



Medical Doctorate (M.D.) Degree Program and Courses Specifications for Anaesthesia and Postoperative intensive care

(According to currently applied **Credit point** bylaws)

Anesthesia and Post-operative intensive care
Faculty of medicine
Aswan University
2019-2020

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M. D. degree of Anesthesia and Post-operative intensive care

A. Basic Information

- Program Title: M. D. degree of Anesthesia and Post-operative intensive care
- Nature of the program: Single.
- Responsible Department: Department of Anesthesia and Postoperative intensive care - Faculty of Medicine- Aswan University.
- Program Director (Head of the Department):
 Assistant Prof. Huda Fahmy Mhmoud
- Coordinator (s):

Principle coordinator: Dr. Ahmed Abdel-Raheem

Assistant coordinator: Dr. Ebraheem Elabd

- ♣ Internal evaluators: Dr. Mohamed Kamel
- **External evaluator:** --Prof: Ibraheem Abass Yousef
- Date of Approval by the Faculty of Medicine Council of Aswan University:
- **♣** Date of most recent approval of program specification by the Faculty of Medicine Council of Aswan University:
- **↓ Total number of courses**: 5 courses

B. Professional Information

1- Program aims

1/1To enable candidates to master high level of clinical skills, bedside care skills, in addition to update medical knowledge as well as clinical experience and competence in the area of Anesthesia and Post-peri-operative medicine, and chronic pain management and enabling the candidates of making appropriate referrals to a sub-specialist

1/2 Provide candidates with fundamental knowledge and skills of intensive care medicine as regards; dealing with critically ill respiratory patients, ICU equipments, techniques, indications, contraindications and training skills of different intensive care techniques.

1/3 To enable candidates to perform high standard scientific medical research and how to proceed with publication in indexed medical journals.

1/4 To enable candidates to describe the basic ethical and medicolegal principles relevant to Anesthesia and Post-operative intensive care .

1/5 To enable candidates to have professional careers as a consultant in Egypt but recognized abroad.

1/6To enable candidates to continue self learning in subspecialties.

1/7 To enable candidates to master different research methodology and do their own.

2-Intended learning outcomes (ILOs) <u>for the whole</u> <u>program</u>:

2/1Knowledge and understanding:

- A. Demonstrate in-depth knowledge and understanding of theories, basics and updated biomedical, clinical epidemiological and socio behavioral science relevant to Anesthesia and postoperative intensive care as well as the evidence based application of this knowledge to patient care.
- B. Explain basics, methodology, tools and ethics of scientific medical, clinical research.
- C. Mention ethical, medico logical principles and bylaws relevant to his practice in the field of Anesthesia and postoperative intensive care.
- D. Mention principles and measurements of quality assurance and quality improvement in medical education and in clinical practice of Anesthesia and postoperative intensive care.
- E. Mention health care system, public health and health policy, issues relevant to Anesthesia and postoperative intensive care and principles and methods of system based improvement of patient care in common health problems of the field of Anesthesia and postoperative intensive care.

2/2 Intellectual outcomes

- A. Apply the basic and clinically supportive sciences which are appropriate to the Anesthesia and postoperative intensive care related conditions / problem / topics.
- B. Demonstrate an investigatory and analytic thinking "problem solving "approaches to clinical situation related to Anesthesia and postoperative intensive care.
- C. Plan research projects.

- D. Write scientific papers.
- E. Participate in clinical risk management as a part of clinical governance.
- F. Plan for quality improvement in the field of medical education and clinical practice in Anesthesia and postoperative intensive care.
- G. Create / innovate plans, systems, and other issues for improvement of performance in his practice.
- H. Present and defend his / her data in front of a panel of experts.
- I. Formulate management plans and alternative decisions in different situations in the field of Anesthesia and postoperative intensive care.

2/3 Skills

2/3/1 Practical skills (Patient Care)

Students will be able to:

- A. Provide extensive level of patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.
- **p.s.** Extensive level means in-depth understanding from basic science to evidence based clinical application and possession of skills to manage independently all problems in field of practice.
- B. Provide extensive level of patient care for patients with all common diagnoses and for uncomplicated procedures related to Anesthesia and postoperative intensive care.
- C. Provide extensive level of patient care for non-routine, complicated patients and under increasingly difficult circumstances, while demonstrating compassionate, appropriate and effective care.
- D. Perform diagnostic and therapeutic procedures considered essential in the field of Anesthesia and postoperative intensive care.
- E. Handles unexpected complications, while demonstrating compassion and sensitivity to patient needs and concerns.

- **F.** Communicate effectively and demonstrate caring and respectful behaviors when interacting with patients and their families in the Anesthesia and postoperative intensive care related situations.
- G. Gather essential and accurate information about patients of the Anesthesia and postoperative intensive care related conditions.
- H. Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, upto-date scientific evidence and clinical judgment for the Anesthesia and postoperative intensive care related conditions.
- I. Develop and carry out patient management plans for Anesthesia and postoperative intensive care related conditions.
- J. Counsel and educate patients and their families about speciality related conditions.
- K. Use information technology to support patient care decisions and patient education in all Anesthesia and postoperative intensive care related clinical situations.
- L. Perform competently all medical and invasive procedures considered essential for the Anesthesia and postoperative intensive care conditions / area of practices.
- M. Provide health care services aimed at preventing the Anesthesia and postoperative intensive care related health problems.
- **N.** Lead health care professionals, including those from other disciplines, to provide patient-focused care in Anesthesia and postoperative intensive care related conditions.
- O. Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets. (Write and evaluate a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and evaluating comprehensive, timely and legible medical records)

2/3/2 General skills

Including:

- Practice-based Learning and Improvement
- Interpersonal and Communication Skills
- Professionalism
- Systems-based Practice

Practice-Based Learning and Improvement

- A. Demonstrate the competency of continuous evaluation of different types of care provision to patients in the different area of Anesthesia and postoperative intensive care.
- B. Appraise scientific evidence.
- C. Continuously improve patient care based on constant selfevaluation and <u>life-long learning</u>.
- D. Participate in clinical audit and research projects.
- E. Practice skills of evidence-based Medicine (EBM).
- F. Educate and evaluate students, residents and other health professionals.
- G. Design logbooks.
- H. Design clinical guidelines and standard protocols of management.
- I. Appraise evidence from scientific studies related to the patients' health problems.
- J. Apply knowledge of study designs and statistical methods to the appraisal of clinical studies.
- K. Use information technology to manage information, access on-line medical information; for the important topics.

Interpersonal and Communication Skills

- L. Master interpersonal and communication skills that result in the effective <u>exchange of information and collaboration</u> with patients, their families, and health professionals, including:-
 - Present a case.
 - <u>Write</u> a consultation note.

- <u>Inform patients</u> of a diagnosis and therapeutic plan completing and maintaining comprehensive.
- Timely and legible medical records.
- Teamwork skills.
- M. Create and sustain a therapeutic and ethically sound relationship with patients.
- N. Elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills.
- O. Work effectively with others as a member or leader of a health care team or other professional group.

Professionalism

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

Systems-Based Practice

- S. Work effectively in health care delivery settings and systems related to Anesthesia and postoperative intensive care including good administrative and time management.
- T. Practice cost-effective health care and resource allocation that does not compromise quality of care.
- U. Advocate for quality patient care and assist patients in dealing with system complexities.
- V. Design, monitor and evaluate specification of under and post graduate course and programs.
- W. Act as a chairman for scientific meetings including time management

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

🖶 Academic standards for Medical Doctorate (MD) degree <mark>in</mark> Anaesthesia and postoperative intensive care

Aswan Faculty of Medicine developed MD degree programs' academic standards for different clinical specialties.

In preparing these standards, the General Academic Reference Standards for post graduate programs (GARS) were adopted. These standards set out the graduate attributes and academic characteristics that are expected to be achieved by the end of the program. These standards were approved by the faculty council on 20/ 3/2010. These standards were revised and approved without changes by the Faculty Council on 23-9-2014.

4- Program External References (Benchmarks)

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

http://www.acgme.org/acWebsite/navPages/nav Public.asp

2. American Board of Anesthesiology (ABA) Critical Care

Medicine Recertification program

http://www.theaba.org/Home/examinations certifications

Comparison between program and external reference				
ltem	Anesthesia and	American Board of		
	postoperative	Anesthesiology (ABA)		
	intensive care	Critical Care Medicine		
		Recertification program		
Goals	Matched	Matched		
ILOS	Matched	Matched		
Duration	4 – 6 years	different		
Requirement	Different	different		
Program	Different	different		
structure				

5- Program Structure

A. Duration of program: 4-6 years

B. Structure of the program:

Total number of credit points: = 420 CP

Master degree: 180 credit point

Didactic #: 37 (23.1%), practical 123 (76.9%), total 160 CP

Thesis and researches: 80 CP (33.3%)

First part

Didactic 10 (100%), practical 0 (0 %), total 10 CP

Second part

Didactic 24, (16.3 %), practical 123 (83.7 %), total 147 CP

Elective courses: 3 credit points

#Didactic (lectures, seminars, tutorial)

According the currently applied bylaws:

Total courses: 160 credit point

Compulsory courses: 157 credit point (98.1%)

Elective courses: 3 credit point (1.9%)

	Credit point	% from total	
Basic science courses	10	4.1%	
Humanity and social courses	3	1.2%	
Speciality courses	147	61.3%	
Others (Computer,)	-	0	
Field training	123	51.3%	
Thesis	40	16.7%	
2 published researches	40	16.7%	
Master degree	180		

C- Program Time Table

Duration of program 4 years divided into

o Part 1

Program-related essential courses

Program-related basic science courses

- Medical statistic
- Research methodology
- Medico-legal Aspects and Ethics in Medical Practice and Scientific Research

Students are allowed to sit the exams of these courses after 6 months from applying to the M D degree.

Students are allowed to sit the exams of the remaining basic science courses after 12 months from applying to the MD degree.

Thesis and 2 published researches

For the M D thesis;

MD thesis subject should be officially registered within 1 year from application to the MD degree,

Discussion and acceptance of the thesis should not be set before 24 months from registering the M D subject; It could be discussed and accepted either before or after passing the second part of examination

o Part 2

Program –related speciality courses and ILOs

Students are not allowed to sit the exams of these courses before 4 years from applying to the MD degree.

Two elective courses can be set during either the 1st or 2nd parts. The students pass if they get 50% from the written exams and 60% from oral exams, 60% from clinical/practical exams of each course and 60% of summation of the written exams, oral and clinical/practical exams of each course

Total degrees 1700 marks.

500 marks for first part

1200 for second part

Written exam 40% - 70%.

Clinical/practical and oral exams 30% - 6

Curriculum Structure: (Courses):

↓Levels and courses of the program:

Courses and student work load list	Course Credit points		edit points	
	Code	didactic	training	total
		#		
First Part				
Basic science courses (10 CP)				
Course 1: Medical Statistics	FAC309A	1		1
Course 2: Research Methodology		1		1
Course 3: Medicolegal Aspects &	FAC309B	1		1
Ethics in Medical Practice and	FAC310C			
Scientific Research				
Course 4 Anesthesia and Intensive	AIP329A	7		7
Care 1(Pharmacology& Physiology				
& Physics and Clinical				
Measurements)				
Elective courses*		3 CI	P	
- Elective course 1		1.5		1.5
- Elective course 2		1.5		1.5
Thesis		40 CP		
Published researches**		40 CP		
Second Part	•	ciality cour		
	Speciality C		k (log Bool	k) 123
		СР		
Speciality Courses	410000	24		2.4
5)Course 5 Anesthesia and	AIP329B	24		24
intensive care 2				
1- Unit (Module) 1 Anesthesia and				
peri-operative medicine				
2- Unit (Module) 2 intensive care				
(Postoperative, general, trauma)				
3- Unit (Module) 3 Chronic pain				
Management	AID220D		122	122
Clinical Work (123 CP)	AIP329B		123	123

#Didactic (lectures, seminars, tutorial)

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

Student work load calculation:

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

Elective Courses#:

- Advanced medical statistics.
- Evidence based medicine.
- Advanced infection control.
- Quality assurance of medical education.
- Quality assurance of clinical practice.
- o -Hospital management

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

3. Thesis / Researches:

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

**Another 40 points are appointed to acceptance or publication of one research from the thesis in international indexed medical journals or publication of 2 researches from the thesis in local specialized medical journals.

Anesthesia and intensive care 2

Units' Titles' list	% from	Level	Core	Core Credit points		
omes mees use	total	(Year)	Didactic	training	Total	
1) Unit 1 "Anesthesia and perioperative medicine"	80%	1,2,3&4	19.2	98.4	117.6	
2) Unit 2 "Critical Care Medicine"	15%	2,3&4	3.6	18.45	22.05	
3) Unit 3 " Chronic Pain Management"	5%	3&4	1.2	6.15	7.35	
Total No. of Units:	3	1,2,3&4	24	123	147	

6. Courses Contents (Annex 1)

The competency based objectives for each course/module/rotation are specified in conjunction with teaching/training methods, requirements for achieving these objectives and assessment methods.

See Annex 1 for detailed specifications for each course/module
Annex 6 II: Program Matrix

7-Admission requirements

- Admission Requirements (prerequisites) if any :
 - I. General Requirements:
 - Master degree in the in the Anesthesia and postoperative intensive care
 - **II. Specific Requirements:**
 - Fluent in English (study language)

VACATIONS AND STUDY LEAVE

The current departmental policy is to give working assistant lecture 3 week leave prior to first/ second part exams.

FEES:

As regulated by the postgraduate studies rules and approved by the faculty vice dean of post graduate studies and the faculty and university councils.

8-Progression and completion requirements

- Students are allowed to sit the exams of the remaining essential courses of the first part after 12 months from applying to the MD degree.

- Examination of the second part cannot be set before 4 years from registering to the degree.
- ♣ Discussion of the MD thesis could be set after 2 years from officially registering the MD subject, either before or after setting the second part exams.
- ♣ The minimum duration of the program is 4 years.

The students are offered the degree when:

- 1. Passing the exams of all basic science, elective and speciality courses of this program as regulated by the post graduates approved rules by the faculty council.
- 2. Completing all scheduled CP and log book (minimum 80%).
- 3. Discussion and acceptance of the MD thesis.
- 4. Acceptance or publication of one research from the thesis in international indexed medical journals or publication of 2 researches from the thesis in local specialized medical journals.

9-Program assessment methods and rules (Annex IV)

Method	ILOs measured
Written examinations:	K & I
Structured essay questions	
Objective questions	
MCQ	
Problem solving	
Structured oral	K ,I &G skills
Logbook assessment	All
Research assignment	I &G skills

Weighting of assessments:

Courses		Degrees			
Courses	Course code	Written Exam	Oral *	Practical / Clinical Exam	Total
	First Par	t			
Basic science courses:					
Medical Statistics	FAC309A	35	15		50
Research Methodology	FAC309B	35	15		50
Medicolegal Aspects & Ethics in Medical Practice and Scientific Research	FAC310C	35	15		50
Course 4 Anesthesia and Intensive Care 1(Pharmacology& Physiology & Physics and Clinical Measurements)	AIP329B	150	200		350
Total of the first part		230	70		500
	Second Pa	art			
	Course code	written	Oral *	Practical / Clinical Exam	total
Speciality Courses					
Course 5 Anesthesia and Intensive care 2	AIP329B		360	360	1200
Paper 1		120			
Paper 2		120			
Paper 3 Paper 4		120 120			
Total of The second part		480	360	360	1200
Elective course 1		50	ī	50	100
Elective course 2		50	į	50	100

^{* 25%} of the oral exam for assessment of logbook

* Anesthesia and intensive care 2

Units' (Module)Titles' list	% from	% from Degrees			
	total	Written	Oral	Practical /	Total
	Marks	Exam	Exam	Clinical	
				Exam	
1) Unit 1 " Anesthesia and	80%	384	288	288	960
Intensive care "					
2) Unit 2 "Critical Care	15%	72	54	54	180
Medicine"	5%	24	18	18	6
3) Unit 3 " Chronic Pain					
Management"					
Total No. of Units	3	480	360	360	1200
(Modules):					

^{* 25%} of the oral exam for assessment of logbook

Total degree 1900

500 marks for first part

1200 for second part

Written exam 40% (480 marks)

Clinical /practical and oral exams 60% (720 marks)

Lesson Examination system:

> First part:

- Written exam 2 hours in Medical Statistics and Research Methodology + oral examination
- Written exam 1 hours in Medicolegal Aspects and Ethics in Medical Practice and Scientific Research + oral examination
- Written exam 3 hours in Anesthesia and Intensive care 1
 (Pharmacology& Physiology & Physics and Clinical Measurements) + oral exam

> Second part:

 Written exam four papers 3 hours for each in Anesthesia and Intensive care 2 + Oral exam+ Clinical/Practical exam

> Elective courses

- Written exam one paper 1 hour in Elective course 1 + Oral & Practical exam
- Written exam one paper 1 hour in Elective course 2 + Oral & Practical exam

10-Program evaluation

By whom	Method	sample
Quality Assurance Unit	Reports	1
	Field visits	
External Evaluator (s):According to	Reports	#
department council	Field visits	
External Examiner (s): According		
to department council		#
Stakeholders	Reports	#
	Field visits	
	Questionnaires	
Senior students	Questionnaires	#
Alumni	Questionnaires	#

#Annex 5 contains evaluation templates and reports (Joined in the departmental folder).

11-Declaration

We certify that all of the information required to deliver this program is contained in the above specification and will be implemented.

All course specifications for this program are in place.

Contributor	Name	Signature	Date
Program Principle	Dr. Ahmed Abdel-Raheem		
Coordinator:			
Head of the Responsible	Assistant Prof. Huda Fahmy		
Department (Program	Mahmoud		
Academic Director):			

Annex 1, Specifications for Courses / Modules

Annex 1: specifications for courses

First Part

- 1) Course 1: Medical statistics.
- 2) Course 2: Research methodology
- 3) Course 3: Medicolegal Aspects & Ethics in Medical Practice and Scientific Research
- 4) Course 4: Anesthesia and Intensive Care 1 (Pharmacology& Physiology& Physics and Clinical Measurements)

Course 1: Medical statistics

Name of department: Public Health and Community Medicine
Faculty of medicine
Aswan University
2019-2020

1. Course data

- Course Title: Medical statistics
- Course code: FAC309A
- Speciality: offered to all clinical and academic specialties
- Number of credit points: 1 credit point
- Department (s) delivering the course: Pubic Health and

Community Medicine

- Coordinator (s):
 - Course coordinator:
- Assistant coordinator (s):
- Date last reviewed: May 2020
- Requirements (pre-requisites) if any :
 - Completed Master degree in any of the academic or clinical departments of Medicine.

2. Course Aims

Enable gradute students to use statistical principles to improve their professional work and develop the concept of critical interpretation of data

3. Intended learning outcomes (ILOs):To be able to use statistical principals to manage data

A knowledge and understanding

A Knowledge and understanding				
ILOS	Methods of	Methods of		
	teaching/	Evaluation		
	learning			
A. List the types of variables	Lecture and	Written		
, ,	discussion	examination		
B. Identify the methods of data	Lecture and	Written		
collection	discussion	examination		
C. Describe the different sampling	Lecture and	Written		
strategies	discussion	examination		
D. Identify types of tabular and	Lecture and	Written		
graphic presentation of data	discussion	examination		
E. Identify measures of central	Lecture and	Written		
tendency and dispersion	discussion	examination		
F. Identify the characters of normal	Lecture and	Written		
distribution curve.	discussion	examination		

B. intellectual

ILOs	Methods of	Methods of
	teaching/	Evaluation
	learning	
A. Describe the normal curves.	Lecture&	Written
	Discussions	examination
B. Describe and summarize data	Lecture&	Written
	Discussions	examination
C. Select the proper test of	Lecture&	Written
significance	Discussions	examination
D. Interpret the proper test of	Lecture&	Written
significance	Discussions	examination

C. Practical skills

ILOs	Methods of	Methods of
	teaching/	Evaluation
	learning	
A. Design data entry files.	Tutorial on	Assignments
,	SPSS	SPSS exam
B. Validate data entry.	Tutorial on	Assignments
,	SPSS	SPSS exam
C. Manage data files.	Tutorial on	Assignments
	SPSS	SPSS exam
D. Construct tables and graphs.	Tutorial on	Assignments
υ ο ο ο ο ο ο ο ο ο ο ο ο ο ο ο ο ο ο ο	SPSS	SPSS exam
E. Calculate measures of central	Tutorial on	Assignments
tendency and dispersion.	SPSS	SPSS exam
F. Select, apply and interpret the	Tutorial on	Assignments
proper test of significance.	SPSS	SPSS exam

D general skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Appraise scientific evidence	Discussions	Research assignment
B. Use information technology to manage information, access online medical information; for the important topics.	tutorial	Research and audits' assignment

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

Time Schedule: First Part

Topic	Covered ILOs			
	Knowledge	Intellectual	Practical skills	General Skills
	A	В	С	D
Introduction	A-F	A-D	-	A&B
Tables and graphics	D	A-D	-	A&B
Sampling	С	-	-	A&B
Methodology of data collection	В	-	-	A&B
Type of variables	A	-	-	A&B
Proportion test& Chi-square test	E,F	C&D	-	A&B
Student T test& Paired T test	E,F	C&D	F	A&B
ANOVA test	E,F	C&D	F	A&B
Non parametric tests	E,F	C&D	F	A&B
Discrimination analysis factor analysis	E,F	C&D	-	A&B
SPSS Introduction	A-F	A-D	-	A&B
Data entry and cleaning of data	A	A-D	A-C	A&B
Transforming of variables	A	A&B	A-C	A&B
Descriptive statistics	D	A-D	D&E	A&B
Graphic presentation	D	A&B	D	A&B
Chi square and interpretation of results	E,F	C&D	F	A&B
Correlation Regression	E,F	C&D	F	A&B
Multiple and logistic Regression	E,F	C&D	F	A&B

5. Course Methods of teaching/learning

- Lectures
- 2. Assignments
- 3. Discussions
- 4. Exercises
- 5. Tutorial on SPSS v.16

6. Course assessment methods:

- i. Assessment tools:
 - 1. Practical examination
 - 2. Attendance and active participation
 - 3. Assignments
 - 4. SPSS examination
 - 5. written exam
- **ii. Time schedule:** After 6 months from applying to the M D degree.
- iii. Marks: 50 (35 for written exam and 15 for oral exam).

7. List of references

i. Lectures notes

Department lecture notes

ii. Essential books

iii.

Medical statistics

Recommended books

Discovering statistics using SPSS

iii. Periodicals, Web sites, etc

8. Signatures

Course Coordinator:	Head of the Department:
Date:	

Course 2: Research Methodology

Name of department: All clinical and academic departments
Faculty of medicine
Aswan University
2019-2020

1. Course data

- Course Title: Research methodology
- Course code: FAC309B
- Speciality: Offered to all clinical and academic specialties
- Number of credit points: 1 credit point
- Department (s) delivering the course: Department of public health
- Coordinator (s):
 - Course coordinator:
 - Assistant coordinator (s):
- **♣ Date last reviewed:** May 2020
- Requirements (prerequisites) if any :
 - Completed Master degree in any of the academic or clinical departments of Medicine.

2. Course Aims

To provide graduate students with the skills of:

- Research proposal,
- Writing planning and implementing rigorous research,
- Writing and publishing scientific papers.

3. Intended learning outcomes (ILOs):To be able to write a rigorous research proposal

A knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Explain differences between	Lecture and	Written
different study designs	discussion	examination
B. Identify sources and types of bias		
in research		
C. Describe the different sampling		
strategies, and compute sample		
size		
D. Select and design valid		
measurement tools for research		
E. Explain ethical issues in		
conducting research on human		
subjects		
F. describe the rules of authorship in		
scientific writing		
G. List the steps involved in proposal		
writing		
H. Identify a research problem	Lecture on	discussion
within a conceptual framework	Criteria to	

	Consider to	
	identify a research	
	problem	
I. Use the web sources to do a	Practical tutorial	assignment
literature search	on web	
J. Select the appropriate study	Lecture on various	Written
design for the research question	study designs	examination
K. Minimize bias in designing	Lecture on the	Written
research	different types of	examination
	bias	
L. Screening & theoretical	Lectures on	Written
background	criteria for	examination
	successful	
	screening	
	program& criteria	
	for evaluation a	
	screening test.	

B. intellectual

Competency and Skills	Methods of teaching/ learning	Methods of Evaluation
A. Apply basic science & knowledge for appraising scientific literature	Discussions &seminars	Written examination

C. Practical skills

Competency and	Methods of	Methods of
Skills	teaching/	Evaluation
	learning	
A. Develop a budget and time line for the research	Tutorial	Assignments
B. Design a data entry file	Tutorial on Epi-	Assignments
	info or Excel	Written exam
C. Identify steps required in fielding the	Lecture	Assignments
study		Written exam
D. Identify steps required for calculation	Lecture	Assignments
Sensitivity, Specificity, positive		Written exam
predictive value, negative predictive		
value, Accuracy of a screening test		

D general skills

<u>Practice based learning improvement & professionalism</u> (Scientific Paper writing skills)

Competency and Skills	Methods of teaching/ learning	Methods of Evaluation
A. To be able to write an abstract	Tutorial	Written examination case study for critque
B. Write the introduction	Tutorial	Written examination
C. Write the methodology section	Tutorial	Written examination
D. Present the results	Tutorial	Written examination
E. Perform Discussion section	Tutorial	Written examination
F. Learn Authorship ethical rules	Tutorial	Written examination

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

Time Schedule: First Part

Topic	Covered ILOs			
	Knowledge	Intellectual	Practical skills	General Skills
	A	В	C	D
Introduction & proposal writing	G	А	А	A-F
Epidemiological Study designs	A,J	А	В,С	-
Screening & theoretical background	L	А	-	1
Screening practical	L	Α	D	ı
Sample size calculation	В	А	В,С	-
Research bias	Н	А	С	F
Ethics in research	E,F	Α	С	F

5. Course Methods of teaching/learning:

- 1. Lectures
- 2. Assignments
- 3. Discussion
- 4. Exercises

6. Course assessment methods:

- i. Assessment tools:
- 1. Written examination
- 2. Attendance and active participation
- 3. Class
- 4. Assignments
- **ii. Time schedule:** After 6 months from applying to the M D degree.
- iii. Marks: 50 (35 for written exam and 15 for oral exam).

7. List of references

i. Lectures notes

• Department lecture notes

ii. Essential books

 An epidemiologic Approach to Reproductive Health, CDC, FHI, and WHO Phyllis A. wingo, James E. Higgens, Goerge L. Rubin, and S. Christine Zahniser 2016.

iii. Recommended books

- Evidence Based Medicine How to practice and teach EBM.
- David Sachett, Sharon E. Straus, W.Scott Richardson,
 William Rosenberg R.Brain Haynes, 2015

iv. Periodicals, Web sites, ... etc

• Dissertation workshop open courseware JHSPH

8. Signatures

Course Coordinator:	Head of the Department:
Date:	Date:

Course 3: Medicolegal Aspects and Ethics in Medical Practice and Scientific Research

Name of department:
Forensic medicine and clinical toxicology
Faculty of medicine
Aswan University
2019-2020

1. Course data

- Course Title: Medicolegal Aspects and Ethics in Medical Practice and Scientific Research
- Course code: FAC310C
- **♣** Speciality: Anesthesia (1st part).
- Number of credit points: 1 credit point
- Department (s) delivering the course: Forensic Medicine and Clinical Toxicology
- Coordinator (s):

Course coordinator:

- Assistant coordinator (s)
- 🖶 Date last reviewed: May 2020.
- Requirements (prerequisites) if any:
 - Completed Master degree.

2. Course Aims

To describe the basic ethical and medicolegal principles and bylaws relevant to practice in the field of Anesthesia

3. Intended learning outcomes (ILOs):

A. knowledge and understanding

Competency and Skills	Methods of teaching/ learning	Methods of Evaluation
A. Mention principals of Taking consent.	Lecture and discussion	Oral &Written exam
B. Mention principals of Writing a death certificate	Lecture and discussion	Oral &Written exam
C. Mention principals of diagnosing death.	Lecture and discussion	Oral &Written exam
D. Mention principals of writing toxicological reports.	Lecture and discussion	Oral &Written exam
E. Explain principals of medical reports.	Lecture and discussion	Oral &Written exam
F. List indications and principals of induced emesis, gastric lavage and samples collection.	Lecture and discussion	Oral &Written exam

B. Intellectual

Competency and Skills	Methods of teaching/ learning	Methods of Evaluation
A. Present case , seminars in death certificate	Lecture and discussion	Discussion and practical
B. Present case, seminars in toxicological cases	Lecture and discussion	Discussion and practical

C. Practical skills

C. Flactical Skills			
Competency and Skills	Methods of teaching/ learning	Methods of Evaluation	
A. Identify medical ethics and ethics in research.	Lecture and discussion	Discussion	
B. Prepare and write consent.	Lecture and discussion	Discussion	
C. Identify medical responsibilities.	Lecture and discussion	Discussion	
D. Write death certificate.	Lecture and discussion	Discussion and active participation	
E. Deal with a case of Suspicious death	Lecture and discussion	Discussion and active participation	
F. Write medical and toxicological reports	Lecture and discussion	Discussion and active participation	
G. Diagnose causes of death and death associated with surgery and anesthesia.	Lecture and discussion	Discussion and active participation	
H. Perform gastric lavage, induce emesis, and obtain samples.			

D. General skills

Practice-Based Learning and Improvement

Competency and Skills	Methods of teaching/ learning	Methods of Evaluation
A. Present a case.	Lecture and discussion	Global rating logbook
B. Write a consultation note	Lecture and discussion	Global rating logbook
C. Inform patients and maintaining comprehensive.	Lecture and discussion	Global rating logbook
D. Make timely and legible medical records	Lecture and discussion	Global rating logbook
E. Acquire the teamwork skills	Lecture and discussion	Global rating logbook

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

Time Schedule: First Part

Topic	Covered ILOs			
	Knowledge	Intellectual	Practical skills	General Skills
	Α	В	С	D
 Death and death certificate. 	В,С	А	D,E	Α
2. Death associated with surgical anesthesia			G	А
3. Toxicological reports	D,F	В	F	A,D,E
4. Ethics in research.	Α		Α	
5. Medical ethics.	E		A,B,C	B,C,E

5. Course Methods of teaching/learning:

- 1. Lectures.
- 2. Discussions.
- 3. Exercises.

6. Course assessment methods:

- i. Assessment tools:
 - 1. Written examination.
 - 2. Attendance and active participation.
 - 3. Oral examination.
- **ii. Time schedule:** After 6 months from applying to the MD degree.
- iii. Marks: 50 (35for written exam and 15 for oral exam).

7. List of references

i. Lectures notes

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

ii. Essential books

- Ballantyne B., Marrs T. and Syversen T.(2009):General and Applied Toxicology.2nd edition. MACMILLAN REFERENCE LTD.UK.
- Bernard Knight and Pekka Saukko (2014): Knight Forensic Pathology. Hodder Arnold press

iii. Recommended books

 Klassen D. (2011): Casarettand Doull s. Toxicology the basic science of poisons. McGrow. Hill press medical publishing division New York

iv. Journal and web site

- Journals of all Egyptian Universities of Forensic Medicine and Clinical Toxicology.
- All International Journals of Forensic Medicine and Clinical Toxicology which available in the university network at <u>www.sciencedirect.com</u>. As:

8. Signatures

Forensic Science International Journal. Toxicology Letter.

v. others

- Course Coordinator: - Head of the Department: Prof. Date: Date:

Course 4 Anesthesia and Intensive Care 1 (Pharmacology& Physiology & Physics and Clinical Measurements)

Name of department:

Anesthesia and postoperative intensive care department Faculty of medicine Aswan University 2019-2020

1. Course data

- **↓** Course Title: Anesthesia and intensive care 1 Pharmacology & Physiology & Physics and Clinical Measurements
- Course code: AIP329A
- Speciality Anesthesia and postoperative intensive care
- ♣ Number of credit points: 7 credit point for didactic (100%)
- ♣ Department (s) delivering the course: Department of Anesthesia and postoperative intensive care - Faculty of Medicine- Aswan- EGYPT
- Coordinator (s):

Principle coordinator: Dr.Ahmed Abdel-Raheem

Assistant coordinator: Dr. Ebrahem Elabd

- ♣ Date last reviewed: May 2020 ♣ Requirements (prerequisites) if any:
 - > None
- Requirements from the students to achieve course ILOs are clarified in the joining log book.

2. Course Aims

1. To acquire the Physiological and Pharmacological Background and physical facts necessary Anesthesia and postoperative intensive care in clinical reasoning, diagnosis and management of diseases which may affects anesthesia and diseases of critical ill patients.

Course 4 Unit (Module) 1 Pharmacology

A. Knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
 A. Mention Principles of pharmacology of: Introduction to Pharmacology and Drug Doses Pharmokinetics and Anesthesia Pharmacodynamics and Receptor Physiology drug-drug interaction related to anesthesia The Pharmacology of the Autonomic Nervous System 	-Lectures	-Written and oral examination - Log book
 B. Describe pharmacologic details of details of: Intravenous Drugs used for the Induction of Anesthesia Pharmacology of Inhalational Anesthetics Pharmacology of Neuromuscular Blocking Drugs and Anticholinesterases Local Anesthetic Pharmacology 		

B. Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Apply the basic (Pharmacological) supportive sciences which are appropriate to Anesthesia and postoperative intensive care related problems.	-Didactic (lectures, seminars, tutorial)	-Written and oral examination -Log book
B. Demonstrate an investigatory and analytic thinking (problem solving) approaches to common clinical situations related to Anesthesia and postoperative intensive care.		

C. Practical skills

Practical: 0 Credit point

D. General Skills

Practice-Based Learning and Improvement

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Use information technology to manage information, access on-line medical information; and support their own education	-Observation and supervision -Written and oral communication	Log book Oral exam

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
B. Write a report in common condition mentioned in A.A, A.B	-Clinical round -Seminars -Lectures	Oral exam -Log book -Chick list

Professionalism

ILOs	Methods of teaching/ Learning	Methods of Evaluation
C. Demonstrate a commitment to ethical principles.	Observation and supervisionWritten & oral communication	Logbook Oral Exam

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
D. Work effectively in different health care delivery settings and systems.	-Observation -Senior staff experience	-360o global rating

Course 4 Unit (Module) 2 Physiology

A- Knowledge and understanding

ILOs	Methods of teaching/	of
A. Mention Physiologic Principles of 1. Cardiovascular Physiology 2. Aspects of Myocardial Physiology 3. Cerebral Blood Flow and Intracranial Pressure 4. The Autonomic Nervous System 5. Basic Physiology 6. The Physiology of Neuromuscular Junction 7. Respiratory Physiology 8. Renal physiology 9. Hepatic physiology 10. Endocrine Physiology 11. Physiology of Pain	-Lectures	-Written and oral examinati on - Log book
 B. Describe Physiologic details of: 1. Cardiovascular Physiology 2. Aspects of Myocardial Physiology 3. Body Fluid Compartments, Sodium and Potassium physiology 4. Physiological Changes Associated with Pregnancy, pediatric and elderly patients. 		

B- Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Apply the basic (physiological) supportive sciences which are appropriate to Anesthesia and postoperative intensive care related problems.	-Didactic (lectures, seminars, tutorial)	-Written and oral examination -Log book
B. Demonstrate an investigatory and analytic thinking (problem solving) approaches to common clinical situations related to Anesthesia and postoperative intensive care.		

C- Practical skills

Practical 0 Credit point

D-General Skills

Practice-Based Learning and Improvement

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Use information technology to manage information, access on-line medical information; and support their own education	-Observation and supervision -Written and oral communication	Log book

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
B. Write a report in common condition mentioned in A.A, A.B	-Clinical round -Seminars -Lectures	-Oral exam -Log book -Chick list

Professionalism

ILOs	Methods of teaching/	Methods of Evaluation
	Learning	
C. Demonstrate a commitment to ethical principles.	- Observation and supervision Written & oral communication	Logbook Oral Exam

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
D. Work effectively in different health care delivery settings and systems.	-Observation -Senior staff experience	-360o global rating

Course 4 Unit (Module) 3 Physics and clinical measurements

A-Knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
 A. Mention Principles of physics of 1. SI Units 2. Electricity and Magnetism 3. The Physics of Flow 4. Pressure and Blood Pressure Monitoring 5. Biological Signals and their Measurement 6. Practical Applications of Pulse Oximetry 7. Respiratory Gas Analysis 8. Vaporizers 9. Anesthetic Breathing Systems 10. Anesthetic Gas Scavenging 11. Gases and Vapors 12. Humidification 13. Heat Production and Loss 14. Fires and Explosions in the Operating Room 	-Lectures	-Written and oral examination - Log book

B-Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Apply the basic (Physics and clinical measurements) supportive sciences which are appropriate to Anesthesia and postoperative intensive care related problems.	-Didactic (lectures, seminars, tutorial)	-Written and oral examination -Log book
B. Demonstrate an investigatory and analytic thinking (problem solving) approaches to common clinical situations related to Anesthesia and postoperative intensive care.		

C-Practical skills

Practical: 0 Credit point

D-General Skills

Practice-Based Learning and Improvement

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Use information technology to manage information, access on-line medical information; and support their own education	-Observation and supervision -Written and oral communication	Log book

Interpersonal and Communication Skills

ILOs	Methods of teaching/	Methods of Evaluation
B. Write a report in common condition mentioned in A.A	-Clinical round -Seminars -Lectures	- Oral exam -Log book -Chick list

Professionalism

ILOs	Methods of teaching/ Learning	Methods of Evaluation
C. Demonstrate a commitment to ethical principles.	Observation and supervisionWritten & oral communication	- Oral exam -Log book

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
D. Work effectively in different health care delivery settings and systems.	-Observation -Senior staff experience	-360o global rating

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

Time Schedule: First Part

Topic	Covered ILOs			
	Knowledge	intellectual	Practical skills	General skills
	Α	В	С	D
'	Unit 1 Pharmac	ology		
- Introduction to	A	A.B	A.B	A-D
Pharmacology and Drug				
Doses				
- Pharmacokinetics and	A	A.B	A.B	A-D
Anesthesia				
- Pharmacodynamics and	A	A.B	A.B	A-D
Receptor Physiology				
- drug-drug interaction	A	A.B	A.B	A-D
related to anesthesia				
The Pharmacology of the	A	A.B	A.B	A-D
Autonomic Nervous System				
- Intravenous Drugs used for	В	A.B	A.B	A-D
the Induction of Anesthesia				
- Pharmacology of	В	A.B	A.B	A-D
Inhalational Anesthetics				
- Pharmacology of	В	A.B	A.B	A-D
Neuromuscular Blocking				
Drugs and				
Anticholinesterases				
Local Anesthetic	В	A.B	A.B	A-D
Pharmacology				
	Unit 2 Physiology			
Cardiovascular Physiology	A	A,B	-	A-D
Aspects of Myocardial	A	A,B	-	A-D
Physiology				

Cerebral Blood Flow and Intracranial Pressure	A	A,B	-	A-D
The Autonomic Nervous System	A	A,B	-	A-D
Basic Physiology	A	A,B	-	A-D
The Physiology of	A	A,B	-	A-D
Neuromuscular Junction				
Respiratory Physiology	A	A,B	-	A-D
Renal physiology	A	A,B	-	A-D
Hepatic physiology	A	A,B	-	A-D
Endocrine Physiology	A	A,B	-	A-D
Physiology of Pain	A	A,B	-	A-D
Cardiovascular Physiology .5	A	A,B	-	A-D
Aspects of Myocardial .6 Physiology	В	A,B	-	A-D
Body Fluid Compartments, .7 Sodium and Potassium physiology	В	A,B	-	A-D
Physiological Changes Associated with Pregnancy, pediatric and elderly patients	В	A,B	-	A-D
Unit 3 Phys	sics and Clinica	l measurement	:S	
SI Units	A	A.B	-	A-D
Electricity and Magnetism	A	A.B	-	A-D
The Physics of Flow	A	A.B	-	A-D
Pressure and Blood Pressure Monitoring	A	A.B	-	A-D
Biological Signals and their Measurement	A	A.B	-	A-D
Practical Applications of Pulse Oximetry	A	A.B	-	A-D
Respiratory Gas Analysis	A	A.B	-	A-D
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Vaporizers	A	A.B	-	A-D
Anesthetic Breathing Systems	A	A.B	-	A-D
Anesthetic Gas Scavenging	A	A.B	-	A-D
Gases and Vapors	A	A.B	-	A-D
Humidification	A	A.B	-	A-D
Heat Production and Loss	A	A.B	-	A-D
Fires and Explosions in the Operating Room	A	A.B	-	A-D

5. Course methods of teaching/learning:

- 1. Didactic (lectures, seminars, tutorial)
- 2. Direct observation
- 3. Observation & supervision
- 4. Written & oral communications
- 5. Senior staff experience
- 6. Clinical round

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

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

7. Course assessment methods:

- i. Assessment tools:
 - Written
 - Oral examination
- **ii. Time schedule:** After 12 months from applying to the MD degree.
- iv. Marks: 1000 marks

8. List of references

i. Lectures notes

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

ii. Essential books

- Guyton AC, Hall JE: Textbook of Medical Physiology, 11th ed. Saunders, 2016.
- Alex S Evers: Anesthetic Pharmacology 1st edition
 2013
- Basic physics & measurement in anesthesia; Davis
 P.D., Parbrook G. D. and Kenny C.N., 4th edition,
 Butterworth Heirmann, pp2-3, 2015

iii. Recommended books

- Alan R Aitkenhead: Texbook of anaesthesia (5th edition,
 2017)
 - Miller R.D., Cucchiara RF et al, (2010): Anesthesia, 5th edition, vol(1).
 - JP Howard Fee: Physiology for Anaesthesiologists (2nd edition 2015)
 - Godman Gilmans. The pharmacological therapeutics.
 11th Ed, 2016

iv. Periodicals, Web sites, ... etc

> Periodicals

British journal of pharmacology

- Pharmacological review
- British journal of anesthesia
- American journal of physiology.
- Journal of applied physiology
- Anesthesia and analgesia
- Journal of pain
- Anesthesia journal

9. Signatures

Course Coordinator		
Unit 1 Coordinator:	Head of the Department:	
Date:	Date:	
Unit 2 Coordinator	Head of the Department	
Date:	Date:	
Unit 3 Coordinator	Head of the Department	
Date:	Date:	
•••••	•••••	

Second Part

Course 5: Anesthesia and intensive care

Name of department:

Anesthesia and postoperative intensive care department Faculty of medicine Aswan University 2019-2020

1. Course data

- Course Title: Anesthesia and intensive care
- Course code: AIP329B
- Speciality Anesthesia and postoperative intensive care
- ♣ Number of credit points: 147 credit point didactic 24 credit point (16.3%) practical 123 credit point (83.7%)
- ♣ Department (s) delivering the course: Department of Anesthesia and postoperative intensive care - Faculty of Medicine- Aswan - EGYPT
- Coordinator (s):

Principle coordinator: Dr. Ahmed Abdel-Raheem

Assistant coordinator: Dr. Ebrahem Elabd

♣ Date last reviewed: May 2020 ♣ Requirements (prerequisites) if any :

- > None
- Requirements from the students to achieve course ILOs are clarified in the joining log book.
- This course consists of 3 Units(Modules)
 - 1- Unit (Module) 1 Anesthesia and peri-operative medicine
 - 2- Unit (Module) 2 intensive care (Postoperative, general, trauma)
 - 3- Unit (Module) 3 chronic pain management

2. Course Aims

- To enable MD students to master high level of clinical skills, in addition to update and advanced medical knowledge, integration and interpretation of different investigations, professional competence in the area of Anesthesia and perioperative medicine, intensive care medicine, and chronic pain management.
- 2. To provide candidates with enough general skills related to Anesthesia and postoperative intensive care including, writing specialized medical reports, use of information technology in clinical decisions and research, teaching junior students and counseling patients and their families about anesthesia, intensive care and chronic pain diseases and conditions.

3. Course intended learning outcomes (ILOs):

Unit 1 (Module): Anesthesia and peri-operative medicine

A-Knowledge and understanding

ILOs	Methods of teaching/	Methods of Evaluation
	learning	
A. Explain update and evidence based etiology, clinical picture, diagnosis and management of the following common diseases and clinical conditions which may affect anesthetic management: Cardiovascular diseases as: A. ischemic heart diseases B. hypertension C. heart failure D. valvular heart diseases. E. congenital heart diseases. Respiratory disorders A. restrictive lung diseases. B. obstructive lung diseases. Liver diseases: 1. acute hepatitis 2. chronic hepatitis 3. liver cirrhosis renal diseases: A. renal impairment B. acute renal failure C. chronic renal failure endocrine diseases: A. diabetes mellitus B. pheochromocytoma C. adrenal disorders D. thyroid disorders	-Didactic (lectures, seminars, tutorial) -Clinical rounds -Seminars -Clinical rotations -Service teaching	-OSCE at the end of each year -log book & portfolio - One MCQ examination at the second half of the second year and another one in the third year -Written and oral examination

E. parathyroid disorders		
F. pituitary disorders		
Neuromuscular diseases		
with Neuropsychiatric Disease		
Anemia or Coagulation Disorders		
Malnutrition		
Evaluation of Children		
Evaluation of the Geriatric Patient		
Evaluation of the Pregnant Patient		
B. Mention the principles of	-Didactic	-OSCE at the
1) Airway management	(lectures,	end of each
2) Monitoring of various body function	seminars,	year
3) Cardiopulmonary resuscitation	tutorial)	-log book &
4) Theories of mechanism of action of general	-Clinical	portfolio
and local anesthesia	rounds	- One MCQ
5) Principles of preoperative patient	-Seminars	examination
preparation.	-Clinical	at the second
6) Postoperative patient care and acute pain	rotations	half of the
management.	-Service	second year
7) Cardiopulmonary resuscitation	teaching	and another
8) Neuroanesthesia		one in the
9) Cardiac Anesthesia		third year
10) Anesthesia for Surgical Treatment of		-Written and
Congenital Heart Disease		oral
11) Thoracic Anesthesia		examination
12) Anesthesia for Major Vascular Surgery		
13) Anesthesia for Gastrointestinal Surgery		
14) Anesthesia for Kidney, Pancreas, or		
Other Organ Transplantation		
15) Endocrine Surgery and Intraoperative		
Management of Endocrine Conditions		
16) Anesthetic Considerations for		
Genitourinary and Renal Surgery		
17) Anesthesia for Obstetric Care and		
Gynecologic Surgery		
18) Anesthesia for Newborn Surgical		
Emergencies		

-	
19)	Anesthesia for Children
20)	Anesthesia for Orthopedic Surgery
21)	Anesthesia for Ophthalmic Surgery
22)	Anesthesia for Otorhinolaryngolic (Ear,
No	se, and Throat) Surgery
23)	Outpatient Anesthesia
24)	Anesthesia Care for Diagnostic or
The	erapeutic
25)	Procedures Outside of the Operating
Roo	om .
26)	Anesthesia for Trauma Patients
27)	Anesthetic Management of the Burned
pat	ients
28)	Postoperative complications
C. Exp	lain the facts and principles of the relevant
bas	ic supportive sciences related to Anesthesia
and	peri operative medicine.
D. Exp	lain the facts and principles of the relevant
clir	ically supportive sciences related to
An	esthesia and peri operative medicine.
E. Des	cribe the basic ethical and medicolegal
pri	nciples revenant to the Anesthesia and peri
op	erative medicine.
F. Des	cribe the basics and measurements of
qua	ality assurance to ensure good clinical care in
An	esthesia and peri- operative medicine.
G. Exp	lain the ethical and scientific principles of
me	dical research.
H. Exp	lain the impact of common health problems
in t	he field of Anesthesia and peri-operative
me	dicine on the society.

B-Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Design and present case in common problem related to Anesthesia and peri operative medicine.	-Clinical rounds -Senior staff experience	-Procedure and case presentation -Log book & Portfolio
B. Apply the basic and clinically supportive sciences which are appropriate to Anesthesia and peri operative medicine related problems.		
C. Demonstrate an investigatory and analytic thinking "problem – solving "approaches to clinical situation related to Anesthesia and peri operative medicine. D. Plan research projects.		
E. Write scientific papers.		
 F. Lead risk management activities as a part of clinical governs. Cardiopulmonary resuscitation. Airway management 		
G. Plain quality improvement activities in the field of medical education and clinical practice in Anesthesia and peri operative medicine.		
H. Create and innovate plans, systems, and other issues for improvement of performance in to Anesthesia and peri operative medicine.		
I. Present and defend his / her data in front of a panel of experts		
J Formulate management plans and alternative decisions in different situations in the field of Anesthesia and peri operative medicine.		

C-Practical skills (Patient Care)

ILOs	Methods of teachinhg/ learning	Methods of Evaluation
A. Take history, examine and clinically diagnose different conditions related to Anesthesia and peri operative medicine.	-Didactic (lectures, seminars, tutorial) -Clinical rounds Clinical rotations (service teaching)	-OSCE at the end of each year -log book & portfolio - One MCQ examination at the second half of the second year and another one in the third year -Clinical exam
 B. Order the following non invasive and invasive diagnostic procedures Routine pre operative Lab investigations related Anesthesia and peri operative medicine. Advanced investigations needed to evaluate concurrent diseases with anesthesia as appropriate. 	-Clinical round with senior staff -Observation -Post graduate teaching -Hand on workshops -Perform under supervision of senior staff	Procedure presentationLog bookChick list
 C. Interpret the following non invasive and invasive diagnostic procedures Routine pre operative Lab investigations related Anesthesia and peri operative 	-Clinical round with senior staff -Observation -Post	ProcedurepresentationLog bookChick list

 Medicine. Advanced investigations needed to evaluate concurrent diseases with anesthesia as appropriate. 	graduate teaching -Hand on workshops -Perform under supervision of senior staff
 Develop and carry out patient management plans for the following problems Preoperative optimization of patients with different medical or surgical diseases who may need anesthesia 	-Clinical round with senior staff
 E. Counsel and educate patients and their family about Different types of anesthesia. Preoperative preparation. Postoperative period. 	-Clinical round with senior staff
F. Use information technology to support patient care decisions and patient education for the Anesthesia and peri-operative medicine related conditions.	-Clinical round with senior staff
 G. Provide health care services aimed at preventing the following conditions Post operative complications as: Cardiovascular complications Pulmonary complications GIT complications pain 	-Clinical round with senior staff
H. Work with health care professionals, including those from other disciplines, to provide patient-focused care for the mentioned in A.A and A.C	-Clinical round with senior staff
I. Write competently all forms of patient charts and sheets including reports	

evaluating these charts and sheets.(Write	
and evaluate a consultation note, Inform	
patients of a diagnosis and therapeutic plan,	
completing and evaluating comprehensive,	
timely and legible medical records)	

D-General Skills

Practice-Based Learning and Improvement

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Perform practice-based improvement activities using a systematic methodology in the common problems (plain and conduct audit cycles) in conditions mentioned in A.A and A.C	-Simulations -Clinical round -Seminars -Lectures -Case presentation -Hand on workshops	 Global rating Procedure & case presentation Log book & Portfolios Chick list
B. Locate, appraises, and assimilates evidence from scientific studies related to patients' health problems.	-Simulations -Clinical round -Seminars -Lectures -Case presentation -Hand on workshops	- Global rating -Procedure & case presentation -Log book & Portfolios - Chick list
C. Apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness		
D. Use information technology to manage		

information, access on-line medical information; and support their own education	
E. Lead the learning of students and other	
health care professionals.	

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Create and sustain a therapeutic and ethically sound relationship with patients	-Simulations -Clinical round -Seminars -Lectures -Case presentation -Hand on workshops	- Global rating -Procedure & case presentation -Log book & Portfolios - Chick list
 G. Perform the following oral communications: Interpretation of the results of different investigations related to Anesthesia and perioperative medicine and discussion of different anesthetic options 		
H. Fill the following reports:Patients' medical reportsAnesthetic sheet		
I. Work effectively with others as a member or leader of a health care team as regard diagnosis and treatment of conditions mentioned in A.A and A.C		

Professionalism

ILOs	Methods of teaching/ Learning	Methods of Evaluation
J. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society that supersedes self-interest.	ObservationSenior staffexperienceCase taking	-Objective structured clinical examination - Patient survey
K. Demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices.		- 360o global rating
L. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
M.Work effectively in different health care delivery settings and systems.	ObservationSenior staff experience	- 360o global rating
N. Practice cost-effective health care and resource allocation that does not compromise quality of care		- Check list evaluation of live or recorded performance
O. Advocate for quality patient care and assist patients in dealing with system complexities		- 360o globalrating- Patientsurvey
P. Partner with health care managers and health care providers to assess, coordinate, and improve health care and predict how these activities can affect system performance		

Unit 2 (Module): Intensive Care Medicine

A-Knowledge and understanding

ILOs	Methods of teaching/ learning	Methods of Evaluation
 Explain update and evidence based etiology, clinical picture, diagnosis and management of the following common diseases and clinical conditions: 1. 1. Shock Hypovolemic Shock Distributive Shock with special consideration to septic shock Cardiac Shock Obstructive shock Respiratory Failure Acute Respiratory Failure from Specific Disorders with special consideration to ARDS Critical Illness in Patients with Chronic Renal Failure Gastrointestinal Failure in the ICU Pancreatitis Bowel Obstruction Obstruction of the Large Bowel Adynamic (Paralytic) Ileus Diarrhea & Malabsorption Pancreatic Insufficiency Lactase Deficiency Diarrhea Infections and sepsis in the Critically Ill Surgical Infections by Body Site Management of the Elderly Patient in the ICU Cardiac Problems in Critical Care Atrial Arrhythmias Ventricular Arrhythmias Ventricular Arrhythmias 	-Didactic (lectures, seminars, tutorial) -Outpatient -Inpatient -Case presentation -Direct observation	- log book -Objective structure clinical examination (OSCE) One MCQ examination at the second half of the second year -Written and oral exam

- Cardiac Problems during Pregnancy
- Toxic Effects of Cardiac Drugs

9. Cardiothoracic Surgery

- Aneurysms, Dissections, & Transections of the Great Vessels
- Postoperative Arrhythmias
- Bleeding, Coagulopathy, & Blood Product, Utilization
- Circulatory Arrest, & Ventricular, Assistance
- Postoperative Low-Output States

10. Pulmonary Disease

- Status Asthmatics
- Life-Threatening Hemoptysis
- Deep Venous Thrombosis & Pulmonary
- Thromboembolism
- Anaphylaxis
- Angioedema

11. Endocrine Problems in the Critically III Patient

- Thyroid Storm
- Myxedema Coma
- Acute Adrenal Insufficiency
- Sick Euthyroid Syndrome

12. Diabetes Mellitus, Hyperglycemia.

- Diabetic Ketoacidosis
- Hyperglycemic Hyperosmolar
- Nonketotic Coma
- Management of the Acutely III Patient with Hyperglycemia or Diabetes Mellitus
- Hyperglycemia
- Hypoglycemia
- Other Complications of Diabetes Mellitus

13. Vascular Emergencies in the ICU

14. Critical Care of Neurologic Disease

- Encephalopathy & Coma
- Seizures
- Neuromuscular Disorders
- Cerebrovascular Diseases

15. Neurosurgical Critical Care

	1	1
Head Injuries		
 Aneurysmal Subarachnoid Hemorrhage 		
 Tumors of the Central Nervous System 		
 Cervical Spinal Cord Injuries 		
16. Acute Abdomen		
17. Gastrointestinal Bleeding		
 Upper Gastrointestinal Bleeding 		
 Lower Gastrointestinal Bleeding 		
18. Hepatobiliary Disease		
 Acute Hepatic Failure 		
 Acute Gastrointestinal Bleeding from Portal 		
Hypertension		
Ascites		
 Hepatorenal Syndrome 		
 Liver Resection in Patients with Cirrhosis 		
19. Poisonings & Ingestions		
20. Care of Patients with Environmental		
Injuries		
Heat Stroke		
Hypothermia		
Frostbite		
 Near-Drowning 		
Envenomation		
 Electric Shock & Lightning Injury 		
Radiation Injury		
21. Management of Critical Complications of		
Pregnancy		
22. Disorders Fluids, Electrolytes, & Acid-Base		
23. Malnutrition in the Critically III Patient		
B. Mention the principles of	-Didactic	- log book
 Basic and advanced life support 	(lectures,	-Objective
 Indications of admission to ICU 	seminars,	structure
Vascular access:	tutorial)	clinical
 Airway management 	-outpatient	examination
1. Nasal and oral airways	-inpatient	(OSCE)
2. Laryngeal mask airway	-case	One MCQ
3. Endotraheal	presentation	examination
tube	-Direct	at the second
• Suction	observation	half of the
 Haemodynamic monitoring 		second year

1. Arterial blood pressure 2. Pulmonary artery pressure 3. Central venous pressure and pulmonary artery wedge pressure. 4. Arrhythmias 5. Hemodynamic drug infusion Invasive& noninvasive assessment of arterial blood gases 1. Acid base status 2. Hypoxemia and hypercapnia 3. Pulse oximetry • The most common electrolyte disorders 1. Hypokalemia 2. Hypomagnesemia 3. Hyponatremia 4. Hypocalcaemia. Infection in ICU 1. Ventilator associated pneumonia

2. Sepsis syndrome. 3. Empirical antibiotic therapy

- Mechanical ventilation
- 1. Objectives of mechanical ventilation
- Indications of mechanical ventilation
- 3. Modes and settings of mechanical ventilation
- 4. Weaning from mechanical ventilation
- 5. Non invasive positive pressure ventilation
- 6. Complications of mechanical ventilation
- 7. Sedation and muscle relaxants
 - Nutrition
- 1. Entral tube feeding
- 2. Total parenteral nutrition
 - Specific management and ventilatory strategies in pulmonary syndromes
- 1. ARDS
- 2. Cardiogenic pulmonary edema
- 3. Acute exacerbation of COPD
- 4. Status asthmatics
- 5. Acute pulmonary embolism
- 6. IPF
- 1. 7. Pneumonia

post-operative management of the following:

-Written and oral exam

Open heart surgery.	
 Neurosurgery. 	
 Vascular surgery. 	
 Surgery for transplanted organs. 	
Major surgical conditions	
C. Explain the facts and principles of the relevant	
basic supportive sciences related to Intensive	
Care Medicine.	
D. Explain the facts and principles of the relevant	
clinically supportive sciences related to Intensive	
Care Medicine.	
E. Describe the basic ethical and medicolegal	
principles revenant to the Intensive Care	
Medicine.	
F. Describe the basics and measurements of	
quality assurance to ensure good clinical care in	
Respiratory Intensive Care Medicine.	
G. Explain the ethical and scientific principles of	
medical research.	
H. Explain the impact of common health	
problems in the field of Intensive Care Medicine	
on the society.	

B-Intellectual outcomes

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Design and present case in common problem related to Intensive Care Medicine.	-Clinical rounds -Senior staff experience	-Procedure and case presentation -Log book & Portfolio
B. Apply the basic and clinically supportive sciences which are appropriate to the Intensive Care Medicine related problems.		
C. Demonstrate an investigatory and analytic thinking "problem – solving "approaches to clinical situation related to Intensive Care Medicine.		
D. Plan research projects.		
E. Write scientific papers.		
 F. Lead risk management activities as a part of clinical governs. Peumothorax Ventilator associated pneumonia Cardio respiratory arrest Pulmonary embolism GIT bleeding Cardiac tamponade Cardiac arrhythmias Intubation Self extubation 		
G. Plain quality improvement activities in the field of medical education and clinical practice in Intensive Care Medicine.		
H. Create and innovate plans, systems, and other issues for improvement of		

	performance in Intensive Care Medicine.	
Ι.	Present and defend his / her data in front of	
	a panel of experts	
J.	Formulate management plans and	
	alternative decisions in different situations	
	in the field of Intensive Care Medicine.	

C-Practical skills (Patient Care)

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Take history, examine and clinically diagnose different conditions related to Intensive Care Medicine	Lecture - Seminar - Outpatient -Inpatient -Case presentation -Direct observation	-OSCE at the end of each year -log book & portfolio - One MCQ examination at the second half of the second year and another one in the third year -Clinical exam
 B. Order the following non invasive and invasive diagnostic procedures 1) CVP (order) 2) Arterial blood gases 3) Ventilator adjustment 4) Investigations appropriate to conditions mentioned above 	-Clinical round with senior staff -Observation -Post graduate teaching -Hand on workshops -Perform under supervision of senior staff	Procedure presentationLog bookChick list
C. Interpret the following non invasive and	-Clinical round with senior	- Procedure presentation

invasive diagnostic procedures 1) Hemodynamic Monitoring 2) ABGs	staff -Observation -Post graduate teaching -Hand on workshops -Perform under supervision of senior staff	- Log book - Chick list
Perform the following non invasive and invasive diagnostic procedures 1) Oral airway placement 2) ABG sampling 3) CVP measurement 4) Ventilator adjustment 5) Chest care	-Clinical round with senior staff -Observation -Post graduate teaching -Hand on workshops -Perform under supervision of senior staff	- Procedure presentation- Log book- Chick list
 Prescribe the following non invasive and invasive therapeutic procedures. Syringe pump adjustment Intubation and mechanical ventilation NIV &IPPV modes and settings Weaning from mechanical ventilation Resuscitation Nutrition 	-Clinical round with senior staff -Observation -Post graduate teaching -Hand on workshops -Perform under supervision of senior staff	Procedure presentationLog bookChick list
 F. Develop and carry out patient management plans for the following problems Diseases mentioned in A.A and A.C in Unit 2 	-Clinical round with senior staff	

 G. Counsel and educate patients and their family about Symptoms of critical illness Methods of management How they synchronize with ventilators H. Use information technology to support patient care decisions and patient education for the Intensive Care Medicine related conditions. 	-Clinical round with senior staff -Clinical round with senior staff	
 I. Provide health care services aimed at preventing the following conditions Hospital acquired pneumonia Ventilator associated respiratory tract infection Bed sores Deep venous thrombosis GIT bleeding Psychological disturbances of the patients Healthcare associated pneumonia 	-Clinical round with senior staff	
 J .Work with health care professionals, including those from other disciplines, to provide patient-focused care for the following Suctioning Tracheotomy tube care Disinfection Caring wounds Chest care Prevention of bed sores 	-Clinical round with senior staff	
K. Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets.(Write and evaluate a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and evaluating comprehensive, timely and legible medical records)		

D-General Skills

Practice-Based Learning and Improvement

ILOs	Methods of teaching/ learning	Methods of Evaluation
 A. Perform practice-based improvement activities using a systematic methodology in the common problems (plain and conduct audit cycles) in the following problems: ARDS Difficult weaning 	-Simulations -Clinical round -Seminars -Lectures -Case presentation -Hand on workshops	- Global rating -Procedure & case presentation -Log book & Portfolios - Chick list
 B. Locate, appraises, and assimilates evidence from scientific studies related to patients' health problems. Endotracheal tube obstruction Life threatening bronchospasm Barotrauma Arrhythmias 	-Simulations -Clinical round -Seminars -Lectures -Case presentation -Hand on workshops	- Global rating -Procedure & case presentation -Log book & Portfolios - Chick list
C. Apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness		
D. Use information technology to manage information, access on-line medical information; and support their own education		
E. Lead the learning of students and other health care professionals. Different maneuvers in ICU		

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Create and sustain a therapeutic and ethically sound relationship with patients	-Simulations -Clinical round -Seminars -Lectures -Case presentation -Hand on workshops	- Global rating -Procedure & case presentation -Log book & Portfolios - Chick list
 G. Perform the following oral communications: Advise patient for synchrony Deal with patient relatives Ordering residents Ordering nurses 		
 H. Fill the following reports: Patients' medical reports ABGs reports Ventilatory lung mechanics 		
 I. Work effectively with others as a member or leader of a health care team A member of a health care team in respiratory intensive care A leader of a health care team in night shift 		

Professionalism

ILOs	Methods of teaching/ Learning	Methods of Evaluation
Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society that supersedes self-interest.	ObservationSenior staffexperienceCase taking	-Objective structured clinical examination - Patient survey
Demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices.		- 360o global rating
Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
Work effectively in different health care delivery settings and systems.	ObservationSenior staff experience	- 360o global rating
Practice cost-effective health care and resource allocation that does not compromise quality of care		- Check list evaluation of live or recorded performance
Advocate for quality patient care and assist patients in dealing with system complexities		360o global ratingPatient survey
Partner with health care managers and health care providers to assess, coordinate, and improve health care and predict how these activities can affect system performance		

Unit 3 (Module) Chronic pain management

A-Knowledge and understanding

ILOs	Methods of	
	teaching/	Evaluation
	learning	
A. <u>Explain update and evidence based etiology</u> ,	- Didactic	- Log book
clinical picture, diagnosis and management of	(lectures,	- Objective
the following common diseases and clinical	seminars,	structure
<u>conditions:</u>	tutorial)	clinical
Common chronic pain condition	-Outpatient	examination
Headache	-Inpatient	(OSCE)
 Cervical and Lumbar Pain 	- Case	- One MCQ
Abdominal Pain	presentation	examination
Arthritis	-Direct	at the second
Neuropathic Pain	observation	half of the
Myofascial Pain		second year
Fibromyalgia		-Written and
Cancer pain		oral exam
Pediatric Pain		
Pregnancy and Pain		
Geriatrics and Chronic Pain		
Gender and Ethnic Issues in Chronic Pain		
Comorbid Conditions		
Psychological Comorbidity		
Obesity and Chronic Pain		
B. Mention the principles of	-Didactic	- Log book
Physiology of pain	(lectures,	-Objective
Molecular Mechanisms of Nociception	seminars,	structure
Different chronic pain syndromes	tutorial)	clinical
 Pharmacology of drugs used to treat different 	-outpatient	examination
types of pain	-inpatient	(OSCE)
71 1	-case	One MCQ
	presentation	examination
	-Direct	at the second

	observation	half of the second year -Written and oral exam
C. Explain the facts and principles of the relevant		
basic supportive sciences related to chronic		
pain management.		
D. Explain the facts and principles of the relevant		
clinically supportive sciences related to chronic		
pain management.		
E. Describe the basic ethical and medicolegal		
principles revenant to chronic pain		
management.		
F. Describe the basics and measurements of		
quality assurance to ensure good clinical care		
in chronic pain management.		
G. Explain the ethical and scientific principles of		
medical research.		
H. Explain the impact of common health		
problems in the field of chronic pain		
management on the society.		

B-Intellectual outcomes

ILOs	Methods of	Methods of
	teaching/	Evaluation
	learning	
A. Design and present case in common	-Clinical	-Procedure and
problem related to chronic pain	rounds	case presentation
management.	-Senior staff	-Log book &
	experience	Portfolio
B. Apply the basic and clinically supportive		
sciences which are appropriate to chronic		
pain management related problems.		
C. Demonstrate an investigatory and analytic thinking "problem – solving "approaches		

to clinical situation related to chronic pain management.	
D. Plan research projects.	
E. Write scientific papers.	
F. Plain quality improvement activities in the field of medical education and clinical practice in chronic pain management.G. Create and innovate plans, systems, and	
other issues for improvement of performance in chronic pain management.	
H. Present and defend his / her data in front of a panel of experts	
I. Formulate management plans and alternative decisions in different situations in the field of chronic pain management.	

C-Practical skills (Patient Care)

ILOs	Methods of teaching/ learning	Methods of Evaluation
A. Take history, examine and clinically diagnose different conditions related to chronic pain management.	-Didactic (lectures, seminars, tutorial) - Outpatient -Inpatient -Case presentation -Direct observation	-OSCE at the end of each year -log book & portfolio - One MCQ examination at the second half of the second year and another one in the third year

		-Clinical exam
 B. Order the following non invasive and invasive diagnostic procedures Appropriate investigations related to conditions mentioned above as: Chest Xray Bone scan Computed tomography MRI EMG 	-Clinical round with senior staff -Observation -Post graduate teaching -Hand on workshops -Perform under supervision of senior staff	- Procedure presentation - Log book - Chick list - Objective structure clinical examination (OSCE) - One MCQ examination at the second half of the second year
C. Interpret the following non invasive and invasive diagnostic procedures Chest X-ray Bone scan Computed tomography MRI EMG	-Clinical round with senior staff -Observation -Post graduate teaching -Hand on workshops -Perform under supervision of senior staff	- Procedure presentation - Log book - Chick list - Objective structure clinical examination (OSCE) - One MCQ examination at the second half of the second year
 D. Perform the following non invasive and invasive diagnostic procedures: Diagnostic nerve blocks as: diagnostic cervical medial branch block diagnostic sacroiliac joint blocks provocative discography 	-Clinical round with senior staff -Observation -Post graduate teaching -Hand on workshops -Perform under supervision of	 Procedure presentation Log book Chick list Objective structure clinical examination (OSCE) One MCQ examination at the second

	senior staff	half of the
E. Prescribe the following non invasive and invasive therapeutic procedures. Ablative techniques Chemical denervation Thermal intradiscal procedures Intervertebral disc annuloplasty (IDET) Radiofrequency ablation Acupuncture (adjuvant) Blocks Joint blocks (intra-articular facet joint injections, sacroiliac joint injections) Nerve and nerve root blocks (celiac plexus blocks, lumbar sympathetic blocks or stellate ganglion blocks, medial branch blocks) Botulinum toxin Electrical nerve stimulation Epidural steroids with or without local anesthetics Intrathecal drug therapies Neurotic blocks Intrathecal nonopioid injections Intrathecal opioid injections Intrathecal opioid injections Minimally invasive spinal procedures Vertebroplasty	-Clinical round with senior staff -Observation -Post graduate teaching -Hand on workshops -Perform under supervision of senior staff	- Procedure presentation - Log book - Chick list
F. Perform the following non invasive and invasive therapeutic procedures Radiofrequency ablation Nerve and nerve root blocks Electrical nerve stimulation Epidural steroids with or without local anesthetics Intrathecal drug therapies • Neurolytic blocks • Intrathecal nonopioid injections Intrathecal opioid injections		

G. <u>Develop and carry out patient management</u> <u>plans for the following problems</u> conditions mentioned above	-Clinical round with senior staff	
H. Counsel and educate patients and their family about conditions mentioned above	- Clinical round with senior staff -Perform under supervision of senior staff	
I. Use information technology to support patient care decisions and patient education for the chronic pain management related conditions	-Clinical round with senior staff	
Provide health care services aimed at preventing the conditions mentioned above	-Clinical round with senior staff	
J. Work with health care professionals, including those from other disciplines, to provide patient-focused care for the conditions mentioned above	-Clinical round with senior staff	
K. Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets. (Write and evaluate a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and evaluating comprehensive, timely and legible medical records)		

D-General Skills

Practice-Based Learning and Improvement

ILOs	Methods of teaching/ learning	Methods of Evaluation
 A. Perform practice-based improvement activities using a systematic methodology in the common problems (plain and conduct audit cycles) Headache Cervical and Lumbar Pain Arthritis Neuropathic Pain 	-Simulations -Clinical round -Seminars -Lectures -Case presentation -Hand on workshops	
B. Locate, appraises, and assimilates evidence from scientific studies related to patients' health problems.	-Simulations -Clinical round -Seminars -Lectures -Case presentation -Hand on workshops	 Global rating Procedure & case presentation Log book & Portfolios Chick list
C. Apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness		
D. Use information technology to manage information, access on-line medical information; and support their own education		
E. Lead the learning of students and other health care professionals in chronic pain management		

Interpersonal and Communication Skills

ILOs	Methods of teaching/ learning	Methods of Evaluation
Create and sustain a therapeutic and ethically sound relationship with patients	-Simulations -Clinical round -Seminars -Lectures -Case presentation -Hand on workshops	- Global rating -Procedure & case presentation -Log book & Portfolios - Chick list
Perform the following oral communications: Options and prognosis of the treatment		
Fill the following reports: Patients' medical reports		
Work effectively with others as a member or leader of a health care team		

Professionalism

ILOs	Methods of teaching/ Learning	Methods of Evaluation
Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society that supersedes self-interest.	ObservationSenior staffexperienceCase taking	-Objective structured clinical examination - Patient survey
Demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices.		- 360o global rating
Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities		

Systems-Based Practice

ILOs	Methods of teaching/ learning	Methods of Evaluation
F. Work effectively in different health care delivery settings and systems.	ObservationSenior staffexperience	- 360o global rating
G. Practice cost-effective health care and resource allocation that does not compromise quality of care		- Check list evaluation of live or recorded performance
H. Advocate for quality patient care and assist patients in dealing with system complexities		- 360o globalrating- Patientsurvey
I. Partner with health care managers and health care providers to assess, coordinate, and improve health care and predict how these activities can affect system performance		

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

Time Schedule: Second Part

Topic	Covered ILOs			
	Knowledge	intellectual	Practical	General
			skills	skills
	Α	В		
Unit 1 Anesth	esia and posto	perative medic	cine	
Ischemic heart diseases	A, C-H	A-E, G-J	A-C	A-P
hypertension	A, C-H	A-E, G-J	A-C	A-P
heart failure	A, C-H	A-E, G-J	A-C	A-E
valvular heart diseases.	A, C-H	A-E, G-J	A-C	A-E
congenital heart diseases.	A, C-H	A-E, G-J	A-C	A-E
restrictive lung diseases.	A, C-H	A-E, G-J	A-C	A-P
obstructive lung diseases.	A, C-H	A-E, G-J	A-C	A-P
acute hepatitis	A, C-H	A-E, G-J	A-C	A-E
chronic hepatitis	A, C-H	A-E, G-J	A-C	A-E
liver cirrhosis	A, C-H	A-E, G-J	A-C	A-E
renal impairment	A, C-H	A-E, G-J	A-C	A-E
acute renal failure	A, C-H	A-E, G-J	A-C	A-E
chronic renal failure	A, C-H	A-E, G-J	A-C	A-E
diabetes mellitus	A, C-H	A-E, G-J	A-C	A-E
pheochromocytoma	A, C-H	A-E, G-J	A-C	A-E
adrenal disorders	A, C-H	A-E, G-J	A-C	A-E
thyroid disorders	A, C-H	A-E, G-J	A-C	A-E
parathyroid disorders	A, C-H	A-E, G-J	A-C	A-E
pituitary disorders	A, C-H	A-E, G-J	A-C	A-E
Neuromuscular diseases	A, C-H	A-E, G-J	A-C	A-E
with Neuropsychiatric Disease	A, C-H	A-E, G-J	A-C	A-E
Anemia or Coagulation Disorders	A, C-H	A-E, G-J	A-C	A-E
Malnutrition	A, C-H	A-E, G-J	A-C	A-E
Evaluation of Children	A, C-H	A-E, G-J	A-C	A-E

A, C-H	A-E, G-J	A-C	A-E
А, С-Н	A-E, G-J	A-C	A-E
В, С-Н	A-J	A-I	A-E
В, С-Н	A-E, G-J	A-I	A-E
В, С-Н	A-J	A-I	A-E
В, С-Н	A-E, G-J	A-I	A-E
В, С-Н	A-E, G-J	A-I	A-E
В, С-Н	A-E, G-J	A-I	A-E
В, С-Н	A-E, G-J	A-I	A-E
В, С-Н	A-E, G-J	A-I	A-E
В, С-Н	A-E, G-J	A-I	A-E
В, С-Н	A-E, G-J	A-I	A-E
В, С-Н	A-E, G-J	A-I	A-E
В, С-Н	A-E, G-J	A-I	A-E
В, С-Н	A-E, G-J	A-I	A-E
В, С-Н	A-E, G-J	A-I	A-E
В, С-Н	A-E, G-J	A-I	A-E
В, С-Н	A-E, G-J	A-I	A-E
	A, C-H B, C-H	A, C-H A-E, G-J B, C-H A-E, G-J	A, C-H A-E, G-J A-C B, C-H A-J A-I B, C-H A-E, G-J A-I

Genitourinary and Renal Surgery				
Anesthesia for Obstetric Care and Gynecologic Surgery	В, С-Н	A-E, G-J	A-I	A-E
Anesthesia for Newborn Surgical Emergencies	В, С-Н	A-E, G-J	A-I	A-E
Anesthesia for Children	В, С-Н	A-E, G-J	A-I	A-E
Anesthesia for Orthopedic Surgery	В, С-Н	A-E, G-J	A-I	A-E
Anesthesia for Ophthalmic Surgery	В, С-Н	A-E, G-J	A-I	A-E
Anesthesia for Otorhinolaryngolic (Ear, Nose, and Throat) surgery	В, С-Н	A-E, G-J	A-I	A-E
Outpatient Anesthesia	В, С-Н	A-E, G-J	A-I	A-E
Anesthesia Care for Diagnostic or Therapeutic	В, С-Н	A-E, G-J	A-I	A-E
Procedures Outside of the Operating Room	В, С-Н	A-E, G-J	A-I	A-E
Anesthesia for Trauma Patients	В, С-Н	A-E, G-J	A-I	A-E
Anesthetic Management of the Burned patients	В, С-Н	A-E, G-J	A-I	A-E
Post operative complications	В, С-Н	A-E, G-J	A-I	A-E
Unit 2	2 Intensive car	e medicine		
Shock				
Hypovolemic Shock	A,C-H	A-J	A,B,F-H	C-E
Distributive Shock with special consideration to septic shock	A,C-H	A-J	A,B,F-H	C -E
Obstructive shock	A,C-H	A-J	A,B,F-H	C-E
Cardiac Shock	A,C-H	A-J	A,B,F-H	C-E
	Respiratory Fa	ailure		

Acute Respiratory Failure	A,C-H	A-J	A,B,F-H	C-P
Acute Respiratory Failure from Specific Disorders with special consideration to ARDS	A,C-H	A-J	A,B,F-H	A,C-E
Critical Illness in Patients with Chronic Renal Failure	A,C-H	A-J	A,B,F-H	C-E
Gastroi	ntestinal Failu	re in the ICU		
Pancreatitis	A,C-H	A-J	A,B,F-H	C-E
Bowel Obstruction	A,C-H	A-J	A,B,F-H	C-E
Obstruction of the Large Bowel	A,C-H	A-J	A,B,F-H	C-E
Adynamic (Paralytic) Ileus	A,C-H	A-J	A,B,F-H	C-E
Diarrhea & Malabsorption	A,C-H	A-J	A,B,F-H	C-E
Pancreatic Insufficiency	A,C-H	A-J	A,B,F-H	C-E
Lactase Deficiency	A,C-H	A-J	A,B,F-H	C-E
Diarrhea	A,C-H	A-J	A,B,F-H	C-E
Infections and sepsis in the Critically III	A,C-H	A-J	A,B,F-H	C-E
Surgical Infections by Body Site	A,C-H	A-J	A,B,F-H	C-E
Management of the Elderly Patient in the ICU	A,C-H	A-J	A,B,F-H	C-E
Cardia	c Problems in (Critical Care		
Atrial Arrhythmias	A,C-H	A-J	A,B,F-H	B,C-E
Ventricular Arrhythmias	A,C-H	A-J	A,B,F-H	B,C-E
Heart Block	A,C-H	A-J	A,B,F-H	C-E
Cardiac Problems during Pregnancy	A,C-H	A-J	A,B,F-H	C-E
Toxic Effects of Cardiac Drugs	A,C-H	A-J	A,B,F-H	C-E

Cardiothoracic Surgery				
Aneurysms, Dissections, & Transections of the Great Vessels	A,C-H	A-J	A,B,F-H	C-E
Postoperative Arrhythmias	A,C-H	A-J	A,B,F-H	C-E
Bleeding, Coagulopathy, & Blood Product, Utilization	A,C-H	A-J	A,B,F-H	C-E
Circulatory Arrest, & Ventricular, Assistance	A,C-H	A-J	A,B,F-H	C-E
Postoperative Low-Output States	A,C-H	A-J	A,B,F-H	C-E
	Pulmonary Dis	ease		
Status Asthmatics	A,C-H	A-J	A,B,F-K	B,C-P
Life-Threatening	A,C-H	A-J	A,B,F-H	C-E
Hemoptysis	A,C-H	A-J	A,B,F-H	C-E
Deep Venous Thrombosis	A,C-H	A-J	A,B,F-I	C-E
Pulmonary Thromboembolism	A,C-H	A-J	A,B,F-I	C-P
Anaphylaxis	A,C-H	A-J	A,B,F-H	C-E
Angioedema	A,C-H	A-J	A,B,F-H	C-E
Endocrine Pro	oblems in the C	critically III Pat	ient	
Thyroid Storm	A,C-H	A-J	A,B,F-H	C-E
Myxedema Coma	A,C-H	A-J	A,B,F-H	C-E
Acute Adrenal Insufficiency	A,C-H	A-J	A,B,F-H	C-E
Sick Euthyroid Syndrome	A,C-H	A-J	A,B,F-H	C-E
Diabetes Mellitus, Hyperglycemia.	A,C-H	A-J	A,B,F-H	C-E
Diabetic Ketoacidosis	A,C-H	A-J	A,B,F-H	C-E

Hyperglycemic Hyperosmolar	A,C-H	A-J	A,B,F-H	C-E
Nonketotic Coma	A,C-H	A-J	A,B,F-H	C-E
Management of the Acutely III Patient with Hyperglycemia or Diabetes Mellitus	A,C-H	A-J	A,B,F-H	C-E
Hyperglycemia	A,C-H	A-J	A,B,F-H	C-E
Hypoglycemia	A,C-H	A-J	A,B,F-H	C-E
Other Complications of Diabetes Mellitus	A,C-H	A-J	A,B,F-H	C-E
Vascular Emergencies in the ICU	A,C-H	A-J	A,B,F-H	C-E
Critical	Care of Neurol	ogic Disease		
Encephalopathy & Coma	A,C-H	A-J	A,B,F-H	C-E
Seizures	A,C-H	A-J	A,B,F-H	C-E
Neuromuscular Disorders	A,C-H	A-J	A,B,F-H	C-E
Cerebrovascular Diseases	A,C-H	A-J	A,B,F-H	C-E
Nei	urosurgical Crit	ical Care		
Head Injuries	A,C-H	A-J	A,B,F-H	C-E
Subarachnoid Hemorrhage	A,C-H	A-J	A,B,F-H	C-E
Tumors of the Central Nervous System	A,C-H	A-J	A,B,F-H	C-E
Cervical Spinal Cord Injuries	A,C-H	A-J	A,B,F-H	C-E
Acute Abdomen	A,C-H	A-J	A,B,F-H	C-E
24.	Gastrointestina	al Bleeding		
Upper Gastrointestinal Bleeding	A,C-H	A-J	A,B,F-I	C-E
Lower Gastrointestinal Bleeding	A,C-H	A-J	A,B,F-I	C-E

Hepatobiliary Disease				
Acute Hepatic Failure	A,C-H	A-J	A,B,F-I	C-E
Acute Gastrointestinal		A-J		C-E
Bleeding from Portal	A,C-H		A,B,F-I	
Hypertension				
Ascites	A,C-H	A-J	A,B,F-H	C-E
Hepatorenal Syndrome	A,C-H	A-J	A,B,F-G	C-E
Liver Resection in Patients	A,C-H	A-J	A,B,F-H	C-E
with Cirrhosis	A,C-11		Α,υ,ι -ι ι	
Poisonings & Ingestions	A,C-H	A-J	A,B,F-H	C-E
Care of Pation	ents with Envir	onmental Inju	ries	
Heat Stroke	A,C-H	A-J	A,B,F-H	C-E
Hypothermia	A,C-H	A-J	A,B,F-H	C-E
Frostbite	A,C-H	A-J	A,B,F-H	C-E
Near-Drowning	A,C-H	A-J	A,B,F-H	C-E
Envenomation	A,C-H	A-J	A,B,F-H	C-E
Electric Shock & Lightning	A,C-H	A-J	A,B,F-H	C-E
Injury			, ,,5,,	
Radiation Injury	A,C-H	A-J	A,B,F-H	C-E
Management of Critical Complications of Pregnancy	A,C-H	A-J	A,B,F-H	C-E
Disorders Fluids, Electrolytes, & Acid-Base	A,C-H	A-J	A,B,F-H	C-E
Malnutrition in the Critically III Patient	A,C-H	A-J	A,B,F-H	C-E
post-operativ	e managemer	nt of the follow	ving:	
Open heart surgery.	B,C-H	A-J	A,B,F-H	C-E
Neurosurgery.	В, С-Н	A-J	A,B,F-H	C-E
Vascular surgery.	B,C-H	A-J	A,B,F-H	C-E
Surgery for transplanted organs.	B,C-H	A-J	A,B,F-H	C-E
Major surgical conditions	B,C-H	A-J	A,B,F-H	C-E

Basic and advanced life support	В,С-Н	A-J	A,B,E	C-E
Indications of admission to ICU	В,С-Н	A-J	A,B	C-E
Vascular access:	B,C-H	A-J	A,B	C-E
Airway management	B,C-H	A-J	A,B,E	B,C-E
Nasal and oral airways	B,C-H	A-J	A,B,D,E	C-E
Laryngeal mask airway	В,С-Н	A-J	A,B,D,E	C-E
Endotraheal tube	B,C-H	A-J	A,B,D,E	C-E
Suction	B,C-H	A-J	A,B,E,J	C-E
Haemodynamic monitoring	В,С-Н	A-J	A-C,D	C-E
Arterial blood pressure	В,С-Н	A-J	A,B,D	C-E
Pulmonary artery pressure	В,С-Н	A-J	А	C-E
Central venous pressure and pulmonary artery wedge pressure.	В,С-Н	A-J	A,B,D	C-E
Arrhythmias	B,C-H	A-J	Α	C-E
Hemodynamic drug infusion	B,C-H	A-J	A,E	C-E
Invasive& noninvasive assessment of arterial blood gases	В,С-Н	A-J	A,B,C,D	C-E
Acid base status	B,C-H	A-J	A-C	C-E
Hypoxaemia and hypercapnia	B,C-H	A-J	A-C	C-E
Pulse oximetry	B,C-H	A-J	A,B	C-E
The most common electrolyte disorders	B,C-H	A-J	A,B	C-E
Hypokalemia	B,C-H	A-J	A,B	C-E
Hypomagnesemia	B,C-H	A-J	A,B	C-E

Hyponatremia	В,С-Н	A-J	A,B	C-E		
Hypocalcaemia.	B,C-H	A-J	A,B	C-E		
Infection in ICU	B,C-H	A-J	A,B	C-E		
Ventilator associated pneumonia	B,C-H	A-J	A,B,K	C-E		
Sepsis syndrome.	B,C-H	A-J	A,B	C-E		
Empirical antibiotic therapy	B,C-H	A-J	А	C-E		
Mechanical ventilation	B,C-H	A-J	A,D,E	C-E		
Objectives of mechanical ventilation	В,С-Н	A-J	А	C-E		
Indications of mechanical ventilation	B,C-H	A-J	А	C-E		
Modes and settings of mechanical ventilation	В,С-Н	A-J	A,D,E	C-E		
Weaning from mechanical ventilation	В,С-Н	A-J	A,E	A,C-E		
Non invasive positive pressure ventilation	В,С-Н	A-J	Α	C-E		
Complications of mechanical ventilation	В,С-Н	A-J	A,E	C-E		
Sedation and muscle relaxants	B,C-H	A-J	А	C-E		
Nutrition	B,C-H	A-J	A,E	C-E		
Entral tube feeding	B,C-H	A-J	A,E	C-E		
Total parenteral nutrition	B,C-H	A-J	A,E	C-E		
Specific management and ventilatory strategies in pulmonary syndromes						
ARDS	A-H	A-J	A,B	A,C-E		
Status asthmatics	A-H	A-J	A,B	C-E		
Acute pulmonary embolism	A-H	A-J	A,B	C-E		

IPF	A-H	A-J	A,B	C-E			
pneumonia	A-H	A-J	A,B	C-E			
Unit 3 Chronic pain management							
Headache	A,C-H	A-I	A-K	A-P			
Cervical and Lumbar Pain	A,C-H	A-I	A-K	A-E			
Abdominal Pain	A,C-H	A-I	A-K	B-E			
Arthritis	A,C-H	A-I	A-K	A-P			
Neuropathic Pain	A,C-H	A-I	A-K	A-E			
Myofascial Pain	A,C-H	A-I	A-K	B-E			
Fibromyalgia	A,C-H	A-I	A-K	B-E			
Cancer pain	A,C-H A-I		A-K	B-E			
Pediatric Pain	A,C-H	A-I	A-K	B-E			
Pregnancy and Pain	A,C-H	A-I	A-K	B-E			
Geriatrics and Chronic Pain	A,C-H	A-I	A-K	B-E			
Gender and Ethnic Issues in Chronic Pain	A,C-H	A-I	A-K	B-E			
Comorbid Conditions							
Psychological Comorbidity	A,C-H	A-I	A-K	B-E			
Obesity and Chronic Pain	A,C-H	A-I	A-K	B-E			
Physiology of pain	В	-					
Molecular Mechanisms of Nociception	В	-					
Different chronic pain syndromes	В	-					
Pharmacology of drugs used to treat different types of pain	В	-					

5. Course methods of teaching/learning:

- 1. Didactic (lectures, seminars, tutorial)
- 2.Outpatient
- 3.Inpatient
- 4. Clinical rounds
- 5. Clinical rotations
- 6.Service teaching
- 7. Direct observation
- 8. Post graduate teaching
- 9. Hand on workshops
- 10. Perform under supervision of senior staff
- 11. Simulations
- 12. Present a case (true or simulated) in a grand round
- 13. Case Taking
- 14. journal club,
- 15. Critically appraised topic,
- 16. Educational prescription
- 17. Observation & supervision
- 18. Written & oral communications

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

- **3.** Extra Didactic (lectures, seminars, tutorial) according to their needs
- 4. Extra training according to their needs

7. Course assessment methods:

i. Assessment tools:

- Clinical examination
- Written
- Oral examination
- > Chick list
- > log book & portfolio
- Procedure/case presentation

- One MCQ examination in f the second year and one in the third year
- ➤ Objective structured clinical examination
- ➤ Check list evaluation of live or recorded performance
- > Record review (report)
- > Patient survey
- 360o global rating
- ii. Time schedule: At the end of the second part
- v. Marks: 1000 marks

8. List of references

i. Lectures notes

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

ii. Essential books

- Morgan G.E, Mikhail M and Murry M., (2016) Clinical anesthesiology, 5th edition, McGraw-Hill Companies, UK, and USA.
- Paul L Marino: The ICU Book (3rd Edition ,2017)
- Dawn A. Marcus: Chronic pain: a primary care guide to practical management (2nd edition, 2014

iii. Recommended books

- David E. Longnecker: Anaesthesiology, (1st edition, 2007)
- Alan R Aitkenhead: Texbook of anaesthesia (5th edition, 2007)
 - Miller R.D., Cucchiara RF et al, (2010): Anesthesia, 5th edition, vol(1).
 - Mechanical Ventilation MacIntyre N R Branson R D 2008
 - Text book of critical care (Shoemaker, 5th edition, 2015)
 - Intensive care medicine (Irwin and Rippe)6th edition, 2008)

• Frederic S. Bongard: Current Diagnosis & Treatment in critical care (3rd edition, 2008)

iv. Periodicals, Web sites, ... etc

- > Periodicals
 - American Journal of Respiratory & Critical Care Medicine
 - Chest
 - BMJ
 - British journal of anesthesia
 - Anesthesia and analgesia
 - Anesthesiology
 - Canadian journal of anesthesia
- **➤** Web Sites:
 - www.frca.co.uk
 - www.nda.ox.ac.uk/wfsa/

v. Others

None

Course Coordinator:	Head of the Department:
Date:	Date:

ANNEX 2 Program Academic Reference Standards (ARS)

1- Graduate attributes for medical doctorate in Anesthesia and postoperative intensive care

The Graduate (after residence training and medical doctorate years of study) must:

- **1-** Demonstrate competency and mastery of basics, methods and tools of scientific research and clinical audit in *Anaesthesia and postoperative intensive care*.
- **2-** Have continuous ability to add knowledge to *Anaesthesia* and postoperative intensive care through research and publication.
- **3-** Appraise and utilise relevant scientific knowledge to continuously update and improve clinical practice.
- **4-** Acquire excellent level of medical knowledge in the basic biomedical, behavioural and clinical sciences, medical ethics and medical jurisprudence and apply such knowledge in patient care and scientific research.
- **5-** Function as a leader of a team to provide patient care that is appropriate, effective and compassionate for dealing with health problems and health promotion.
- **6-** Identify and create solutions for health problems in *Anaesthesia and postoperative intensive care.*
- **7-** Acquire an in depth understanding of common areas of *Anaesthesia and postoperative intensive care*, from basic clinical care to evidence based clinical application, and possession of required skills to manage independently all problems in these areas.

- 8- Demonstrate leadership competencies including interpersonal and communication skills that ensure effective information exchange with individual patients and their families and teamwork with other health professions, the scientific community and the public.
- **9-** Function as teacher in relation to colleagues, medical students and other health professions.
- **10**-Master decision making capabilities in different situations related to *Anaesthesia and postoperative intensive care*.
- 11- Show leadership responsiveness to the larger context of the health care system, including e.g. the organisation of health care, partnership with health care providers and managers, practice of cost-effective health care, health economics, and resource allocations.
- 12- Demonstrate in depth awareness of public health and health policy issues including independent ability to improve health care, and identify and carryout systembased improvement of care.
- 13- Show model attitudes and professionalism.
- **14-** Demonstrate commitment for lifelong learning and maintenance of competence and ability for continuous medical education and learning in subsequent stages and in *Anaesthesia and postoperative intensive care* or one of its subspecialties.
- **15-** Use recent technologies to improve his practice in *Anaesthesia and postoperative intensive care* .
- **16-** Share in updating and improving clinical practice in *Anaesthesia and postoperative intensive care*.

2- Competency based Standards for medical doctorate in Anaesthesia and postoperative intensive care

22.1- Knowledge and understanding

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

- **2-1-A-** Established, updated and evidence- based theories, basics and developments of *Anaesthesia and postoperative intensive care* and relevant sciences.
- 2-1-B- Basics, methods and ethics of medical research.
- **2-1-C** Ethical and medicolegal principles of medical practice related to *Anaesthesia and postoperative intensive care*.
- **2-1-D-** Principles and measurements of quality in *Anesthesia and postoperative intensive care*.
- **2-1-E-** Principles and efforts for maintainace and improvements of public health.

2- Intellectual skills

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

- **2-2-A-** Application of basic and other relevant science to solve Anesthesia and postoperative intensive care related Problems.
- **2-2-B-** Problem solving based on available data.
- **2-2-C-** Involvement in research studies related to *Anesthesia and postoperative intensive care*.
- 2-2-D- Writing scientific papers.
- **2-2-E-** Risk evaluation in the related clinical practice.
- **2-2-F-** Planning for performance improvement in *Anesthesia and postoperative intensive care*.
- **2-2-G-** Creation and innovation in *Anesthesia and postoperative intensive care*.
- 2-2-H- Evidence based discussion.
- **2-2-I-** Decision making in different situations related to *Anesthesia and postoperative intensive care.*

2.3- Clinical skills

By the end of the program, the graduate should be able to Competency-based outcomes for Patient Care:-

- **2-3-A-** MD students must be able to provide extensive level of patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health extensive level means in depth understanding and from basic science to evidence based clinical application and possession of skills to manage independently all problems in *Anesthesia and postoperative intensive care*.
- **2-3-B-** Master patient care skills relevant to *Anesthesia and postoperative intensive care* for patients with all diagnoses and procedures.
- **2-3-C-** Write and evaluate reports for situations related to the *Anesthesia and postoperative intensive care*.

2.4- General skills

By the end of the program, the graduate should be able to Competency-based outcomes for Practice-based Learning and Improvement

- **2-4-A-**Master practice-based learning and improvement skills that involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence, improvements in patient care and risk management
- **2-4-B-** Use competently all information sources and technology to improve his practice.
- 2-4-C- Master skills of teaching and evaluating others.

Competency-based objectives for Interpersonal and Communication Skills

2-4-D-Master interpersonal and communication skills that result in effective information exchange and teaming with patients, their families, and other health professionals.

Lesson : Competency-based objectives for Professionalism

- **2-4-E-**Master Professionalism behavior, as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.
 - Competency-based objectives for Systems-based Practice:
- **2-4-F-**Demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively use system resources to provide care that is of optimal value.
- 2-4-G- Participate in improvement of the education system.
- **2-4-H-** Demonstrate skills of leading scientific meetings including time management
- 2-4-O- Demonstrate skills of self and continuous learning.

Annex 3, Methods of teaching/learning

Annex 3, Methods of teaching/learning

	Patient care	knowledge	Practice- based learning/ Improvement	and communication	Professionalism	Systems- based practice
Didactic (lectures, seminars, tutorial)	X	X		X	X	X
journal club,	Х	X	X			
Educational prescription	X	Х	Х	Х	Х	X
Present a case (true or simulated) in a grand round		X	X	X	X	
Observation and supervision	Х		X	Х	X	Х
conferences		Х	Х	Х		Х
Written assignments	Х	Х	Х	Х	Х	Х
Oral assignments	X	Х	Х	Х	X	X

Teaching methods for knowledge

- Didactic (lectures, seminars, tutorial)
- journal club
- Critically appraised topic
- Educational prescription (a structured technique for following up on clinical questions that arise during rounds and other venues).
- Present a case (true or simulated) in a grand round
- Others

Teaching methods for patient care

- Observation and supervision /Completed tasks procedure/case logs
- On-the-job" training without structured teaching is not sufficient for this skill (checklists).
- Simulation is increasingly used as an effective method for skill/teamwork training.

Teaching methods for other skills

- Written communication (e.g., orders, progress note, transfer note, discharge summary, operative reports, and diagnostic reports).
- Oral communication (e.g., presentations, transfer of care, interactions with patients, families, colleagues, members of the health care team) and/or non verbal skills (e.g., listening, team skills)
- ❖ Professionalism, including medical ethics, may be included as a theme throughout the program curriculum that includes both didactic and experiential components (e.g., may be integrated into already existing small group discussions of vignettes or case studies and role plays, computer-based modules) and may be modeled by the faculty in clinical practice and discussed with the resident as issues arise during their clinical practice.

Annex 4, Assessment methods

Annex 4, ILOs evaluation methods for MD students.

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

Annex 4, Glossary of MD students assessment methods

- Record Review Abstraction of information from patient records, such as medications or tests ordered and comparison of findings against accepted patient care standards.
- Chart Stimulated Recall Uses the MD doctor's patient records in an oral examination to assess clinical decisionmaking.
- Mini clinical evaluation: Evaluation of Live/Recorded Performance (single event) – A single resident interaction with a patient is evaluated using a checklist. The encounter may be videotaped for later evaluation.
- ❖ Standardized Patients (SP) Simulated patients are trained to respond in a manner similar to real patients. The standardized patient can be trained to rate MD doctor's performance on checklists and provide feedback for history taking, physical examination, and communication skills. Physicians may also rate the MD doctor's performance.
- ❖ Objective Structured Clinical Examination (OSCE) A series of stations with standardized tasks for the MD doctors to perform. Standardized patients and other assessment methods often are combined in an OSCE. An observer or the standardized patient may evaluate the MD doctors.
- ❖ Procedure or Case Logs MD doctors prepare summaries of clinical experiences including clinical data. Logs are useful to document educational experiences and deficiencies.
- PSQs Patients fill out Patient Survey questionnaires (PSQs) evaluating the quality of care provided by MD doctors.

- Case /problems assess use of knowledge in diagnosing or treating patients or evaluate procedural skills.
- Models: are simulations using mannequins or various anatomic structures to assess procedural skills and interpret clinical findings. Both are useful to assess practice performance and provide constructive feedback.
- ❖ 360 Global Rating Evaluations MD doctors, faculty, nurses, clerks, and other clinical staff evaluate MD doctors from different perspectives using similar rating forms.
- ❖ Portfolios A portfolio is a set of project reports that are prepared by the MD doctors to document projects completed during the MD study years. For each type of project standards of performance are set. Example projects are summarizing the research literature for selecting a treatment option, implementing a quality improvement program, revising a medical student clerkship elective, and creating a computer program to track patient care and outcomes.
- Examination MCQ A standardized examination using multiple-choice questions (MCQ). The in-training examination and written board examinations are examples.
- ❖ Examination Oral Uses structured realistic cases and patient case protocols in an oral examination to assess clinical decision-making.
- Procedure or Case Logs MD doctors prepare summaries of clinical experiences including clinical data. Logs are useful to document educational experiences and deficiencies.
- ❖ PSQs Patients fill out Patient Survey questionnaires (PSQs) evaluating the quality of care provided by MD doctors.

Annex 5, program evaluation tools

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

Annex 6, program Correlations:

مصفوفة توافق المعايير القومية القياسية العامة لبرامج الدكتوراه مع المعايير الأكاديمية المعتمدة من كلية الطب – جامعة أسوان لدرجة الدكتوراه في التخدير و العناية المركزة

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

1-

Graduate attributes

Faculty ARS	NAQAAE General ARS for Postgraduate Programs
1- Demonstrate competency and mastery of basics, methods and tools of scientific research and clinical audit in Anesthesia and postoperative intensive care.	1-إنقان أساسيات و منهجيات البحث العلمي
2- Have continuous ability to add knowledge new developments to Anesthesia and postoperative intensive care through research and publication.	2-العمل المستمر علي الإضافة للمعارف في مجال التخصص
3- Appraise and utilise scientific knowledge to continuously update and improve clinical practice and relevant basic sciences.	3-تطبيق المنهج التحليلي والناقد للمعارف في مجال التخصص و المجالات ذات العلاقة
4- Acquire excellent level of medical knowledge in the basic biomedical, clinical, behavioural and clinical sciences, medical ethics and medical jurisprudence and apply such knowledge in patient care and scientific	4- مج المعارف المتخصصة مع المعارف ذات العلاقة مستنبطا و مطورا للعلاقات البينية بينها
 5- Function as a leader of a team to provide patient care that is appropriate, compassionate for dealing with effective and health Problems and health promotion. 7- Acquire an in depth understanding of common areas of speciality, from basic clinical care to evidence based clinical application, and 	5-إظهار وعيا عميقا بالمشاكل الجارية و النظريات الحديثة في مجال التخصص
possession of skills to manage independently all problems in these areas. 6- Identify and create solutions for health problems in Anesthesia and postoperative intensive care.	6-تحديد المشكلات المهنية و إيجاد حلولا مبتكرة لحلها
5- Function as a leader of a team to	7-إنقان نطاقا واسعا من المهارات المهنية في

provide patient care that is appropriate,	مجال التخصص
effective and compassionate for dealing with	
health	
problems and health promotion.	
7- Acquire an in depth understanding of	
common areas of Anesthesia and	
postoperative intensive care , from basic	
clinical care to evidence based clinical	
application, and possession of skills to	
manage independently all problems in these	
areas.	
16- Share in updating and improving clinical	8- التوجه نحو تطوير طرق و أدوات و
practice in Anesthesia and postoperative	
intensive care.	أساليب جديدة للمزاولة المهنية
9- Function as teacher in relation to colleagues,	
medical students and other health	
professions.	
15- Use recent technologies to improve his	9-استخدام الوسائل التكنولوجية المناسبة بما
practice in Anesthesia and postoperative	TO THE TOTAL PARTY OF THE PARTY
intensive care.	يخدم ممارسته المهنية
8- Demonstrate leadership competencies	10-التواصل بفاعلية و قيادة فريق عمل في
including interpersonal and communication	C. C
skills that ensure effective information	سياقات مهنية مختلفة
exchange with individual patients and their	
families and teamwork with other health	
professions, the scientific community and the	
public.	
5- Function as a leader of a team to	
provide patient care that is appropriate,	
effective and compassionate for dealing with	
health problems and health promotion.	
10- Master decision making capabilities in	11-اتخاذ القرار في ظل المعلومات المتاحة
different situations related to Anesthesia and	عاد حرو ي
postoperative intensive care.	
11- Show leadership responsiveness to the	12-توظيف الموارد المتاحة بكفاءة و تتميتها
larger context of the health care system,	والعمل على إيجاد موارد جديدة
including e.g. the organisation of health care,	والعمل على إيجاد موارد جديده
partnership with health care providers and	
managers, practice of cost-effective health	
care, health economics, and resource	
allocations.	

12- Demonstrate in depth awareness of public health and health policy issues including independent ability to improve health care, and identify and carryout system-based improvement of care.	13-الوعي بدوره في تتمية المجتمع والحفاظ على البيئة
13- Show model attitudes and professionalism.	14-التصرف بما يعكس الالتزام بالنزاهة و المصداقية و قواعد المهنة
 14- Demonstrate commitment for lifelong learning and maintenance of competence and ability for continuous medical education and learning in subsequent stages and in Anesthesia and postoperative intensive care or one of its subspecialties. 15- Use recent technologies to improve his practice in Anesthesia and postoperative intensive care. 	15-الالتزام بالتنمية الذاتية المستمرة و نقل علم علمه و خبراته للأخرين

2- Academic standards

Faculty ARS	NAQAAE General ARS for
•	Postgraduate Programs
A- Established, updated and evidence- based theories, basics and developments of Anesthesia and postoperative intensive care and relevant sciences.	2-1-أ- النظريات و الأساسيات والحديث من المعارف في مجال التخصص والمجالات ذات العلاقة
2.1. B- Basic, methods and ethics of medical research.	2-1-ب -أساسيات و منهجيات و أخلاقيات البحث العلمي و أدواته المختلفة
2.1. C- Ethical and medicologal principles of medical practice related to C Anesthesia and postoperative intensive care.	2-1-ج- المبادئ الأخلاقية و القانونية للممارسة المهنية في مجال التخصص
 D- Principles and measurements of quality in Anesthesia and postoperative intensive care. 	2-1-د مبادئ و أساسيات الجودة في الممارسة المهنية في مجال التخصص
2.1. E- Principles and efforts for maintains and improvements of public health.	2-1-هـ - المعارف المتعلقة بأثار ممارسته المهنية على البيئة وطرق تتمية البيئة وصيانتها
2.2. A- Application of basic and other relevant science to solve Anesthesia and postoperative intensive care related problems.	2-2-أ -تحليل و تقييم المعلومات في مجال التخصص و القياس عليها و الاستنباط منها
2.2.B- Problem solving based on available data.	2-2-ب - حل المشاكل المتخصصة استنادا علي المعطيات المتاحة
2.2.C- Involvement in research studies related to Anesthesia and postoperative intensive care	2-2-ج -إجراء دراسات بحثية تضيف إلى المعارف
2.2. D- Writing scientific papers.	2-2-د- صياغة أوراق علمية
2.2. E- Risk evaluation in the related clinical practice	2-2—ه تقييم المخاطر في الممارسات المهنية
2.2.F- Planning for performance improvement in Anesthesia and postoperative intensive care.	2-2-و -التخطيط لتطوير الأداء في مجال التخصص
2-2-G- Creation and innovation in the Anesthesia and postoperative intensive care.	2-2-ز - الابتكار /الإبداع
2.2. H- Evidence – based discussion.	2-2-ح- الحوار والنقاش المبني علي البراهين
	والأنلة

 2.2.I- Discussion making in different situations related to Anesthesia and postoperative intensive care. 2.3. A- MD students must be able to provide extensive level of patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health extensive level means in depth understanding and from basic science to evidence – based clinical application and possession of skills to manage independently all problems in Anesthesia and postoperative intensive care. 2.3. B- Master patient care skills relevant to Anesthesia and postoperative intensive care or patients with all diagnoses and procedures. 	2-2-ط -اتخاذ القرارات المهنية في سياقات مهنية مختلفة 2-2-أ -إنقان المهارات المهنية الأساسية و الحديثة في مجال التخصص
2.3. C- Write and evaluate reports for situations related to the field of Anesthesia and postoperative intensive care. 2.4.A-Master practice-based learning and improvement skills that involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence, improvements in patient care and risk management	2-3-ب- كتابة و تقييم النقارير المهنية. 2-3-ج -تقييم و تطوير الطرق و الأدوات القائمة في مجال التخصص
2.4.B- Use competently all information sources and technology to improve his practice.	2-3-د - استخدام الوسائل التكنولوجية بما يخدم الممارسة المهنية
2.4.A-Master practice-based learning and improvement skills that involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence, improvements in patient care and risk management 2.4.G- Participate in improvement of the education system.	2-3-هـ -التخطيط لتطوير الممارسة المهنية وتنمية أداء الآخرين

Comparison between ARS- ILOS for medical doctorate for Anesthesia and postoperative intensive care

(ARS)	(ILOs)
2-1- Knowledge and understanding	2-1- Knowledge and understanding
2-1-A- Established, updated and evidence-based Theories, Basics and developments of Anesthesia and postoperative intensive care and relevant sciences.	2-1-A- Demonstrate in-depth knowledge and understanding of theories, basics and updated biomedical, clinical epidemiological and socio behavioral science relevant to his speciality as well as the evidence — based application of this knowledge to patient care.
2-1-B Basic, methods and ethics of medical research.	2-1-B- Explain basics, methodology, tools and ethics of scientific medical, clinical research.
2-1-C- Ethical and medicologal principles of medical practice related to Anesthesia and postoperative intensive care field.	2-1-C- Mention ethical, medico logical principles and bylaws relevant to his practice in the field of Anesthesia and postoperative intensive care.
2-1-D- Principles and measurements of quality in the Anesthesia and postoperative intensive care field.	2-1-D- Mention principles and measurements of quality assurance and quality improvement in medical education and in clinical practice of Anesthesia and postoperative intensive care.
2-1-E -Principles and efforts for maintains and improvements of public health.	2-1-E- Mention health care system, public health and health policy, issues relevant to this speciality and principles and methods of system – based improvement of patient care in common health problems of the field of Anesthesia and postoperative intensive care
2-2- Intellectual skills:	2-2- Intellectual skills:
2-2-A-Application of basic and other	2-2-A- Apply the basic and clinically supportive

relevant science to solve	sciences which are appropriate to
Anesthesia and postoperative	Anesthesia and postoperative intensive
intensive care related problems.	care related conditions / problem /
	topics.
2-2-B- Problem solving based on	2-2-B- Demonstrate an investigatory and
available data.	analytic thinking "problem –
	solving "approaches to clinical
	situation related to Anesthesia and
	postoperative intensive care.
2-2-C- Involvement in research studies	2-2-C- Plan research projects.
related to the Anesthesia	
and postoperative intensive care.	
2-2-D Writing scientific papers.	2-2-D- Write scientific paper.
2-2-E -Risk evaluation in the related	2-2-E- Participate in clinical risk
clinical practice.	management as a part of clinical
	governance.
2-2-F-Planning for performance	2-2-F- Plan for quality improvement in the field
improvement in the Anesthesia	of medical education and clinical practice
and postoperative intensive care	in Anesthesia and postoperative intensive
field.	care
neid.	care
2-2-G- Creation and innovation in the	2-2-G- Create / innovate plans, systems, and
speciality field.	other issues for improvement of
opcononcy menan	performance in his practice.
2-2-H- Evidence – based discussion.	2-2-H- Present and defend his / her data in
II _ II delice	front of a panel of experts.
2-2-I -Decision making in different	2-2-I- Formulate management plans and
situations related to Anesthesia	alternative decisions in different
and postoperative intensive care	situations in the field of the Anesthesia
fields.	
ileius.	and postoperative intensive care.

continuous

2-3- Clinical skills:

- 2-3-A- MD students must be able to provide extensive level of patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health extensive level means in depth understanding and from basic science to evidence based clinical application and possession of skills to manage independently all problems in his field of practice.
- **2-3-B-** Master patient care skills relevant to Anesthesia and postoperative intensive care for patients with all diagnoses and procedures.

2/3/1/Practical skills (Patient care :)

continuous

- 2-3-1-A- Provide extensive level of patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. p.s. Extensive level means in-depth understanding from basic science to evidence based clinical application and possession of skills to manage independently all problems in field of practice.
- **2-3-1-B-** Provide extensive level of patient care for patients with all common diagnoses and for uncomplicated procedures related to Anesthesia and postoperative intensive care.
- 2-3-1-C- Provide extensive level of patient care for non-routine, complicated patients and under increasingly difficult circumstances, while demonstrating compassionate, appropriate and effective care.
- 2-3-1-D- Perform diagnostic and therapeutic procedures considered essential in the field of Anesthesia and postoperative intensive care
- 2-3-1-E- Handles unexpected complications, while demonstrating compassion and sensitivity to patient needs and concerns.
- 2-3-1-F- Communicate effectively and demonstrate caring and respectful behaviors when interacting with patients and their families in the Anesthesia and postoperative

- intensive care related situations.
- **2-3-1-G-** Gather essential and accurate information about patients of the Anesthesia and postoperative intensive care related conditions.
- 2-3-1-H Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence and clinical judgment for the Anesthesia and postoperative intensive care related conditions.
- **2-3-1-I-** Develop and carry out patient management plans for Anesthesia and postoperative intensive care related conditions.
- **2-3-1-J-** Counsel and educate patients and their families about Anesthesia and postoperative intensive care related conditions.
- 2-3-1-K- Use information technology to support patient care decisions and patient education in all Anesthesia and postoperative intensive care related clinical situations.
- 2-3-1-L- Perform competently all medical and invasive procedures considered essential for the Anesthesia and postoperative intensive care related conditions / area of practices.
- **2-3-1-M-** Provide health care services aimed at preventing the Anesthesia and postoperative intensive care related health problems.
- **2-3-1-N-** Lead health care professionals,

	including those from other disciplines, to provide patient-focused care in Anesthesia and postoperative intensive care related conditions.
2-3-C- Write and evaluate reports for situations related to the field of Anesthesia and postoperative intensive care.	2-3-1-O- Write competently all forms of patient charts and sheets including reports evaluating these charts and sheets. (Write and evaluate a consultation note, Inform patients of a diagnosis and therapeutic plan, completing and evaluating comprehensive timely and legible medical records).
2-4- General skills	2/3/2 General skills
2-4-A- Master practice-based learning and improvement skills that involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence, improvements in patient care and risk	2-3-2-A- Demonstrate the competency of continuous evaluation of different types of care provision to patients in the different area of Anesthesia and postoperative intensive care.
management	2-3-2-B- Appraise scientific evidence.
	 2-3-2-C- Continuously improve patient care based on constant self-evaluation and <u>life-long learning</u>. 2-3-2-D. Participate in clinical audit and research projects.
	2-3-2-E- Practice skills of evidence-based Medicine (EBM).
	2-3-2-G- Design logbooks.
	 2-3-2-H- Design clinical guidelines and standard protocols of management. 2-3-2-I- Appraise evidence from scientific studies related to the patients' health problems.

2-4-B- Use competently all information sources and technology to improve his practice.	 2-3-2-J- Apply knowledge of study designs and statistical methods to the appraisal of clinical studies. 2-3-2-K- Use information technology to manage information, access online medical information; for the important topics.
2-4-C- Master skills of teaching and evaluating others.	2-3-2-F- Educate and evaluate students, residents and other health professionals.
2-4-D- Master interpersonal and communication Skills that result in effective information exchange and teaming with patients, their families, and other health professionals.	2-3-2-L- Master interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals, including:- • Present a case.
	 Write a consultation note. Inform patients of a diagnosis and therapeutic plan Completing and maintaining comprehensive. Timely and legible medical records. Teamwork skills.
	2-3-2-M - Create and sustain a therapeutic and ethically sound relationship with patients.
	2-3-2-N - Elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills.
	2-3-2-O- Work effectively with others as a member or leader of a health care team or other professional group.
2-4-E- Master Professionalism behavior, as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse	2-3-2-P- Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society.2-3-2-Q- Demonstrate a commitment to
patient population.	ethical principles including

	provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices. 2-3-2-R- Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities.
2-4-F- Demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively use system resources to provide care that is of optimal value.	2-3-2-S- Work effectively in health care delivery settings and systems related to Anesthesia and postoperative intensive care including good administrative and time management.
2-4-G - Participate in improvement of the education system.	2-3-2-T- Practice cost-effective health care and resource allocation that does not compromise quality of care.
	2-3-2-U- Advocate for quality patient care and assist patients in dealing with system complexities.
	2-3-2-V- Design, monitor and evaluate specification of under and post graduate courses and programs.
2-4-H- Demonstrate skills of leading scientific meetings including time management	2-3-2-W- Act as a chair man for scientific meetings including time management 2-3-2-S- Work effectively in health care delivery settings and systems related to Anesthesia and postoperative intensive care including good administrative and time management.
2-4-O- Demonstrate skills of self and continuous learning .	From A to H

III-Program matrix Knowledge and understanding

Course	Program covered ILOs								
	2/1/A	2/1/B	2/1/C	2/1/D	2/1/E				
Course 1 : Medical statistics		✓							
Course 2 : Research Methodology		✓							
Course 3 : Medicolegal Aspects and Ethics in Medical Practice and Scientific Research			>						
Course 4 Anesthesia and Intensive Care 1(Pharmacology& Physiology & Physics and Clinical Measurements)	√								
Course 5: Anesthesia and intensive care 2	✓	√	√	√	√				

Intellectual

Course	Program covered ILOs								
	2/2/A	2/2/B	2/2/C	2/2/D	2/2/E	2/2/F	2/2/G	2/2/H	2/2/1
Course 1 : Medical statistics			>	>				>	
Course 2 : Research Methodology			>	>				\	
Course 3: Medicolegal Aspects and Ethics in Medical Practice and Scientific Research								\	
Course 4 Anesthesia and Intensive Care 1(Pharmacology& Physiology & Physics and Clinical Measurements)	>	>							
Course 5: Anesthesia and intensive care 2	✓	√	✓	✓	√	√	✓	√	√

Practical Skills (Patient Care)

Course		Program covered ILOs							
	2/3/1/A	2/3/1/B	2/3/1/C	2/3/1/D	2/3/1/E	2/3/1/F	2/3/1/G	2/3/1/H	
Course 1:									
Medical									
statistics									
Course 2 :									
Research									
Methodolog									
У									
Course 3:				✓				✓	
Medicolegal									
Aspects and									
Ethics in									
Medical									
Practice and									
Scientific									
Research									
Course 4									
Anesthesia									
and Intensive									
Care									
1(Pharmacol									
ogy&									
Physiology									
& Physics									
and Clinical									
Measuremen									
ts)									
Course 5:	√	✓	✓	✓	√	√	✓	✓	
Anesthesia									
and									
intensive									
care 2									

Course	Program covered ILOs							
	2/3/1/I	2/3/1/J	2/3/1/K	2/3/1/L	2/3/1/M	2/3/1/N	2/3/1/0	
Course 1:								
Medical statistics								
Course 2:								
Research								
Methodology								
Course 3:	√						✓	
Medicolegal								
Aspects and								
Ethics in Medical								
Practice and								
Scientific								
Research								
Course 4								
Anesthesia and								
Intensive Care								
1(Pharmacology&								
Physiology								
& Physics and								
Clinical								
Measurements)								
Course 5:	√	√	√	√	√	<u> </u>	√	
Anesthesia and								
intensive care 2								

General Skills

Course	Program covered ILOs							
	2/3/2/A	2/3/2/B	2/3/2/C	2/3/2/D	2/3/2/E	2/3/2/F	2/3/2/G	2/3/ 2/H
Course 1 : Medical statistics		√						
Course 2 : Research Methodology		√		~	✓			
Course 3: Medicolegal Aspects and Ethics in Medical Practice and Scientific Research								
Course 4 Anesthesia and Intensive Care 1(Pharmacology & Physiology & Physics and Clinical Measurements)								
Course 5: Anesthesia and intensive care 2	√	√	√	√	√	√	√	√

General Skills

Course		Program covered ILOs							
	2/3/2/I	2/3/2/J	2/3/2/K	2/3/2/L	2/3/2/M	2/3/2/N	2/3/2/0	2/3/ 2/P	
Course 1 : Medical statistics	√	√	\						
Course 2 : Research Methodology	√	√							
Course 3: Medicolegal Aspects and Ethics in Medical Practice and Scientific Research				>					
Course 4 Anesthesia and Intensive Care 1(Pharmacology & Physiology & Physics and Clinical Measurements)			>	>					
Course 5: Anesthesia and intensive care 2	√	√	√	√	✓	√	√	✓	

General Skills

Course	Program covered ILOs						
	2/3/2/Q	2/3/2/R	2/3/2/S	2/3/2/T	2/3/2/U	2/3/2/V	2/3/2/W
Course 1 : Medical statistics							
Course 2 : Research Methodology							
Course 3: Medicolegal Aspects and Ethics in Medical Practice and Scientific Research							
Course 4 Anesthesia and Intensive Care 1(Pharmacology& Physiology & Physics and Clinical Measurements)	√		>				
Course 5: Anesthesia and intensive care 2	√	\	>	✓	√	>	√

Annex 7, Additional information:

Department information

- Post-operative and Trauma ICU 17 beds
- 14 operative rooms

Staff members:

Head of the Department: Assist. Prof. Huda Fahmy Mahmoud

Staff members:

- 1- Dr. Ayman El-Demerdash
- 2- Dr. Mahmoud Hassan
- 3- Dr. Mohamed Kamel
- 4- Dr. Ahmed Abdel-Raheem
- 5- Dr. Saudi Salah
- 6- Dr. Tarek Sayed

- 28- Dr.Ola Mahmoud Wahba
- **30- Dr. Khaled Mohamad Morsy**
- 31- Dr. Halla Mohammed Hashem
- 32- Dr. Sayed Kaoud Abd Elshafy

The operative lists achieved by the whole anesthetic team in our hospital per week include:

- 1] Plastic surgery (average of 40 cases per week in the lists)
- 2] Vascular surgery (average of 15-20 cases per week in the lists)
- 3] Neurosurgery (average of 15-20 cases per week in the lists)
- 4] Cardiothoracic surgery (average of 6 cases per week in the lists)
- 5] ENT and Ophthalmic surgery (average of 40 cases per week in the lists)
- 6] Orthopedic surgery (average of 70 cases per week in the lists)
- 7] Obstetrics and Gynecological surgery (average of 15-20 cases per week in the lists)
- 8] Genitourinary tract surgery (average of 50 cases per week in the lists)
- 9] General Surgery (average of 50 cases per week in the lists)
- 10] Endoscopic Surgery (average of 15-20 cases per week in the lists)
- 11) Pediatric general surgery (average of 20-25 cases per week in the lists)
- !2) Pediatric open Heart surgery (average of 4 cases per week in the lists)
- 13) Trauma surgery (average of 50-60 cases per week in the lists)

Department quality control insurance for completing the program

- Evaluation by the Department head and stuff members.
- Regular assessments.
- Log book monitoring.
- Recent equipments and Specialized Units.

(End of the program specifications)