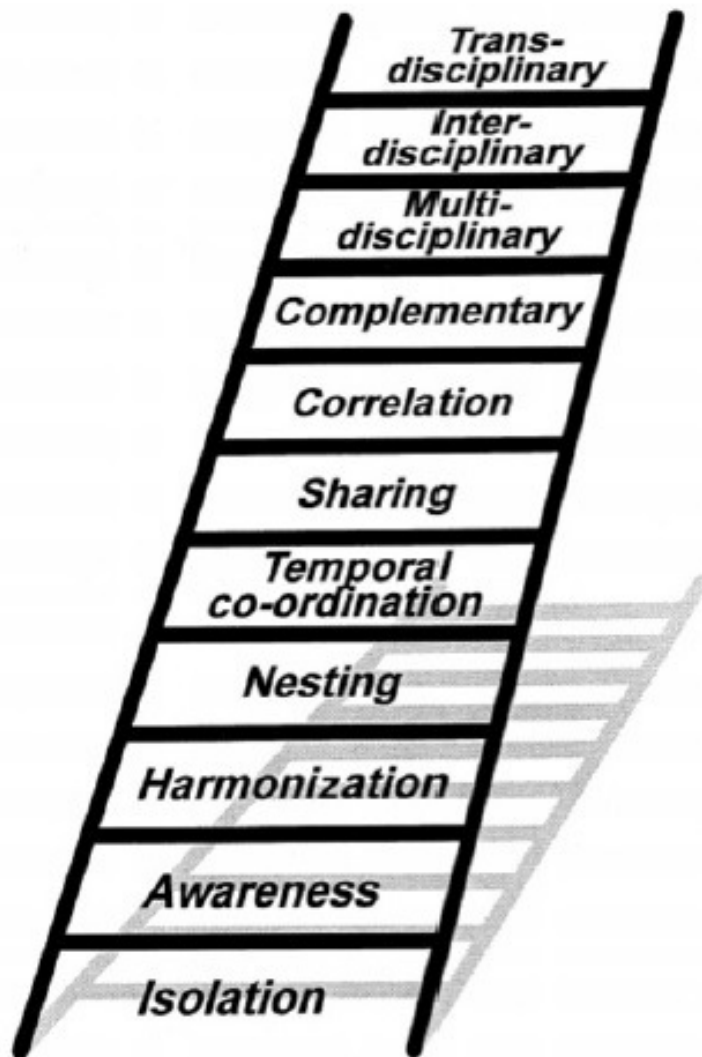
Core Medical Disciplines (Shared with Mainstream)
Horizontal Integration (Temporal Coordination)

Additional Mandatory Courses (Credit Points)

Integrated Sessions / CBL (Correlation)
Early Patient Encounter (Vertical Integration)
Scientific Research Methodology
Critical Thinking
Communications Skills
Family Medicine
Genetics
Emergency Medicine
Student Selected Component

Mentorship / Portfolio

Capacity Building



**Harden, 2000 in The integrated curriculum in medical education:
AMEE Guide No. 96 (Brauer & Ferguson 2015)**

- Step 1 is isolation, in which faculty organize their teaching without considering other subjects or disciplines.
- Step 2 is awareness, in which teachers of one subject are aware of what is covered elsewhere, but no explicit attempt is made to help students look at a subject in an integrated manner.
- Step 3 is harmonization, in which teachers communicate with each other about their courses and adapt their content accordingly.
- Step 4 is nesting, also called infusion, in which teachers target content from other courses within their own courses.
- Step 5 is temporal co-ordination, in which similar content is covered in parallel across courses.
- Step 6 is sharing or joint teaching, often conducted when there are common areas of content or there is a need to include new content in a curriculum.
- Step 7 is correlation, in which an integrated teaching session may be introduced in addition to subject-based teaching.
- Step 8 is complementary programming, often related to a theme or topic to which several disciplines can contribute.
- Step 9 is multi-disciplinary, in which themes are identified, sometimes related to an area in which practical decisions need to be made, other times when the subject matter transcends subject boundaries. These themes or problems are viewed through a multidisciplinary lens even though the disciplines maintain their own identity and understanding of the problem.
- Step 10 is inter-disciplinary, in which there is further development of the commonalities across disciplines.
- Step 11 is trans-disciplinary, in which the curriculum focuses on the learner's process of constructing meaning from information and experience. An example cited is the last two years of the Dundee curriculum (Harden et al. 1997), in which students focus their learning around 113 clinical problems or tasks to integrate their experience.



Governing Bodies of Medical Education in Egypt



Universities' law



Law Change
5+2



Guidelines
Integration
EPE
Research
Electives
Assessment



National
Academic
Reference
Standards
NARS
CBME



Law Change – Prime Minister's Decision

١٠٠ الجريدة الرسمية - العدد ١٣ (تابع) في ٢٩ مارس سنة ٢٠١٨

قرار رئيس مجلس الوزراء

رقم ٥٦٥ لسنة ٢٠١٨

بتعديل بعض أحكام اللائحة التنفيذية لقانون تنظيم الجامعات

رئيس مجلس الوزراء

بعد الاطلاع على الدستور :

وعلى قانون تنظيم الجامعات الصادر بالقانون رقم ٤٩ لسنة ١٩٧٢ وتعديلاته :

وعلى اللائحة التنفيذية لقانون تنظيم الجامعات الصادرة بقرار رئيس الجمهورية

رقم ٨٠٩ لسنة ١٩٧٥ وتعديلاتها :

وعلى قرار رئيس الجمهورية رقم ٣٨٧ لسنة ٢٠١٥ بتفويض رئيس مجلس الوزراء

في بعض الاختصاصات :

وعلى موافقة المجلس الأعلى للجامعات :

وبعد موافقة مجلس الوزراء :

وعلى ما ارتأه مجلس الدولة :

وبناءً على ما عرضه وزير التعليم العالي والبحث العلمي :

تقرر :

(المادة الاولى)

يُستبدل بنص المادة (١٥٤) من اللائحة التنفيذية لقانون تنظيم الجامعات المشار إليها

النص الآتي :

« مدة الدراسة لنيل درجة البكالوريوس في الطب والجراحة خمس سنوات بنظام الساعات

أو النقاط المعتمدة » .

(المادة الثانية)

يُنشر هذا القرار في الجريدة الرسمية ، ويسرى على الطلاب الملتحقين الجند

اعتباراً من العام الدراسي ٢٠١٨/٢٠١٩ .

صدر برئاسة مجلس الوزراء في ١١ رجب سنة ١٤٣٩ هـ

(الموافق ٢٩ مارس سنة ٢٠١٨ م) .

رئيس مجلس الوزراء

مهندس/ شريف إسماعيل



Supreme Council Guidelines



المجلس الاعلى للجامعات لجنة قطاع الدراسات الطبية

Mini-CEX Mini Clinical Evaluation (DOPS), والتمارين السريرية المصغرة (DOPS), Exerciser),

➤ لا يوجد دور للاختبارات التقليدية الشفوية او الاختبارات الكلينيكية للحالات القصيرة والطويلة.

➤ توزن درجات الامتحان علي حسب المجموعات التعليمية (Blocks) او الوحدات التدريسية (modules) و تختلف في نظامي النقاط او الساعات المعتمدة ففي نظام الساعات المعتمدة فتحسب كل ساعة بـ ٢٥ درجة اما في نظام النقاط المعتمدة فتحسب كل نقطة ما بين ١٥ و ٢٠ درجة.

➤ لكي ينجح الطالب يجب ان يحصل علي ٦٠٪ من الدرجات النهائية و ٤٠٪ في درجات الامتحان النظري.

➤ عند رسوب الطالب يصرح له دخول امتحان الدور الثان و يحسب له درجة النجاح ٦٠٪ اما اذا رسب في الدور الثاني فيحق له عند اعادة السنة الدراسية الاحتفاظ بدرجاته كاملة.

➤ لا ينقل الطالب من مرحلة الي اخري الا عند نجاحه في جميع المجموعات او الوحدات التعليمية او الدورات السريرية.

تقييم الطلاب:

➤ يشكل تقييم الطلاب جزءا لا يتجزأ من الانشطة التعليمية العلمة و ينبغي ان يكون تصميم تقييم الطلاب مبنا علي الجدارات و نواتج التعلم المطلوبه من البرنامج التعليمي و يجب استخدام ادوات تقييم ذات مصداقيه و قابله للإستخدام.

➤ يجب ان يكون تقييم الطلاب مبنا علي التقييم (الدمج) او المتكامل وليس تقييم المواد الدراسية و تضع كل كلية (Blueprinting) جدول المواصفات الخاص بها مع مراعاة قواعد تقييم الطلاب المذكوره في المعايير المرجعيه من الهينه القوميه لضمان جوده التعليم في جمهوريه مصر العربيه.

➤ لا يسمح للطالب الدخول الي الامتحانات الا اذا استوفى نسبة حضور ٧٥٪.

➤ يجب ان تتبنى الكلية نظام التقييم التكويني (Formative assessment) في نظام النقاط المعتمدة و يكون حضوره شرط لدخول الاختبارات التراكمية (Summative assessment) للطالبه و لا يشتمل هذا التقييم علي اي درجات و يستعمل نظام ملف الانجاز الالكتروني او الورقي لمتابعه الطلاب في التقييم التكويني و يلتزم المنسق بإحطاء تغذيه راجعه للطلبة عن التقييم الخاص بهم.

➤ التقييم التراكمي (Summative assessment) يشمل التقييم التراكمي علي اصال السنة والامتحانات الدورية والنهائية.

➤ بالنسبة لامتحانات الدورية والنهائية تتم في نهاية الفصل الدراسي او المجموعة التعليمية (Block) او الوحدة الدراسي (Module) او العام الدراسي او المرحلة الدراسي كما تزي ادره الكلية.

➤ بالنسبة لاصال السنة تتم في نهاية البلوك او الوحدة الدراسي او الفصل الدراسي و يعتبر الطالب بما يقلل ٢٠٪ من الدرجات.

➤ يتكون امتحان اخر العام او المرحلة التعليمية من ٧٠٪ علي الاختبار النهائي مقسمة الي ٤٠٪ اختبار مدمج و من امثله الإختبارات : الاسئلة الموضوعية مثل الاختبار من متحد او اسئلة المزوجة الممتدة او الاسئلة المقالية المعدلة أو اسئلة السيناريوهات المعتمدة علي الحالات الكلينيكية و ٣٠٪ علي الاختبار العملي و من امثله ذلك الاختبار العملي الموضوعي متعدد المحطات مثل OSCE, OSPE و الرصد المباشر للمهارات

الدراسة الذاتية

توصيف البرنامج

تعتمد البرامج
الكلينكية و:

فصل تمهيدي

و يتبع الفص

تدريس العلو

(blocks)

hin organ and

يتبع ذلك عد

علي كل كليا

cases

الاولوية.

يجب اضافة

الطلاب وأسد

➤ يجب ان يحتوي البرنامج الدراسي علي ٥ الي ١٠٪ منه لبعض المقررات او الوحدات الاختياريه.



National Academic Reference Standards (NARS)

Medicine

2nd Edition, 2017

**National Authority for Quality Assurance and
Accreditation of Education "NAQAAE"**



NARS 2017

*Shifting from
Outcome-based to Competency based medical education CBME*

6 competency areas including 65 key competencies

- i - Graduate as a health care provider (17 key competencies)**
- ii - Graduate as a health promoter (9 key competencies)**
- iii- Graduate as a professional (9 key competencies)**
- iv - Graduate as a scholar and scientist (8 key competencies)**
- v - Graduate as a member of a team & system (12 key competencies)**
- vi - Graduate as a life long learner & researcher (10 key competencies)**



Competency Area I

Graduate as a health care provider

The graduate should provide quality, safe, patient-centered care, drawing upon his/her integrated knowledge and clinical skills, and adhering to professional values. The graduate should collect and interpret information, make clinical decisions and carry out diagnostic and therapeutic interventions with an understanding of the limits of his/her expertise, considering the patient's circumstances and preferences as well as the availability of resources

The graduate should be able to:



Competency Area I

Graduate as a health care provider

- 1.1. Take and record a structured, patient centered history**
- 1.2. Adopt an empathic and holistic approach to the patients and their problems.**
- 1.3. Assess the mental state of the patient.**
- 1.4. Perform appropriately timed full physical examination of patients appropriate to the age, gender, and clinical presentation of the patient while being culturally sensitive.**
- 1.5. Prioritize issues to be addressed in a patient encounter.**
- 1.6. Select the appropriate investigations and interpret their results taking into consideration cost/ effectiveness factors.**
- 1.7. Recognize and respond to the complexity, uncertainty, and ambiguity inherent in medical practice.**
- 1.8. Apply knowledge of the clinical and biomedical sciences relevant to the clinical problem at hand.**
- 1.9. Retrieve, analyze, and evaluate relevant and current data from literature, using information technologies and library resources, in order to help solve a clinical problem based on evidence (EBM).**



Competency Area I

Graduate as a health care provider

1.10. Integrate the results of history, physical and laboratory test findings into a meaningful diagnostic formulation.

1.11. Perform diagnostic and intervention procedures² in a skillful and safe manner, adapting to unanticipated findings or changing clinical circumstances.

1.12. Adopt strategies and apply measures that promote patient safety

1.13. Establish patient-centered management plans in partnership with the patient, his/her family and other health professionals as appropriate, using Evidence Based Medicine in management decisions.

1.14. Respect patients' rights and involve them and /or their families/carers in management decisions.

1.15. Provide the appropriate care in cases of emergency, including cardio-pulmonary resuscitation, immediate life support measures and basic first aid procedures.

1.16. Apply the appropriate pharmacological and nonpharmacological approaches to alleviate pain and provide palliative care for seriously ill people, aiming to relieve their suffering and improve their quality of life.

1.17. Contribute to the care of patients and their families at the end of life, including management of symptoms, practical issues of law and certification.



Competency Area II

Graduate as a health promoter

The graduate should advocate for the development of community and individual measures which promote the state of well-being, he/she should empower individuals and communities to engage in healthy behaviors, and put his/her knowledge and skills to prevent disease, reduce deaths and promote quality life style

The graduate should be able to:



Competency Area II

Graduate as a health promoter

- 2.1 Identify the basic determinants of health and principles of health improvement.**
- 2.2 Recognize the economic, psychological, social, and cultural factors that interfere with wellbeing.**
- 2.3 Discuss the role of nutrition and physical activity in health.**
- 2.4 Identify the major health risks in his/her community, including demographic, occupational and environmental risks; endemic diseases, and prevalent chronic diseases.**
- 2.5 Describe the principles of disease prevention, and empower communities, specific groups or individuals by raising their awareness and building their capacity.**
- 2.6 Recognize the epidemiology of common diseases within his/her community, and apply the systematic approaches useful in reducing the incidence and prevalence of those diseases.**
- 2.7 Provide care for specific groups including pregnant women, newborns and infants, adolescents and the elderly.**
- 2.8 Identify vulnerable individuals that may be suffering from abuse or neglect and take the proper actions to safeguard their welfare.**
- 2.9 Adopt suitable measures for infection control.**



Competency Area III
Graduate as a professional

The graduate should adhere to the professional and ethical codes, standards of practice and laws governing practice
The graduate should be able to:



Competency Area III

Graduate as a professional

- 3.1. Exhibit appropriate professional behaviors and relationships in all aspects of practice, demonstrating honesty, integrity, commitment, compassion, and respect.**
- 3.2. Adhere to the professional standards and laws governing the practice, and abide by the national code of ethics issued by the Egyptian Medical Syndicate.**
- 3.3. Respect the different cultural beliefs and values in the community they serve.**
- 3.4. Treat all patients equally, and avoid stigmatizing any category regardless of their social, cultural, ethnic backgrounds, or their disabilities.**
- 3.5. Ensure confidentiality and privacy of patients' information.**
- 3.6. Recognize basics of medico-legal aspects of practice, malpractice and avoid common medical errors.**
- 3.7. Recognize and manage conflicts of interest.**
- 3.8. Refer patients to appropriate health facility at the appropriate stage.**
- 3.9. Identify and report any unprofessional and unethical behaviors or physical or mental conditions related to himself, colleagues or any other person that might jeopardize patients' safety.**



Competency Area IV

Graduate as a scholar and scientist

The graduate should build his clinical practice on a base of knowledge of scientific principles and methods of basic medical reasoning, care provision, further professional development and research

The graduate should be able to:



Competency Area IV

Graduate as a scholar and scientist

- 4.1 Describe the normal structure of the body and its major organ systems and explain their functions.**
- 4.2 Explain the molecular, biochemical, and cellular mechanisms that are important in maintaining the body's homeostasis.**
- 4.3 Recognize and describe main developmental changes in humans and the effect of growth, development and aging on the individual and his family.**
- 4.4 Explain normal human behavior and apply theoretical frameworks of psychology to interpret the varied responses of individuals, groups and societies to disease.**
- 4.5 Identify various causes (genetic, developmental, metabolic, toxic, microbiologic, autoimmune, neoplastic, degenerative, and traumatic) of illness/disease and explain the ways in which they operate on the body (pathogenesis).**
- 4.6 Describe altered structure and function of the body and its major organ systems that are seen in various diseases and conditions.**
- 4.7 Describe drug actions: therapeutics and pharmacokinetics; side effects and interactions, including multiple treatments, long term conditions and non-prescribed medication; and effects on the population.**
- 4.8 Demonstrate basic sciences specific practical skills and procedures relevant to future practice, recognizing their scientific basis, and interpret common diagnostic modalities, including: imaging, electrocardiograms, laboratory assays, pathologic studies, and functional assessment tests.**



Competency Area V

Graduate as a member of the health team and a part of the health care system

The graduate should work and collaborate effectively with physicians and other colleagues in the health care professions, demonstrating an awareness of and a respect for their roles in delivering safe effective patient and population-centered care. He/she should be committed to his/her role as a part of health system, respecting its hierarchy and rules and using his/her administrative and leadership skills to add value to the system

The graduate should be able to:



Competency Area V

Graduate as a member of the health team and a part of the health care system

- 5.1 Recognize the important role played by other health care professions in patients' management.**
- 5.2 Respect colleagues and other health care professionals and work cooperatively with them, negotiating overlapping and shared responsibilities and engaging in shared decision-making for effective patient management.**
- 5.3 Implement strategies to promote understanding, manage differences, and resolve conflicts in a manner that supports collaborative work.**
- 5.4 Apply leadership skills to enhance team functioning, the learning environment, and/or the health care delivery system.**
- 5.5 Communicate effectively using a written health record, electronic medical record, or other digital technology.**
- 5.6 Evaluate his/her work and that of others using constructive feedback.**



Competency Area V

Graduate as a member of the health team and a part of the health care system

5.7 Recognize own personal and professional limits and seek help from colleagues and supervisors when necessary.

5.8 Apply fundamental knowledge of health economics to ensure the efficiency and effectiveness of the health care system.

5.9 Use health informatics to improve the quality of patient care.

5.10 Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements.

5.11 Improve the health service provision by applying a process of continuous quality improvement.

5.12 Demonstrate accountability to patients, society, and the profession.



Competency Area VI

Graduate as a lifelong learner and researcher

The graduate should demonstrate a lifelong commitment to excellence in practice through continuous learning and professional development. He should reflect on his own performance and plan for his own development making use of all possible learning resources. The graduate should have an inquisitive mind and adopt sound scientific research methodology to deal with practice uncertainty and knowledge gaps and to contribute to the development of his profession as well as for the purpose of his own academic development

The graduate should be able to:



Competency Area VI

Graduate as a lifelong learner and researcher

6.1 Regularly reflect on and assess his/her performance using various performance indicators and information sources.

6.2 Develop, implement, monitor, and revise a personal learning plan to enhance professional practice

6.3 Identify opportunities and use various resources for learning.

6.4 Engage in inter-professional activities and collaborative learning to continuously improve personal practice and contribute to collective improvements in practice.

6.5 Recognize practice uncertainty and knowledge gaps in clinical and other professional encounters and generate focused questions that address them.

6.6 Effectively manage learning time and resources and set priorities.

6.7 Demonstrate an understanding of the scientific principles of research including its ethical aspects and scholarly inquiry and Contribute to the work of a research study.

6.8 Critically appraise research studies and scientific papers in terms of integrity, reliability, and applicability.

6.9 Analyze and use numerical data including the use of basic statistical methods.

6.10 Summarize and present to professional and lay audiences the findings of relevant research and scholarly inquiry



Curriculum Committee

Curriculum Committee Dean's Decision (368/2017)

Higher Committee & **2** Subcommittees: *Curriculum Develop.* & *Assessment*

Participation of **5** Universities: Cairo, Beni Suef, Fayoum, October & MUST

More than **100** Staff members

All specialties, Medical Education Development Center, Quality & E-Learning Units

With Participation of Students & House Officers





جامعة القاهرة
Cairo University

مكتب العميد



كلية الطب

Faculty of Medicine

قرار عميد الكلية

رقم ١١٠٤ صادر بتاريخ ٢٠١٧/١١/٢٠

عميد الكلية:

- بعد الإطلاع علي القانون رقم ٤٩ لسنة ١٩٧٢ بشأن تنظيم الجامعات ولائحته التنفيذية والقرارات المعدلة له.
- وعلى قرار رئيس الجمهورية رقم ٨٠٩ لسنة ١٩٧٥ بإصدار اللائحة التنفيذية لقانون تنظيم الجامعات.
- وعلى موافقتنا.

قرر

مادة (١): تُشكل اللجنة العليا التنسيقية لتحضير الكلية لتطبيق النظام الحديث للنقاط المعتمدة وذلك علي النحو التالي

- | | | |
|--------------------------------|---|---------------|
| د.د. فتحي رزق فاروق خضير | عميد الكلية | (بصفته رئيسا) |
| أ.د. محمد طارق زكي أنيس | وكيل الكلية لشئون الدراسات العليا والبحوث | (بصفته) |
| أ.د. هالة صلاح الدين طلعت | لشئون التعليم والطلاب | (بصفتها) |
| أ.د. خالد مكي عبدالعظيم | وكيل الكلية لشئون خدمة المجتمع | (بصفته) |
| أ.د. نادية حسن بدرلوي | أستاذ متفرغ طب الأطفال | |
| أ.د. منى محمود علي حامد | رئيس قسم الطفيليات | |
| أ.د. منى عطية محمود هنا | مدير وحدة الجودة | |
| أ.د. هشام محمود عامر | أستاذ الجراحة العامة ومدير لجنة التقييم | |
| أ.د. طارق أحمد حسن سعيد | مدير البرنامج التعليمي ومدير لجنة تطوير المناهج | |
| أ.د. محمد حسن علي فهمي | أستاذ الجراحة العامة | |
| أ.د.حاتم حمدي العيشي | أستاذ الروماتيزم والتأهيل | |
| أ.د. نزمين مفتاح جلال فتح الله | أستاذ طب الأطفال | |
| أ.د. إيمان عبد المجيد عيسى | مدرس طب وجراحة العيون | |
| أ.د. ماريان يوسف عوض الله | مدرس الأشعة التشخيصية | |

أعضاء من الخارج:

- أ.د. خالد الخشاب
 - أ.د. وائل الشاعر
 - أ.د. نيهاد محبوب
- وكيل الكلية لشئون التعليم والطلاب بطب الفيوم
وكيل الكلية لشئون التعليم والطلاب بطب بني سويف
وكيل كلية لشئون التعليم والطلاب بطب مصر والعلوم والتكنولوجيا
ممثل عن كلية طب ٦ أكتوبر



كلية الطب

Faculty of Medicine



جامعة القاهرة

Cairo University

مكتب العميد

لجنة تطوير المناهج

- أ.د. فتحي رزق فاروق خضير
- أ.د. محمد طارق زكي أنيس
- أ.د. هالة صلاح الدين طلعت
- أ.د. طارق أحمد حسن سعيد
- أ.د. مصطفى عبدالحميد سليم
- أ.د. منال رشدي محمد المصري
- أ.د. عيبر أحمد زايد
- أ.د. حنان عبد العزيز مبارك
- أ.د. هالة عصام الدين محمد كحلة
- د. صفاء زاهد عبد الرحمن
- د. منى محمد شعبان
- د. منى سعيد الشربيني سليمان
- د. زولب احمد محمد نور عطيه
- عميد الكلية
- وكيل الكلية وكيل الكلية لشئون الدراسات العليا (بصفته)
- وكيل الكلية لشئون التعليم والطلاب (بصفتها)
- مدير البرنامج التعليمي ومدير اللجنة
- مدير مركز التعليم الطبي بصفته مسئولاً عن تطوير فدرات أعضاء هيئة التدريس
- أستاذ الأمراض الباطنة
- أستاذ الطب الشرعي
- أستاذ الفسيولوجيا
- أستاذ الأمراض الباطنة
- أستاذ مساعد الأمراض الصدرية
- مدرس التوليد وامراض النساء
- مدرس الطفيليات
- مدرس الكيمياء الحيوية الطبية

لجنة التقييم

- أ.د. فتحي رزق فاروق خضير
- أ.د. محمد طارق زكي أنيس
- أ.د. خالد مكي عبدالعظيم
- أ.د. جوهان ابراهيم ابو الفتوح
- أ.د. هشام محمود عامر
- أ.د. منال عبد الواحد بصيلة
- أ.د. زولب محمد المعداوي
- أ.د. ايهاب عبد العزيز الشعراوي
- أ.د. أحمد سليمان نصر
- د. شيما ابراهيم محمد الجعفري
- عميد الكلية
- وكيل الكلية وكيل الكلية لشئون الدراسات العليا (بصفته)
- وكيل الكلية وكيل الكلية لشئون خدمة المجتمع (بصفتها)
- رئيس قسم الهندسة
- أستاذ الجراحة العامة ومدير اللجنة
- أستاذ الأمراض الجلدية
- أستاذ الهندسة
- أستاذ التشريح
- أستاذ التوليد وأمراض النساء
- مدرس الفسيولوجيا الإكلينيكية للجهاز العصبي

مادة (٢): يتم دعوة مديري لجنة تطوير المناهج ولجنة التقييم لحضور اجتماعات مجلس الكلية بصفه دورية.

مادة (٣): يُنشر هذا القرار على جميع المختصين بتنفيذه.

عميد الكلية

أ.د. فتحي خضير



اللجنة العليا التنسيقية لإدارة برنامج كلية الطب

أولاً: تشكيل اللجنة

• يصدر قرار من عميد الكلية بتشكيلها وتتكون لجنة المناهج من 9 إلى 13 عضو و هم:

وكيل الكلية لشئون التعليم والطلاب.

مدير إدارة الجودة.

أعضاء من هيئة التدريس ممثلين لبعض التخصصات الأكاديمية والإكلينيكية بنسبة 3 : 4

على الأقل أحد الطلاب ويمكن إضافة طبيب امتياز.

• تكون للجنة سلطة عليا لتنفيذ ومتابعة البرنامج ولا يسمح بتغيير أي جزء من البرنامج إلا بعد موافقة اللجنة.

• تتبع اللجنة مجلس الكلية وتقدم تقاريرها إلى المجلس دورياً.

• تعقد اللجنة اجتماعات على الأقل مرتين كل شهر وتعيين مدير منها لإدارة البرنامج.

• يتبع اللجنة لجان فرعية يصدر بتشكيلهم قرار من العميد هما: لجنة تطوير المناهج و لجنة التقييم

مُعين اللجنة منسق لكل فصل دراسي أو مقرر أو وحدة دراسية.

• يراعى في اختيار أعضاء اللجنة بعض أو كل الشروط التالية:

أن تتضمن أعضاء من مختلف مستويات هيئة التدريس (مدرس، أستاذ مساعد، أستاذ، أستاذ متفرغ).

وجود خبره وممارسة في إدارة العمليات التعليمية.

مشهود لهم بالسمعة الطبية ومهارات التواصل الجيد مع الطلاب والزملاء.

وجود ماجستير أو دبلوم في التعليم الطبي .

الإشتراك في أبحاث في مجال التعليم الطبي.

ثانياً: وظائف ومسئوليات اللجنة:

تكون اللجنة مسئولية بشكل عام على الإشراف على البرنامج الدراسي لمرحلة البكالوريوس بشكل كامل من حيث التصميم، إدارة التنفيذ، المتابعة، تقييم البرنامج، ضمان التنسيق، التعديل والتحسين وتقديم المقترحات لمجلس الكلية وتقوم اللجنة بالمهام الآتية:

• صياغة السياسات والإجراءات واللوائح المنظمة للأطراف المسؤولة عن المنهج والمقررات أو الوحدات التعليمية أو الفصول الدراسية بالكلية.

• عمل توصيف البرنامج بما لا يقل عن المواصفات القياسية التي تعلنها الهيئة القومية لضمان الجودة والاعتماد بجمهورية مصر العربية وبما يضمن:

- توافق نواتج التعلم المستهدفة من البرنامج مع المعايير الأكاديمية القومية والتي تعلنها الهيئة القومية لضمان جودة التعليم بجمهورية مصر العربية.

- اختيار طرق التدريس والتعلم التي تحقق نواتج التعلم الخاصة بالبرنامج المطور.

- تحديد المقررات أو الوحدات التعليمية التي تحقق نواتج التعلم المستهدفة من البرنامج والمعايير الأكاديمية القومية ومدى تحقيقها للمهارات والجدارات المطلوبة بشكل منطقي ومتناسق.

- تحقيق قدر مناسب من التاكد الأفقي والرأسي عبر البرنامج والمقررات بما لا يقل عن المستوى الخامس لسلم هاردين.

• تصميم المقررات أو الوحدات التعليمية وتعيين منسق لكل مقرر أو وحدة تعليمية والإشراف على مراجعة توصيف المقررات أو الوحدات التعليمية بما يتوافق مع توصيف البرنامج والإشراف على أي مقرر مقترح من الكلية.

• التواصل مع رؤساء الأقسام لمتابعة انتظام تنفيذ المقررات الدراسية.

• التواصل مع وحدة الجودة والتنسيق معها في متابعة تنفيذ البرنامج.

• التأكد من إضافة مقررات صمودية من مهارات التواصل وأخلاقيات المهنة والاحترافية.

• تحديد الحالات الإكلينيكية التي يجب أن يتقنها الطلاب والمهارات المطلوبة والمتوقعة من الخريج لتمكنه من التقدم لفترة عمله كطبيب مقيم بما لا يقل عن معايير الهيئة القومية لضمان الجودة والتعليم بجمهورية مصر العربية

• تقديم مقترحات لإضافة أو حذف أي مقررات أو وحدات تعليمية إلى البرنامج.

• اقتراح خطة تطوير مهارات أعضاء هيئة التدريس وعمل استشارات لأعضاء هيئة التدريس في إعادة تصميم البرامج والمقررات الدراسية والتواصل مع لجان الجودة في الكليات لتنسيق وتقديم ورش عمل ودورات لتنمية قدرات أعضاء هيئة التدريس في التعليم التكاملية.

• عمل مراجعة وتقييم للبرنامج دورياً.

• كتابة تقرير ربع سنوي لمجلس الكلية عن نشاط اللجنة وانتظام الدراسة بالطريقة التكاملية.

• التأكد من أن البنية التحتية والتسهيلات اللوجستية للكلية تناسب البرنامج ومقرراته الدراسية.

مهام منسق الفصل الدراسي أو المقرر أو الوحدة التعليمية بما يلي:

• الإشراف على أعداد الجداول الدراسية للفصل الدراسي تحت إشراف مدير البرنامج وكيكل الكلية لشئون التعليم والطلاب.

• متابعة انتظام العملية التعليمية وكل ما يتعلق بأعمال التدريس والتدريب والامتحانات بالفصل الدراسي المعني أو المقرر أو الوحدة التعليمية.

• متابعة الطلاب والعمل على حل المشاكل اليومية التي تواجههم.

• تسيير العمل اليومي في الفصل الدراسي المسئول عنه وإفادة مدير البرنامج عن مستوى إنتظام و تحصيل الطلاب وتقديم تقرير عن ذلك.

• التنسيق بين الأقسام العلمية داخل الفصل الدراسي ودراسة المستوى العلمي للمقررات بالفصل الدراسي.

• التواصل مع لجنة التقييم التي تقوم بإعداد الاختبارات النظرية والعملية بالتعاون مع وكيل الكلية لشئون الطلاب والتعليم لمراجعة نتائج الامتحانات وتطبيق قواعد تأكيد الجودة.



I- Committee Meetings
II- Workshops & E-Forums
III- Departments' Input
IV- Departmental & Inter-Departmental Meetings
V- Faculty Committees' Presentations

رابعاً: إجتماعات تنسيقية للمناقشة و تفعيل التكامل "مع" و "بين" الاقسام المختلفة

- 1- إجتماع مع رئيس قسم صحة الاسرة ٢٢ يناير ٢٠١٨
- 2- إجتماع مع رئيس قسم الصحة العامة ٢٤ يناير ٢٠١٨
- 3- إجتماع مع رئيس الباطنة ٢٤ يناير ٢٠١٨
- 4- إجتماع في قسم الميكروبيولوجي ٢٩ يناير ٢٠١٨
- 5- إجتماع مع أعضاء قسم الجراحة ٥ فبراير ٢٠١٨
- 6- إجتماع مشترك مع رئيسي قسم الباطنة و الجراحة ٦ فبراير ٢٠١٨
- 7- إجتماع في قسم الكيمياء الحيوية ٧ فبراير ٢٠١٨
- 8- إجتماع في قسم الميكروبيولوجي ٧ فبراير ٢٠١٨
- 9- إجتماع في قسم الفارماكولوجي ٧ فبراير ٢٠١٨
- 10- إجتماع مشترك لأقسام الفارماكولوجي و الميكروبيولوجي ٧ فبراير ٢٠١٨
- 11- إجتماع مشترك لأقسام الفسيولوجي و الهستولوجي و الكيمياء الحيوية ١٠ فبراير ٢٠١٨
- 12- إجتماع مشترك لأقسام الجراحة و الباطنة و النساء و الأطفال ١١ فبراير ٢٠١٨
- 13- عرض البرنامج على مجلس قسم الجراحة ١٢ فبراير ٢٠١٨
- 14- إجتماع لرؤساء اقسام العلوم الأساسية و منسقى الوحدات الدراسية ١٣ فبراير ٢٠١٨
- 15- إجتماع لرؤساء اقسام العلوم الأساسية لمناقشة بعض بنود اللائحة المتعلقة بالاختبارات ٢٠ فبراير ٢٠١٨
- 16- إجتماع مشترك لأقسام الباثولوجي و الفسيولوجي و الهستولوجي و الكيمياء الحيوية ٢١ فبراير ٢٠١٨
- 17- إجتماع مشترك لرؤساء أقسام الجراحة و الباطنة و النساء و الأطفال ٢١ فبراير ٢٠١٨
- 18- عرض لمجلس قسم الامراض النفسية ٦ مارس ٢٠١٨
- 19- عرض لمجلس قسم العظام ١٣ مارس ٢٠١٨
- 20- عرض لمجلس قسم المسالك البولية و التناسلية ١٤ مارس ٢٠١٨
- 21- إجتماع مشترك لأقسام الجراحة و العظام و المسالك ١٩ مارس ٢٠١٨

خامساً: عروض للجان و مجلس الكلية

- 1- عرض لمجلس الكلية ٢٥ فبراير ٢٠١٨
- 2- عرض للجنة شؤون التعليم و الطلاب ١١ مارس ٢٠١٨

إجتماعات

أولاً: إجتماعات اللجنة العليا التنسيقية و لجنة

- 1- إجتماع الاول تحضيرى لبدء أعمال ال
- 2- الاجتماع الثاني ٢٦ نوفمبر ٢٠١٧
- 3- الاجتماع الثالث ٢٨ نوفمبر ٢٠١٧
- 4- الاجتماع الرابع ٤ ديسمبر ٢٠١٧
- 5- الاجتماع الخامس ٩ ديسمبر ٢٠١٧
- 6- الاجتماع السادس ٢٣ ديسمبر ٢٠١٧
- 7- الاجتماع السابع ٢٧ ديسمبر ٢٠١٧
- 8- الاجتماع الثامن مع رؤساء الأقسام ٩
- 9- الاجتماع التاسع ١٧ يناير ٢٠١٨
- 10- الاجتماع العاشر مع رؤساء أقسام الع
- 11- الاجتماع الحادى عشر مع منسقى الو
- 12- الاجتماع الثاني عشر ٢٧ مارس ١٨
- 13- الاجتماع الثالث عشر ٢٨ مارس ١٨
- 14- الاجتماع الرابع عشر ٢٩ مارس ١٨
- 15- الاجتماع الخامس عشر ٣١ مارس ١٨

ثانياً: ورش عمل و ندوات إلكترونية

ثالثاً: مقترحات الاقسام

- 1- مقترح من قسم صحة الاسرة
- 2- مقترح من قسم الصحة العامة
- 3- مقترح من قسم الطب الشرعى و السم



- ثم قام اد طارق سعيد بعرض قائمة بسيناريوهات الحالات التي تم تحضيرها للتدريس بنظام PBL في الوحدات الدراسية المختلفة

PREPARED CASES FOR INTEGRATED SYSTEM BASED MODULES		
METHODS OF TEACHING: <ul style="list-style-type: none">• Small group, Case-Based Instruction (CBI).• Cadaveric dissection laboratories.• BioPac medical physiology laboratories.• Patient panels.• Clinical case mysteries - small group presentations.• Team-based learning.• Independent Learning Modules.• Flipped classroom methodologies.		
Cases for system based modules:		
1ST BLOCK: Introduction to Disease mechanisms <ul style="list-style-type: none">• Lung cancer• Compound fracture• Tonsillitis• Abscess• Amyloidosis	2ND BLOCK: Support & Movement <ul style="list-style-type: none">• Multiple humerus fractures and shoulder dislocation• Acute limb ischemia secondary to intra-arterial injection• Cut wound injury at the wrist• Postoperative Radial n Injury• Fracture neck of femur• Carpal tunnel syndrome• Supraspinatus tear and subacromial bursitis• Osteogenesis imperfecta• Familial periodic paralysis	3RD BLOCK: Hemopoietic system, Lymphatic & immune system <ul style="list-style-type: none">• Macrocytic anemia• G6PD deficiency• Sickle cell anemia• Breast malignant tumour
4TH BLOCK: Respiratory system, Cardiovascular system, Neuroscience I (Autonomic NS) <ul style="list-style-type: none">• Pheochromocytoma• Pericardial effusion• Angina• Hemopneumothorax• IRDS• shock	5TH BLOCK: Neuroscience II (CNS), Endocrine System <ul style="list-style-type: none">• Intracranial hemorrhage• Trigeminal neuralgia• Hemiplegia• Bell's palsy• Alzheimer disease• Acromegaly• Thyrotoxicosis• Osteoporosis• Tetany• Sheehan's syndrome• Cushing syndrome• DKA• Hyperthyroidism• DM• Short stature• Open angle glaucoma• Closed angle glaucoma	6TH BLOCK: Digestive system, Urinary system, Reproductive system <ul style="list-style-type: none">• Peptic ulcer• Appendicitis• Submandibular duct stone• Portal HTN• Obstructive jaundice• Hepatic hydatid cyst• Male infertility• Nephrotic syndrome

و إنتهى الاجتماع في الساعة الواحدة ظهرا

مدير اللجنة
اد / طارق سعيد

Current: Hours /
1st Year : 26 Hrs
2nd Year: 26 Hrs
3rd Year : 25 Hrs
78
Proposed: 35 hc
5 hours per week
1 Week per mod
Hours for each b

المقترحات التي تم عرضها من قبل أعضاء

لتقييم 9 يناير 2018

بإذن اللجنة العليا و
تاريخ 6 أكتوبر وبنى

نسخة 2017 ✓

نموذج الهيئة القومية للجودة

نسخة 2017 (Matrix)

تعليم الطبي

تعليمية

NARS 2017

Shifting from
Outcome-based to
Competency based
medical education

CBME

Committee Tasks



✓ Program LOs, Framework

✓ Modules' weights

✓ Module coordinators

✓ Course ILOs in accordance with NARS 2017

← Writing Modules

✓ Writing Bylaws

↖ Program Specs

↖ Program Matrix

✓ Teaching facilities' coding & database

✓ Laboratory development

← E-Learning Unit & Internet Platform development



Program Learning Objectives



Gap Analysis

- **Revision of key competencies against proposed program LOs**
- **Addition of new LOs to achieve key competencies**
- **Adding new modules to achieve new LOs**



New Additions

- Family Medicine
- Investigative Medicine (Diagnostics)
- Mental Health & Cognitive Principles
- Palliative Medicine & Oncology
- Medical Research Methodology, Biostatistics & EBM
- Early patient Encounter
- Medical Ethics & Law
- Medical Professionalism
- Communication Skills
- Student Selected Component (Electives)



Vertical Curricula



Vertical Curricula

Obligatory	Student Selected Component (SSC) 15 Credit Points		
	Humanitarian	In-Depth Medical Studies	Languages
	3 Credit Points Each Duration: 1 Semester	6 Credit points Each Duration: 2 Semesters	9 Credit Points Each Duration: 3 Semesters
Medical Terminology Medical Professionalism Medical Ethics & Law Communication Skills Early Patient Encounter Medical Research & EBM	History of Medicine in Egypt Sociology Art & Design Photography Health Economics Human Resources Computer Programming Information Technology Medical Statistics Hospital Management Quality Control Narrative Medicine	Anesthesiology Breast Cardiac Surgery Critical Care Diabetes Genetics Geriatric Medicine Head & Neck Surgery Infertility Interventional Radiology Neurosurgery Oncology Ophthalmology Organ Transplantation Otorhinolaryngology Pediatric Cardiology Pediatric Surgery Plastic Surgery Radiology Sports Medicine Traumatology Urology Vascular Surgery	Arabic English French German

T A X O N O M Y
O F
E D U C A T I O N A L O B J E C T I V E S



The Classification of Educational Goals

HANDBOOK 1 COGNITIVE DOMAIN

By

A Committee of College
and University Examiners

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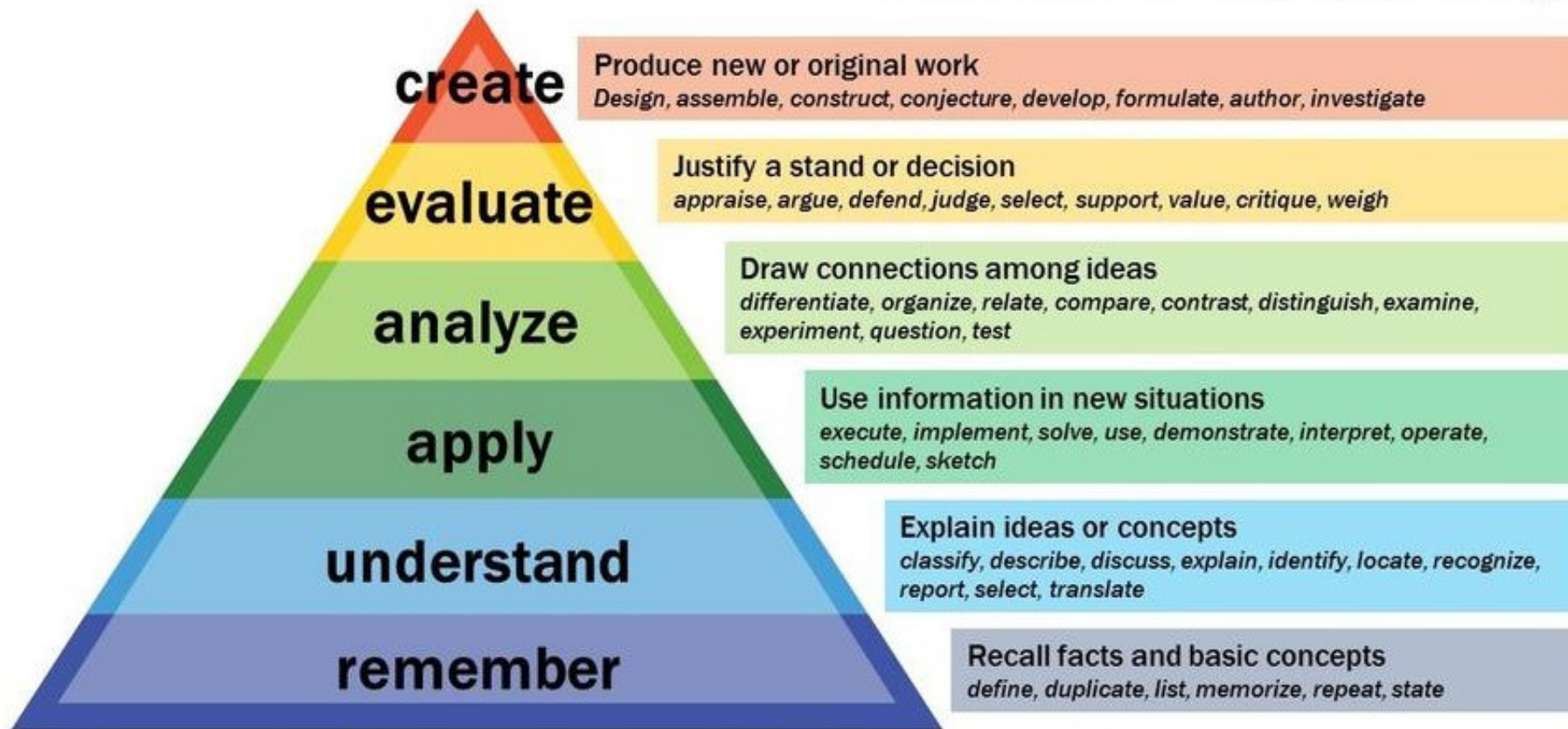
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LONGMANS



Bloom's Taxonomy



Vanderbilt University Center for Teaching: <https://cft.vanderbilt.edu/guides-sub-pages/blooms-taxonomy/>



KNOWING or REMEMBERING	COMPREHENDING or UNDERSTANDING	APPLYING	ANALYZING	SYNTHESIZING or EVALUATING	CREATING
Cite Define Draw Enumerate Find Label List Locate Match Memorize Name Recall Recite Record Recognize Select State Tabulate	Arrange Associate Classify Convert Describe Discuss Explain Exemplify Identify Interpret Locate Match Paraphrase Report Research Sort Summarize Translate	Adapt Apply Compute Coordinate Demonstrate Develop Dramatize Employ Establish Examine Extrapolate Illustrate Implement Instruct Interview Manipulate Modify Operate Order Practice Predict Prepare Produce Utilize	Analyze Appraise Detail Determine Calculate Categorize Classify Compare Contrast Correlate Critique Defend Detect Dissect Distinguish Examine Inspect Inventory Research Solve Summarize Test	Assess Assemble Build Choose Compare Construct Debate Estimate Formulate Generate Hypothesize Integrate Judge Justify Manage Organize Predict Prescribe Prepare Prioritize Produce Propose Recommend Structure Synthesize	Adapt Anticipate Collaborate Combine Communicate Compose Construct Create Design Facilitate Forecast Generate Initiate Model Negotiate Organize Perform Plan Produce Propose Reconcile Revise Resolve Structure Substitute
Teaching Strategies	Teaching Strategies	Teaching Strategies	Teaching Strategies	Teaching Strategies	Teaching Strategies
Lecture Video Illustrations Examples Visuals	Questions Discussion Review Test Reports Exercises	Practice Demonstrations Presentations Projects Role play Micro-teach	Problem solving Case Studies Critical Incidents Discussion Questioning Test	Projects Problem solving Case studies Plan development Constructing Simulation	Simulations Critiques Complex case study Design and development Product generation Producing
lower order thinking			higher order thinking		

BLOOM'S TAXONOMY OF LEARNING OBJECTIVES (revised)

UNMC faculty development www.unmc.edu/facdev

Anderson, L.W., Krathwohl, D.R., Airasian, P.W., Cruikshank, K.A., Mayer, R.E., Pintrich, P.R., Raths, J., Wittrock, M.C. (2001). *A Taxonomy for Learning, Teaching, and Assessing: A revision of Bloom's Taxonomy of Educational Objectives*. New York: Pearson, Allyn & Bacon.
 Bloom, B.S. (Ed.). Engelhart, M.D., Furst, E.J., Hill, W.H., Krathwohl, D.R. (1958). *Taxonomy of Educational Objectives, Handbook I: The Cognitive Domain*. New York: David McKay Co Inc.



Competency Area I

Graduate as a health care provider

Competency (1) The graduate as a health care provider *By the end of the program, the graduate will be able to:*

Key Competencies	Program LOs
1.1. Take and record a structured, patient centered history	1.1.1 Interview and document a structured patient history.
1.2. Adopt an empathic and holistic approach to the patients and their problems.	1.2.1 Implement holistic approach to patients' problems, taking into consideration beliefs values, goals and concerns.
1.3. Assess the mental state of the patient.	1.3.1 Assess the mental and psychological status of the patient. 1.3.2 Identify common types of cognitive impairments.
1.4. Perform appropriately timed full physical examination of patients appropriate to the age, gender, and clinical presentation of the patient while being culturally sensitive.	1.4.1 Conduct full physical assessment for different age groups and genders in acute and chronic clinical conditions. 1.4.2 Perform appropriate clinical examination, with consideration of the different culture backgrounds.
1.5. Prioritize issues to be addressed in a patient encounter.	1.5.1 Prioritize the collected data during history taking and clinical examination. from the patient medical problems and their differential diagnoses
1.6. Select the appropriate investigations and interpret their results taking into consideration cost/ effectiveness factors.	1.6.1 Follow the guide lines in choosing the proper investigation, taking in consideration the cost effectiveness factors. 1.6.2 Analyze results of performed investigation to reach a proper diagnosis.



Competency Area I

Graduate as a health care provider

Competency (1) The graduate as a health care provider *By the end of the program, the graduate will be able to:*

Key Competencies	Program LOs
1.7. Recognize and respond to the complexity, uncertainty, and ambiguity inherent in medical practice.	1.7.1 Recognize uncertain and complex medical conditions that are unavoidable in the practice of medicine. 1.7.2 Cope with the complexity and uncertainty by proper counseling, consultation and referral.
1.8. Apply knowledge of the clinical and biomedical sciences relevant to the clinical problem at hand.	1.8.1 Integrate basic sciences relevant to medicine into clinical practice.
1.9. Retrieve, analyze, and evaluate relevant and current data from literature, using information technologies and library resources, in order to help solve a clinical problem based on evidence (EBM).	1.9.1 Retrieve and analyze relevant data using different current information resources. 1.9.2 Evaluate collected data to solve clinical problems.
1.10. Integrate the results of history, physical and laboratory test findings into a meaningful diagnostic formulation.	1.10.1 Formulate the collected data including the history, clinical examination and investigations to reach a proper diagnosis.
1.11. Perform diagnostic and intervention procedures ² in a skillful and safe manner, adapting to unanticipated findings or changing clinical circumstances.	1.11.1 Perform different diagnostic and intervention procedures in a safe manner in different clinical situations.* Appendix B 1.11.2 Define the principles of management for common diseases and life-threatening conditions including pharmacological basis of drugs, non-invasive and invasive interventions, basic pre- and post operative care, pain relief and palliative care.
1.12. Adopt strategies and apply measures that promote patient safety	1.12.1 Recognize basics of health and patient's safety and safety procedures during practical and clinical years.



Competency Area I

Graduate as a health care provider

Competency (1) The graduate as a health care provider *By the end of the program, the graduate will be able to:*

Key Competencies	Program LOs
1.13. Establish patient-centered management plans in partnership with the patient, his/her family and other health professionals as appropriate, using Evidence Based Medicine in management decisions.	1.13.1 Construct a patient centered management plan, in collaboration with the patient, his family and other health professionals. 1.13.2 Formulate the management decisions according to Evidence Based Medicine.
1.14. Respect patients' rights and involve them and /or their families/carers in management decisions.	1.14.1 Respect patient's right to know and share in management decision.
1.15. Provide the appropriate care in cases of emergency, including cardio-pulmonary resuscitation, immediate life support measures and basic first aid procedures.	1.15.1 Follow the guidelines necessary for managing emergencies, including cardio-pulmonary resuscitation, immediate life support measures and basic first aid procedures.
1.16. Apply the appropriate pharmacological and nonpharmacological approaches to alleviate pain and provide palliative care for seriously ill people, aiming to relieve their suffering and improve their quality of life.	1.16.1 Adopt the guidelines for appropriate therapeutic modalities for palliative care and pain management.
1.17. Contribute to the care of patients and their families at the end of life, including management of symptoms, practical issues of law and certification.	1.17.1 Support the patients and their families at end of life, as regards alleviation of symptoms and recognition of legal factors.



Competency Area II

Graduate as a health promoter

Competency (2) The graduate as a health promoter *By the end of the program, the graduate will be able to:*

Key Competency	Program LOs
2.1 Identify the basic determinants of health and principles of health improvement.	2.1.1 Identify the core knowledge of health care. 2.1.2 Clarify the basic principles of health care enhancement.
2.2 Recognize the economic, psychological, social, and cultural factors that interfere with wellbeing.	2.2.1 Integrate variable factors including economic, psychological, social, and cultural issues that influence the individual wellbeing.
2.3 Discuss the role of nutrition and physical activity in health.	2.3.1 Emphasize on the role of nutrition and healthy life style in maintenance of health and prevention of disease.
2.4 Identify the major health risks in his/her community, including demographic, occupational and environmental risks; endemic diseases, and prevalent chronic diseases.	2.4.1 Recognize the impact of epidemiological and occupational risk factors on health in a given community. 2.4.2 Understand the causes behind the diseases chronicity and endemicity in a certain population. 2.4.3 Differentiate population based approaches of health care including disease burden, quality of life and wellbeing. 2.4.4 Outline the epidemiologic principles and the effect of social and demographic patterns on disease and vulnerability.



Competency Area II

Graduate as a health promoter

Competency (2) The graduate as a health promoter *By the end of the program, the graduate will be able to:*

Key Competency	Program LOs
2.5 Describe the principles of disease prevention, and empower communities, specific groups or individuals by raising their awareness and building their capacity.	2.5.1 Identify the determinants of disease prevention, early detection and control of common community health problems. 2.5.2 Raise the awareness of communities and build their capacities in disease prevention. 2.5.3 Define the principles of management and appropriate quality concepts and processes required for healthcare facilities. 2.5.4 Describe the Egyptian health systems and different population-based approaches of health care including disease burden, quality of life and well-being.
2.6 Recognize the epidemiology of common diseases within his/her community, and apply the systematic approaches useful in reducing the incidence and prevalence of those diseases.	2.6.1 Identify the epidemiology of common diseases within the community. 2.6.2 Implement the systematic approaches useful in reducing the incidence and prevalence of those diseases.
2.7 Provide care for specific groups including pregnant women, newborns and infants, adolescents and the elderly.	2.7.1 Implement proper health care in different groups including pregnant women, newborns and infants, adolescents and the elderly.
2.8 Identify vulnerable individuals that may be suffering from abuse or neglect and take the proper actions to safeguard their welfare.	2.8.1 Recognize individuals exposed to abuse or negligence. 2.8.2 Perform proper measures to protect the wellbeing of vulnerable groups.
2.9 Adopt suitable measures for infection control.	2.9.1 Adopt infection control measures and safety procedures



Competency Area III

Graduate as a professional

Competency (3) The graduate as a professional *By the end of the program, the graduate will be able to:*

Key Competency	Program LOs
3.1. Exhibit appropriate professional behaviors and relationships in all aspects of practice, demonstrating honesty, integrity, commitment, compassion, and respect.	3.1.1 Practices within a professional and ethical framework, demonstrating honesty, integrity, commitment, compassion, and respect. 3.1.2 Honor and respect patients and their relatives, superiors, colleagues and any other member of the health profession.
3.2. Adhere to the professional standards and laws governing the practice, and abide by the national code of ethics issued by the Egyptian Medical Syndicate.	3.2.1 Apply the national code of ethics issued by the Egyptian Medical Syndicate. 3.2.2 Adhere to legal requirements for medical practice.
3.3. Respect the different cultural beliefs and values in the community they serve.	3.3.1 Interact with different cultural beliefs and values in the community they serve.
3.4. Treat all patients equally, and avoid stigmatizing any category regardless of their social, cultural, ethnic backgrounds, or their disabilities.	3.4.1 Adopt a holistic unbiased approach towards all patients regardless of their different social, cultural and ethnic diversity.



Competency Area III

Graduate as a professional

Competency (3) The graduate as a professional *By the end of the program, the graduate will be able to:*

Key Competency	Program LOs
3.5. Ensure confidentiality and privacy of patients' information.	3.5.1 Emphasize on confidentiality and privacy of patient's information.
3.6. Recognize basics of medico-legal aspects of practice, malpractice and avoid common medical errors.	3.6.1 Adhere to medicolegal requirements for health care. 3.6.2 Avoid malpractice and common medical errors.
3.7. Recognize and manage conflicts of interest.	3.7.1 Aware and interact with issues and areas of conflicts of interest
3.8. Refer patients to appropriate health facility at the appropriate stage.	3.8.1 Select the appropriate stage for patient's referral to the proper health facility.
3.9. Identify and report any unprofessional and unethical behaviors or physical or mental conditions related to himself, colleagues or any other person that might jeopardize patients' safety.	3.9.1 Recognize any events reflecting unprofessional or unethical practice. 3.9.2 Identify physical or mental conditions in himself and colleagues that would endanger the patient's safety. 3.9.3 Report any events that encounter unethical, unprofessional behaviors and any mental or physical conditions that would disrupt patient's safety.



Competency Area IV

Graduate as a scholar and scientist

Competency (4) The graduate as a scholar and scientist *By the end of the program, the graduate will be able to:*

Key Competency	Program LOs
4.1 Describe the normal structure of the body and its major organ systems and explain their functions.	4.1.1 Describe the normal structure and function of human body
4.2 Explain the molecular, biochemical, and cellular mechanisms that are important in maintaining the body's homeostasis.	4.2.1 Describe molecular, biochemical and cellular mechanisms needed in maintaining homeostasis
4.3 Recognize and describe main developmental changes in humans and the effect of growth, development and aging on the individual and his family.	4.3.1 Identify the developmental changes in humans and the effect of growth and aging on individuals and their family.
4.4 Explain normal human behavior and apply theoretical frameworks of psychology to interpret the varied responses of individuals, groups and societies to disease.	4.4.1 Describe basics of normal and abnormal human behavior. 4.4.2 Use psychological knowledge to interpret the diversity in responses of individuals, groups and societies to disease.



Competency Area IV

Graduate as a scholar and scientist

Competency (4) The graduate as a scholar and scientist *By the end of the program, the graduate will be able to:*

Key Competency	Program LOs
4.5 Identify various causes (genetic, developmental, metabolic, toxic, microbiologic, autoimmune, neoplastic, degenerative, and traumatic) of illness/disease and explain the ways in which they operate on the body (pathogenesis).	4.5.1 Describe the etiology of illness/diseases (genetic, developmental, metabolic, toxic, microbiologic, autoimmune, neoplastic, degenerative, and traumatic). 4.5.2 Clarify the underlying mechanisms of the various diseases.
4.6 Describe altered structure and function of the body and its major organ systems that are seen in various diseases and conditions.	4.6.1 Describe the pathology and pathophysiology of different diseases at the cellular, organ and system levels.
4.7 Describe drug actions: therapeutics and pharmacokinetics; side effects and interactions, including multiple treatments, long term conditions and non-prescribed medication; and effects on the population.	4.7.1 Describe the pharmacological basis of drug therapy, (actions, pharmacokinetics and side effects). 4.7.2 Recognize drug interactions, including multiple treatments. 4.7.3 Identify the various non-prescribed medication. 4.7.4 Recognize the long term effect of different drugs on population.
4.8 Demonstrate basic sciences specific practical skills and procedures relevant to future practice, recognizing their scientific basis, and interpret common diagnostic modalities, including: imaging, electrocardiograms, laboratory assays, pathologic studies, and functional assessment tests.	4.8.1 Demonstrate the principles and procedures of practical skills in basic sciences. 4.8.2 Correlate the basic practical skills to future practice. 4.8.3 Select and interpret Common diagnostic modalities, including: imaging, electrocardiograms, laboratory assays, pathologic studies, and functional assessment tests, according to guide lines.



Competency Area V

Graduate as a member of the health team and a part of the health care system

Competency (5) The graduate as a member of the health team and a part of the health care system

By the end of the program, the graduate will be able to:

Key Competency	Program LOs
5.1 Recognize the important role played by other health care professions in patients' management.	5.1.1 Identify the important contribution by other members of health care system in patients' management.
5.2 Respect colleagues and other health care professionals and work cooperatively with them, negotiating overlapping and shared responsibilities and engaging in shared decision-making for effective patient management.	5.2.1 Respect colleagues and other health care professionals. 5.2.2 Work effectively within a multidisciplinary team 5.2.3 Ensure the importance of negotiation in overlapping and shared responsibilities, to reach a shared decision with other health care professionals for effective patient management.
5.3 Implement strategies to promote understanding, manage differences, and resolve conflicts in a manner that supports collaborative work.	5.3.1 Apply strategies that undermine conflicts and enhance teamwork.
5.4 Apply leadership skills to enhance team functioning, the learning environment, and/or the health care delivery system.	5.4.1 Implement leadership skills to promote team building, learning environment and/or the health care deliver system.



Competency Area V

Graduate as a member of the health team and a part of the health care system

Competency (5) The graduate as a member of the health team and a part of the health care system

By the end of the program, the graduate will be able to:

Key Competency	Program LOs
5.5 Communicate effectively using a written health record, electronic medical record, or other digital technology.	5.5.1 Present information clearly in written, electronic and verbal forms. 5.5.2 Facilitate effective communication through documentation whether written, electronic records or other digital technology.
5.6 Evaluate his/her work and that of others using constructive feedback.	5.6.1 Use feedback to assess own work and that of others.
5.7 Recognize own personal and professional limits and seek help from colleagues and supervisors when necessary.	5.7.1 Consult other colleagues and supervisors in conditions that exceed his capabilities.
5.8 Apply fundamental knowledge of health economics to ensure the efficiency and effectiveness of the health care system.	5.8.1 Implement the principles of health economics to achieve an efficient and effective health care system.



Competency Area V

Graduate as a member of the health team and a part of the health care system

Competency (5) The graduate as a member of the health team and a part of the health care system

By the end of the program, the graduate will be able to:

Key Competency	Program LOs
5.9 Use health informatics to improve the quality of patient care.	5.9.1 Improve the quality of patient care through the proper use of information technology.
5.10 Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements.	5.10.1 Record a complete, accurate and retrievable clinical data without delay, abiding to the regulations and requirements of laws.
5.11 Improve the health service provision by applying a process of continuous quality improvement.	5.11.1 Ensure the implementation of the principles of total quality management process to improve healthcare.
5.12 Demonstrate accountability to patients, society, and the profession.	5.12.1 Shows responsibility and commitment towards patients, profession and society as a whole.



Competency Area VI

Graduate as a lifelong learner and researcher

Competency (6) The graduate as a lifelong learner and researcher *By the end of the program, the graduate will be able to:*

Key Competency	Program LOs
6.1 Regularly reflect on and assess his/her performance using various performance indicators and information sources.	6.1.1 Appraise own performance regularly using various performance indicators and information sources
6.2 Develop, implement, monitor, and revise a personal learning plan to enhance professional practice	6.2.1 Create and employ personal learning plan to enhance professional practice 6.2.2 Evaluate his/her personal learning plan to ensure continuous professional development
6.3 Identify opportunities and use various resources for learning.	6.3.1 Recognize available learning opportunities 6.3.2 Use different resources to promote learning process.
6.4 Engage in inter-professional activities and collaborative learning to continuously improve personal practice and contribute to collective improvements in practice.	6.4.1 Join inter-professional cooperative learning and activities to improve self and overall practice
6.5 Recognize practice uncertainty and knowledge gaps in clinical and other professional encounters and generate focused questions that address them.	6.5.1 Identify own limitation in knowledge and professional practice through formulation of focused questions



Competency Area VI

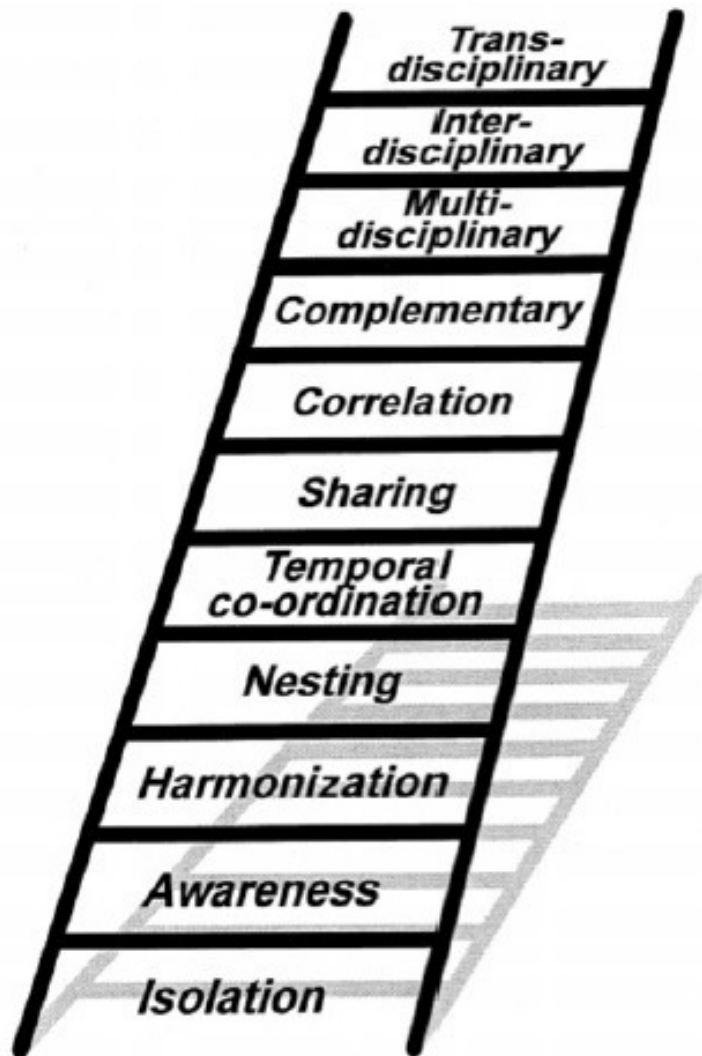
Graduate as a lifelong learner and researcher

Competency (6) The graduate as a lifelong learner and researcher *By the end of the program, the graduate will be able to:*

Key Competency	Program LOs
6.6 Effectively manage learning time and resources and set priorities.	6.6.1 Prioritize tasks to achieve proper time management and optimum resource utilization
6.7 Demonstrate an understanding of the scientific principles of research including its ethical aspects and scholarly inquiry and Contribute to the work of a research study.	6.7.1 Express comprehensive understanding of the fundamentals of scientific research 6.7.2 Respect ethical principles of research and actively participate in research activities
6.8 Critically appraise research studies and scientific papers in terms of integrity, reliability, and applicability.	6.8.1 Criticize scientific research studies as regards relevance, integrity, reliability, and applicability
6.9 Analyze and use numerical data including the use of basic statistical methods.	6.9.1 Apply simple statistical methods.
6.10 Summarize and present to professional and lay audiences the findings of relevant research and scholarly inquiry	6.10.1 Construct research result presentation adjusted to the types of audiences addressed (professional and public)



Framework



**Harden, 2000 in The integrated curriculum in medical education:
AMEE Guide No. 96 (Brauer & Ferguson 2015)**

- Step 1 is isolation, in which faculty organize their teaching without considering other subjects or disciplines.
- Step 2 is awareness, in which teachers of one subject are aware of what is covered elsewhere, but no explicit attempt is made to help students look at a subject in an integrated manner.
- Step 3 is harmonization, in which teachers communicate with each other about their courses and adapt their content accordingly.
- Step 4 is nesting, also called infusion, in which teachers target content from other courses within their own courses.
- Step 5 is temporal co-ordination, in which similar content is covered in parallel across courses.
- Step 6 is sharing or joint teaching, often conducted when there are common areas of content or there is a need to include new content in a curriculum.
- Step 7 is correlation, in which an integrated teaching session may be introduced in addition to subject-based teaching.
- Step 8 is complementary programming, often related to a theme or topic to which several disciplines can contribute.
- Step 9 is multi-disciplinary, in which themes are identified, sometimes related to an area in which practical decisions need to be made, other times when the subject matter transcends subject boundaries. These themes or problems are viewed through a multidisciplinary lens even though the disciplines maintain their own identity and understanding of the problem.
- Step 10 is inter-disciplinary, in which there is further development of the commonalities across disciplines.
- Step 11 is trans-disciplinary, in which the curriculum focuses on the learner's process of constructing meaning from information and experience. An example cited is the last two years of the Dundee curriculum (Harden et al. 1997), in which students focus their learning around 113 clinical problems or tasks to integrate their experience.

Benchmarks



1. **National Academic Reference Standards (NARS), Medicine, 2nd Ed, 2017**, The National Authority for Quality Assurance and Accreditation "NAQAAE"
2. **Dundee MBChB Course Structure**. Accessed at: <http://medicine.dundee.ac.uk/dundee-mbchb-course-structure>
3. **Dundee: Learning Medicine in Dundee, Curriculum Handbook**, Accessed at: <http://www.dundee.ac.uk/medschool>
4. **Imperial College London, Medicine (MBBS) Programmes**. Accessed at: <https://www.imperial.ac.uk/medicine/study/undergraduate/medicine-mbbs-programmes/>
5. **Keele University Graduating Excellent Clinicians (2018)**: Accessed at: <https://www.keele.ac.uk/medicine/>
6. **Keele University Programme Specification: Undergraduate (2017/2018)**: Accessed at: <https://www.keele.ac.uk/medicine/mbchb5years/courseinformationandcurriculummap/>
7. **King's College London Programme Approval Form (2016)**, Accessed at: <https://www.kcl.ac.uk/aboutkings/quality/academic/prog/specs/201617pdfs/Medicine-Undergraduate-Graduate-Professional-Entry-Programme-MBBS.pdf>
8. **King's College London Programme Specification (2016)**, Accessed at: <https://www.kcl.ac.uk/aboutkings/q/uality/academic/prog/specs/201718pdfs/NEW-PG-EXIT-AWARDS/Women-and-Childrens-Health-MSc.pdf>
9. **King's College London, The MBBS Curriculum 2020**. Accessed at: <https://www.kcl.ac.uk/IsM/education/meded/mbbs/index.aspx>
10. **King's College, Review of King's College London School of Medicine, 2012-2013, General Medical Council**. Accessed at: https://www.gmc-uk.org/-/media/documents/kings-college-report_pdf-51938065.pdf
11. **Li Ka Shing Faculty of Medicine, The University of Hong Kong, Bachelor of Medicine and Bachelor of Surgery Programme (MBBS) 5-year curriculum**: Accessed at: <http://www.med.hku.hk/programme/mbbs-5yr>
12. **Monash University, The New 5 Year Curriculum**, Accessed at: <http://www.med.monash.edu.au/gendermed/curriculum.html>
13. **Queen Mary University of London. Medicine (5 Year Programme)**. Accessed at: <https://www.qmul.ac.uk/undergraduate/coursefinder/courses/80040.html>
14. **RCSI Bahrain Royal College of Surgeons in Ireland, Five-Year Curriculum**. Accessed at: <http://www.rcsibahrain.edu.bh/index.jsp?p=1064&n=119>
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	Manchester's	KCL	UCL	Dundee	ST. George
Foundation years Content Fundam. & Basics CVS+Resp Imm. + Inf. Musculosk Neuroscien GIT & Renal Endocrine Theraput. Genetic dis. & Cancer Reprod. Path.	Year 1 <u>Life Cycle Module</u> Cellular & mol. Immune syst. Genetic diseases Cancer pathphys. CardioResp. Mod. Year 2 Musculosk. & Neuroscience mod GIT, Renal and endocrine mod.	Year 1 <u>Biomed. Sci.</u> Genes behavior & environment Year 2 Less Biom. Sci. Immunity & Inf. Life Support Diagnostics Pathology Therapeutics Trauma Year 3 Less Biom .Sci. Human dev. Cl. Genetics Healthy ageing	Year 1 Foundation health & med. Practice Immunity & Inf. CVS & Resp. Fluids, nutrition & Metabolism Year 2 Musculosk. Neuroscience Endocrine Genetics & Cancer	Year 1 <u>Basics of:</u> Structure Function Molecular Disease Defense Drugs + 3 Syst. Year 2 7 syst Year 3 5 syst. CVS, Resp Renal, GIT, Nervous Meusculosk. Endocrine Ageing Blood Sp. Senses	Year 1 Life Support: CVS, Resp Life maintenance GIT, Renal, Endocrine Year 2 Immunity , Inf. Life structure: Musculosk. Genetics Life Control: Neurosc. Reprod. Ageing Year 3 Same as yr. 2 but PBL

K.A.M.P. 2018-2019



Credit Point System (ECTS)

Student Work Load = Contact + Non-Contact Hours

Student Work Load (50 hrs/wk)

Non-Contact Work Load → Portfolio

Phase 1: Body Systems' (5 Semesters)

Introductory Block (1 Semester)

System Based Modules (4 Semesters)

Musculoskeletal System 1 & 2

Cardiovascular System

Respiratory System

Neuroscience 1 & 2

Hematopoietic System, Immunity & Defense mechanism

Digestive & Hepatobiliary System

Endocrine System

Urogenital System

Reproductive System

Cognitive & Behavioral Sciences

Investigative Medicine

Vertical Modules

Phase 2: Integrated Clinical Themes (5 Semesters)

Clinical Rounds with Clinical Core Cases



Draft 1 curriculum map of IMP/MUST (Date: 25/11/2017)

CPR Humanities & Medical ethics Biostatistics and Research Methods Clinical exposure & personal development	1st Semester				2nd Semester				
	YEAR 1	Foundation General Modules				Integrated Body Systems Modules			
		Foundation & Musculoskeletal system1				Musculo-skeletal system 2	Integumentary system	Cardio-vascular system	Respiratory system
	YEAR 2	Integrated Body Systems Modules				Integrated Body Systems Modules			
		Digestive system	Liver and biliary system	Endocrine system	Metabolism 1	Reproductive system & Breast	Renal system	Haemo-lymphatic system	Metabolism 2
	YEAR 3	Integrated Body Systems Modules				Activities and assignments as part of cont. assessment will be recorded in Cumulative portfolios			
		Nervous system	Special senses	Antimicrobial chemotherapy					



- قام الاساتذة اد هالة كحله و اد منال المصري و اد حنان مبارك بعرض المسودة الاولى لمقترح منهج مقدم من قصر العيني للسنوات الثلاث الاولى بنظام
(Modular Education Integrated Curriculum MEDIC) متضمناً الفصل التحضيرى بالسنة الاولى

Draft 1

Integrated Modular System

Year 1	
Semester 1	Semester 2
<ul style="list-style-type: none">• Introduction of normal structure of Cells and tissues.• Introduction of normal homeostatic functions of cells, tissues, organs and systems.• Molecular Biology• Immunology• Principles of therapeutics• Concepts and Principles of pathophysiological and pathological conditions.• Infection control 1• Genetics / embryology• Medical bioethics• Medical terminology (self-learning)• Skills lab (Vital signs)	<ul style="list-style-type: none">• Haemopoietic system• Musculoskeletal system• Cardiovascular system• Respiratory system• Biostatistics• Skills lab (basic life support)• Behavioral Medicine• Medicolegal Aspects
Year 2	
Semester 1	Semester 2
<ul style="list-style-type: none">• Neuroscience 1• Endocrine system• Digestive system• Liver and biliary system• health systems research	<ul style="list-style-type: none">• Neuroscience 2• Reproductive system• Genitourinary system• Nutrition• Metabolism• Applied Epidemiology
Year 3	
Semester 1	
<ul style="list-style-type: none">• Neuroscience 3 (Special sense)• Head and neck• Breast• Multisystem diseases• Research methodology	

-قامت اد هالة كحله و اد منال المصرى بعرض المسودة الثانية لمقترح منهج مقدم من قصر العيني للسنوات الخمس بنظام (Modular Education) (Integrated Curriculum MEDIC).

Year 1

1 st Semester	
Block 1 (9 weeks)	Block 2 (8 weeks)
Structural principles Functional principles Molecular principles Psychosocial principles Disease mechanisms Defense mechanisms Principles of drug therapy Safe medical practice Principles of medical ethics Basic emergency care Medical terminology	Musculoskeletal system Biostatistics Population science Basics of genetics
2 nd Semester	
Block 3 (8 weeks)	Block 4 (8 weeks)
Respiratory system Hemopoietic system Skills lab	Cardiovascular system Nutrition General embryology Medical professionalism Skills lab

Year 2

1 st Semester	
Block 5 (8 weeks)	Block 6 (8 weeks)
Gastrointestinal system & hepatology Early patient contact.	Genitourinary system Endocrine system Special embryology & fetal anomalies. Early patient contact (relevant cases)
2 nd Semester	
Block 7 (8 weeks)	Block 8 (8 weeks)
Neuroscience I Ageing Health , behavior& society Sexual health	Neuroscience II Injury & repair

Year 3

Transitional year- 36 weeks

1 st Semester	
Block 9 (9 weeks)	Block 10 (9 weeks)
Infections & infection control Therapeutics & prescribing	Forensic medicine Evidence based medicine
2 nd Semester	
Block 11 (9 weeks)	Block 12 (9 weeks)
Substance abuse Mental health Foundations of clinical practice. (simulated & real patients) Fundamentals of Clinical Research	ENT Dermatologv.

Hospital-based blocks year 4

Block 13 9 weeks in Children's Hospital	Block 14 9 weeks in Women's Hospital
Block 15 9 weeks in Int. Medicine Surgery	Block 16 9 weeks Ophthalmology psychiatry

Hospital-based blocks year 5

Block 17 20 weeks in Surgery Hospital	Block 18 20 weeks in Medicine Hospital
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- قام اد مصطفى سليم بحرض مسودة مقدمة من اد مصطفى سليم و اد منى عطيه و اد حنان مبارك و اد حمدي ابراهيم و اد نرمين مفتاح و اد ولاء سيد و اد رشا احمد و اد ايمان مجدي و و اد علا سيد لمقترح رقم ٢ لكلية طب جامعة القاهرة بنظام (Modular Education Integrated Curriculum)
 (MEDIC) سنتان و نصف Introductory & System Blocks ثم سنتان و نصف اكلينيكي بنظام Clinical themes مقسمة الي حزم Bundles على الاقسام المختلفة حسب القسم الرئيسي في تدريس ال Themes داخل كل حزمة بالإضافة للمناهج الرئيسية

Clinical Themes Covered	Main Department	Complimentary Depts.
Shortness of breath/ RD.	Internal	
Palpitation		
Chest pain		
Raised blood pressure		
Collapse		
Bundle 2:		
Clinical Themes Covered	Main Department	Complimentary Depts.
Unsteady gait	Internal	
Unconsciousness/ Coma		
Tingling/ numbness		
Paraplegia		
Focal neurological deficit		
Bundle 3:		
Clinical Themes Covered	Main Department	Complimentary Depts.
Cough	Internal	
Hemoptysis		
Noisy breathing/wheezy chest		
Sore throat		
Bundle 4:		
Clinical Themes Covered	Main Department	Complimentary Depts.
Fever	Internal	
Recurrent infections		
Abnormal Labs		
Bruising		
Bundle 5:		
Clinical Themes Covered	Main Department	Complimentary Depts.
Abdominal distension/ pain	Internal	
Jaundice		
Hematemesis		
Diarrhea/ stool incontinence		
Constipation		
Vomiting		
Weight loss/ loss of appetite		
Weight gain/ obesity		
Bundle 6:		
Clinical Themes Covered	Main Department	Complimentary Depts.
Confusion	Internal	
Dizziness		
Tiredness / Generalized weakness		
Headache		
Pain		
Tremor		
Thirst		
Sudden death		
Bundle 7:		
Clinical Themes Covered	Main Department	Complimentary Depts.
Breast lump	General sur	
Groin lump		
Neck lump		
Scrotal swellings		
Cold extremities		
Leg/ foot ulcer		
Bundle 8:		
Clinical Themes Covered	Main Department	Complimentary Depts.
Difficulty swallowing	General sur	
Abdominal/loin pain		
Rectal bleeding		
Hematemesis		
Bundle 9:		
Clinical Themes Covered	Main Department	Complimentary Depts.
Perioperative care	General sur	
Postoperative problems		
Infection control		
Hematuria		
Urinary symptoms		
Bundle 10:		
Clinical Themes Covered	Main Department	Complimentary Depts.
Trauma	General sur	
Falls / immobility	Orthopedic	
Joint swelling/pain	Rheumatol	
Leg pain/ ankle swelling		
Muscle pain		
Back/neck pain		
Painful mouth		
Bundle 11:		
Clinical Themes Covered	Main Department	Complimentary Depts.
Fetal malformation	Pediatric m	
Growth and development		
Intellectual developmenet		
Arrested development		
Immunisation		
Fever/ recurrent infections		
SFGA/ LFGA		
Exanthemata		
Bundle 12:		
Clinical Themes Covered	Main Department	Complimentary Depts.
Abn. / Irreg. vaginal bleeding	Gyn. & Obs	
Pelvic pain		
Pelvic organ prolapse		
Contraception		Andrology Dpt.
Sexual medicine		Andrology Dpt.
Infertility		Andrology Dpt.
STDs/ Genital discharge		Andrology Dpt.
Pregnancy/ Antenatal care		
Bleeding in pregnancy		
Labor		
SFGA/ LFGA		Pediatrics Dpt.
Bundle 13:		
Clinical Themes Covered	Main Department	Complimentary Depts.
Acute loss of vision	Ophthalmology Dpt.	Neurology
Chronic loss of vision		Internal medicine
Acute red eye		
Chronic red eye		
Squint		
Painful eye		
Bundle 14:		
Clinical Themes Covered	Main Department	Complimentary Depts.
Altered mood	Psychiatry Dpt.	Internal medicine
Anxiety		
Behavioral problems		
Psychosis		
Child abuse/ deliberate self harm		
Substance abuse		Toxicology
Bundle 15:		
Clinical Themes Covered	Main Department	Complimentary Depts.
Blocked nose	ENT Dpt.	
Deafness		
Ear ache		
Hoarsness		
Stridor		
Tinnitus		
Bundle 16:		
Clinical Themes Covered	Main Department	Complimentary Depts.
Hair problems	Dermatology Dpt.	Internal medicine
Skin rash		General surgery
Skin lumps		
Itching		
Bundle 17:		
Clinical Themes Covered	Main Department	Complimentary Depts.
Statistics/ research studies	Community Med. Dpt.	Infection control unit
Epidemiology of disease		Pediatric Medicine
Infection control		
Immunisation		
Travel advice		

*Can be arranged in a separate bundle



- قامت اد عبير زايد بحرض مسودة مقدمة من اد عبير زايد و اد حنان مبارك و د ماريث عوض الله و د سوزان ألبرت و د ريهام نفاذ لمقترح رقم ٣ لكلية طب جامعة القاهرة بنظام (Modular Education Integrated Curriculum MEDIC) سنتان و نصف Introductory & System Blocks تم سنتان و نصف اكلينيكي بنظام System Based بالاضافة للمناهج الرأسيه

Integrated Curriculum Draft

Phase I: Foundation	Vertical Modules
1st Semester (16 weeks)	
Block 1(10 weeks): Introduction To human Body	
<ul style="list-style-type: none">• Structural principles (Basis of Anatomy, Cytology & basic tissues)• Functional principles (Introduction to Physiology & biophysics)• Bio chemical Principles.• Molecular & genetic principles• Cognitive & behavioral principles• General embryology and development.• Medical terminology (self-learning)	<ul style="list-style-type: none">• Medical professionalism & capacity building:<ul style="list-style-type: none">✦ Principles of biomedical ethics/ code of conduct/human rights.✦ Communication Skills✦ Leadership✦ Regulations of research✦ Medical claims & regulations✦ Medical errors & malpractice• Early patient Encounter (serving at the end of each module in phase II)• Mentorship• Research project• Electives:<ul style="list-style-type: none">✦ Languages✦ Medical courses as (geriatric medicine, traffic medicine, sports medicine,.....)✦ Non medical courses as (HR, Economics, IT, Art,.....)
Block 2 (6 weeks): Introduction to Disease mechanisms	
<ul style="list-style-type: none">• Basis of pathology, Microbiology & parasitology.• Principles of drug therapy & prescriptions (General pharmacology).• Epidemiology.• Biostatistics• Basis of Infection control <p>Skill Lab (Hand washing)</p>	



Phase II: System based modules for preclinical practice	4th semester
2nd Semester	Block 6(16 weeks): Integration & Control
Block 3 (8 weeks): Support & Movement	<ul style="list-style-type: none"> • Neuroscience II (CNS) • Endocrine System
<ul style="list-style-type: none"> • Musculoskeletal system • Integumentary system <i>Skill lab (injection sites & techniques)</i>	5th Semester
Block 4 (8 weeks): Internal Environment	Block 7(16 weeks): Maintenance of Life
<ul style="list-style-type: none"> • Hemopoietic system • Lymphatic & immune system <i>Skill lab (blood grouping/ handling of blood samples).</i>	<ul style="list-style-type: none"> • Digestive system • Urinary system • Reproductive system (including pregnancy & sexual cycle) • Nutrition & Metabolism. <i>Skill Lab (catheterization/ Ryle insertion/pregnancy test)</i>
3rd Semester	Phase III: Clinical Practice
Block 5 (16 weeks): Vital Systems	6TH semester
<ul style="list-style-type: none"> • Respiratory system • Cardiovascular system • Neuroscience I (Autonomic NS) <i>Skill lab (vital signs/blood pressure/First Aid/ ECG)</i>	Block 7(16 weeks): transitional block
	<ul style="list-style-type: none"> • Special Senses (Ophthalmology & ENT) • Legal medicine • General Aspects of Clinical Toxicology • EBM <i>Skill Lab (Imaging & Laboratory Reports/ gastric lavage)</i>
	7th Semester
	General Medicine I
	8th Semester
	General Medicine II Children Health
	9th Semester
	General Surgery I
	10th Semester
	General Surgery II Women's Health



Preliminary Program Map



Preliminary System Based Modules' Weights



Source



Kasr



Kasr Al Ainy Integrated Program - Faculty of Medicine - Cairo University



CONTENT

Anatomy : Introduc
Anatomy: General I
Histology: Introduc
Histology: Microtec
Histology: Cytology
Histology: CT prop
Histology: Epitheliu
Histology: Cytogen

Biochemistry: Bioc
Biochemistry of Mc
Biochemistry of Ge
Physiology: Introdu
Physiology of Nerv
Physiology of Meta
Physiology: Biophy

Micro: Bacterial Str
Micro: Bacterial Gr
Micro: Bacterial Ge
Micro: Bacterial Va
Micro: Bacterial Pa

Micro: Antimicrobi
Micro: General viro
Micro: General Myc

Pharma: Introductio
Pharma: Drug inter
Pharma: Prescriptio
Pathology: Introduc
Pathology: Samplin
Pathology: Inflamm
Pathology: Cell inju
Pathology: Growth

Pathology: Fluid &
Pathology: Parasitic
Pathology: Genetic
Pathology: Cytolog
Pathology: Immuno
Parasitology : Intro

Anatomy of Autono
Anatomy of Sympat
Anatomy of Parasyt
Physiology: Autono
Histology: Neuron
Histology: Ganglia
Histology: Peripher
Histology: Degener
Histology: Nerve er
Pharma: Autonomic

Anatomy of B
Anatomy of B
Anatomy of B
Embryology c
Biochemistry:
Micro: Norma
Micro: Staph
Micro: Bacilli
Micro: Psudo
Micro: Mycot
Micro: Barton
Micro: Derma
Micro: Candic
Micro: Meask
Micro: Herpe
Micro: HHV-1
Micro: Parvov
Micro: Pox vi
Physiology of

Histology of I
Histology of C
Histology of I
Histology of I

Anatomy of B
Anatomy of T
Anatomy of T
Anatomy of S
Biochemistry
Biochemistry
Micro: Gener
Micro: Overv
Micro: Innate
Micro: T cell
Micro: The H
Micro: Acqui
Micro: Immu
Micro: Hyper
Micro: Transp
Micro: Tolera
Micro: Immu
Micro: Brucel
Micro: Borrel
Micro: Retrov
Micro: Enbste

Physiology: B
Histology: Bl
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Pharma: Immi
Pharma: Bloo
Pharma: GIT
Pathology: Bl
Parasitology :

Anatomy of I
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Anatomy of
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Biochemistry
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Micro: Toxe
Micro: Fung
Physiology: C
Histology: W
Pharma: Carc
Pathology of

Anatomy of I
Anatomy of I
Anatomy of I
Anatomy of
Embryology

Mirco: Norm
Mirco: Airbo
Mirco: Strept
Mirco: Coryt
Mirco: Biote
Mirco: Acine
Mirco: Borde
Mirco: Myco
Mirco: Myco
Mirco: Chaln
Mirco: Candi
Mirco: Asreg
Mirco: Ortho
Mirco: Meta
Mirco: Rhinc
Physiology: I
Histology: R
Pharma: Res
Pathology of
Parasitology:

Anatomy of
Anatomy of
Anatomy of I
Anatomy of I
Anatomy of I
Pharma: Skel
Parasitology

Neuroanatomy, Anatom
Anatomy of EYE
Anatomy of EAR
Embryology of CNS
Biochemistry of Signal
Mirco: Strept Agalactiae
Mirco: Listeria Monocyt
Mirco: Hemophilus aeg
Mirco: Clostr Botulinum
Mirco: Candida
Mirco: Coccidiodes
Mirco: Polio Virus
Mirco: Herpes Simplex
Physiology: Sensory
Physiology: Motor
Physiology: Special Sen

Histology: pathways
Histology: tracts
Histology: Spinal cord
Histology: Brain stem
Histology: cerebellum
Histology: cerebrum bra
Histology: Eye & Ear
Pharma: Ocular pharmac
Pharma: Psycho-neuro-p
Pathology: Peripheral &
Parasitology: CNS

Anatomy of Pituitary G
Anatomy of Thyroid & I
Anatomy of Suprarenal
Anatomy of Pancreas
Embryology of Endocri

Biochemistry of Diabete
Physiology: Endocrine
Histology: Endocrine pa
Histology: Suprarenal
Histology: thyroid & pa
Histology: pituitary & p
Pharma: Autacoid and th
Pharma: Hormones and
Pathology of Endocrine

Anatomy of Female Ger
Embryology of Female
Mirco: Neisseria Gonorr
Mirco: Gardnerella Vagi
Mirco: Chlamydia Tract
Physiology: Reproducti
Histology: Female genit
Pathology of Female ge

Anatomy of Oral Cavity & Salivary Glands
Anatomy of Pharynx, Oesophagus, GIT, Liver & Biliary Systems
Embryology of GIT

Biochemistry of Digestion & Absorption
Biochemistry of Liver Metabolism & Fatty Liver

Mirco: Normal Flora
Mirco: Clostr Difficile
Mirco: Yersinia enterocolitidis
Mirco: Vibrio
Mirco: Bacteroides
Mirco: Hepatitis viruses
Mirco: Rota virus
Mirco: Staph
Mirco: Salmonella
Mirco: Yersinia pseudotuberculosis
Mirco: Campylobacter
Mirco: Borellia Vinc
Mirco: Yellow fever virus
Mirco: Calicivirus
Mirco: Bacillus erues
Mirco: Shigella
Mirco: HHV-7
Mirco: Helicobacter
Mirco: Leptospira
Mirco: Mumps
Mirco: Astroviruses

Physiology: GIT

Histology: Oral cavity
Histology: GIT
Histology: digestive glands
Histology: salivary glands
Histology: pancreas
Histology: liver
Pharma: Gastro-intestinal tract

Pathology of GIT
Pathology of Hepatobiliary
Pathology of Pancreas
Parasitology: Cestodes
Parasitology: Introduction to Nematodes, Intestinal nematodes
Parasitology: Protozoology, Intestinal

GIT & Liver

Anatomy of Urinary System
Anatomy of Male Genital Stem & Perineum
Embryology of Genitourinary system

Mirco: Normal Flora
Mirco: E Coli
Mirco: Ureaplasma urealyticum
Mirco: Rubella
Mirco: Eneerococci
Mirco: Proteus
Mirco: Candida
Mirco: Cytomegalovirus
Mirco: Neisseria gonorrhoea
Mirco: Mycoplasma hominis
Mirco: Herpes viruses

Physiology: Kidney

Histology: Urinary System
Histology: Male genital System
Pharma: Renal pharmacology
Pathology of Kidney
Pathology of Urinary tract and male genital
Parasitology: Urogenital Protozoa

Urogenital

Integration & Adjustment



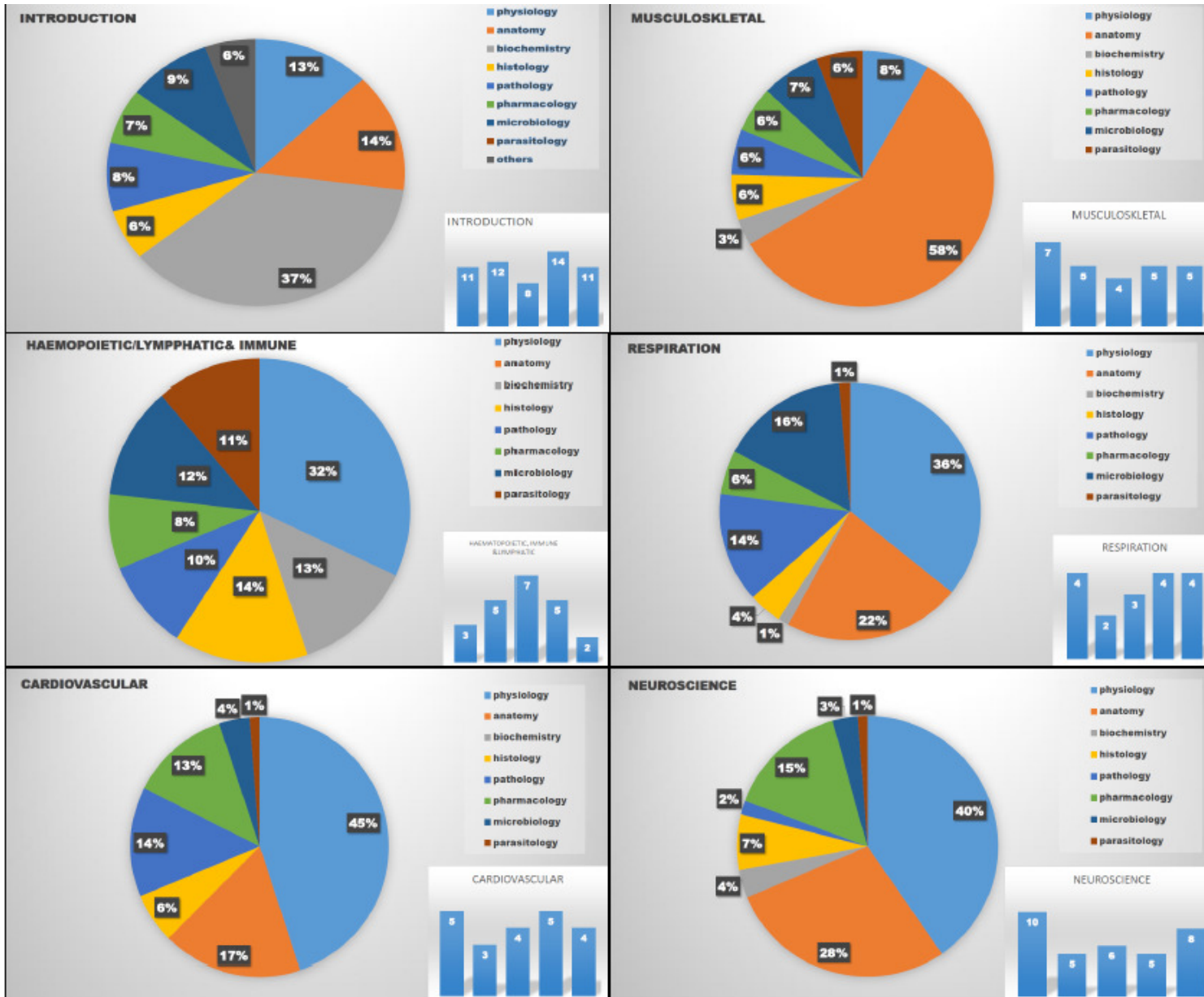
- Meeting in Microbiology department – 29/1/2018
- Meeting in Biochemistry department – 7/2/2018
- Meeting in Microbiology Department – 7/2/2018
- Meeting in Pharmacology department – 7/2/2018
- **Joint Meeting: Pharmacology & Microbiology – 7/2/2018**
- **Joint Meeting: Biochemistry, Physiology & Histology – 10/2/2018**
- **Joint Meeting: Pathology, Physiology, Biochemistry & Histology – 21/2/2018**
- **Summative Meeting: Basic Sciences' Department heads & Module coordinators – 13/2/2018**
- **Summative Meeting: Basic Sciences' Department heads – 20/2/2018**





Final Weights

FINAL	Anat	Phys	Bio	Hist	Path	Pharm	Micro	Para	Hours
Introductory (Including Metabolism)	19	40	204	46	87	29	34	19	478
Musculoskeletal & Integumentary 1 + 2	170	23	7	28	15	2	19	19	283
Hemopoetic & Immunity	14	26	13	21	7	6	16	21	124
Cardiovascular	45	59	8	6	20	28	7	0	173
Endocrine	24	47	8	9	7	14	0	0	109
GIT & Liver	46	21	8	30	28	10	15	38	196
Respiratory	31	35	3	7	13	6	25	2	122
Neuroscience 1	11	19	0	13	0	25	0	0	68
Neuroscience 2	42	78	0	29	7	22	11	6	195
Urogenital (Including Male Genital)	30	26	0	21	20	20	9	6	132
Reproduction (Including Female Genital)	16	14	0	13	20	4	5	0	72





Coordinators & Modules' Writing Committees



Block	Coordinator from	Writing Committee
Biomedical Sciences	Biochemistry	Physiology – Anatomy
Introduction to Human Body	Histology	Anatomy
Mechanism of Disease and Drug Therapy	Pathology	Pharma – Micro – Para - Medicine
Musculoskeletal	Anatomy	Phy – Bio – Hist – Path – Pharm – Micro – Para – Medicine – Surgery – Ortho – Rheumatology
Hemopoietic	Histology	Anat - Phy – Bio – Path – Pharm – Micro – Para – Medicine – Pediatrics – Rheumatology
Endocrine	Physiology	Anat - Bio – Hist – Path – Pharm – Medicine – Surgery
Cardiovascular	Physiology	Anat – Bio – Hist – Path – Pharm - Micro – Medicine – Surgery - Cardiothoracic
Respiratory	Microbiology	Anat – Phys – Hist – Path – Pharm - Para – Medicine
GIT & Liver	Parasitology	Anat – Phys – Bio - Hist – Path – Pharm - Micro – Medicine - Surgery
Neuroscience 1	Pharmacology	Anat – Phys - Hist – Medicine - Surgery
Neuroscience 2	Anatomy	Phys – Hist – Path – Pharm – Micro - Para – Medicine - Surgery
Urogenital	Pathology	Anat - Phys – Hist – Pharm – Micro - Para – Medicine – Surgery - Andrology
Reproduction	Physiology	Anat - Hist – Path - Micro - Medicine – OB/G - Andrology
Investigative	Internal Medicine	Radiology – Clinical Pathology – Oncology - Chest – Surgery – Para - Path
Family Medicine	Internal Medicine	Family Medicine – Community – OB/G - Pediatrics – Surgery
Palliative & Oncology	Anesthesiology	Surgery - Oncology



الوحدة الدراسية		المنسق	لجنة الكتابة
Introduction to Biomedical Sciences		اد حنان حسنى - كيمياء حيوية	اد هدى يوسف - فسيولوجى اد حنان، منار ك - فسنده له ح.
lymphatic - اد داليا فتحى هستولوجى			
اد أميمة خورشيد - فارماكولوجى اد أيمن ابو العينين - تشريح			
اد دعاء مهندي - ميكروبيولوجى اد رانيا محمد - باثولوجى اد شريف فهمي - تشريح اد نجوى عبد الوهاب - هستولوجى اد هشام محمد محمود - فارماكولوجى			
اد هانى محمد جمال - فسيولوجى			
اد ابراهيم محمدى - فسيولوجى اد احمد نعيم - باثولوجى اد أشرف سرور - ميكروبيولوجى Genital اد أمل مصطفى - هستولوجى اد عبير فؤاد - هستولوجى اد حسام يحيى - تشريح Urinary اد سحر عزت - هستولوجى اد عمرو ماهر - فارماكولوجى اد منى الشربيني - طفلييات اد وائل مصطفى - باثولوجى اد طه عبد الناصر محمد - ذكورة اد عمرو المليجي - باطنة اد احمد الشونفي - مسالك	اد سامية جيل - باثولوجى	Urogenital	
اد أمل مصطفى - هستولوجى اد حسام يحيى - تشريح اد دينا رضوان - هستولوجى اد دينا فوزى - باثولوجى اد سميرة عبد اللطيف - باثولوجى اد محمد محمود - فارماكولوجى	اد ماجدة الحمزاوى - فسيولوجى ♀	Reproduction	
اد إيمان صادق - هستولوجى اد إيهاب عبد العزيز - تشريح اد سهى على - فارماكولوجى اد ماري عطية - هستولوجى اد منى صلاح الدين - باثولوجى اد هدى يوسف - فسيولوجى اد هبة مصطفى - باطنة	اد هشام عطيه - فارماكولوجى	Neuroscience 1	
اد إيمان صادق - هستولوجى اد ريهام فهمي - ميكروبيولوجى اد عبير العنتلي - طفلييات اد عفاف عثمان - فارماكولوجى اد لبنى عمر - باثولوجى اد مها بلبع - هستولوجى Special Senses اد مها جمال الدين - فسيولوجى Sensory اد مها صبرى - فسيولوجى Motor اد نجاة يونان - فسيولوجى Sensory اد هبة شوقي - فسيولوجى اد احمد عمرو - جراحة اعصاب اد هبة مصطفى - باطنة	اد إيهاب عبد العزيز - تشريح	Neuroscience 2	



Specifications Template

2 Workshops for Coordinators
13 Feb & 12 Mar 2018

Specifications



Kasr Al Ainy Int



Kasr Al Ainy Int



Kasr Al Ainy Inte



Kasr Al Ainy Integrated Program - Faculty of Medicine - Cairo University



System 3- intended learning out Problem Based and Team Based L

Block title:

Code:

Departments:

Sharing Depart
1-
2-
3-
4-

Academic year:

Semester:

Date of specification app

- Credit points:
- Allocated Marks:
- Duration:
- Total hours:
 - Contact hours:
 - Non-contact ho

ILOs
a-Knowledge and understandin a1.Recognize.... a2.Identify... a3..... a4....
b- Practical/clinical b1.Perform... b2.Titate... b3.... b4...
c- Professional and behavioral :
d- Communication skills
e- Intellectual skills
f-General and transferrable skill

5- Teaching & leaning me
Lectures: Groups / Numbers / Fre
Tutorials / Small Group Discussion
PBL / TBL: Groups / Numbers / Fr

Time Plan

Topics	Time
Lectures	1 hour
Practical/Clinical	
Tutorial / SGT	
PBL / TBL	
Assignments	
Revision, Training & Exams	
Total	

4- Block content, contac

Topic	Contact Hours	Lect (hr)
Total		

6- Assessment plan and b

- 6-A) Attendance Criteria
- 6-B) Assessment Tools
- 6-C) Time Schedule
- 6-D) Grading System

Topics Covered	Marks	ILOs Covered			Written Exams Types of Questions				OSPE/OSCE
		Recall	Understanding	Intellectual	MCQ	SAQ	Cases	Others	
	Total								

6-E) Examination Description

Examination	Description
Continuous Assessment	
Mid-Year	
Final	
Written	
OSPE/OSCE	

7- Readings and references:

8- Facilities required for teaching & learning

1- Overall aim of the blo

2- Competency areas cov

E Block contents

Lectures:
. Topic 1
. Topic 2

Practical / Clinical Sessions
. Topic 1
. Topic 2

Tutorial / Small Group Discussion
. Topic 1
. Topic 2

Topics	Allocated Marks	Ent
Total		1- 2-

Block Coordinator:

Block Writing Committee:

Date:



Module designing progression checklist

Module title:

Sharing Departments:

Module coordinator (MC) steering guide	Check box
1-Means of Communication between members	
<ul style="list-style-type: none">• Meetings (state No. Of meetings)• Virtual e.g. WhatsApp	
2-Clinician member of the module	
<ul style="list-style-type: none">• Actively participated in module ILOs establishment• Involvement in integrated sessions formulation; projecting on common community based problems	
3-Learning outcomes	
<ul style="list-style-type: none">• Outcomes are developed adherent to program competencies• Relation of topics to Program ILOs and competencies	
5- Prepare a comprehensive Timetable	
<ul style="list-style-type: none">• Similar topics of different disciplines are taught same day or week	
6-Teaching Methods	
<ul style="list-style-type: none">• Lectures• Practical or clinical sessions• Tutorial sessions (small group teaching)• Integrated sessions (integrated cases between all disciplines)• Skill labs (clinical clerkships)• Others (please mention)	



Case Scenarios



CASE SCENARIOS FOR INTEGRATED SYSTEM BASED MODULES

Introduction to Disease mechanisms Tonsillitis-3151 Shistosomiasis - 31101 Breast abscess-3131 Scurvy-1162	Musculoskeletal <ul style="list-style-type: none"> • Multiple humeral fractures + shoulder dislocation-1152 • Postoperative wrist drop-1191 • Fracture neck of femur-1251 • Carpal tunnel syndrome-1191 • Erb's palsy-1192 • Supraspinatus tear and subacromial bursitis-11101 • Osteogenesis imperfecta-1142 • Familial periodic paralysis-1151 • Muscle atrophy-1122 • Fracture clavicle-1281 • Compound fracture-3161 • Postoperative nerve injury-1131 • Complicated Botox therapy-2231 	Hematopoietic system & immunity <ul style="list-style-type: none"> • Hemolytic anemia-2412 • Iron deficiency anemia-11111 • Sickle cell anemia-1171 • Malaria-3217 • Toxoplasmosis • Celiac disease-1282 • Amyloidosis-3111 • HIV-3221
Digestive & Hepatobiliary system <ul style="list-style-type: none"> • Peptic ulcer1-2131 • Peptic ulcer 2-3251 • Peptic ulcer 3-3291 • Appendicitis1-2132 • Appendicitis 2-3141 • Submandibular duct stone-2172 • Decompensated liver disease-2261 • Obstructive jaundice-2181 • Hepatic hydatid cyst-3171 • Viral Hepatitis • Amoebic liver abscess-3216 • Fasciola-3112 • Dehydration-1123 • Malabsorption syndrome(cappillaria-3191 • Gastric carcinoma +postoperative sequelae-2112 	Endocrine System <ul style="list-style-type: none"> • Tetany-21101 • Sheehan's syndrome-2181 • Cushing syndrome-2152 • Diabetic Ketoacidosis-2221 • Uncontrolled diabetes-2251 • Hyperthyroidism 1-2151 • Hyperthyroidism 2- 2241 • Short stature-1121 • Pheochromocytoma-2121 • Pituitary gland tumour-2411 	Neuroscience II (CNS & Special Senses) <ul style="list-style-type: none"> • Trigeminal neuralgia-2161 • Facial palsy-2171 • Alzheimer disease-1141 • Brown-Sequard syndrome-2291 • Cerebral compression-2111 • Cerebral embolism-2162 • Open angle glaucoma-2191 • Closed angle glaucoma + diabetic retinopathy-21111
Respiratory system <ul style="list-style-type: none"> • Bronchial Asthma 1-3241 • Bronchial Asthma 2-3281 • Pulmonary TB-31111 • Hemopneumothorax-1221 • IRDS-1231 • Lung cancer-3181 	Cardiovascular system <ul style="list-style-type: none"> • Pericardial effusion-1241 • Angina-2271 • Vascular injury + hemorrhagic Shock-1271 • Acute limb ischemia-1161 • Ischemic heart disease-1261 • DVT-3231 • Traumatic arterial injury-1271 • Post-injection arterial injury-1161 	Reproductive system <ul style="list-style-type: none"> • Male infertility1-1132 • Male infertility2- 2201 • Sexually Transmitted Diseases Urogenital system <ul style="list-style-type: none"> • Nephrotic syndrome-1111 • Diabetic Nephropathy



Clinical Core Cases

Theme Bundles



Bundle 1:

Clinical Themes Covered	Main Dep
Shortness of breath/ RD.	Internal M
Palpitation	
Chest pain	
Raised blood pressure	
Collapse	

Bundle 2:

Clinical Themes Covered	Main Dep
Unsteady gait	Internal M
Unconsciousness/ Coma	
Tingling/ numbness	
Paraplegia	
Focal neurological deficit	

Bundle 3:

Clinical Themes Covered	Main Dep
Cough	Internal M
Hemoptysis	
Noisy breathing/wheezy chest	
Sore throat	

Bundle 4:

Clinical Themes Covered	Main Dep
Fever	Internal M
Recurrent infections	
Abnormal Labs	
Bruising	

Bundle 5:

Clinical Themes Covered	Main Dep
Abdominal distension/ pain	Internal M
Jaundice	
Hematemesis	
Diarrhea/ stool incontinence	
Constipation	
Vomiting	
Weight loss/ loss of appetite	
Weight gain/ obesity	

Bundle 6:

Clinical Themes Covered	Main Dep
Confusion	Internal M
Dizziness	
Tiredness / Generalized weakness	
Headache	
Pain	
Tremor	
Thirst	
Sudden death	

Bundle 7:

Clinical Themes Covered	Main Department	Complimentary Depts.
Breast lump	General surgery	Radiology
Groin lump		Andrology
Neck lump		Plastic surgery
Scrotal swellings		
Cold extremities		
Leg/ foot ulcer		

Bundle 8:

Clinical Themes Covered
Difficulty swallowing
Abdominal/loin pain
Rectal bleeding
Hematemesis

Bundle 9:

Clinical Themes Covered
Perioperative care
Postoperative problems
Infection control
Hematuria
Urinary symptoms

Bundle 10:

Clinical Themes Covered
Trauma
Falls / immobility
Joint swelling/pain
Leg pain/ ankle swelling
Muscle pain
Back/neck pain
Painful mouth

Bundle 11:

Clinical Themes Covered
Fetal malformation
Growth and development
Intellectual development
Arrested development
Immunisation
Fever/ recurrent infections
SFGA/ LFGA
Exanthemata

Bundle 12:

Clinical Themes Covered
Abn. / Irreg. vaginal bleedin
Pelvic pain
Pelvic organ prolapse
Contraception
Sexual medicine
Infertility
STDs/ Genital discharge
Pregnancy/ Antenatal care
Bleeding in pregnancy
Labor
SFGA/ LFGA

Bundle 13:

Clinical Themes Covered	Main Department	Complimentary Depts.
Acute loss of vision	Ophthalmology Dpt.	Neurology
Chronic loss of vision		Internal medicine
Acute red eye		
Chronic red eye		
Squint		
Painful eye		

Bundle 14:

Clinical Themes Covered	Main Department	Complimentary Depts.
Altered mood	Psychiatry Dpt.	Internal medicine
Anxiety		
Behavioral problems		
Psychosis		
Child abuse/ deliberate self harm		
Substance abuse		Toxicology

Bundle 15:

Clinical Themes Covered	Main Department	Complimentary Depts.
Blocked nose	ENT Dpt.	
Deafness		
Ear ache		
Hoarsness		
Stridor		
Tinnitus		

Bundle 16:

Clinical Themes Covered	Main Department	Complimentary Depts.
Hair problems	Dermatology Dpt.	Internal medicine
Skin rash		General surgery
Skin lumps		
Itching		

Bundle 17:

Clinical Themes Covered	Main Department	Complimentary Depts.
Statistics/ research studies	Community Med. Dpt.	Infection control unit
Epidemiology of disease		Pediatric Medicine
Infection control		
Immunisation		
Travel advice		

	Andrology Dpt.	
	Andrology Dpt.	
	Andrology Dpt.	
	Pediatrics Dpt.	

*Can be arranged in a separate bundle

Integration & Adjustment



- Meeting: Head of Family medicine department – 22/1/2018
- Meeting: Head of Community medicine department – 24/1/2018
- Meeting: Head of Internal medicine department – 24/1/2018
- Meeting: Surgery department – 5/2/2018
- Surgery department council – 12/2/2018
- **Joint Meeting: Internal Medicine, General Surgery – 6/2/2018**
- **Joint Meeting: Internal Medicine, General Surgery, OB/G & pediatrics – 11/2/2018**
- **Joint Meeting: Internal Medicine, General Surgery, OB/G & pediatrics – 21/2/2018**





Course Intended Learning Outcomes



Competency Area I

Graduate as a health care provider

Competency (1) The graduate as a health care provider *By the end of the program, the graduate will be able to:*

Key Competencies	Course ILOs
1.1. Take and record a structured, patient centered history	MED-422-b.1 Interview and document a structured patient history
1.3. Assess the mental state of the patient.	PSY-313-a.1 Identify common types of cognitive impairments PSY-413-b.2 Assess the mental and psychological status of the patient..
1.4. Perform appropriately timed full physical examination of patients appropriate to the age, gender, and clinical presentation of the patient while being culturally sensitive.	SUR-523-b.2 Conduct full physical assessment for different age groups and genders in acute and chronic clinical conditions
1.5. Prioritize issues to be addressed in a patient encounter.	MED-522-b.9 Prioritize the collected data during history taking and clinical examination. from the patient medical problems and their differential diagnoses-b,12
1.6. Select the appropriate investigations and interpret their results taking into consideration cost/ effectiveness factors.	INV-314-c.7 Follow the guide lines in choosing the proper investigation, taking in consideration the cost effectiveness factors.



Competency Area I

Graduate as a health care provider

Competency (1) The graduate as a health care provider *By the end of the program, the graduate will be able to:*

Key Competencies	Course ILOs
1.14. Respect patients' rights and involve them and /or their families/carers in management decisions.	ETH-328-d.4 Respect patient's right to know and share in management decision.
1.15. Provide the appropriate care in cases of emergency, including cardio-pulmonary resuscitation, immediate life support measures and basic first aid procedures.	MED-522-b,11 Follow the guidelines necessary for managing emergencies, including cardio-pulmonary resuscitation, immediate life support measures and basic first aid procedures.
1.16. Apply the appropriate pharmacological and nonpharmacological approaches to alleviate pain and provide palliative care for seriously ill people, aiming to relieve their suffering and improve their quality of life.	PLL-421-b.10 Adopt the guidelines for appropriate therapeutic modalities for palliative care and pain management.
1.17. Contribute to the care of patients and their families at the end of life, including management of symptoms, practical issues of law and certification.	PLL-421-d.2 Support the patients and their families at end of life, as regards alleviation of symptoms and recognition of legal factors.



Competency Area II

Graduate as a health promoter

Competency (2) The graduate as a health promoter *By the end of the program, the graduate will be able to:*

Key Competency	Course ILOs
2.2 Recognize the economic, psychological, social, and cultural factors that interfere with wellbeing.	COM-418-a.8 Integrate variable factors including economic, psychological, social, and cultural issues that influence the individual wellbeing.
2.3 Discuss the role of nutrition and physical activity in health.	NRT-419-a.1 Emphasize on the role of nutrition and healthy life style in maintenance of health and prevention of disease.
2.4 Identify the major health risks in his/her community, including demographic, occupational and environmental risks; endemic diseases, and prevalent chronic diseases.	COM-418-a,11 Understand the causes behind the diseases chronicity and endemicity in a certain population. COM-418-a.13 Outline the epidemiologic principles and the effect of social and demographic patterns on disease and vulnerability.



Competency Area II

Graduate as a health promoter

Competency (2) The graduate as a health promoter *By the end of the program, the graduate will be able to:*

Key Competency	Course ILOs
2.5 Describe the principles of disease prevention, and empower communities, specific groups or individuals by raising their awareness and building their capacity.	COM-418-a.4 Describe the Egyptian health systems and different population-based approaches of health care including disease burden, quality of life and well-being.
2.8 Identify vulnerable individuals that may be suffering from abuse or neglect and take the proper actions to safeguard their welfare.	TOX-317-a.5 Recognize individuals exposed to abuse or negligence.
2.9 Adopt suitable measures for infection control.	EPE-333-b.7 Adopt infection control measures and safety procedures



Teaching & Assessment



Fourth Edition

A Practical Guide for **MEDICAL TEACHERS**

Edited by

John A. Dent • Ronald M. Harden

Foreword by Brian D. Hodges

medicine **Patient** Amode Digital medical education leadership *assessment* Ethics
SUPPORT *developmental* Outcome-based curriculum **INTEGRATED**
EDUCATIONAL STRATEGIES **Professionalism** Inspire review
Career-based Distance education sciences Attitude Mentoring
leadership Written assessments **WORKPLACE ASSESSMENT** **Medicine** **Basic**
learning **Integrated** **Mentoring** *Team based learning*
Inspire planning and DEVELOPMENT **practical** **research**
Evidence-based medicine *Problem-based learning* **Ethics** **strategy** student care
assessment **simulated/standardised patients** Ambulatory care teaching
Undergraduate EDUCATIONAL STRATEGIES **Distance education**
Patient safety **teach** Small group teaching **SUPPORTIVE**
PEER-ASSISTED LEARNING **Outcome-based curriculum** *Career-based*

CHURCHILL
LIVINGSTONE
ELSEVIER

Teaching methods



I- Learning situations:

- **Lectures**
- **Small-group teaching:** Aims to explore the key concepts in the lectures and readings with a practical emphasis to help students with complicated material. It requires active participation, purposeful activity, and face-to-face contact.
- **Bedside teaching:** The Traditional clinical teaching bringing together the ‘learning triad’ of patient, student and clinician/tutor in a particular clinical environment.
- **Ambulatory care teaching:** refers to any place where patients attend healthcare facilities without being admitted as inpatients.
- **Community based teaching:** describes curricula that are based on addressing the health needs of the local community and preparing graduates to work in that community. Can be delivered in tertiary centers. focuses on the care provided to patients both before the decision to refer to a tertiary hospital and after the decision to discharge the patient from such care.

Teaching methods



II- Educational strategies

- **Problem based learning**
- **Team based learning:** provides students with opportunities to apply conceptual knowledge through a sequence of events that includes individual work, team-work and immediate feedback.
- **Integrated sessions**
- **Simulated based teaching** any educational activity that utilizes simulative tools and methods in order to create learning opportunities for participants.

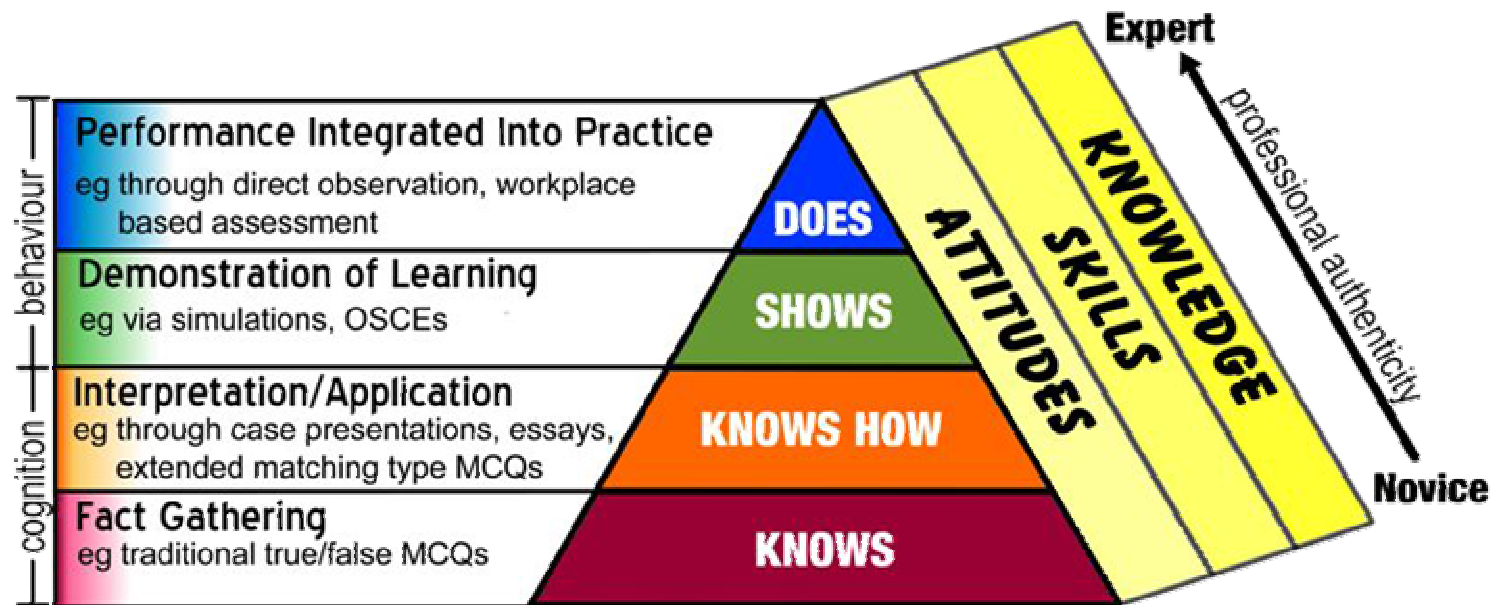
Dent & Harden (2013)



Assessment

MILLER'S PRISM OF CLINICAL COMPETENCE (aka Miller's Pyramid)

it is only in the "does" triangle that the doctor truly performs



Based on work by Miller GE. *The Assessment of Clinical Skills/Competence/Performance*; Acad. Med. 1990; 65(9): 63-67
Adapted by Drs. R. Mehay & R. Burns, UK (Jan 2009)

Miller (1990)

Assessment methods



I-Written assessments

- **Short answer open ended questions:** This is an open-ended question type which requires the candidate to generate a short answer of often no more than one or two words.
- **Essay questions** are open-ended types of questions that require a longer answer. Ideally, they are used to ask the candidate to set up a reasoning process, to evaluate a given situation.
- **True-False questions**
- **Multiple choice questions** (single-best-option multiple-choice or A-type.) :the most well-known item format.
- **Multiple True False questions** more than one option can be ticked by the candidate.
- **Extended Matching Questions:** Extended-matching items consist of a theme description, a series of options (up to 26), a lead in and a series of short cases.
- **Key feature approach questions:** short, clearly described case or problem and a limited number of questions
- **Script concordance test questions:** ill-defined problems and method called aggregate scoring. A clinical scenario in which not all data are provided for the solution of the problem is presented.

Assessment methods



II-Performance and work place assessment

- **Objective Structured Clinical Examination (OSCE)** s typically used in high stakes summative assessments
- **Mini Clinical Evaluation Exercise (Mini-CEX):** An assessor directly observes the practitioner's performance in 'real' clinical encounters with patients in the workplace. He or she then discusses diagnosis and management with the practitioner and gives them feedback on the encounter
- **Case Based Discussion (CBD) Or Chart recall Discussion (CSR):** It is a structured interview In which *practitioners* discuss aspects of a case in which they have been involved in order to explore their underlying reasoning, decision making and ethical understanding. It can be used in a variety of settings, such as clinics, wards or assessment units, and different clinical problems can be discussed.
- **Direct Observation of procedural skills (DOPS):** The *practitioner* is directly observed by an assessor while undertaking a procedure on a real patient.
- **Multi-Source Feedback (MSF):** collect structured judgements of those who work with, or have experience of, the *practitioner* and feed these back in a systematic way, building up a picture of individual practice. Judges can include both senior and junior colleagues, nurses, administrative staff, medical students and patients, depending on the tool used. All judges remain anonymous, and their scores and comments are fed back to the trainee.

Competency Area I



Competency (1) The graduate as a health care provider *By the end of the program, the graduate will be able to:*

Key Competency	Courses	Teaching/Learning	Assessment
1.1. Take and record a structured, patient centered history	COM-418 Community Medicine ENT-316 Ear, Nose & Throat EPE-333 Early Patient Encounter 4 FML- 420 Family medicine MED-422 Medicine 1 MED-522 Medicine 2 OBG-425 Women's Health OPH-315 Eye Disorders PED-424 Child's Health SUR-423 Surgery 1 SUR-523 Surgery 2	Bedside teaching. Ambulatory care teaching Integrated sessions Team based learning	Performance Mini Clinical Evaluation Exercise (Mini-CEX) OSCE
1.2. Adopt an empathic and holistic approach to the patients and their problems.	CMS-129 Communication Skills 1 CMS-229 Communication Skills 2 ENT-316 Ear, Nose & Throat ETH-328 Medical Ethics & Law 3 MED-522 Medicine 2 MPF-526 Medical Professionalism 5 OBG-425 Women's Health OPH-315 Eye Disorders PED-424 Child's Health PSY-313 Behavioral & Cognitive Sciences PSY-413 Psychiatry SUR-523 Surgery 2	Integrated sessions Small group teaching Bedside teaching. Team based learning Simulated based teaching	Written MCQs True and false Performance Mini Clinical Evaluation Exercise (Mini-CEX) OSCE
1.3. Assess the mental state of the patient.	PSY-313 Behavioral & Cognitive Sciences PSY-413 Psychiatry MED-522 Medicine 2	Interactive lectures. Small group teaching Tutorials Bedside teaching. Ambulatory care teaching Videos	Performance Mini Clinical Evaluation Exercise (Mini-CEX) OSCE

Competency Area I



Competency (1) The graduate as a health care provider *By the end of the program, the graduate will be able to:*

Key Competency	Courses	Teaching/Learning	Assessment
1.4. Perform appropriately timed full physical examination of patients appropriate to the age, gender, and clinical presentation of the patient while being culturally sensitive.	EPE-130 Early Patient Encounter 1 EPE-231 Early Patient Encounter 2 EPE-232 Early Patient Encounter 3 EPE-333 Early Patient Encounter 4 OPH-315 Eye Disorders ENT-316 Ear, Nose & Throat FML-420 Family Medicine PED-424 Child's Health OBG-425 Women's Health MED-422 Medicine 1 MED-522 Medicine 2 SUR-423 Surgery 1 SUR-523 Surgery 2	Bedside teaching Integrated sessions Problem based learning Small group teaching Team based learning Simulated Based Learning	Performance Mini Clinical Evaluation Exercise (Mini-CEX) OSCE Direct Observation of procedural skills (DOPS)
1.5. Prioritize issues to be addressed in a patient encounter.	ENT-316 Ear, Nose & Throat MED-422 Medicine 1 MED-522 Medicine 2 OBG-425 Women's Health OPH-315 Eye Disorders PED-424 Child's Health RSP-208 Respiratory System SUR-423 Surgery 1 SUR-523 Surgery 2	Lectures Tutorials Small group teaching Team based learning	Performance Mini Clinical Evaluation Exercise (Mini-CEX) Written Short answer questions MCQs Extended matching questions (EMQs) True and false
1.6. Select the appropriate investigations and interpret their results taking into consideration cost/ effectiveness factors.	INV-314 Investigative medicine PED-424 Child's Health OBG-425 Women's Health MED-422 Medicine 1 MED-522 Medicine 2 SUR-423 Surgery 1 SUR-523 Surgery 2	Lectures Tutorials Bedside teaching Integrated sessions Small group teaching Team based learning	Performance OSCE/OSPE Written Short answer questions MCQs Extended matching questions (EMQs) True and false

Competency Area I



Competency (1) The graduate as a health care provider *By the end of the program, the graduate will be able to:*

Key Competency	Courses	Teaching/Learning	Assessment
1.7. Recognize and respond to the complexity, uncertainty, and ambiguity inherent in medical practice.	CMS-129 Communication Skills 1 CMS-229 Communication Skills 2 COM-418 Community Medicine MED-522 Medicine 2 OBG-425 Women's Health PED-424 Child's Health PSY-313 Behavioral & Cognitive Sciences SUR-523 Surgery 2	Integrated sessions Team based learning Seminars Lectures Tutorials Small group teaching Case based learning	Written Short answer questions MCQs Extended matching questions (EMQs) True and false
1.8. Apply knowledge of the clinical and biomedical sciences relevant to the clinical problem at hand.	CVS-207 Cardiovascular System DIG-311 Digestive System & Liver END-209 Endocrine System EPE-130 Early Patient Encounter 1 EPE-231 Early Patient Encounter 2 EPE-232 Early Patient Encounter 3 EPE-333 Early Patient Encounter 4 HEM-106 Hematopoietic S. & Immunity INT-101 Normal structure of the human body INT-102 Introduction to biomedical sciences INT-103 Principles of disease & drug therapy MSK-105 Musculoskeletal 1 MSK-205 Musculoskeletal 2 NEU-104 Neuroscience 1 NEU-204 Neuroscience 2 RPR-210 Reproductive System RSP-208 Respiratory System URG-312 Urogenital System	Lectures Integrated sessions Case based learning Interactive lectures Audiovisual materials	Written MCQs Extended matching questions (EMQs) Short answer questions True and false

Competency Area I



Competency (1) The graduate as a health care provider *By the end of the program, the graduate will be able to:*

Key Competency	Courses	Teaching/Learning	Assessment
1.9. Retrieve, analyze, and evaluate relevant and current data from literature, using information technologies and library resources, in order to help solve a clinical problem based on evidence (EBM).	CMP-235 Computer ENT-316 Ear, Nose & Throat INV-314 Investigative medicine MED-522 Medicine 2 OBG-425 Women's Health OPH-315 Eye Disorders PED-424 Child's Health RES-434 Medical Research & EBM 1 RES-534 Medical Research & EBM 2 SSC-020 Information Technology SSC-021 Computer Programming SUR-523 Surgery 2 TOX-317 Clinical toxic. & Legal Medicine	Audiovisual materials Case based learning Computer assisted learning E-learning Practical lab Seminars	Written Short answer questions MCQs Performance Practical exam OSCE/OSPE
1.10. Integrate the results of history, physical and laboratory test findings into a meaningful diagnostic formulation.	ENT-316 Ear, Nose & Throat INV-314 Investigative medicine MED-522 Medicine 2 OBG-425 Women's Health OPH-315 Eye Disorders PED-424 Child's Health RSP-208 Respiratory System SUR-523 Surgery 2	Lectures Tutorials Case based learning Small group teaching Team based learning	Performance Mini Clinical Evaluation Exercise (Mini-CEX) OSCE Written MCQs
1.11. Perform diagnostic and intervention procedures ² in a skillful and safe manner, adapting to unanticipated findings or changing clinical circumstances.	COM-418 Community Medicine FML-420 Family Medicine INT-103 Principles of disease & drug therapy INV-314 Investigative medicine MED-522 Medicine 2 OBG-425 Women's Health PED-424 Child's Health PLL-421 Palliative Medicine & Oncology SUR-523 Surgery 2	Audiovisual materials Simulated based teaching Lectures Practical lab Small group teaching Tutorials	Performance Direct Observation of procedural skills (DOPS) Written MCQs True and false

Competency Area I



Competency (1) The graduate as a health care provider *By the end of the program, the graduate will be able to:*

Key Competency	Courses	Teaching/Learning	Assessment
1.12. Adopt strategies and apply measures that promote patient safety	COM-418 Community Medicine FML-420 Family Medicine INT-103 Principles of disease & drug therapy INV-314 Investigative medicine RSP-208 Respiratory System	Lectures Tutorials Small group teaching	Performance Direct Observation of procedural skills (DOPS) Written Short answer questions MCQs True and false
1.13. Establish patient-centered management plans in partnership with the patient, his/her family and other health professionals as appropriate, using Evidence Based Medicine in management decisions.	CMS-129 Communication Skills 1 CMS-229 Communication Skills 2 MED-422 Medicine 1 MED-522 Medicine 2 OBG-425 Women's Health PED-424 Child's Health RES-434 Medical Research & EBM 1 RES-534 Medical Research & EBM 2 SUR-423 Surgery 1 SUR-523 Surgery 2	Integrated Sessions Small group teaching Team based learning Community based teaching	Written Short answer questions MCQs True and false
1.14. Respect patients' rights and involve them and /or their families/carers in management decisions.	EHT-128 Medical Ethics & Law 1 ETH-228 Medical Ethics & Law 2 ETH-328 Medical Ethics & Law 3	Lectures Tutorials Small group teaching	Written Short answer questions True and false MCQs
1.15. Provide the appropriate care in cases of emergency, including cardio-pulmonary resuscitation, immediate life support measures and basic first aid procedures.	EPE-333 Early Patient Encounter 4 MED-422 Medicine 1 MED-522 Medicine 2 OBG-425 Women's Health PED-424 Child's Health SUR-423 Surgery 1 SUR-523 Surgery 2	Simulated based teaching Team based learning Audiovisual materials	Performance Direct Observation of procedural skills (DOPS) Written Short answer questions MCQs True and false

Competency Area I



Competency (1) The graduate as a health care provider *By the end of the program, the graduate will be able to:*

Key Competency	Courses	Teaching/Learning	Assessment
1.16. Apply the appropriate pharmacological and nonpharmacological approaches to alleviate pain and provide palliative care for seriously ill people, aiming to relieve their suffering and improve their quality of life.	PLL-421 Palliative Medicine & Oncology PSY-413 Psychiatry MED-522 Medicine 2	Lectures Bedside teaching Integrated sessions Small group teaching Team based learning E-learning	Performance OSCE/OSPE Written MCQs MEQs True or False Short answer questions
1.17. Contribute to the care of patients and their families at the end of life, including management of symptoms, practical issues of law and certification.	PLL-421 Palliative Medicine & Oncology PSY-413 Psychiatry CMS-129 Communication Skills 1 CMS-229 Communication Skills 2	Lectures Small group teaching Team based learning Community based teaching	Performance OSCE/OSPE Written Short answer questions MCQs MEQs True and false

Competency Area II



Competency (2) The graduate as a health promoter *By the end of the program, the graduate will be able to:*

Key Competency	Courses	Teaching/Learning	Assessment
2.1 Identify the basic determinants of health and principles of health improvement.	COM-418 Community Medicine FML-420 Family Medicine SSC-018 Health Economics	Lectures Tutorials Small group teaching	Written Short answer Short answer questions True and false MCQs
2.2 Recognize the economic, psychological, social, and cultural factors that interfere with wellbeing.	COM-418 Community Medicine FML-420 Family Medicine PSY-413 Psychiatry SSC-018 Health Economics	Integrated sessions Interactive lectures Tutorials	Written Short answer True and false MCQs
2.3 Discuss the role of nutrition and physical activity in health.	INT-102 Introduction to biomedical sciences NTR-419 Clinical Nutrition FML-420 Family Medicine MED-522 Medicine 2	Integrated sessions Lectures Tutorials Small group teaching Case-based learning	Written Short answer Short answer questions True and false MCQs Extended matching questions (EMQs)
2.4 Identify the major health risks in his/her community, including demographic, occupational and environmental risks; endemic diseases, and prevalent chronic diseases.	COM-418 Community Medicine FML-420 Family Medicine OBG-425 Women's Health PED-424 Child's Health RSP-208 Respiratory System TOX-317 Clinical toxicology & Legal Medicine	Integrated sessions Lectures Tutorials Small group teaching	Written Short answer Short answer questions True and false MCQs Extended matching questions (EMQs)

Competency Area II



Competency (2) The graduate as a health promoter *By the end of the program, the graduate will be able to:*

Key Competency	Courses	Teaching/Learning	Assessment
2.5 Describe the principles of disease prevention, and empower communities, specific groups or individuals by raising their awareness and building their capacity.	COM-418 Community Medicine FML-420 Family Medicine RSP-208 Respiratory System	Integrated sessions Lectures Tutorials Small group teaching	Written Short answer Short answer questions True and false MCQs Extended matching questions (EMQs)
2.6 Recognize the epidemiology of common diseases within his/her community, and apply the systematic approaches useful in reducing the incidence and prevalence of those diseases.	COM-418 Community Medicine FML-420 Family Medicine	Integrated sessions Lectures Tutorials Small group teaching	Written Short answer Short answer questions True and false MCQs Extended matching questions (EMQs)
2.7 Provide care for specific groups including pregnant women, newborns and infants, adolescents and the elderly.	COM-418 Community Medicine FML-420 Family Medicine PED-424 Child's Health OBG-425 Women's Health MED-522 Medicine 2	Bedside teaching Integrated sessions Lectures Tutorials Small group teaching	Performance OSCE/OSPE Mini Clinical Evaluation Exercise (Mini-CEX) Written Short answer Short answer questions True and false MCQs Extended matching questions (EMQs)

Competency Area II



Competency (2) The graduate as a health promoter *By the end of the program, the graduate will be able to:*

Key Competency	Courses	Teaching/Learning	Assessment
2.8 Identify vulnerable individuals that may be suffering from abuse or neglect and take the proper actions to safeguard their welfare.	COM-418 Community Medicine FML-420 Family Medicine TOX-317 Clinical toxic & Legal Medicine	Integrated sessions Lectures Tutorials Small group teaching	Written Short answer Short answer questions True and false MCQs Extended matching questions (EMQs)
2.9 Adopt suitable measures for infection control.	COM-418 Community Medicine EPE-232 Early Patient Encounter 3 TOX-317 Clinical toxic & Legal Medicine MED-522 Medicine 2 SUR-523 Surgery 2	Lectures Tutorials Small group teaching Audiovisual	Performance Direct Observation of procedural skills (DOPS) OSCE Written Short answer Short answer questions True and false MCQs Extended matching questions (EMQs)



Milestones



MILESTONES

- They are significant points in learner development
- They provide narrative descriptors of competencies and key competencies along a developmental continuum
- They enable both learner and program determine individual trajectories of development in narrative terms
- They lay out a framework of observable behaviors and other attribute associated with development of skills, knowledge and behaviors

Holmboe et al (2016)

Accreditation Council for Graduate Medical Education "ACGME"

Writing Milestones



Level 1	Level 2	Level 3	Level 4	Level 5
Expectations for a student at first year after entry	Expectations for a student who passes entry but is performing at a lower level than midway of his study	Expectations for a student midway of his study	Expectations for a student nearing graduation	Expectations for a student at graduation
End of Year 1	End of Phase 1	End of Clinical Clerkships I	End of Clinical Clerkships II	End of Year 5

Adapted from Holmboe et al (2016), ACGME Milestones Handbook

Milestones



Competency (1) The graduate as a health care provider *By the end of the program, the graduate will be able to:*

Key Competency	Year 1	Phase 1	Clinical Clerkships I	Clinical Clerkships II	Year 5
1.1. Take and record a structured, patient centered history	Acquires General Medical History	Acquires Basic Specialty Specific Medical History	Acquires Full Medical History integrating Medical & Psychological Elements	Acquires & Present Prioritized Medical History Eliciting Information Not Volunteered by Patient	Acquires & Present Full Prioritized Medical History With Full Management Plan
1.6. Select the appropriate investigations and interpret their results taking into consideration cost/ effectiveness factors.	Describes Basic Principles of Laboratory & Tissue Sampling Investigations	Describes Principles of Laboratory Radiological, Pathological, Nuclear Scanning Investigations	Describes Disease-Specific Plans of Investigations	Understands Economical Factors Influencing Choice of Investigative Tools	Constructs a full Investigatory Plan taking into consideration Cost/Benefit Ratio
1.16. Apply the appropriate pharmacological and nonpharmacological approaches to alleviate pain and provide palliative care for seriously ill people, aiming to relieve their suffering and improve their quality of life.	Describes the Physiological & Pharmacological Basis of Pain Management	Describes the Pharmacological Basis of Oncological Management	Applies basic principles in choosing Lines of Management to Alleviate Different Symptoms	Understands different lines of Palliative care for Seriously ill Patients	Select and Use Appropriate Approaches to Provide Palliation To Relieve Suffering and Improve their quality of life

Milestones



Competency (2) The graduate as a health promoter *By the end of the program, the graduate will be able to:*

Key Competency	Year 1	Phase 1	Clinical Clerkships I	Clinical Clerkships II	Year 5
2.1 Identify the basic determinants of health and principles of health improvement.	Understands general Principles of body functions and disease Mechanisms	Understands System Related Functions & Health Problems	Describes different health aspects of special senses and substance abuse	Identifies health care system improvement requirements and group specific health needs	Understands needs for global health enhancement .
2.3 Discuss the role of nutrition and physical activity in health.	Describes the Biomedical Basis of Metabolism, Vitamins & Nutrients	Describes the Basic Body Needs, Muscle Fuel, Energy Stores	Understands GIT & Hepatobiliary Role in Maintenance of Body Health	Understands Role of Nutrition in Causing, Preventing and Dietary Managing Malnutrition Disorders & Non-communicable Diseases. <i>Identifies different types used in clinical nutrition</i>	Select Appropriate Nutritional Plan for Different Groups and/or Different Illnesses
2.7 Provide care for specific groups including pregnant women, newborns and infants, adolescents and the elderly.	Understands different Metabolic and Functional Age Related Differences	Understands different Pathological Conditions Prevalent in Certain Population Groups	Understands Common System-Related Health Conditions in Relations to Age Groups	Understands Health Plans and Health Care System Requirements for Pregnant Women & Children	Provide Health care for Newborns and the Elderly.



Progress on National Level
&
Coordination with other Universities



SCU's National Workshop 20-1-2018





Misr University for Science & Technology
Faculty Council
18-2-2018



Time Table



Time Table

Year	Semester	Starts	Ends	Duration	Working Days	Exam Prep	Total	Daily Hours	Weekly Hours
1	Semester I	Sep 15 th -21 st	Jan 12 th -18 th	16 Wks	80 days	8 days	120 days	480/80= 6.0 Hrs	30 Hrs
	Semester II	Jan 27 th - Feb 2 nd	May 27 th – Jun 1 st	16 Wks	80 days	8 days	120 days	450/80= 5.6 Hrs	28 Hrs
2	Semester III	Sep 15 th -21 st	Jan 12 th -18 th	16 Wks	80 days	8 days	120 days	450/80= 5.6 Hrs	28 Hrs
	Semester IV	Jan 27 th - Feb 2 nd	May 27 th – Jun 1 st	16 Wks	80 days	8 days	120 days	450/80= 5.6 Hrs	28 Hrs
3	Semester V	Sep 15 th -21 st	Jan 12 th -18 th	16 Wks	80 days	8 days	120 days	450/80= 5.6 Hrs	28 Hrs
	Semester VI	Jan 27 th - Feb 2 nd	Jun 2 nd -7 th	18 Wks	87 days	3 days	126 days	450/87= 5.2 Hrs	26 Hrs
4	Semester VII	Sep 1 st	Jan 18 th	20 Wks	94 days	6 days	140 days	450/94= 4.8 Hrs	24 Hrs
	Semester VIII	Feb 2 nd	Jun 21 st	20 Wks	94 days	6 days	140 days	450/94= 4.8 Hrs	24 Hrs
5	Semester IX	Sep 1 st	Jan 18 th	20 Wks	94 days	6 days	140 days	450/94= 4.8 Hrs	24 Hrs
	Semester X	Feb 2 nd	Jun 21 st	20 Wks	94 days	6 days	140 days	450/94= 4.8 Hrs	24 Hrs



Final Program Map

Faculty Council approval to send proposed curriculum to be revised by SCU's Medical sector on 25th Feb 2018



Introduction to human Body

Normal structure of the human body (2 Wks) (4 CR)

Introduction to biomedical sciences (8 Wks) (16 CR)

Principles of disease mechanism & Pharmacological basis of drug therapy (6 Wks) (10 CR)

Body Structure

Neuroscience 1 (3 Wks) (5 CR)

Musculoskeletal System 1 (8 Wks) (14 CR)

Hematopoietic System, Immunity & Defense Mechanisms (5 Wks) (8 CR)

Medical Professionalism 1 (MPF) (0.5 CR)

Medical Terminology (TER) (0.5 CR)

Medical Ethics & Law 1 (ETH) (0.5 CR)

Communication Skills 1 (CMS) (0.5 CR)

Early Patient Encounter 1 (EPE) (1 CR)

MPF 1

Terminology

Ethics 1

Comm 1

E.P.E 1

1

Introduction to Anatomy & Histology

General Embryology

Cytology

Biochemical Principles

Introduction to Physiology

General Metabolism

Molecular biology

Biophysics

General Pathology

General Microbiology

General Pharmacology

General Parasitology



Life support				
2	Cardiovascular System (7 Wks) (12 CR)			
	Respiratory System (5 Wks) (8 CR)			
	Musculoskeletal System 2 (4 Wks) (5 CR)			
	Medical Ethics & Law 1 (ETH) (0.5 CR)		Ethics 2	
	Communication Skills 2 (CMS) (0.5 CR)		Comm 2	
	Student Selected Component 1 (SSC) (3 CR)			SSC 1
	Early Patient Encounter 2 (EPE) (1 CR)			E.P.E 2
Internal Environment				
Neuroscience 2 (8 Wks) (13 CR)				
Endocrine System (5 Wks) (7 CR)		MPF 2		
Reproductive System (3 Wks) (5 CR)				
Medical Professionalism 2 (MPF) (0.5 CR)				
Student Selected Component 2 (SSC) (3 CR)				SSC 2
Computer (0.5 CR)				
Early Patient Encounter 3 (EPE) (1 CR)				E.P.E 3



Life maintenance

Digestive System & Liver (8 Wks) (13 CR)

Urogenital System (5 Wks) (9 CR)

Behavioral & Cognitive Sciences (2 Wks) (2 CR)

Investigative medicine (1 Wk) (2 CR)

Student Selected Component 3 (SSC) (3 CR)

Early Patient Encounter 4 (EPE) (1 CR)

SSC 3

E.P.E 4

3

Transition to clinical practice

Eye Disorders
(6 Wks) (9 CR)

ENT
(6 Wks) (9 CR)

Clinical toxicology & Legal Medicine
(6 Wks) (8 CR)

MPF 3

Ethics 3

SSC 4

Medical Professionalism 3 (MPF) (0.5 CR)

Medical Ethics & Law 3 (ETH) (0.5 CR)

Student Selected Component 4 (SSC) (3 CR)



Clinical Clerkships I			
4	Community Medicine (5 Wks) (7 CR)	Medicine 1	MPF 4 SSC 5 Research 1
	Nutrition (1 Wks) (2 CR)	(5 Wks) (5 CR)	
	Psychiatry (2 Wks) (3 CR)	Surgery 1	
	Family Health (1 Wks) (2 CR)	(5 Wks) (5 CR)	
	Palliative Medicine & Oncology (1 Wk) (2 CR)		
Clinical Clerkships II			
Child's Health (10 Wks) (15 CR)	Women & Reproductive Health (10 Wks) (15 CR)		
Medical Professionalism 4 (MPF) (0.5 CR)			
Student Selected Component 5 (SSC) (3 CR)			
Medical Research & EBM 1 (RES) (0.5 CR)			



Clinical Clerkships III

5

Medicine 2

(20 Wks) (29 CR)

Surgery 2

(20 Wks) (29 CR)

MPF 5

RES 2

Medical Professionalism 5 (MPF) (0.5 CR)

Medical Research & EBM 2 (RES) (1.5 CR)

Cardiology
Chest
Clinical Pathology
Dermatology
Emergency & ICU
Geriatric Medicine
Infectious Diseases
Neurology
Rheumatology

Anaesthesiology
Andrology
Cardiothoracic Surgery
Emergencies & Burns
Neurosurgery
Orthopaedics
Radiology
Urology



Bylaws

اللائحة

The Proposed Curriculum & Bylaws were approved by Medical Sector of SCU

The Final Curriculum & Bylaws were approved by Faculty Committee for Education & Students' Affairs on 11 Mar 2018

The Final Curriculum & Bylaws were approved by Faculty Council on 20 Mar 2018

The Final Curriculum & Bylaws were approved by University Committee for Education & Students' Affairs (Medical Sector) on 12 Apr 2018



كلية الطب - قصر العيني

جامعة القاهرة

اللائحة الدراسية

٢٠١٩/٢٠١٨

Kasr Al Ainy Modular Program

Faculty of Medicine

Cairo University

K.A.M.P

2018/2019



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مادة (٢): تمنح جامعة القاهرة بناء على طلب كلية الطب درجة البكالوريوس في الطب و الجراحة

مادة (٣): مدة الدراسة لنيل درجة البكالوريوس في الطب و الجراحة خمس سنوات مقسمة على ١٠ فصول دراسية (Semesters)

مادة (٤): اللغة الانجليزية: هي لغة التدريس و التقييم بالبرنامج

مادة (٥): تطبق هذه اللائحة على جميع الطلاب الجدد الملتحقين بالفرقة الاولى للكلية بدءاً من العام الدراسي ٢٠١٨-٢٠١٩ سواء طلاب النظام العادى او طلاب البرنامج المتكامل بنظام النقاط المعتمدة لدرجة البكالوريوس (إبكا) (IPKA)

مادة (٦): النقاط المعتمدة

١-٦: تطبق الكلية نظام النقاط المعتمدة لقياس جهد الطالب و يحصل الطالب على كامل النقاط المعتمدة لاي مقرر عند نجاحه فيه

٢-٦: مجموع النقاط المعتمدة للعام الدراسي الواحد ستون نقطة و مجموع النقاط المعتمدة لنيل درجة البكالوريوس ٣٠٠ نقطة معتمدة

٣-٦: تساوى النقطة المعتمدة الواحدة ٢٥ ساعة من جهد الطالب مقسمة الى ١٥ ساعة تدريسية (Contact Hours) و ١٠ ساعات أنشطة تعلم ذاتى و إستذكار و واجبات دراسية (Non Contact Hours)

٤-٦: تعتبر ساعات التقييم بكل اشكاله ضمن الساعات التدريسية سواء كان تقييماً تكوينياً Formative أو تراكمياً Summative

٥-٦: يتم توثيق ساعات أنشطة التعلم الذاتى (Non Contact Hours) بواسطة المرشد الأكاديمي للطالب عن طريق ملف الانجاز Portfolio سواء كان ورقياً او إلكترونياً E-Portfolio و تكون إجازة ملف الطالب شرط من شروط النجاح في مقرر الإحترافية الطبية المخصص للعام الدراسي

مادة (٧): المراحل التعليمية

تنقسم الدراسة بالكلية الى مرحلتين:

١- **المرحلة الاولى: العلوم الطبية الأساسية و مدتها عامان و نصف (٥ فصول دراسية من الاول الى الخامس) (Semesters: 1-5)** هم الفرقة الدراسية الاولى و الثانية و النصف الاول من الفرقة الثالثة و تدرس هذه المواد بطريقة الوحدات الدراسية التكاملية المبنية على انظمة جسم الانسان (Integrated System-Based Modules) و لا يجوز للطالب الانتقال للمرحلة الثانية الا عند حصوله على جميع النقاط المعتمدة المخصصة لهذه المرحلة

٢- **المرحلة الثانية: العلوم الطبية الإكلينيكية و مدتها عامان و نصف (٥ فصول دراسية من السادس الى العاشر) (Semesters: 6-10)** هم النصف الثانى من الفرقة الدراسية الثالثة و الفرقة الرابعة و الفرقة الخامسة و تدرس هذه المواد بطريقة الجولات السريرية (Clinical Rounds) و تتبنى الكلية عدد (١٠٠) حالة أكلينيكية (Core Clinical Cases) تدرس بصورة تكاملية بين الأقسام موزعة في صورة حزم من الحالات حسب التخصصات موضح في كل منها القسم الرئيسى المسئول عن تدريسها خلال فترة توزيع الطالب على هذا القسم و الأقسام الكاملة المشاركة في تدريس كل حالة



المقرر	Code الكود	Course
مقدمة للجسم البشري	INT-101	Normal structure of the human body
مقدمة للعلوم الطبية	INT-102	Introduction to biomedical sciences
مقدمة لأساسيات علم الأمراض و العلاج النوائى	INT-103	Principles of disease mechanism & drug therapy
الجهاز العصبي ١	NEU-104	Neuroscience 1
الجهاز الهيكلى العضلى و الجلد و الأنسجة ١	MSK-105	Musculoskeletal & Integumentary systems 2
الجهاز المناعى و الدم	HEM-106	Hematopoietic system, Immunity & defense mechanisms
الجهاز العصبي ٢	NEU-204	Neuroscience 1
الجهاز الهيكلى العضلى و الجلد و الأنسجة ٢	MSK-205	Musculoskeletal & Integumentary systems 2
الجهاز الدورى	CVS-207	Cardiovascular System
الجهاز التنفسى	RSP-208	Respiratory System
جهاز الغدد الصماء	END-209	Endocrine System
الجهاز التناسلى	RPR-210	Reproductive System
الجهاز الهضمى و الكبد	DIG-311	Digestive System & Liver
الجهاز البولى	URG-312	Urogenital System
العلوم السلوكية و المعرفية	PSY-313	Behavioral & Cognitive Sciences
العلوم التخصصية	INV-314	Investigative medicine
طب و جراحة العين	OPH-315	Eye Disorders
الأنف و الأذن و الحنجرة	ENT-316	Ear, Nose & Throat
السموم الأكلينيكية و الجوانب القانونية في الطب	TOX-317	Clinical toxicology & Legal Medicine
الصحة العامة	GLB-418	Global Health Care
التغذية الطبية	NTR-419	Clinical Nutrition
الأمراض النفسية	PSY-413	Mental health
طب الأسرة	FML-420	Family Medicine
الطب التلطيفى و الأورام	PLL-421	Palliative Medicine & Oncology
الأمراض الباطنة ١	MED-422	Medicine 1
الجراحة ١	SUR-423	Surgery 1
طب الأطفال	PED-424	Child's Health
أمراض النساء و التوليد	OBG-425	Women's Health
الأمراض الباطنة ٢	MED-522	Medicine 2
الجراحة ٢	SUR-523	Surgery 2
الإحترافية الطبية ١	MPF-126	Medical Professionalism 1
الإحترافية الطبية ٢	MPF-226	Medical Professionalism 2
الإحترافية الطبية ٣	MPF-326	Medical Professionalism 3
الإحترافية الطبية ٤	MPF-426	Medical Professionalism 4
الإحترافية الطبية ٥	MPF-526	Medical Professionalism 5
البحث الطبى و الطب المبني على الدليل ١	RES-434	Medical Research & EBM 1
البحث الطبى و الطب المبني على الدليل ٢	RES-534	Medical Research & EBM 2
التدريب الأكلينيكى المبكر ١	EPE-130	Early Patient Encounter 1
التدريب الأكلينيكى المبكر ٢	EPE-231	Early Patient Encounter 2
التدريب الأكلينيكى المبكر ٣	EPE-232	Early Patient Encounter 3
التدريب الأكلينيكى المبكر ٤	EPE-333	Early Patient Encounter 4
اللغة الإنجليزية (المصطلحات الطبية)	TER-127	Medical Terminology
أخلاقيات مهنة الطب و القانون ١	EHT-128	Medical Ethics & Law 1
أخلاقيات مهنة الطب و القانون ٢	ETH-228	Medical Ethics & Law 2
أخلاقيات مهنة الطب و القانون ٣	ETH-328	Medical Ethics & Law 3
مهارات التواصل ١	CMS-129	Communication Skills 1
مهارات التواصل ٢	CMS-229	Communication Skills 2
الكمبيوتر	COM-235	Computer

كود المقرر: ثلاث احرف رمز المقرر متبوعاً برقم الفرقة الدراسية في خانة المئات و رقم المقرر في خانتي الأحاد و العشرات



٢-٩: المقررات الاختيارية Student Selected Component

٣ محاور من المقررات متاحة للدراسة بجانب المناهج الأساسية في الاماكن المحددة لها بالخريطة الزمنية للبرنامج و على الطالب اجتياز عدد من هذه المناهج مجموع نقاطها ١٥ نقطة معتمدة للتخرج و لا تحتسب لها درجات في المجموع التراكمي للطالب. و يجوز إضافة مقررات اختيارية جديدة بقرار من مجلس الكلية و تحدد النقاط المعتمدة لكل مقرر وفقاً لساعات التدريس كما هو موضح فيما يلي:

محور اللغات	محور العلوم الاتساقية	محور الدراسات الطبية المتعمقة
وزن المقرر ٩ نقاط معتمدة يدرس على ٣ أجزاء كل منهم في فصل دراسي	وزن المقرر ٣ نقاط معتمدة يدرس على فصل دراسي واحد	وزن المقرر ٦ نقاط معتمدة يدرس على جزئين كل منهم في فصل دراسي
مناخ من المرحلة الأولى	مناخ من المرحلة الأولى	مناخ من المرحلة الثانية
اللغة العربية SSC-001 (لغير الناطقين بالعربية) اللغة الانجليزية SSC-002 (لغير الناطقين بالانجليزية أو خريجي مدارس اللغات الانجليزية أو الثانوية الانجليزية أو الدبلومة الأمريكية أو البكالوريا الكندية) اللغة الفرنسية SSC-003 (لغير الناطقين بالفرنسية أو خريجي مدارس اللغات الفرنسية أو البكالوريا الفرنسية) اللغة الالمانية SSC-004 (لغير الناطقين بالالمانية أو خريجي مدارس اللغات الالمانية أو الثانوية الالمانية-ايبنتور)	تاريخ الطب المصري SSC-005 علم الاجتماع SSC-006 الرسم و التصميم SSC-007 التصوير SSC-008 قانون عام SSC-009 اقتصاديات الطب SSC-010 إدارة الموارد البشرية SSC-011 مهارات إدارة المعلومات SSC-012 علم البرمجيات SSC-013	الإشعة التداخلية SSC-017 الإشعة التشخيصية SSC-018 الأمراض الصدرية SSC-019 الأمراض العصبية SSC-020 أمراض القلب SSC-021 أمراض القلب للأطفال SSC-022 أمراض الكبد SSC-023 أمراض الكلى SSC-024 الأمراض المعدية SSC-025 الأمراض النفسية SSC-026 الأمراض النفسية للأطفال SSC-027 أمراض و جراحة الثدي SSC-028 الأنف و الأذن و الحنجرة SSC-029 الأورام SSC-030 التخدير SSC-031 جراحة الأطفال SSC-032 جراحة الرأس و الرقبة SSC-033 الجراحة العامة SSC-034 جراحة العظام SSC-035 جراحة او عية نموية SSC-036 جراحة تجميل SSC-037 جراحة قلب و صدر SSC-038 جراحة مخ و اعصاب SSC-039 الروماتيزم و التأهيل SSC-040 زراعة الأعضاء SSC-041 طب الأطفال SSC-042 طب الجنين SSC-043 الطب الرياضي SSC-044 طب الطوارئ SSC-045 طب المسنين SSC-046 الطب المهني و البيئي SSC-047 طب و جراحة العين SSC-048 علاج العقم SSC-049 مرض السكر SSC-050 المسالك البولية SSC-051 الوراثة البشرية SSC-052
	مناخ من المرحلة الثانية	
	الأحصاء الطبي المتقدم SSC-014 إدارة المستشفيات SSC-015 معايير الجودة SSC-016	

كود المقرر: ثلاث احرف رمز المقررات الاختيارية متبوعاً برقم المقرر



الباب الثاني
مراحل التعليم

مادة (١٠): مرحلة العلوم الطبية الأساسية

الفرقة الاولى الفصلين الدراسيين الاول والثاني	الكود Code	النقاط المعددة Credit Points	الاسابيع Weeks	الساعات الكلية Total Hours	ساعات التدريس Contact	جهد حر Non- Contact	الدرجات Marks
المجموع		60	32Wks	1500	940	560	1190
Semester 1 – الفصل الدراسي الأول							
مقدمة للجسم البشري	INT-101	4	2	100	60	40	80
مقدمة للعلوم الطبية	INT-102	16	8	400	240	160	320
مقدمة لأساسيات الأمراض و العلاج الدوائي	INT-103	10	6	250	180	70	200
Semester 2 – الفصل الدراسي الثاني							
الجهاز العصبي ١	NEU-104	5	3	125	75	50	100
الجهاز الهيكلي العضلي و الجلد و الأنسجة ١	MSK-105	14	8	350	210	140	280
الجهاز المناعي و الدم	HEM-106	8	5	200	120	80	160
الإحترافية الطبية ١	MPF-126	0.5	-	12	7	5	10
اللغة الإنجليزية (المصطلحات الطبية)	TER-127	0.5	-	12	7	5	-
أخلاقيات مهنة الطب و القانون ١	EHT-128	0.5	-	13	8	5	10
مهارات التواصل ١	CMS-129	0.5	-	13	8	5	10
التدريب الإكلينيكي المبكر ١	EPE-130	1	-	25	25	0	20

الفرقة الثانية الفصلين الدراسيين الثالث و الرابع	الكود Code	النقاط المعددة Credit Points	الاسابيع Weeks	الساعات الكلية Total Hours	ساعات التدريس Contact	جهد حر Non- Contact	الدرجات Marks
المجموع		60	32 Wks	1500	900	600	1070
Semester 3 – الفصل الدراسي الثالث							
الجهاز الدوري	CVS-207	12	7	300	180	120	240
الجهاز الهيكلي العضلي و الجلد و الأنسجة ٢	MSK-205	5	4	125	75	50	100
الجهاز التنفسي	RSP-208	8	5	200	120	80	160
أخلاقيات مهنة الطب و القانون ٢	ETH-228	0.5	-	13	8	5	10
مهارات التواصل ٢	CMS-229	0.5	-	12	7	5	10
مقرر إختياري	SSC	3	-	75	35	40	-
التدريب الإكلينيكي المبكر ٢	EPE-231	1	-	25	25	0	20
Semester 4 – الفصل الدراسي الرابع							
الجهاز العصبي ٢	NEU-204	13	8	325	195	130	260
جهاز الغدد الصماء	END-209	7	5	175	105	70	140
الجهاز التناسلي	RPR-210	5	3	125	75	50	100
الإحترافية الطبية ٢	MPF-226	0.5	-	12	7	5	10
الكمبيوتر	COM-235	0.5	-	13	8	5	-
مقرر إختياري	SSC	3	-	75	35	40	-
التدريب الإكلينيكي المبكر ٣	EPE-232	1	-	25	25	0	20

الفرقة الثالثة الفصل الدراسي الخامس	الكود Code	النقاط المعددة Credit Points	الاسابيع Weeks	الساعات الكلية Total Hours	ساعات التدريس Contact	جهد حر Non- Contact	الدرجات Marks
المجموع		30	16 Wks	750	450	300	540
Semester 5 – الفصل الدراسي الخامس							
الجهاز الهضمي و الكبد	DIG-311	13	8	325	195	130	260
الجهاز البولي	URG-312	9	5	225	135	90	180
العلوم السلوكية و المعرفية	PSY-313	2	2	50	30	20	40
العلوم التشخيصية	INV-314	2	1	50	30	20	40
مقرر إختياري	SSC	3	-	75	35	40	-
التدريب الإكلينيكي المبكر ٤	EPE-334	1	-	25	25	0	20



الفرقة الثالثة الفصل الدراسي السادس	الكود Code	النقاط المعتدة Credit Points	الأسابيع Weeks	الساعات الكلية Total Hours	ساعات التدريس Contact	جهد حر Non- Contact	الدرجات Marks
المجموع		30	18 Wks	750	450	300	540
Semester 6 – الفصل الدراسي السادس							
طب و جراحة العين	OPH-315	9	6	225	135	90	180
الأنف و الأذن و الحنجرة	ENT-316	9	6	225	135	90	180
السموم الأكلينيكية و الجوانب القانونية في الطب	TOX-317	8	6	200	130	70	160
الإحترافية الطبية ٣	MPF-326	0.5	-	12	7	5	10
أخلاقيات مهنة الطب و القانون ٣	ETH-328	0.5	-	13	8	5	10
مقرر إجتهاري	SSC	3	-	75	35	40	-

الفرقة الرابعة الفصلين الدراسيين السابع و الثامن	الكود Code	النقاط المعتدة Credit Points	الأسابيع Weeks	الساعات الكلية Total Hours	ساعات التدريس Contact	جهد حر Non- Contact	الدرجات Marks
المجموع		60	40 Wks	1500	900	600	1140
Semester 7 – الفصل الدراسي السابع							
الصحة العامة	GLB-418	7	5	175	105	70	140
التغذية	NTR-419	2	1	50	30	20	40
الأمراض النفسية	PSY-413	3	2	75	45	30	60
طب الأسرة	FML-420	2	1	50	30	20	40
الطب التطبيقي و الأورام	PLL-421	2	1	50	30	20	40
الأمراض الناطقة ١	MED-422	5	5	125	80	45	100
الجراحة ١	SUR-423	5	5	125	80	45	100
الإحترافية الطبية ٤	MPF-426	0.5	-	12	7	5	10
مقرر إجتهاري	SSC	3	-	75	35	40	-
البحث الطبي و الطب المبني على الدليل ١	RES-434	0.5	-	13	8	5	10
Semester 8 – الفصل الدراسي الثامن							
طب الأطفال	PED-424	15	10	375	225	150	300
أمراض النساء و التوليد	OBG-425	15	10	375	225	150	300

الفرقة الخامسة الفصلين الدراسيين التاسع و العاشر	الكود Code	النقاط المعتدة Credit Points	الأسابيع Weeks	الساعات الكلية Total Hours	ساعات التدريس Contact	جهد حر Non- Contact	الدرجات Marks
المجموع		60	40 Wks	1500	900	600	1200
Semester 9 & 10 – الفصلين الدراسيين التاسع و العاشر							
الأمراض الباطنة ٢ *	MED-522	29	20	725	435	290	580
الجراحة ٢ *	SUR-523	29	20	725	435	290	580
الإحترافية الطبية ٥	MPF-526	0.5	-	12	7	5	10
البحث الطبي و الطب المبني على الدليل ٢	RES-534	1.5	-	38	23	15	30

* ملحوظة: مقررا الباطنة ٢ و الجراحة ٢ يشملان تخصصاتهم المختلفة مع مراعاة التكامل الافقى بينها في التطبيق



الباب الرابع

التقييم

مادة (١٤): نسبة الحضور

لا يسمح للطلاب بدخول الامتحان او التقييم النهائي لأي مقرر اذا لم يحقق نسبة حضور قدرها ٧٥% على الاقل و يعتبر راسباً في هذا المقرر الا اذا قدم عذراً يقبله مجلس الكلية

مادة (١٥): قواعد النقل للفرق الأعلى

١-١٥: يحصل الطالب على كل النقاط المعتمدة المخصصة للمقرر او الوحدة الدراسية او الدورة السريرية عند نجاحه في الامتحان او التقييم

٢-١٥: لا ينتقل الطالب الى الفرقة الاعلى اذا تبقى عليه أكثر من ٢٠ نقطة معتمدة من النقاط المعتمدة لمقررات الفرق الأدنى

٣-١٥: لا ينتقل الطالب من مرحلة العلوم الأساسية الى مرحلة العلوم الاكلينيكية الا اذا حصل على كامل النقاط المعتمدة المخصصة لمرحلة العلوم الأساسية (١٥٠ نقطة)

مادة (١٦): درجة النجاح

١-١٦: لكي ينجح الطالب في اي مقرر يجب ان يحصل على ٦٠% من الدرجة الكلية و ٤٠% من درجة امتحان التحريري
٢-١٦: عند رسوب الطالب يسمح له بإعادة الاختبار في المقررات الى رسب فيها عدد ٣ مرات (الدور الثاني للعام الدراسي و الدوران الاول و الثاني للعام الدراسي التالي) و عند نجاحه فيه يحتسب له فقط درجة النجاح (٦٠%) و يحصل على كامل النقاط المعتمدة المخصصة للمقرر

مادة (١٧): أحكام التقييم

١-١٧: تشكل لجنة الامتحان في مرحلة العلوم الأساسية من السادة رؤساء أقسام العلوم الأساسية المشاركين في تدريس كل وحدة دراسية من وحدات مرحلة العلوم الأساسية برئاسة رئيس القسم التابع له منسق الوحدة الدراسية و تشكل لجنة امتحان ثلاثية في مرحلة العلوم الاكلينيكية برئاسة رئيس القسم (او المنسق في الوحدات المشتركة) و تكون مهمة هذه اللجان وضع الامتحان النظري من الاسئلة الموضوعية من الاقسام المشاركة في تدريس المقرر بنسب مشاركتها طبقاً لتوصيف المقرر او الوحدة الدراسية و ان يشمل اسئلة من انواع مختلفة لقياس أهداف المنهج و الإعداد للإمتحانات العملية و الامتحانات الدورية و يتم اعتماد هذا التشكيل من مجلس الكلية.

٢-١٧: يتم الاعلان عن جدول الامتحانات الدورية و النهائية في بداية العام الدراسي.

٣-١٧: يتم التقييم للمقررات او الوحدات الدراسية التكاملية بمشاركة جميع الأقسام المشاركة في التدريس طبقاً لنسب مشاركتهم من واقع توصيف المقرر او الوحدة الدراسية.

٤-١٧: يطبق قانون تنظيم الجامعات ولائحته التنفيذية في احتساب عدد مرات الرسوب لكل مستوى و يتعرض الطالب للفصل من الكلية طبقاً لفرص الرسوب المنصوص عليها به.

٥-١٧: يشترط للحصول على شهادة البكالوريوس النجاح في جميع المقررات (الوحدات الدراسية/المواد/الدورات السريرية) الإلزامية و الإختيارية و يحتسب المجموع التراكمي من المقررات (الوحدات الدراسية/المواد/الدورات السريرية) الإلزامية فقط و يرتب جميع طلاب الكلية (طلاب الدفعة الأساسية و دفعة طلاب البرنامج المتكامل إيكاً) حسب مجموعهم التراكمي عند التخرج و عند التقدم لشغل وظائف المعيد و الاطباء المقيمين بالكلية



مادة (٢٦): بدء العمل بهذه اللائحة:

تطبق هذه اللائحة على جميع الطلاب الجدد الملتحقين بالفرقة الاولى للكلية بدءاً من العام الدراسي ٢٠١٨-٢٠١٩ سواء طلاب النظام العادى او طلاب البرنامج المتكامل بنظام النقاط المعتمدة لدرجة البكالوريوس (إبكا) (IPKA)

مادة (٢٧):

يرتب جميع طلاب الدفعة (و التي تشمل طلاب النظام العادى و طلاب البرنامج المتكامل بنظام النقاط المعتمدة لدرجة البكالوريوس إبكا) حسب مجموعهم التراكمى عند التخرج و عند التقدم لشغل وظائف المعيدين و الاطباء المقيمين بالكلية

مادة (٢٨):

الطلاب الملتحقون بالكلية قبل العام الدراسي ٢٠١٨-٢٠١٩ سواء طلاب النظام العادى او طلاب البرنامج المتكامل بنظام النقاط المعتمدة لدرجة البكالوريوس (إبكا) (IPKA) تطبق عليهم احكام اللوائح السارية عند التحاقهم بالكلية

مادة (٢٩):

يخضع الطالب للنظام العام للجامعة والكلية وتطبق عليه قواعد الفصل من الجامعة وفرص إعادة القيد والأعدار المقبولة لتأجيل الإختبار وإيقاف القيد الدراسى وكافة القواعد والقوانين واللوائح الخاصة بشأن تأديب الطلاب المنصوص عليها فى قوانين تنظيم الجامعات ولائحتها التنفيذية.

مادة (٣٠):

يجوز لمجلس الكلية أن يطلب تعديل بعض بنود هذه اللائحة الأساسية و إذا كان التعديل يمس الهيكل العام للبرنامج يتم تطبيقه على الدفعات الجديدة الملتحقة بالكلية بعد هذا التعديل اما إذا كان التعديل إجرائي إستوجبته التجربة العملية فى التطبيق و لا يؤثر على الهيكل العام للبرنامج فيطبق على جميع الطلاب فور إعتماده.

مادة (٣١):

يعرض على مجلس الكلية كافة الموضوعات التي لم يرد فى شأنها نص فى مواد هذه اللائحة و يجوز تصديق مجلس الجامعة على قرارات مجلس الكلية.



Challenges

- Institution Culture
- Learning Material
- Large Numbers – Logistics / Mentorship
- Preclinical Phase Modular Lab Arrangement
- Competency Based Assessment
- Portfolio



References & Benchmarks

Benchmarks



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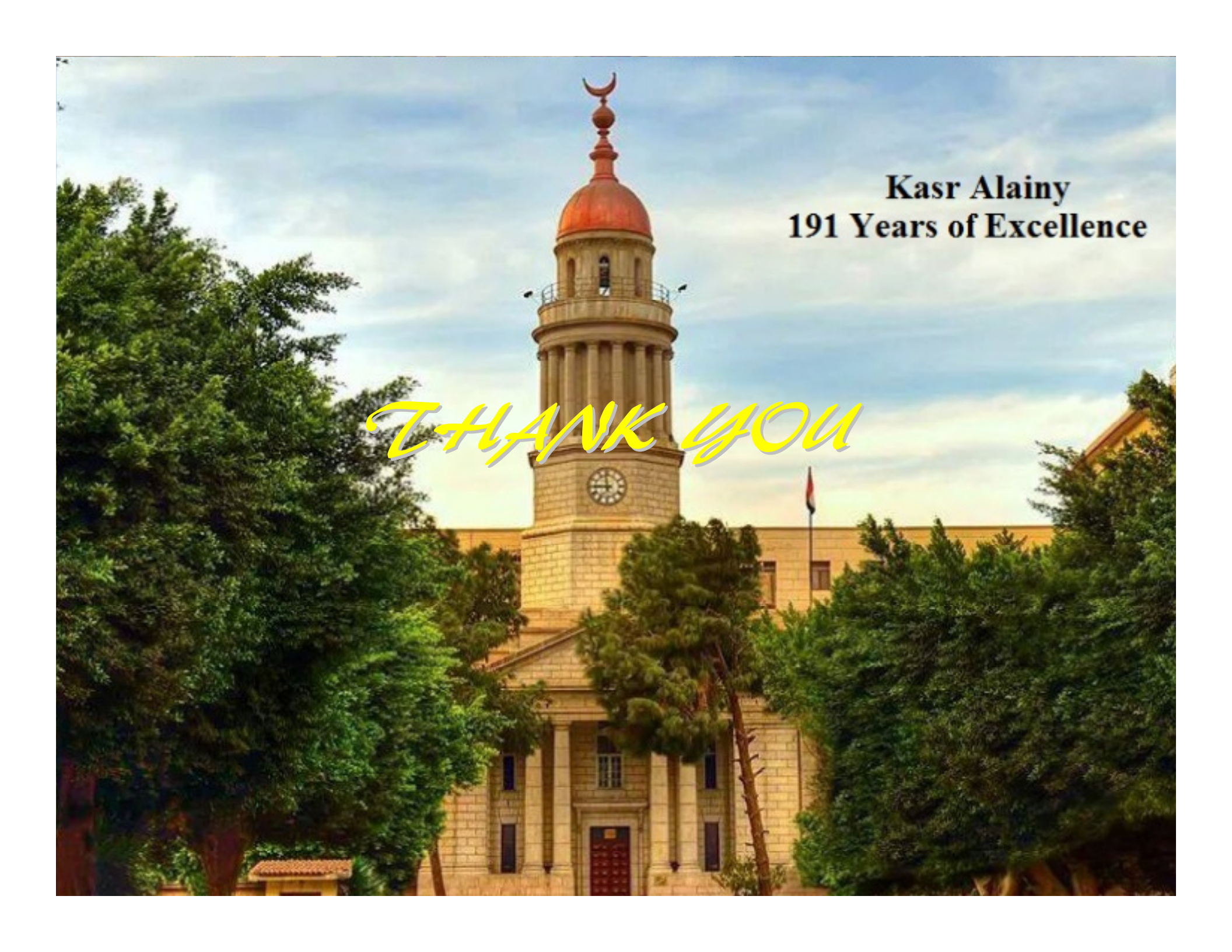


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