

**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 Pediatric 2025-2026**

## Academic Program Description Form

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

**Faculty/Institute:** College of medicine

**Scientific Department:**

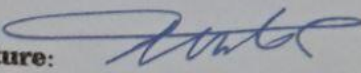
**Academic or Professional Program Name:** General Medicine and Surgery

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

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

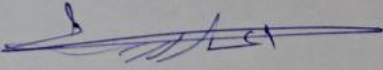
**Description Preparation Date:** 10/9 /2025

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

**Signature:** 

**Head of Department Name:**

Prof Dr. Nael Mohammed



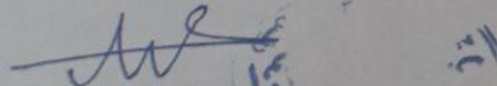
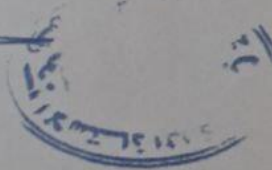
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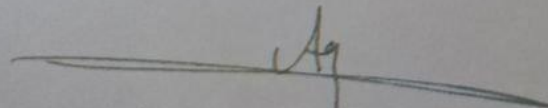
**Scientific Associate Name:**

Prof. Dr. aalan. hassan

**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**

Seeking to make the College of Medicine in Al-Qadisyiah University a distinguished college among the medical colleges in Iraq in the field of medical education. Additionally, to make it has a clear imprint in promoting the health field in the Iraqi community and works to provide distinctive proposals and views for basic and clinical medical sciences to ensure meeting the health needs of the community at the local and national levels..

### **2. Program Mission**

Al Qadisyiah medical college aims at producing medical doctors that are able to participate effectively in the health care delivery system whether in Iraq or any other country

The curriculum is designed to provide students with the necessary knowledge, skills and attitudes in order to function as safe doctors and have the baseline for lifelong learning in the medical field in the future

### **3. Program Objectives**

**Continuous development of the scientific research system to identify and diagnose major health problems in the community, propose appropriate scientific solutions to them, and keep pace with development in basic and clinical medical sciences.**

### **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

<b>6. Program Structure</b>				
<b>Program Structure</b>	<b>Number of semester</b>	<b>Credit hours</b>	<b>Percentage</b>	<b>Reviews*</b>
<b>Institution Requirements</b>	<b>2</b>	Total 150 h (90h theory for annual year semester I,II) and 60 h for each group Clinical session		<b>Basic</b>
<b>College Requirements</b>	<b>2</b>	Total 150 h (90h theory for annual year semester I,II) and 60 h for each group Clinical session		<b>Basic</b>
<b>Department Requirements</b>	<b>2</b>	Total 150 h (90h theory for annual year semester I,II) and 60 h for each group Clinical session		<b>Basic</b>
<b>Summer Training</b>	yes	Summer emergency training		
<b>Other</b>	No			

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

<b>7. Program Description</b>				
<b>Year/Level</b>	<b>Course Code</b>	<b>Course Name</b>	<b>Total Credit Hours for each group</b>	
<b>4<sup>th</sup> stage</b>	<b>PED 4203</b>	<b>Pediatric</b>	<b>theoretical</b>	<b>practical</b>
			90h for annual year assessment ( semester I,II)	Each group 7wks + 2d ( total 60 h for each group)

**Semester duration: 15 weeks**

A.Theoretical lectures.

B.Clinical training sessions ( in Maternity and Children Teaching Hospital in al-Diwaniyah).

**Lectures :**

3 hours per week(at hall lecture in faculty of medicine)

For 15 week

TOTAL : 45 lecture in the 1 st semester, 45 lecture in 2ed semester.

**Clinical session :**

2 hours per day

4 days per week

7 weeks and 2 days (for each group).

Clinical and small group teaching

Students divided for small group teaching,they learn history taking skills( from pediatrics patients and their families in pediatrics ward)for different clinical cases. Also general examination for patients,, vital signs (pulse, blood pressure, temperature ,heart rate),,

Measurement (length , weight , OFC ) and how to use growth chart .

also they learn examination of body systems ( C.V.S., R.S., G.I.T., C.N.S.) ,( examination of pediatrics patients in the pediatric wards with different clinical findings) .

At the end of the course ,there is clinical assessment .

Allocated marks : 100 mark

**Attendance / Absence**

Students are required by university regulations to be present during daytime from 8 a.m. till 10 a.m. for outpatient clinics attendance . Student attendance is compulsory. This means that you are required to attend all:

- Clinical teaching sessions
- Formative assessment and review sessions

Students who fail to attend for any reason is instructed to notify the secretary and

give the reason why he/she was unable to attend.

Failure of students to attend (unauthorized absence) for 10% of total weeks is subjected to disciplinary actions (from alarming him till review with MEU committee / head / deputy dean and if absence reached 15% the student is subjected to further disciplinary action. This ranges from a meeting with the year coordinator to (in the worst cases) referral to deanery with a view to expulsion.

1. Course duration: 7 weeks and 2 days of teaching for each group of four year MBCHB program ( 4 groups , each group contains = 60 students and each group further subdivided into three subgroups which =20 students ) in form of 2 hours daily , for 4 days per a week ( from 8:00 AM to 10:00 AM ) followed by end term examination .

2. Final courses examination done at the end of clinical course.

3. Total teaching hours 60h.

#### **AIM OF THE COURSE IS TO :**

-To provide the students with basic knowledge of normal and abnormal growth and development (physical,physiologic,psychosocial)and its clinical application from birth till adolescence.

-To enable students to provide basic health care for Pediatric age group (neonates,infants,children and adolescents).

-To provide students with appropriate knowledge and skills needed for management of the common and important pediatrics emergencies and diseases.

-To provide the students with appropriate professional attitude and communication and problem solving skills.

-To enable the students to acquire lifelong learning competencies necessary for continuous professional development.

-Describe preventive strategies for common infectious disorders, malnutrition, genetic and metabolic disorders, poisoning, accidents and child abuse.

-Outline national programs relating to child health including immunization programs.

#### **MODEL-BASED PROCEDURES AND TECHNICAL SKILLS:**

1-perform vein puncture and collect blood sample.

2- Insert a cannula into peripheral veins.

3-practice enteral ,parenteral, inhalational and topical methods for drug administration.

4-demonstrate competency in cardiopulmonary resuscitation and basic life –support.

5-use a nabalizar for administration of inhalation therapy.

6-administer basic oxygen therapy.

7-insert a naso-gastric tube.

8-perform bladder catheterization.

## 8. Expected learning outcomes of the program

### Knowledge

**by the end of the course, all students should be able to:**

1-Describe normal growth and development during infancy, childhood and adolescence.

2-Identify abnormalities of growth and development during infancy and childhood.

3-Describe appropriate management for abnormalities affecting growth and development.

4-Identify common genetic diseases and their impact on children and families.

5-Determine the nutritional requirements and the most common nutritional disorders affecting infants and children.

6-Describe appropriate management of nutritional disorder.

7-Describe the indications ,contraindications, administration and precautions of the immunization necessary for infants and children according to the national schedule and the condition of the child.

8-Recognize the most important behavioral and social issues during during childhood and adolescence.

9-Describe appropriate measures for health promotion as well as prevention of diseases and injury in infants,children and adolescents.

10-Describe the causes, pathogenesis, clinical symotoms, signs,investigations, treatment and prognosis of the most important neonatal and pediatric problems.

11-Setthe management priorities for different neonatal and pediatric emergency.

12-Describe the theoretical basis of professional practical skills and evidence based medicine (EBM).

13-Recognize basis of ethics, medicolegal aspects of health,problems malpractice and common medical errors.

14-Recognize basics of health and patient,s safety and safety procedures during practical and clinical years.

### clinical and intellectual skills:

By the end of the course all students should be able to:

1-take and record a structured patient-centerd medical history.

2-check vital signs in neonates, infants, children and adolescents.

3-asses physical and mental development in neonates, infants, children and

	<p>adolescents according to standard milestones and recognize abnormalities.</p> <p>4-perform appropriate clinical and anthropometric assessment of the nutritional status of infants and children.</p> <p>5-perform an adequate clinical examination for a patient in the pediatric age group and identify deviations from normal.</p> <p>6-construct appropriate management strategies both diagnostic and therapeutic for patients with common acute and chronic pediatric diseases.</p> <p>7-assess,classify and describe appropriate treatment for sick children below the age of five years according to the principles of Integrated Management of Childhood Illness(IMCI).</p> <p>8-compose an initial plan of management for stabilization for different neonatal and pediatrics emergencies.</p> <p>9-work out drug dosage based on patient,s criteria and health condition.</p> <p>10-write safe prescriptions of different types of drugs.</p>
<p><b>ethical and social skills:</b></p>	<p>By the end of the course all students should be able to:</p> <p>1-adopt an empathic and holistic approach to the patients and their problems taking into consideration beliefs,values,goals and concerns.</p> <p>2-respect the patients, families right to know and share in decision making as well as dignity, privacy, information confidentiality and autonomy.</p> <p>3-understand and respect the different cultural beliefs and values regardless of their disabilities in the community theyserve.</p> <p>4-recognise the important role played by other health care professions in patients, management regardless of degree or occupation.</p> <p>5-counsel patients suffering from different conditions as well as their families.</p> <p>6-recognize one,s own limitations of knowledge and skills referring patients to appropriate health facility at the appropriate stage.</p>

## 9. Teaching and Learning Strategies

- Theoretical lectures and the use of the smart board
- Readings, self-learning, panel discussions.
- Clinical sessions
- Guide students to some websites to benefit from them to develop abilities.
- Ask the students a set of thinking questions during the lectures such as what, how, when and why
- Tutorials and seminars
- EBM

## 10. Evaluation methods

- Theory**
- . **Written Examination (formative and summative )**
- **Oral Examination**
- **practical**
- **Small group Clinical exams , history taking , physical exam , OSCE**
- Logbook and skills assessment**
- **reports and activities**

## 11. Faculty

### Faculty Members

Academic Rank	Specialization		Special Requirements/Skills (if applicable)		Number of the teaching staff	
	General	Special			Staff	Lecturer
Prof	MBCHB	Pediatrics			5	
Assist. Prof	MBCHB	Pediatrics			3	
lecturer	MBCHB	Pediatrics			2	

### Professional Development

#### Mentoring new faculty members

processes and activities designed to enhance the professional knowledge, skills, and attitudes of educators so that they might, in turn, improve the learning of students.

**Professional development of faculty members**

creating or sustaining a culture of teaching excellence; advancing new initiatives in teaching and learning; and supporting individual faculty members' goals for professional development.

**12. Acceptance Criterion**

According to the student's central acceptance rate

**13. The most important sources of information about the program****Recommended readings and books for students :**

- 1-Nelson-Essentials of Pediatrics.
- 2-Pediatric Secrets.
- 3-Nelson Textbook of Pediatrics.
- 4-Hutchison,s Clinical Methods.
- 5-Pediatric Clinical Exam Made Easy.
- 6-Macload,s Clinical Examination.

**14. Program Development Plan**

A structured program developed plan was prepared to strengthen the medical curriculum and enhanced the overall quality of undergraduate education .

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
4 <sup>th</sup> stage	PED 4203	Pediatrics	Basic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

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

## Course Description Form

1. Course Name:
Pediatrics
2. Course Code:
PED 4203
3. annual year / semester I,II
4 <sup>th</sup> stage
4. Description Preparation
Date:10/9/2025
5. Available Attendance Forms:
Attendance sheet
6. Number of Credit Hours (Total) / Number of Units (Total)
Total 150h for annual year , semester I,II (90h theory and 60h practical for each group / 8 unit total unit
7. Course administrator's name (mention all, if more than one name)
Name: alaan alzamiely Email:

## I. The time table of Course contents, topics :

topics	hour	objective
1.bilirubin metabolism 2.causes and treatment of neonatal jaundice 3.Rh-isoimmunization 4.ABO incompatibility 5.epilepsy (definition,classification) 6.approaches treatment of epilepsy, Status epilepticus 7.cerebral palsy :causes and classification 8.approaches and treatment of cerebral palsy 9. الطب البديل	7h	Causes ,epidemiology, clinical manifestation, diagnosis ,treatment, prevention
1.fluid therapy 2.electrolyte disorder 3.acid base disorder 4.Diabetes Mellitus 5.Daibetic ketoacidosis 6.mal nutrition 7.chronic diarrhea 8.mal absorption 9. Rickets (Nutritional rickets,Secondary rickets) 10.JRA 11.kawasaki disease	12 h	Causes ,epidemiology, clinical manifestation, diagnosis ,treatment, prevention
1.Mumps 2.Pertussis 3.Diphtheria 4. Meningitis 5.Encephalitis 6.Tetanus 7.T.B.in children	7h	Causes ,epidemiology, clinical manifestation, diagnosis ,treatment, prevention
1.growth and development 2.Milestone 3.Common cold 4.Croup ,epiglottitis 5.Broncholitis 6.Asthma 7.Pneumonia,pleural effusion 8.Bronchiactasis	8h	Causes ,epidemiology, clinical manifestation, diagnosis ,treatment, prevention
1.The normal newborn baby 2.prematurity,IUGR	11h	Causes ,epidemiology,

<ul style="list-style-type: none"> <li>3.assessment of the gestational age &amp;care of newborn</li> <li>4.RDS,TTN</li> <li>5.Birth asphyxia,apnea,IVH</li> <li>6.NEC,meconium aspiration</li> <li>7.hemorrahegic disease of newborn</li> <li>8.Infant of diabetic mother</li> <li>9.neonatal seizure</li> <li>10.birth injuries ,umbilical hernia, umbilical granuloma</li> <li>11.Neonatal sepsis</li> </ul>		<p>clinical manifestation, diagnosis ,treatment, prevention</p>
<ul style="list-style-type: none"> <li>1.measles,chicken pox ,rubella</li> <li>2. Roseola infantum ,scarlet fever, erythema infectiosum</li> <li>3.viral hepatits</li> <li>4.kala-azar</li> <li>5. AGE 6.TEF,GERD</li> <li>7.Dudenal atresia, Pyloric stenosis</li> <li>8.intussusception</li> <li>9.hirschsprung disease</li> <li>10.infant feeding</li> </ul>	11h	<p>Causes ,epidemiology, clinical manifestation, diagnosis ,treatment, prevention</p>
<ul style="list-style-type: none"> <li>1.introduction to anemia</li> <li>2.physiological anemia of infancy</li> <li>3.megaloblastic anemia</li> <li>4.iron deficiency anemia</li> <li>5.hereditary spherocytosis ,G6PD deficiency</li> <li>6.Thalassemia</li> <li>7.sickle cell anemia</li> </ul>	7h	<p>Causes ,epidemiology, clinical manifestation, diagnosis ,treatment, prevention</p>

<ol style="list-style-type: none"> <li>1. Congenital adrenal hyperplasia</li> <li>2. Congenital hypothyroidism, Neonatal hypothyroidism</li> <li>3. hypoparathyroidism</li> <li>4. short stature</li> <li>5. Precocious puberty</li> <li>6. APSGN</li> <li>7. Hemolytic uremic syndrome</li> <li>8. Nephrotic syndrome</li> <li>9. UTI</li> </ol>	9 h	<p>Causes ,epidemiology, clinical manifestation, diagnosis ,treatment, prevention</p>
<ol style="list-style-type: none"> <li>1. Congenital and acquired cardiac diseases ;introduction</li> <li>2. Etiology of CHD and classification</li> <li>3. Acyanotic volume overload (VSD),PDA,ASD</li> <li>4. H.T.</li> <li>5. Cyanotic congenital heart lesions (TOF)</li> <li>6. Paroxysmal hypercyanotic attacks, prognosis and complications of TOF</li> <li>7. TGA</li> <li>8. Heart failure in children</li> <li>9. Infective endocarditis in children,cardiac tumor</li> <li>10. Myocarditis,cardiomyopathy</li> <li>11 .EBM</li> <li>12. الطب البديل</li> </ol>	8h	<p>Causes ,epidemiology, clinical manifestation, diagnosis ,treatment, prevention</p>
<ol style="list-style-type: none"> <li>1. poliomyelitis</li> <li>2. GBS</li> <li>3. Typhoid fever</li> <li>4. Brucellosis</li> <li>5. ITP</li> <li>6. henoch-schonlein purpura</li> <li>7. hemophilia</li> <li>8. von willebrand disease</li> <li>9. leukemia,lymphoma ,wilms tumor</li> <li>10. Genetic disease;prenatal diagnosis, Down syndrome,Turner syndrome</li> <li>11. Vaccination</li> </ol>	10h	<p>Causes ,epidemiology, clinical manifestation, diagnosis ,treatment, prevention</p>

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

### Time Table of topics for clinical course for 4<sup>th</sup> year 2025-2026

#### Small group sessions and clinical skills:

##### 1<sup>st</sup> week:

Day	8.00- 10.00 AM/Subject/skills	Method	Location
Sunday	History taking	Real patient	Hospital
Monday	History taking	Real patient	Hospital
Tuesday	History taking	Real patient	Hospital
Wednesday	History taking	Real patient	Hospital

##### 2<sup>nd</sup> week:

Day	8.00- 10.00 AM/Subject/skills	Method	Location
Sunday	General examination	Real patient	Hospital
Monday	General examination	Real patient	Hospital
Tuesday	Measurement (Ht., weight, OFC, Growth chart). Vital signs ( H.R., R.R, B.I.Pr.pulse, Temp.)	Real patient	Hospital
Wednesday	Measurement (Ht., weight, OFC, Growth chart). Vital signs ( H.R., R.R, B.I.Pr.pulse, Temp.)	Real patient	Hospital

##### 3<sup>rd</sup> week:

Day	8.00- 10.00 AM/Subject/Skills	Method	Location
Sunday	Examination of R.S	Real patient	Hospital, pediatrics wards
Monday	Examination of R.S	Real patient	Hospital
Tuesday	Examination of R.S	Examination of pediatrics patients in the pediatric wards with different clinical findings	Hospital
Wednesday	Examination of R.S	Examination of pediatrics patients in the pediatric wards with different clinical findings	Hospital

**4<sup>th</sup> week:**

<b>Day</b>	<b>8.00- 10.00 AM/Subject/skills</b>	<b>Method</b>	<b>Location</b>
<b>Sunday</b>	<b>Examination of C.V.S.</b>	<b>Real patient</b>	<b>Hospital, pediatrics wards</b>
<b>Monday</b>	<b>Examination of C.V.S.</b>	<b>Real patient</b>	<b>Hospital, pediatrics wards</b>
<b>Tuesday</b>	<b>Examination of C.V.S.</b>	<b>Examination of pediatrics patients in the pediatric wards with different clinical findings</b>	<b>Hospital, pediatrics wards</b>
<b>Wednesday</b>	<b>Examination of C.V.S.</b>	<b>Examination of pediatrics patients in the pediatric wards with different clinical findings</b>	<b>Hospital, pediatrics wards</b>

**5<sup>th</sup> week:**

<b>Day</b>	<b>8.00- 10.00 AM/Subject/skills</b>	<b>Method</b>	<b>Location</b>
<b>Sunday</b>	<b>Examination of G.I.system</b>	<b>Real patient</b>	<b>Hospital, pediatrics wards</b>
<b>Monday</b>	<b>Examination of G.I.system</b>	<b>Real patient</b>	<b>Hospital, pediatrics wards</b>
<b>Tuesday</b>	<b>Examination of G.I.system</b>	<b>Examination of pediatrics patients in the pediatric wards with different clinical findings</b>	<b>Hospital, pediatrics wards</b>
<b>Wednesday</b>	<b>Examination of G.I. system</b>	<b>Examination of pediatrics patients in the pediatric wards with different clinical findings</b>	<b>Hospital, pediatrics wards</b>

**6<sup>th</sup> week:**

<b>Day</b>	<b>8.00- 10.00 AM/Subject/skills</b>	<b>Method</b>	<b>Location</b>
<b>Sunday</b>	<b>Examination of C.N.S.</b>	<b>Real patient</b>	<b>Hospital, pediatrics wards</b>
<b>Monday</b>	<b>Examination of C.N.S.</b>	<b>Real patient</b>	<b>Hospital, pediatrics wards</b>
<b>Tuesday</b>	<b>Examination of C.N.S.</b>	<b>Examination of pediatrics patients in the pediatric wards with different clinical findings</b>	<b>Hospital, pediatrics wards</b>
<b>Wednesday</b>	<b>Examination of C.N.S.</b>	<b>Examination of pediatrics patients in the pediatric wards with different clinical findings</b>	<b>Hospital, pediatrics wards</b>

**7<sup>th</sup> week:**

<b>Day</b>	<b>8.00- 10.00 AM/Subject/skills</b>	<b>Method</b>	<b>Location</b>
<b>Sunday</b>	<b>Perform veinpuncture and collect blood sample</b>	<b>Artificial</b>	<b>Skill lab</b>
<b>Monday</b>	<b>Insert a cannula into peripheral veins</b>	<b>Artificial</b>	<b>Skill lab</b>
<b>Tuesday</b>	<b>Practice entral , parental,inhalational and topical methods for drug administration</b>	<b>Real patient</b>	<b>Hospital</b>
<b>Wednesday</b>	<b>Demonstrate competency in cardiopulmonary resuscitation and basic life - support</b>	<b>Real patient , Power point</b>	<b>Hospital Skill lab</b>

### 8<sup>th</sup> week:

Day	8.00- 10.00 AM/Subject/skills	Method	Location
Sunday	Use a nebulizer for administration of inhalation therapy , Perform bladder catheterization	Artificial, Real patient	Skill lab, Hospital
Monday	Administer basic oxygen therapy , Insert a naso-gastric tube	Real patient	Hospital

### Assessment tools:

	Tool	Purpose, assessment of:-	To serve ILO #
	Written examination	Knowledge and understanding.	
	Clinical examination (long case).	Clinical and intellectual skills and general skills and attitudes.	
	Clinical examination (OSCE)	Data acquisition	
	Oral Examination	Knowledge and understanding	
		Knowledge and data analysis	
	Log book:		
	1- ER attendance	Data acquisition and skills related to treatment strategies	
	2- Clinical presentation	Skills related to treatment strategies,	
	3- Staff rounds	general skills and attitude	
	4- Seminars		

**Assessment schedules: 4<sup>th</sup> stage assessment schedules include :**

**Examinations description:**

Examination	Description
1-continuous progress test (CPT)	oral examination / spot diagnosis , quizzes , PBL ,Short answered questions, and skills assessment , log book activity , Case report ,homework 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
3-Half year theory exam	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 , general look and according bloom and blue print
5-final theory exam	M.C.Qs. as problem case or direct question , according bloom and blue print

**Allocated marks :100 mark**

examination	Marks allocated
1 <sup>st</sup> semester exam	10 degree
Mid year exam	20 degree
2 <sup>nd</sup> semester exam	10 degree
Clinical exam	20 degree
Final Written exam	40 degree

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

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