

**Ministry of Higher Education and Scientific Research  
Scientific Supervision and Scientific Evaluation Apparatus  
Directorate of Quality Assurance and Academic Accreditation  
Department**



# **Academic Program and Course Description Guide**

**4<sup>th</sup> stage Medicine 2025-2026**

## Academic Program Description Form

**University Name:** University of Al-Qadisiyah

**Faculty/Institute:** College of medicine

**Scientific Department:**

**Academic or Professional Program Name:** General Medicine and Surgery

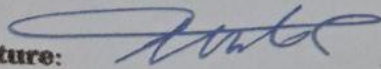
**Final Certificate Name:** Bachelor's degree in General Medicine and Surgery

**Academic System:** Annual year / 2 semester

**Description Preparation Date:** 10/9 /2025

**File Completion Date:** 16/9/2025

**Signature:**



**Head of Department Name:**

Prof Dr. Nael Mohammed

**Signature:**



**Scientific Associate Name:**

Prof. Dr. Radhi F. Shlash


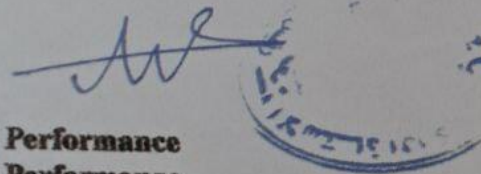
**The file is checked by:** Prof Dr. Anwar jassib

**Department of Quality Assurance and University Performance**

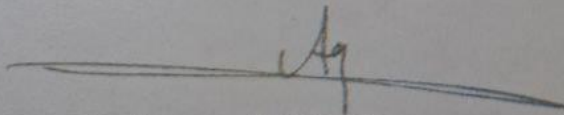
**Director of the Quality Assurance and University Performance**

**Department:**

**Signature:**



**Approval of the Dean**



### 1. Program Vision

Raise awareness about the importance of medical health and the effects of medical morbidity on patients

### 2. Program Mission

To improve student's knowledge and abilities regarding the field of internal medicine so as to develop the health care services provided by them as future doctors and to implant an empathetic view of medically ill patients to treat them equally as any other patients in need of care

### 3. Program Objectives

- 1- Introduce students to the concept of medical illness, how to diagnose and treat
- 2- Raise awareness about the heavy burden of medical illness on society
- 3- Correct common misconceptions regarding internal medicine
- 4- Improve students abilities to interact with different patients

### 4. Program Accreditation

An application has been made for national accreditation for medical colleges

### 5. Other external influences

Advances in medical science and technology , requiring regular curriculum updates

### 6. Program Structure

Program Structure	Number of	Credit hours	Percentage	Reviews*
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	<b>semesters</b>			
<b>Institution Requirements</b>	<b>2</b>	<b>Total hours 180 h (120h theory for annual year semester I,II) and 60 h for each group Clinical session</b>		<b>Basic</b>
<b>College Requirements</b>	<b>2</b>	<b>Total hours 180 h (120h theory for annual year semester I,II) and 60 h for each group Clinical session</b>		<b>Basic</b>
<b>Department Requirements</b>	<b>2</b>	<b>Total hours 180 h (120h theory for annual year semester I,II) and 60 h for each group Clinical session</b>		<b>Basic</b>
<b>Summer Training</b>	<b>YES</b>	<b>Summer emergency training</b>		
<b>Other</b>	<b>No</b>			

\* This can include notes whether the course is basic or optional.

## 7. Program Description

Year/ Level	Course Code	Course Name	Credit Hours	
			theoretical	practical
4 <sup>th</sup>	MED 4201	Medicine (Cardiovascular,Respiratory,Endocrinology ,nephrology,Gastrointestinal tract and liver and pancreas diseases)		
			120 h for annual year semester I,II	Each group 7wks + 2d 60 h for each group Clinical session

## 8. Expected learning outcomes of the program

### Knowledge

By the end of the 4th stage, students will be able to:

1. Apply basic clinical knowledge to understand common diseases and patient management.
2. Integrate pre-clinical and para-clinical subjects with clinical practice.
3. Demonstrate understanding of medical research methodology and biostatistics.
4. Formulate simple research questions and participate in supervised research projects.
5. Apply principles of evidence-based medicine in clinical decision-making.
6. Recognize ethical and legal aspects of medical practice and research.
7. Communicate effectively with patients, peers, and healthcare professionals.
8. Demonstrate professionalism, empathy, and respect for patient confidentiality.
9. Perform basic clinical and diagnostic skills under supervision.
10. Develop self-directed learning and critical thinking skills.

### Skills

How to take history from medical patients.

–How to perform medical examination.

–How to prescribe medical medications.

–How to use medical therapy in the management of different medical problems.

### Ethics

Students should have an idea about the burden of medical health issues on society and be able to sympathize with patients in order to offer the optimum help for them.

Maintain patient confidentiality and dignity.

Obtain informed consent.

Demonstrate professionalism, empathy, and responsibility.

## 9. Teaching and Learning Strategies

Theoretical lectures  
Clinical sessions  
Tutorials and seminars  
EBM

## 10. Evaluation methods

Theoretical exams , formative and summative  
Clinical exams , history taking , physical exam , OSCE  
Logbook and skills assessment

### 1. Faculty

#### Faculty Members

Academic Rank	Specialization		Special Requirements/Skills (if applicable)		Number of the teaching staff	
	General	Special			Staff	Lecturer
5 prof	MBChB	Medicine				
2 Ass.prof	MBChB	Medicine				
2 Lecturer	MBChB	Medicine				

Program Skills Outline															
				Required program Learning outcomes											
Year/Level	Course Code	Course Name	Basic or optional	Knowledge				Skills				Ethics			
				A1	A2	A3	A4	B1	B2	B3	B4	C1	C2	C3	C4
4th	MED 4201	medicine	Basic	√	√	√	√	√	√	√	√	√	√	√	√

- Please tick the boxes corresponding to the individual program learning outcomes under evaluation.

## Course Description Form

1. Course Name: medicine	
medicine	
2. Course Code:	
MED 4201	
3. Semester : fourth year	
Annual year / semester I, II	
4. Description Preparation Date:	
10/9/2025	
5. Available Attendance Forms: 16/10/2025	
Attendance sheet	
6. Number of Credit Hours (Total 90 h) / Number of Units (3Total)	
Total 180h (120h theory for annual year / semester I,II and 60h clinical session) / 10 unit total	
7. Course administrator's name (mention all, if more than one name)	
Name: Osamah Tahir Mulim Alaa Hadi Mazin zamel Akeel mer ali Ali Talib Majed abd al ameer Email:	
8. Course Objectives	
<b>Course Objectives</b>	1- Introduce students to the concept of medical illness, how to diagnose and treat  2- Raise awareness about the heavy burden of medical illness on society  3- Correct common misconceptions regarding internal medicine  4- Improve students abilities to interact with different patients..

## Teaching and Learning Strategies

### Strategy

4 theoretical large group lectures per week  
 7wk +2d weeks of clinical training for each small group learning  
 Using case scenarios, seminars, case presentations and PBL

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## 15.Learning and Teaching Resources

Required textbooks (curricular books, if any)

Main references (sources)

Davidson's Principles and practice of medicine

Recommended books and references  
 (scientific journals, reports...)

Cecil Essentials of Medicine.  
 Online resources: American college gastroenterology; European society gastroenterology.

Electronic References, Websites

**Aims of the course:**

- 1- To introduce medical students to the fields of General Medical sciences and to make them familiar with Medical sciences and the medical pharmacology.
- 2- Make the students able to diagnose different Medical disorders when presented to them in the future.
- 3- Teach the students how to manage patients with Medical health problems in different health settings

**Learning objectives:****(Knowledge):**

- 1- How to diagnose and manage patients with Cardiovascular, Respiratory and Endocrine, GIT, and Nephrology disorders
- 2- How to recognize patients with medical emergencies and the ABCs of management of those cases
- 3- The basic rules of drug prescription

**(Skills):**

- 1- The mastering of history taking with handling of different patients in medical wards, CCU and emergency ward
- 2- The basic rules of systemic examination of the chest and abdomen
- 3- How to arrange information to write the proper case sheet
- 4- Case presentation and clinical discussion

**(Attitudes):**

- 1- Students should have an idea about the burden of medical health issues on society
- 2- Be able to sympathize with patients in order to offer the optimum help for them
- 3- How to respect patients and behave in a professional and a humane way

**Communication skills:**

- 1- Conduct sincere and effective patient interviews, properly explain their condition and plan of management, obtain consents and convey bad news in a professional way.
- 2- Write patient records and properly present them.
- 3- Communicate, consult and respect the role of other health-care providers.
- 4- Work effectively and cooperatively in a team.

**Life-long learning.**

Formulate a focused clinical question based on real or hypothetical case, search effectively medical literature using electronic resources, retrieve appropriate information and appraise them using the principles of evidence based medicine.

**Ethical behavior.**

- 1- Treat the patient as a person, respecting his confidentiality and deliver care in an honest, considerate and compassionate manner.
- 2- Advocate the patient's interests over his own.
- 3- Maintain a professional image, and practice a responsible attitude.
- 4- Outline the ethical principles related to organ donation.
- 5- Discuss professional errors in an honest way.

**Teaching methods:**

- i. Formal lectures.
- ii. Clinical sessions.
- iii. Problem Based Learning
- iiii. EBM

**Assessment methods:**

- Theoretical exams which include essay questions in the form of clinical cases in addition to single choice questions.
- Clinical exam in the form of long case and oral exam.(OSCE)
- Student's activity recorded in Log Book

Formative and summative exam

## semester contents : Theory

No. of lecture	System)	Name of lecture	Learning objectives
1	CVS	ECG 1	1- normal ECG 2-non cardiac causes for abnormal ECG 3- Ischemic Heart Disease IHD
2	CVS	ECG2	1- ECG findings of Pericarditis 2- findings of ventricular hypertrophy 3- findings in Heart Block
3	CVS	ECG3	Recognition of different types of Arrhythmias
4	CVS	Rheumatic fever and Atherosclerosis	1- definition, diagnosis and clinical features of Rheumatic fever 2- definition, pathophysiology, diagnosis and consequences of Atherosclerosis
5	CVS	Ischemic Heart Disease	1- coronary circulation 2- coronary endothelial function 3- common causes of chest pain 4- clinical features of Chronic Stable Angina
6	CVS	Chronic Stable Angina (CSA) and Acute Coronary Syndrome (ACS)	1- management of CSA 2- drugs used and invasive treatment methods 3- prognosis of CSA 4- prevention 5- diagnosis and clinical features of Acute MI
7	CVS	Management of ACS	1- Immediate treatment (drugs and invasive methods) 2- complications 3- later management 4- prevention 5- prognosis
8	CVS	Silent Ischemia	1-silent ischemia 2- angina with normal coronary arteries 3- cardiac risk of non- cardiac surgery 4- peripheral arterial disease
9	CVS	Vascular disorders	1- Raynaud's phenomenon 2- Acute limb ischemia 3- Renal vascular disease 4- Aortic

				disease
10	CVS		<b>Refractory Angina</b>	<b>1-Treatment of chronic IHD 2- alternative treatment of refractory angina</b>

11	CVS		<b>Hypertension</b>	<b>1- definition and diagnosis 2- causes 3- investigations 4- treatment (pharmalogical and non-pharmalogical )</b>
12	CVS		Acute Myocarditis and Cardiomyopathy	<b>1- definition 2- types 3- diagnosis 4- risk factors 5- treatment</b>
13-	CVS		Pulmonary Edema (PE)	<b>1-definition 2- etiology 3- clinical features and diagnosis</b>
14	CVS		Heart Failure (HF)	<b>1-management of PE 2- Types of HF 3- management of Chronic HF</b>
15	CVS		Cardiac signs	<b>1-Inspection 2-Palpation 3- Auscultation</b>
16	CVS		Diseases of the Pericardium	<b>1-Acute Pericarditis 2- Pericardial Tamponade 3-Tuberculous Pericarditis 4- Chronic Constrictive Pericarditis</b>
17	CVS		Approaching emergencies in Cardiology 1 <b>EBM</b>	<b>1-Cardiac Tamponade 2-A STEMI 3- VT/V Flutter/VF/ Toursade de points 4- SVT/AF/A tachycardia/A Flutter</b>
18	CVS		Approaching emergencies in Cardiology 2	<b>1-Complete Heart Block 2- Acute Endocarditis 3- Pulmonary Embolism 4- Limb Ischemia 5- DVT</b>
19	CVS		Diseases of Heart Valves	<b>1-Mitral Stenosis 2-Mitral Regurgitation 3- Aortic Stenosis 4-Aortic Regurgitaion</b>
20	CVS		Congenital Heart Disease	<b>1-Coarctation of Aorta 2- ASD 3-VSD 4- Tetralogy of Fallot</b>
21	CVS		Infective Endocarditis	<b>1-Definition 2- diagnosis 3- causes 4- treatment</b>
22	CVS		Angiography-Arteriography <b>EBM</b>	<b>1-Types of stents and balloons 2- types of Arterial accesses 3- PCI 4- indications of Catheterization 5- complications of Cath</b>
	<b>System Blueprint (%)</b>		<b>Respiratory</b>	

23	RS		Introduction to respiratory system	<b>Anatomy and Physiology of Respiratory system</b>
24	RS		Presentation of Resp. diseases	<b>1-Dyspnea 2- Cough 3- Hemoptysis 4- Chest pain</b>
25	RS		Pulmonary Function Test	<b>1-Obstruction 2-Restriction 3- Interpretation of results</b>
26	RS		COPD	<b>1-Types (Emphysema and Chronic Bronchitis)2- Epidemiology 3-risk factors 4- clinical features 5- management (drugs and O2 therapy)</b>
27	RS		Asthma	<b>1-Definition 2- Epidemiology 3- Etiology 4- Pathogenesis 5- Diagnosis 6- Treatment</b>
28	RS		<b>Bronchiectasis</b>	<b>1-Definition 2- causes 3- diagnosis 4- treatment</b>

29	RS		<b>Interstitial Lung Disease</b>	<b>1-Definition 2- causes 3- diagnosis 4- treatment</b>
30	RS		Pulmonary Embolism	<b>1-Definition 2- causes 3- diagnosis 4- treatment</b>
31	RS		Pulmonary Neoplasms	<b>1-Types 2- clinical features 3- Assessment and staging 4- treatment</b>
32	RS		Pleural Effusion	<b>1-Definition 2- causes 3- diagnosis 4- treatment</b>
33	RS		Pneumonia	<b>1-Definition 2- causes 3- diagnosis 4- treatment</b>
	<b>System Blueprint (%)</b>		<b>Endocrine</b>	
34			Diabetes Mellitus (DM) 1	<b>1-Definition 2- types 3- risk factors 4- pathogenesis</b>
35			DM2	<b>1-investigations 2- clinical features 3- complications 4- prognosis</b>
36			Diabetic Keto-Acidosis (DKA)	<b>1- definition 2- pathogenesis 3- clinical features 4- management</b>
37			Hyperglycemic Hyperosmolar state	<b>1- definition 2- pathogenesis 3- clinical features 4- management</b>
38			Hypoglycemia	<b>1- definition 2- pathogenesis 3- clinical features 4- management</b>

39			DM in pregnancy	1- definition 2- pathogenesis 3- clinical features 4- management
40			Diabetic Nephropathy	1- definition 2- pathogenesis 3- clinical features 4- management
41			Drugs used in Hyperglycemia	1- Metformin 2- Sulphonylureas 3- Incretin based therapies 4- Insulin therapy
42			Thyroid gland	1-Anatomy 2-Embryology 3-Physiology 4- Thyroid hormone synthesis, regulation and function
43			Hypothyroidism	1- types 2- causes 3- clinical features and diagnosis 4- treatment
44			Hyperthyroidism	Graves' disease definition, diagnosis and treatment Graves' disease in pregnancy
45			Adrenal gland Addison disease and Cushing disease	1- types 2- causes 3- clinical features and diagnosis 4- treatment

No. of lecture	system GIT	Name of lecture	Learning objectives
1	GIT Diseases of the Esophagus	Gastro-Esophageal Reflux disease	Pathophysiology, Risk factors, etiology, clinical features, complications and management
2	GIT Diseases of the Esophagus	Motility disorders	1- Achalasia (pathogenesis, clinical features and management) 2- other motility disorders
3	GIT Diseases of the Esophagus	Tumors of the Esophagus <b>EBM</b>	<b>Squamous Carcinoma</b> (pathogenesis, clinical features and management)
4	GIT diseases of the Stomach and Duodenum	Gastritis	1- Acute gastritis 2- Chronic nonspecific gastritis 3- Chronic gastritis due to Helicobacter Pylori infection 4- Autoimmune chronic gastritis 5- Menetrier's disease

5	GIT diseases of the Stomach and Duodenum		Peptic Ulcer disease I	1- <b>etiology and risk factors</b> 2- <b>diagnosis</b> 3- <b>pathogenesis</b>
6	<b>GIT diseases of the Stomach and Duodenum</b>		<b>Peptic Ulcer disease II</b>	1- <b>clinical features</b> 2- <b>investigations</b> 3- <b>complications</b> 4- <b>management</b>

7	<b>GIT diseases of the Stomach and Duodenum</b>		<b>Surgical treatment of Peptic Ulcer</b>	1- <b>indications of surgery</b> 2- <b>complications of surgery</b> 3- <b>Zollinger Ellison syndrome</b>
8	GIT diseases of the Stomach and Duodenum		Functional disorders	1- <b>functional causes of vomiting</b> 2- <b>Gastroparesis</b>
9	GIT diseases of the Stomach and Duodenum		Tumors of the Stomach	<b>Gastric Carcinoma( etiology and risk factors, pathology, clinical features, management</b>
10	GIT diseases of the Stomach and Duodenum		Other tumors of the stomach	1- <b>Gastric Lymphoma</b> 2- <b>other tumors</b>
11	GIT diseases of Small Intestine		Coeliac disease	1- <b>clinical features</b> 2- <b>investigations</b> 3- <b>management</b>
12	GIT diseases of Small Intestine		Small bowel bacterial overgrowth	1- <b>causes and clinical features of bacterial overgrowth</b> 2- <b>Whipple's disease</b> 3- <b>Short bowel syndrome</b> 4- <b>radiation enteritis</b>
13-	GIT diseases of Small Intestine		Other disorders	1- <b>Motility disorders</b> 2- <b>Protein losing enteropathy</b> 3- <b>Lactose intolerance</b>

14	GIT diseases of Small Intestine		Tumors of the Small Intestine <b>EBM</b>	1- <b>Carcinoid tumor</b> 2- <b>Lymphoma</b> 3- <b>Malabsorption</b>
15	<b>GIT diseases of Large Intestine</b>		<b>Inflammatory Bowel disease I</b>	1- risk factors 2- pathology 3- clinical features

16	<b>GIT diseases of Large Intestine</b>		<b>Inflammatory Bowel disease II</b>	1- complications 2- investigations 3- management 4- Sever Ulcerative Colitis
17	GIT diseases of Large Intestine		Irritable Bowel Syndrome	1- causes 2- clinical features and diagnosis 3- management
18	GIT diseases of Large Intestine		Tumors of the Colon I	1- <b>Polyyps</b> 2- <b>Tubular adenoma</b> 3- <b>Villous adenoma</b>
19	GIT diseases of Large Intestine		Tumors of the Colon II	1- <b>Gastro intestinal polyposis syndromes</b> 2- <b>Familial adenomatous polyposis</b> 3- <b>Peutz-Jegher's syndrome</b>
20	GIT diseases of Large Intestine		Colo-Rectal Carcinoma	1- <b>etiology</b> 2- pathology 3- clinical features 4- investigations 5- management
	<b>system Blueprint diseases of the Liver</b>	(%)		
21	GIT diseases of the Liver		Introduction to Liver diseases	<b>Anatomy and physiology of the liver</b> Investigations of liver <b>Types of Jaundice</b>
22	GIT diseases of the Liver		Liver Cirrhosis <b>EBM</b>	1- <b>acute and chronic liver injury</b> 2- <b>liver Cirrhosis ( definition, causes, clinical features (stigmata), management,</b>

				<b>complications)</b>
<b>23</b>	GIT diseases of the Liver		Portal Hypertension	<b>1- definition 2- causes 3-clinical features 4- management 5- complications 6- prevention of variceal bleeding</b>
<b>24</b>	GIT diseases of the Liver		Ascites	<b>1- definition 2- causes 3- investigations 4- management</b>
<b>25</b>	GIT diseases of the Liver		Liver failure	<b>1-liver failure (definition, types, causes, clinical features and management) 2- Hepatic Encephalopathy</b>
<b>26</b>	GIT diseases of the Liver		Viral Hepatitis	<b>1- Types (A,B,C,D,E) 2- diagnosis, management, complications</b>
<b>27</b>	<b>GIT diseases of the Liver</b>		<b>Alcoholic Liver</b>	<b>1-types 2- clinical features 3- investigations 4- management</b>

<b>28</b>	<b>GIT diseases of the Liver</b>		<b>Drug induced liver injury</b>	<b>1-causes 2- Gilbert's syndrome</b>
<b>29</b>	GIT diseases of the Liver		Inherited Liver disease	<b>1-Hereditary haemochromatosis 2- Wilson's disease</b>
<b>30</b>	GIT diseases of the Liver		Autoimmune liver and biliary disease	<b>1-Autoimmune hepatitis 2-Primary biliary cirrhosis 3-Primary sclerosing cholangitis.</b>
<b>31</b>	GIT diseases of the Liver		Liver tumor <b>EBM</b>	<b>1-Hepatocellular carcinoma 2-Secondary malignant tumors 3-Benign tumors</b>
<b>32</b>	GIT diseases of the Liver		Liver disease during Pregnancy	<b>1-Hyperemesis Gravidarum 2--Intrahepatic cholestasis of pregnancy 3-Acute fatty liver of pregnancy</b>

33	GIT diseases of the Liver		Acute & Chronic pancreatitis & Pancreatic tumor	1- Acute pancreatitis 2- Chronic pancreatitis 3- Pancreatic tumor
	<b>system Blueprint diseases of the Kidney</b>	<b>(%)</b>		
34	Nephrology		Functional anatomy and physiology of the kidney	1- Functions of 2- the kidneys Anatomy of the kidneys
35	Nephrology		Acute Kidney Injury	1- definition 2- Pathogenesis 3- Clinical assessment 4- Management 5- Prognosis 6- Established ACUTE RENAL FAILURE
36	Nephrology		Chronic renal failure	1- definition and etiology 2- clinical features 3- Fluid and electrolyte balance 4- Cardiovascular disease and lipids 5- Hematological Manifestations 6- Renal osteodystrophy 7- management
37	Nephrology		Glomerular diseases I	1- Histological Terms of Glomerular Changes 2- Classification of glomerulopathies 3- Investigations 4- Nephrotic syndrome
38	Nephrology		Glomerular diseases II	1- Minimal-change glomerular lesion 2- Focal segmental glomerulosclerosis 3- Membranous glomerulopathy 4- IgA nephropathy

<b>39</b>	<b>Nephrology</b>		<b>Glomerular diseases III</b>	<b>1- Henoch–Schönlein purpura 2- membrano-proliferative glomerulonephritis</b>
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system Blueprint (%)			3- Infection-related glomerulonephritis	
<b>40</b>	Nephrology		Glomerular diseases IV	<b>1- diabetic nephropathy</b>
<b>41</b>	Nephrology		Acute & chronic interstitial nephritis	<b>1- definition 2- diagnosis 3- investigations 4- management</b>
<b>42</b>	Nephrology		Renal vascular diseases	<b>1- Renal artery stenosis 2- Acute renal infarction 3- Diseases of small intrarenal vessels</b>
<b>43</b>	Nephrology		Renal involvement in systemic conditions	<b>1- Diabetes mellitus 2- Multiple myeloma 3- Hepatic–renal disease 4- Sarcoidosis 5- Systemic vasculitis 6- Systemic sclerosis 7- Sickle-cell nephropathy</b>
<b>44</b>	<b>Nephrology</b>		<b>Urinary Tract Infection</b>	<b>1-clinical features 2-investigations 3-management 4- Persistent or recurrent UTI 5-a symptomatic bacteriuria</b>

### Schedule and place of small group sessions and Clinical skills

Teaching Techniques of practical sessions:

1. Clinical scenario
2. Real in patient case( short case)
3. Real in patient case( long case)
4. Data analysis (ecg.-cxr.)
5. Group discussion

6. Attachment to( ER.-CCU.-ETT- ECHO.-CAG.)

**First Week**

Skill	Frequency	Method	Location
<b>HISTORY TAKING ART</b>	2 hour	Real patient	Hospital
<b>2-PHYSICAL EXA. PROTOCOL</b>	2 hour	Real patient	Hospital
<b>. 3- CXR. READING PROTOCOL+ CASES</b>	2 hour	Real patient	Hospital
<b>4-CLINICAL ECG. READING PROTOCOL+ CASES</b>	2 hour	Real patient	Hospital

**Second Week**

Skill	Frequency	Method	Location
<b>6-PEx. PROTOCOL . IN ER.+ CASES</b>	2 hour	Real patient	Hospital
<b>7- SHOCK APPROACH+ CASES</b>	2 hour	Real patient	Hospital
<b>8-HF. VHD. APPROACH</b>	2 hour	Real patient	Hospital
<b>9- MI.APPROACH</b>	2 hour	Real patient	Hospital

**Third Week**

Skill	Frequency	Method	Location
<b>11-ADULT CONG. HD. APPROACH</b>	2 hour	Real patient	Hospital
<b>12-PERICARDIAL HD. APPROACH</b>	2 hour	Real patient	Hospital
<b>13.APPROACHING EMERGENCY CASES</b>	2 hour	Real patient	Hospital
<b>Respiratory system: inspection, Trachea, Palpation, Percussion, Auscultation</b>	2 hour	Real patient	Hospital

## Fourth Week

Skill	Frequency	Method	Location
Cardiopulmonary resuscitation (with the use of DC shock), Administer Oxygen	2 hour	Real patient	Hospital
Diagnostic and Therapeutic skills of RS	2 hour	Real patient	Hospital
Skills for DC shock	2 hour	Real patient	Hospital
Skills for CPR	2 hour	Real patient	Hospital

## Fifth Week

Skill	Frequency	Method	Location
History and case presentation of GIT	2 hour	Real patient	Hospital
Physical examination: Inspection, Superficial palpation, Deep palpation, Percussion (including signs of ascites),	2 hour	Real patient	Hospital
Interpreted on sonar and radiological finding	2 hour	Real patient	Hospital
Interpreted Stool examination and serum finding , CBC finding	2 hour	Real patient	Hospital

## Six Week

Skill	Frequency	Method	Location
History and case presentation for hematology	2 hour	Real patient	Hospital
General look and Inspection for all body	2 hour	Real patient	Hospital
Physical examination:, Superficial palpation, Deep palpation spleen ,liver ,nail	2 hour	Real patient	Hospital
Blood investigation and x-ray finding	2 hour	Real patient	Hospital

## Seven Week

Skill	Frequency	Method	Location
Approach for Examination liver and gall bladder	2 hour	Real patient	Hospital
Liver functional test interpreted	2 hour	Real patient	Hospital
Sonar and radiological finding for liver and GB disorders	2 hour	Real patient	Hospital
Approach for management for hydrated cyst of liver	2 hour	Real patient	Hospital

## Eight Week

Skill	Frequency	Method	Location
Approach for Examination of the kidney	2 hour	Real patient	Hospital
Renal function test interpreted	2 hour	Real patient	Hospital

### Skills:

- Cardiopulmonary resuscitation (with the use of DC shock),
- Administer Oxygen Performing ECG,
- Measure blood glucose using finger prick sample and Stix,
- IM & subcutaneous injection (using Insulin syringes).
- NG tube insertion,
- Folly's Catheter insertion & removal,
- Peritoneocentesis,
- Urinalysis Master basic skills (including the use of dipsticks in urine examination including protein and glucose in urine, how to interpret renal function and practicing the use of glucometer) and value the importance of these in terms of overall clinical examination.

- Understand the basics of dialysis in management of renal failure (haemo and peritoneal dialysis) through a hospital visit to the dialysis unit and practicing history taking from patients with renal failure
- Urine dipstick and analysis

### **Seminars:**

1-Bronchial asthma

2-Diabetic Keto-acidosis (DKA)

3-Chronic Obstructive Pulmonary Disease (COPD)

4-CHF

5-Drugs used in Hypertension

6-Drugs used in Diabetes Mellitus

7-Drugs used in Ischemic Heart Disease

8-Corticosteroids

### **Teaching and learning methods:**

Methods used:

1. Clinical classes

2. Lectures

3. Staff rounds

4. Illustrated lecture

5. skill labs

6. Tutorials

7. Emergency rounds

8-EBM

## **Assessment and evaluation of the 4<sup>th</sup> stage**

### **A) Grading system:**

To evaluate assessment of students by :-

First and second semesters exam written exam and CPT = 10M

Half year exam = 20 marks

Clinical exam = 15 marks

LOG BOOK (Skills) =5

Final exam = 40 marks

#### **1-The continuous progress test (CPT) -----the activity**

It comprises students' performance in constructive quizzes during the large group teaching lectures in addition to their participation by interactive teaching and their response to questions during the lectures . the answer is discussed immediately after the quiz so the students can have a feedback of their performance . The quiz is usually either (a problem solving question with photos to explain the case , MCQ , short essay , oral or OSCE ) intended to test students' knowledge , critical thinking , analysis and intellectual skills , of previously presented lectures . The are 10-15 quizzes during the semester .

#### **2-The clinical examination**

Including the ability of students to deal with real patients in the clinical ward by taking history and doing examination.

#### **3- Summative examination**

### **Examination description:**

\* applied for 2025-2026, Academic year. And such plane applied for midterm and final exam

- ❖ There are at least 1 formative exam for each system. However, the formative exam have no mark (Note: all student should participate in the formative exam).
- ❖ Followed by single summative exam for semester I,II and half year exam while in final summative exam there are a second trial if fail.
- ❖ Time for mid semester I,II exam would be 1 hour , final theoretical exam would be 3 hours .
- ❖ Clinical examination at the end of clinical course.

### **The summative and formative examination**

The aim of summative and formative examination of internal medicine aims to evaluate knowledge, critical thinking, analysis and problem solving abilities.

Approximately 60-70% of question test knowledge and 30-40% test critical thinking and problem solving abilities

### Examinations description:

Examination	Description
1-continuous progress test (CPT)	oral examination / spot diagnosis , quizzes , PBL ,Short answered questions , Case report ,homework activity and skills assessment , log book activity
2- theory exam for each 1 <sup>st</sup> and 2 <sup>nd</sup> mid semester	Short answered questions, M.C.Qs. and case presentation with short answer and matching according bloom and blue print
<b>3-Halve year theory exam</b>	Short answered questions, M.C.Qs. and case presentation with short answer and matching according bloom and blue print
4- clinical session exam for final exam	OSCE , long case , short case , physical exam according bloom and blue print
5-final theory exam	M.C.Qs. as case sinario or direct question , according bloom and blue print

**The minimum passing grades (Faculty bylaws) is 50 marks.**

**Re-sit Examinations :- Students who fail in the annual year assessment will be required to re-sit (second sitting) the Final examination ( theory and practical exam) .**