Joint Collaborative Academic Program of Rawalpindi Medical University and Al Azhar University for Gaza students

Preamble

In the face of adversity, the pursuit of knowledge remains unwavering. For the students of Al-Azhar University, a renowned institution steeped in academic excellence, the ongoing conflict in their home country has brought significant challenges to their education. Forced to leave behind the familiar halls of their university, many have sought refuge in alternative pathways to continue their medical education and fulfill their aspirations of becoming compassionate, skilled healthcare professionals.

As the war continues to disrupt normal life and educational institutions, the students of Al-Azhar University have turned to Rawalpindi Medical University in Pakistan—a respected institution with a rich history of producing competent doctors and healthcare leaders. Rawalpindi Medical University, with its state-of-the-art facilities, diverse student body, and strong academic framework, has opened its doors to these students, providing them with an opportunity to pursue their medical degrees amidst uncertain circumstances.

This act of resilience and determination is not merely a testament to the indomitable spirit of these young scholars but also to the power of global academic collaboration in times of crisis. As they embark on this new chapter of their academic journey, these students carry with them not only the hopes of their families but also the aspirations of their communities, who continue to look to them as future leaders in the field of medicine. Through perseverance and dedication, they will overcome the challenges of displacement, continuing their education and ultimately contributing to the healing of a world ravaged by conflict.

Word By Vice Chancellor

Prof. Dr. Muhammad Umar (Sitara-e-Imtiaz)

Vice Chancellor, RMU & Allied hospitals

It is with great pride and a deep sense of responsibility that we welcome the students of Al-Azhar University to Rawalpindi Medical University in these challenging times. The world has witnessed immense hardship as conflict disrupts the lives and futures of countless individuals, and it is with a spirit of solidarity and compassion that we extend our support to these dedicated medical students, who, despite the adversity they face, have shown remarkable resilience in their pursuit of knowledge.

The collaboration between our institutions is a testament to the strength of global academic partnerships. It highlights the enduring power of education, which transcends borders, conflict, and hardship. Rawalpindi Medical University has always believed in the transformative power of learning, and we are honored to provide a safe, supportive environment where these students can continue their medical studies, grow in their knowledge, and ultimately fulfill their dreams of serving humanity as healthcare professionals.

Our university has a long tradition of nurturing talent and fostering academic excellence. In welcoming the students of Al-Azhar University, we reaffirm our commitment to upholding these values, not only for the students who are part of this collaboration but also for the communities they will one day serve. These young scholars bring with them academic potential and the strength of character and determination born out of their experiences in these turbulent times. We believe that through our combined efforts, they will emerge as doctors and symbols of hope, resilience, and healing for a world in need.

I extend my heartfelt gratitude to all those who have worked tirelessly to make this collaboration possible. Let this partnership serve as a reminder that, even in the face of great challenges, we can find ways to work together and support each other. To the students of Al-Azhar University, know that you are not alone in this journey. We are with you every step of the way, and we are proud to be part of your educational path during this critical moment in history.

Together, we will heal, we will learn, and we will emerge stronger.

Word by Principal

Prof Jahangir Sarwar Khan

Principal RMC

It is an honor to welcome the students of Al-Azhar University to Rawalpindi Medical University. In these difficult times, when conflict has forced many to seek refuge far from home, we stand united in our commitment to education and the future of healthcare.
This collaboration is a symbol of resilience, compassion, and shared purpose. By providing these talented students with the opportunity to continue their medical studies, we are not only helping them pursue their dreams but also nurturing the next generation of doctors who will heal and uplift their communities, wherever they may be.
We are proud to support these students in their academic journey and are confident that, together, we will build a brighter future through education, collaboration, and unwavering determination.

Word by Professor Incharge

Prof Nasir Khan

Dean Diagnostics, Prof Incharge Al Azhar RMU program

In the spirit of scholarly collaboration, this joint academic initiative aims to provide students, researchers, and faculty from both institutions with a unique opportunity to engage in shared learning, innovative research, and the exchange of knowledge across disciplines. By coming together, we unite the rich intellectual traditions of Al-Azhar University, one of the oldest and most esteemed educational institutions in the world, with the cutting-edge academic approaches of RMU. As the Professor-in-Charge of this initiative, I am deeply committed to overseeing the smooth execution of this collaboration and ensuring that its outcomes are meaningful for all involved. Together, we will provide an environment that encourages intellectual curiosity, nurtures creativity, and strengthens the bonds of mutual respect and understanding.

Word by Authors

As authors and contributors to this important academic collaboration between **RMU** and **Al-Azhar University**, we are honored to offer our thoughts and reflections on this momentous occasion. The joint academic session before you marks not only a significant step in academic partnership but also a profound opportunity to bridge the knowledge, traditions, and expertise of our two esteemed institutions.
At the heart of this collaboration lies a shared belief in the power of education to transform individuals, communities, and societies. The merging of the rich intellectual heritage of **Al-Azhar University** with the dynamic, forward-thinking academic environment of **RMU** creates a unique platform for innovation and growth. Through this partnership, we aim to promote cross-disciplinary research, enhance learning experiences, and encourage deeper cultural understanding.
The works and research presented within this document represent the dedication, passion, and hard work of many individuals from both universities. Each contribution is a reflection of the commitment we share to advancing knowledge and addressing some of the pressing challenges of our time. Our collaborative efforts span a variety of fields—ranging from science and technology to social sciences, humanities, and Islamic studies—and embody the diverse strengths of our institutions.
As authors, we recognize the importance of our collective responsibility in shaping the academic and intellectual futures of the students and communities we serve. The joint academic session is a testament to our belief in the power of partnerships that transcend geographical, cultural, and disciplinary boundaries. We believe that the knowledge exchanged in this session will not only deepen our academic understanding but will also foster lasting relationships among scholars, researchers, and students across borders.
We extend our deepest gratitude to the leadership, faculty, and students of both **RMU** and **Al-Azhar University** for their unwavering support and participation in this endeavor. We also express our appreciation for the organizers and all those who have worked tirelessly to bring this session to fruition.

Dr Mehwish Riaz
Assistant Professor Community Medicine
Coordinator for Al Azhar RMU Program

Dr Omaima Asif
Assistant Director DME, RMU
DME Coordinator for Al Azhar RMU Program

Objectives

Enhanced academic skills	• Ensure seamless transition of Al Azhar University students into RMU's academic and clinical system
Skill development	• Foster the development of clinical,academic and professional competencies
Psychological support	• Address the psychological and emotional needs of Al Azhar University students

Introduction

This document outlines the academic and administrative framework supporting the integration of medical students from Al-Azhar University into Rawalpindi Medical University, following the ongoing conflict in their home country. As these students continue their medical education under extraordinary circumstances, we must provide a comprehensive overview of their demographics, clinical and psychological assessments, and the adapted curriculum designed to ensure their academic success and well-being.

Demographics

The students of Al-Azhar University who have sought to continue their studies at Rawalpindi Medical University represent a diverse group, each with their own unique academic and personal backgrounds. This section provides a detailed profile of the student body, including their age, academic standing, and previous medical training. Understanding the demographics of these students is essential for tailoring academic support, facilitating their integration into campus life, and fostering an environment that promotes mutual understanding and respect among all learners.

Clinical and Psychological Assessment

The displacement caused by the ongoing conflict has impacted the students in various ways, and as such, their clinical and psychological needs must be carefully assessed and addressed. This section highlights the initial clinical evaluations conducted to assess their health and fitness for continuing medical training. In addition, it provides a psychological assessment to evaluate the emotional and mental well-being of these students, many of whom have faced trauma, stress, and uncertainty. The goal is to ensure that each student receives the necessary support to thrive academically and emotionally in their new environment.

Curriculum Adaptation and Support

Given the unique circumstances of these students, the curriculum at Rawalpindi Medical University has been adapted to meet their academic needs while ensuring continuity in their medical education. This section outlines the structure of the modified curriculum, including key areas of focus, courses, and clinical exposure tailored to help these students catch up on missed content while maintaining the high standards of medical education that Rawalpindi Medical University is known for. Additionally, it highlights the academic support systems in place, such as tutoring, mentoring, and counseling services, to ensure that these students have the resources they need to succeed.

This document serves as a comprehensive guide to the integration process for the students of Al-Azhar University, providing an overview of their demographics, clinical and psychological assessments, and the curriculum designed to support their continued medical education. Through this collaborative effort, Rawalpindi Medical University remains steadfast in its commitment to fostering an inclusive, supportive, and academically rigorous environment for all students, particularly in times of crisis.

Section I

Students Profile

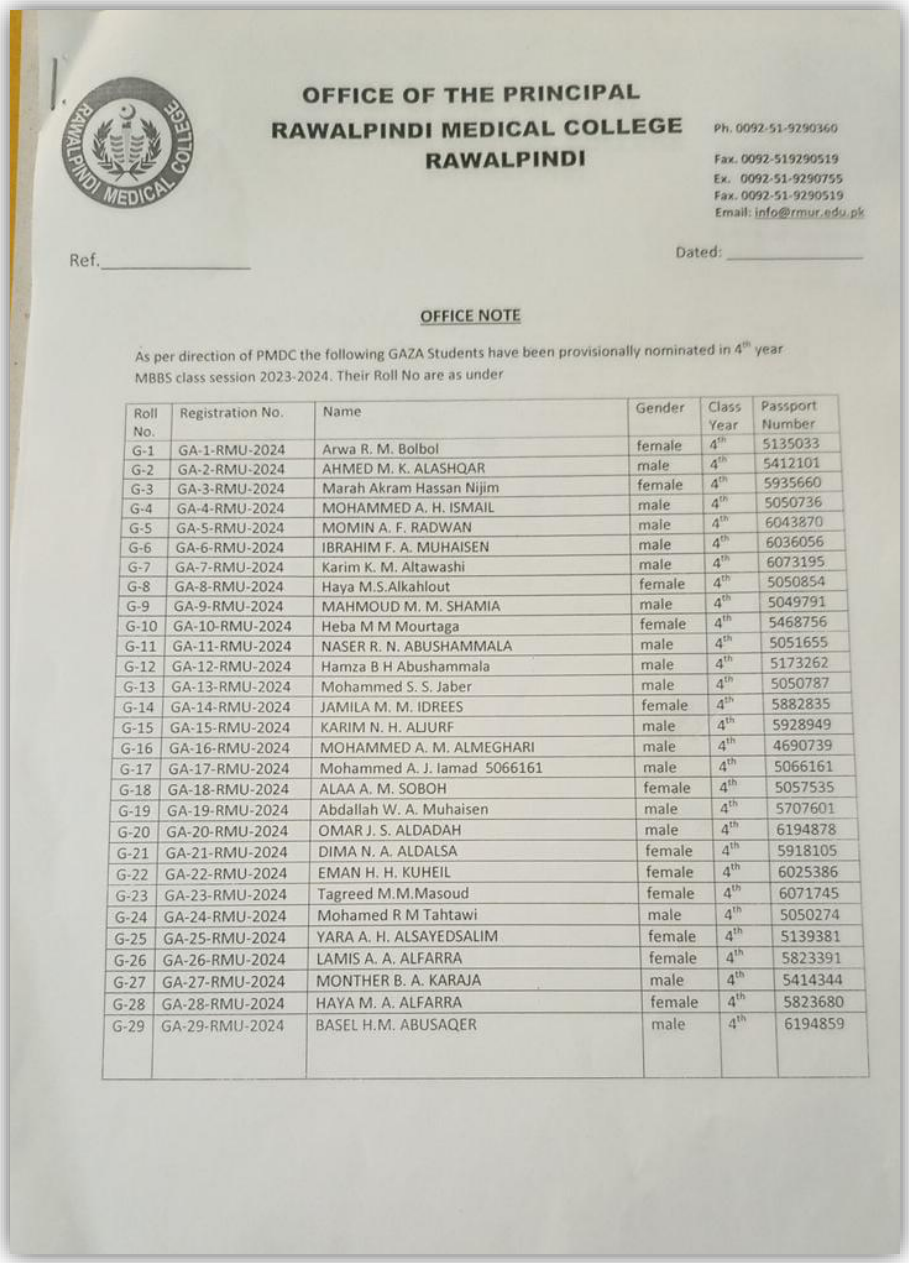
- **Welcome day**
- **Registration at RMU**
- **Demographic profile**
- **Physical and psychological assessment**
- **Academic assessment**
- **Mentorship program**
- **Extracurricular activities**

Welcome day at RMU

On October 30, 2024, a formal welcome event was held at the New Teaching Block of Rawalpindi Medical University (RMU) to welcome students from Al-Azhar University. The event commenced at 9:00 AM with a red-carpet welcome, and national anthem of Pakistan and Palestine were played, creating an atmosphere of unity and respect.

A welcome note was delivered by RMU students, followed by the screening of a documentary titled *Life at RMU*, which provided an insightful overview of student life and academic culture at the university. An introduction to the mentorship program was presented, highlighting its objectives and benefits. The Principal of RMU addressed the audience, followed by a speech from the Vice Chancellor of RMU Subsequent addresses were delivered by the President of PMDC and the Dean of Al Azhar University, emphasizing the importance of academic collaboration and professional development. The White Coat Ceremony, a key event highlight took place, symbolizing the students' commitment to the medical profession. Refreshments were served at the end, providing an opportunity for informal interaction among participants. The event concluded with a guided campus and hospital tour, leaving a lasting impression on the visiting students and setting the stage for future collaboration.

Registration at RMU



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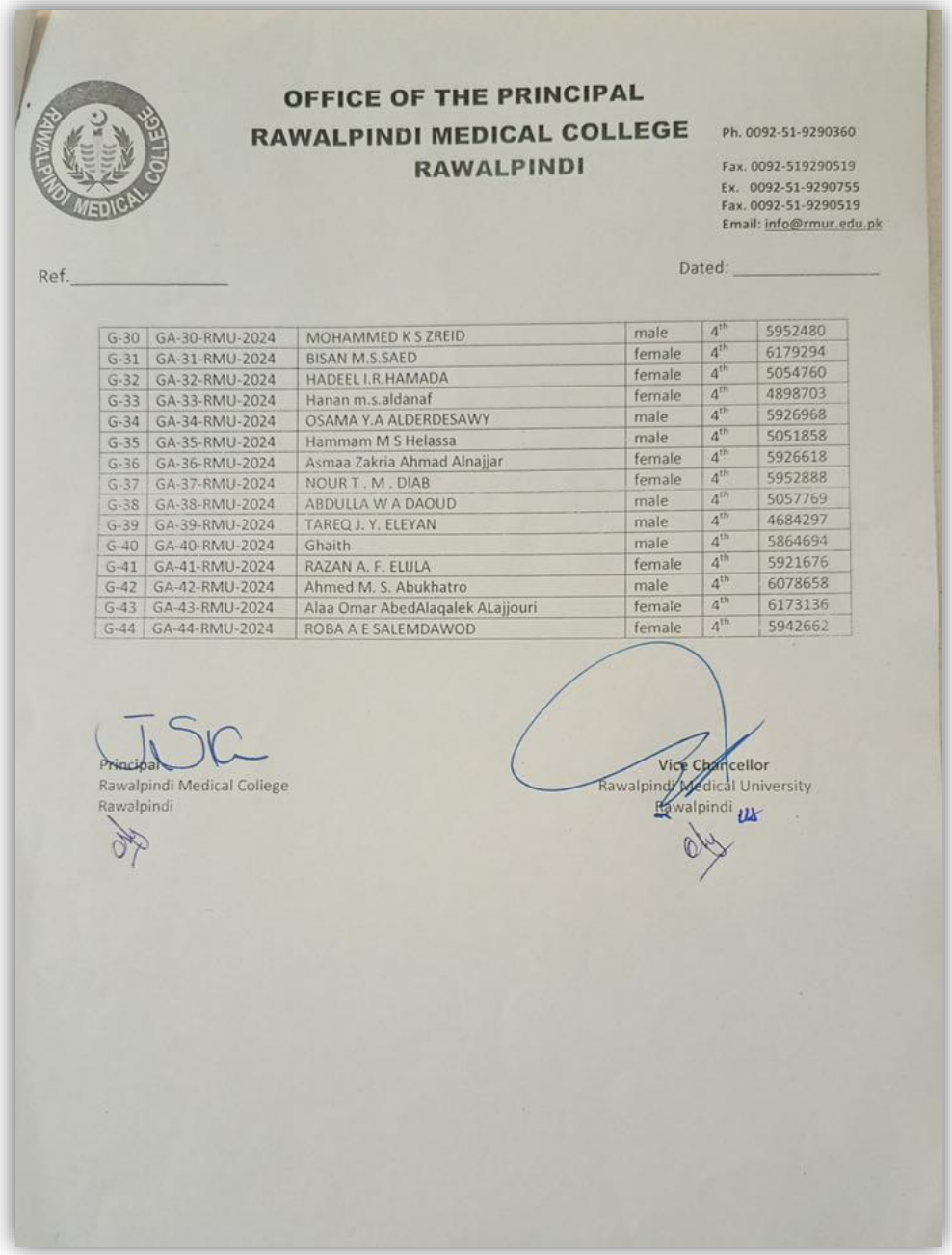
Ref._____ Dated: _____

OFFICE NOTE

As per direction of PMDC the following GAZA Students have been provisionally nominated in 4th year MBBS class session 2023-2024. Their Roll No are as under

Roll No.	Registration No.	Name	Gender	Class Year	Passport Number
G-1	GA-1-RMU-2024	Arwa R. M. Bolbol	female	4th	5135033
G-2	GA-2-RMU-2024	AHMED M. K. ALASHQAR	male	4th	5412101
G-3	GA-3-RMU-2024	Marah Akram Hassan Nijim	female	4th	5935660
G-4	GA-4-RMU-2024	MOHAMMED A. H. ISMAIL	male	4th	5050736
G-5	GA-5-RMU-2024	MOMIN A. F. RADWAN	male	4th	6043870
G-6	GA-6-RMU-2024	IBRAHIM F. A. MUHAISEN	male	4th	6036056
G-7	GA-7-RMU-2024	Karim K. M. Altawashi	male	4th	6073195
G-8	GA-8-RMU-2024	Haya M.S.Alkahlout	female	4th	5050854
G-9	GA-9-RMU-2024	MAHMOUD M. M. SHAMIA	male	4th	5049791
G-10	GA-10-RMU-2024	Heba M M Mourtaga	female	4th	5468756
G-11	GA-11-RMU-2024	NASER R. N. ABUSHAMMALA	male	4th	5051655
G-12	GA-12-RMU-2024	Hamza B H Abushammala	male	4th	5173262
G-13	GA-13-RMU-2024	Mohammed S. S. Jaber	male	4th	5050787
G-14	GA-14-RMU-2024	JAMILA M. M. IDREES	female	4th	5882835
G-15	GA-15-RMU-2024	KARIM N. H. ALJURF	male	4th	5928949
G-16	GA-16-RMU-2024	MOHAMMED A. M. ALMEGHARI	male	4th	4690739
G-17	GA-17-RMU-2024	Mohammed A. J. Iamad 5066161	male	4th	5066161
G-18	GA-18-RMU-2024	ALAA A. M. SOBOH	female	4th	5057535
G-19	GA-19-RMU-2024	Abdallah W. A. Muhaisen	male	4th	5707601
G-20	GA-20-RMU-2024	OMAR J. S. ALDADAH	male	4th	6194878
G-21	GA-21-RMU-2024	DIMA N. A. ALDALSA	female	4th	5918105
G-22	GA-22-RMU-2024	EMAN H. H. KUHEIL	female	4th	6025386
G-23	GA-23-RMU-2024	Tagreed M.M.Masoud	female	4th	6071745
G-24	GA-24-RMU-2024	Mohamed R M Tahtawi	male	4th	5050274
G-25	GA-25-RMU-2024	YARA A. H. ALSAYEDSALIM	female	4th	5139381
G-26	GA-26-RMU-2024	LAMIS A. A. ALFARRA	female	4th	5823391
G-27	GA-27-RMU-2024	MONTHER B. A. KARAJA	male	4th	5414344
G-28	GA-28-RMU-2024	HAYA M. A. ALFARRA	female	4th	5823680
G-29	GA-29-RMU-2024	BASEL H.M. ABUSAQER	male	4th	6194859



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Ref._____ Dated: _____

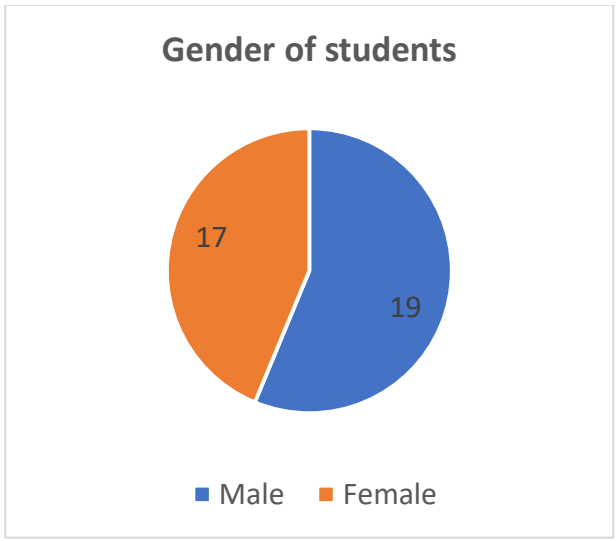
G-30	GA-30-RMU-2024	MOHAMMED K S ZREID	male	4th	5952480
G-31	GA-31-RMU-2024	BISAN M.S.SAED	female	4th	6179294
G-32	GA-32-RMU-2024	HADEEL I.R.HAMADA	female	4th	5054760
G-33	GA-33-RMU-2024	Hanan m.s.aldanaf	female	4th	4898703
G-34	GA-34-RMU-2024	OSAMA Y.A ALDERDESAWY	male	4th	5926968
G-35	GA-35-RMU-2024	Hammam M S Helassa	male	4th	5051858
G-36	GA-36-RMU-2024	Asmaa Zakria Ahmad Alnajjar	female	4th	5926618
G-37	GA-37-RMU-2024	NOUR T . M . DIAB	female	4th	5952888
G-38	GA-38-RMU-2024	ABDULLA W A DAOUD	male	4th	5057769
G-39	GA-39-RMU-2024	TAREQ J. Y. ELEYAN	male	4th	4684297
G-40	GA-40-RMU-2024	Ghaith	male	4th	5864694
G-41	GA-41-RMU-2024	RAZAN A. F. ELIJLA	female	4th	5921676
G-42	GA-42-RMU-2024	Ahmed M. S. Abukhatro	male	4th	6078658
G-43	GA-43-RMU-2024	Alaa Omar AbedAlaqalek ALajjouri	female	4th	6173136
G-44	GA-44-RMU-2024	ROBA A E SALEMDAWOD	female	4th	5942662

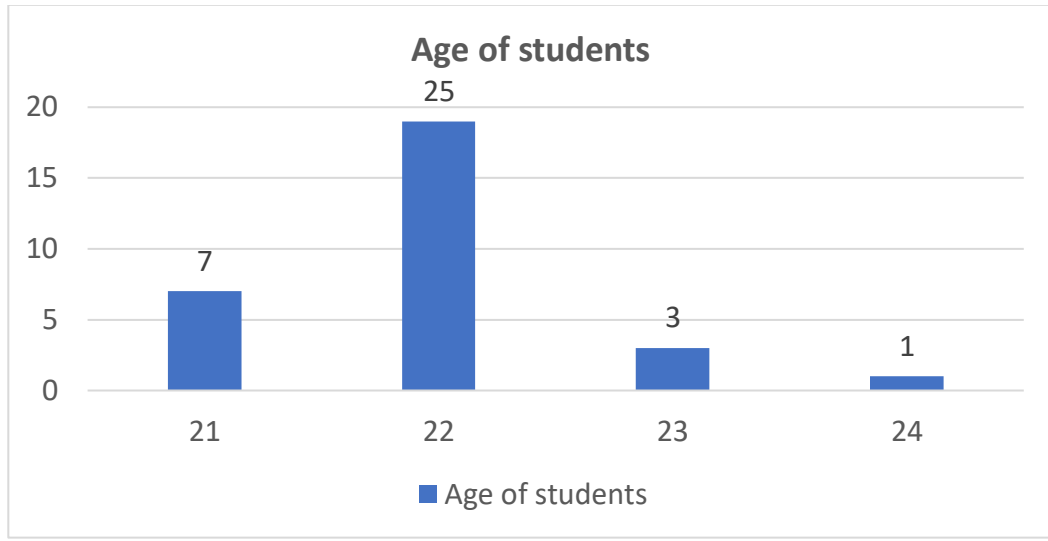
Principal
Rawalpindi Medical College
Rawalpindi

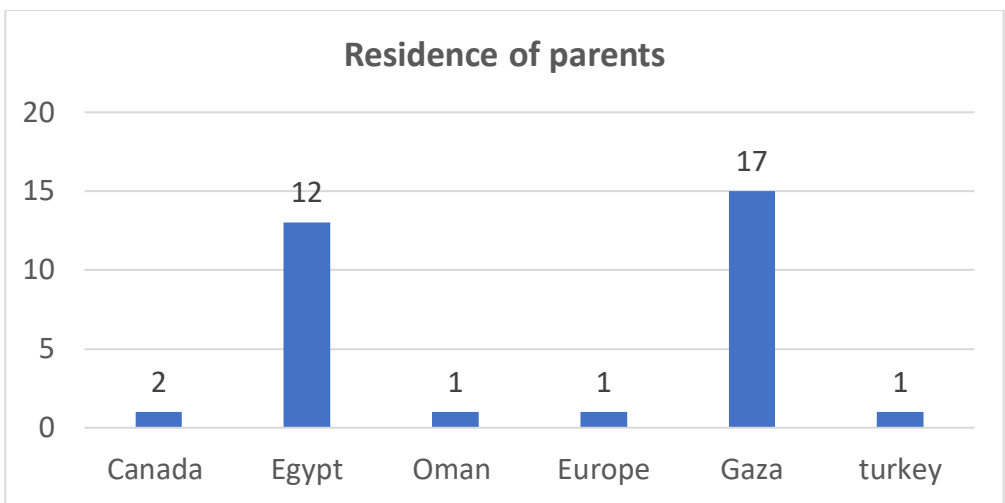
Vice Chancellor
Rawalpindi Medical University
Rawalpindi

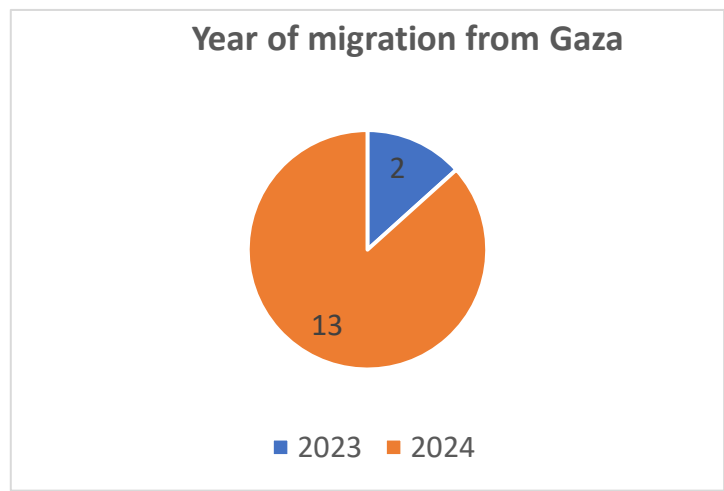
1- Demographic profile of students (n=36)

The medical students from Al-Azhar University, who have sought to continue their education at Rawalpindi Medical University (RMU) due to the ongoing conflict in their home country, represent a unique and resilient group. Out of the 44 students initially displaced, 36 have successfully arrived at RMU to pursue their medical studies. This group reflects a diverse range of academic backgrounds, with students at various stages of their medical education. This section provides an overview of the demographics of the 36 students currently enrolled at RMU, including their age, year of study, academic performance prior to their displacement, and other relevant background information. Understanding these key aspects is essential for ensuring that RMU provides appropriate academic, social, and psychological support to facilitate their successful integration into the university environment and their continued academic progress.









2- Physical and psychological assessment

S. No	Name	Medical Assessment	Vitals	Vision	ENT	Psychiatry	
1	MOHAMMED K S ZREID	Comorbid: Nil	B.P: 120/70	Color-38/38	NAD	Age:	22
		Past Med Hx: Nil	Pulse: 75/min			Gender:	Male
		Past Surg Hx: Nil	RR: 16/min	Vision-38/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure A	SPO2: 96%				
2	IBRAHIM F. A. MUHAISEN	Comorbid: Nil	B.P: 120/80	Color-30/38	NAD	Age:	21
		Past Med Hx: Nil	Pulse: 90/min			Gender:	Male
		Past Surg Hx: Nil	RR: 18/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	SPO2: 96%				
3	ABDALLAH W. A. MUHAISEN	Comorbid: Nil	B.P: 120/80	Color-30/38	NAD	Age:	22
		Past Med Hx: Asthmatic	Pulse:74/min			Gender:	Male
		Past Surg Hx: Nil	RR: 16/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	SO2: 98%				
4	HEBA M. M. MOURTAGA	Comorbid: PCOS, insulin Resistance	B.P: 110/80	Color-30/38	NAD	Age:	22
		Past Med Hx: Asthmatic (controlled)	Pulse: 92/min			Gender:	Female
		Past Surg Hx: Nil	RR: 16/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	SO2: 99%				
5	ARWA R. M. BOLBOL	Comorbid: Nil	B.P: 120/70	Color-30/38	NAD	Age:	22
		Past Med Hx: Nil	Pulse: 70/min			Gender:	Female
		Past Surg Hx: Nil	RR: 16/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	SO2: 99%				
6	ABDULLA W A DAOUD	Comorbid: Nil	B.P: 110/70	Color-30/38	NAD	Age:	22
		Past Med Hx: Nil	Pulse: 63/min			Gender:	Male
		Past Surg Hx: Nil	RR: 17/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	SPO2: 97%				
7	HAYA M. A. ALFARRA	Comorbid: Nil	B.P: 140/80	Color-30/38	NAD	Age:	22
		Past Med Hx: Nil	Pulse: 81/min			Gender:	Female
		Past Surg Hx: Nil	RR: 17/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	SO2: 100%				
8	KARIM N. H. ALJURF	Comorbid: Dust allergy	B.P: 110/80	Color-30/38	NAD	Age:	27
		Past Med Hx: Asthmatic (controlled)	Pulse: 70/min			Gender:	Male
		Past Surg Hx: Nil	RR: 17/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	SPO2: 98%				

9	MARAH AKRAM HASSAN NIJIM	Comorbid: Nil	B.P:110/70	Color-30/38	NAD	Age:	22
		Past Med Hx: Nil	Pulse:83/min			Gender:	Female
		Past Surg Hx: Lens Replacement	RR: 15/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	SPO2:100%				
10	NASER R. N. ABUSHAMMALA	Comorbid: Nil	B.P:80/50	Color-30/38	NAD	Age:	22
		Past Med Hx: Nil	Pulse 56/min			Gender:	Male
		Past Surg Hx: Nil	RR: 16/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	SPO2: 98%				
11	BASEL H. M. ABUSAQER	Comorbid: Nil	B.P:130/90	Color-30/38	NAD	Age:	27
		Past Med Hx: Nil	Pulse: 81/ min			Gender:	Male
		Past Surg Hx: Nil	RR: 16/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	SPO2 99%				
12	KARIM K. M. ALTAWASHI	Comorbid: Nil	B.P: 120/80	Color-30/38	NAD	Age:	23
		Past Med Hx: Nil	Pulse: 66/min			Gender:	Male
		Past Surg Hx: Nil	RR: 16/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	SPO2: 97%				
13	TAGREED M.M. MASOUUD	Comorbid: Nil	B.P: 100/70	Color-30/38	NAD	Age:	21
		Past Med Hx: Nil	Pulse :84/ min			Gender:	Female
		Past Surg Hx: Nil	RR: 16/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	SPO2: 99%				
14	HAYA M. S. ALKAHLOUT	Comorbid: Nil	B.P: 100/60	Color-30/38	NAD	Age:	23
		Past Med Hx: IBS	Pulse: 91/min			Gender:	Female
		Past Surg Hx: Nil	RR: 14/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	SPO2: 98%				
15	YARA A. H. LSAYEDSALIM	Comorbid: Mosquito Allergy	B.P: 110/80	Color-30/38	NAD	Age:	22
		Past Med Hx: Nil	Pulse: 75/min			Gender:	Female
		Past Surg Hx: Nil	RR: 14/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	SO2:99%				
16	ALAA A. M. SOBOH	Comorbid: Nil	B.P:110/60	Color-30/38	NAD	Age:	22
		Past Med Hx: Nil	Pulse: 73/min			Gender:	Female
		Past Surg Hx: Nil	SPO2: 100%	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	RR:14/min				
17	EMAN H. H. KUHEIL	Comorbid: Nil	B.P: 100/70	Color-30/38	NAD	Age:	22
		Past Med Hx: Nil	Pulse: 90/min			Gender:	Female
		Past Surg Hx: Nil	RR: 14/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	SPO2: 98%				

18	GHAITH	Comorbid: Nil	BP: 110/60	Color-30/38	NAD	Age:	22
		Past Med Hx: Nil	Pulse: 73 min			Gender:	Male
		Past Surg Hx: Nil	SPO2: 100%	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	RR: 14 min				
19	MONTHER KARAJA	Comorbid: Nil	B.P: 100/70	Color-30/38	NAD	Age:	22
		Past Med Hx: Nil	Pulse: 90/min			Gender:	Male
		Past Surg Hx: Nil	RR: 14/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	SPO2: 98%				
20	MOHAMMED A. J. JAMAD	Comorbid: Nil	BP: 110/60	Color-30/38	NAD	Age:	22
		Past Med Hx: Nil	Pulse: 73 min			Gender:	Male
		Past Surg Hx: Nil	SPO2: 100%	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	RR: 14 min				
21	HAMMAM	Comorbid: Nil	BP:100/80	Color-30/38	NAD	Age:	22
		Past Med Hx: Nil	Pulse:67/min			Gender:	Male
		Past Surg Hx: Nil	SPO:96%	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	RR: 16/min				
22	BISAN MAHER SAED	Comorbid: Nil	BP: 100/60	Color-30/38	NAD	Age:	22
		Past Med Hx: Nil	SPO: 99%			Gender:	Female
		Past Surg Hx: Nil	Pulse: 80/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	RR: 14 min				
23	ALAA O.A. ALAJJURI	Comorbid: Nil	BP: 100/60	Color-30/38	NAD	Age:	21
		Past Med Hx: Nil	Pulse: 84/min			Gender:	Female
		Past Surg Hx: Nil	RR: 16 min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	SPO: 96%				
24	ASMAA Z. A. ALNAJJAR	Comorbid: Nil	BP:120/70	Color-30/38	NAD	Age:	21
		Past Med Hx: Nil	SPO: 99%			Gender:	Female
		Past Surg Hx: Nil	Pulse: 84/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	RR: 16 min				
25	MOMIN	Comorbid: Nil	BP: 100/70	Color-30/38	NAD	Age:	22
		Past Med Hx: Nil	SPO: 99%			Gender:	Male
		Past Surg Hx: Lens Replacement	Pulse:75/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	RR: 16 min				
26	TAREQ ELEYAN	Comorbid: Nil	BP:120/70	Color-30/38	NAD	Age:	23
		Past Med Hx: Nil	SPO: 99%			Gender:	Male
		Past Surg Hx: Nil	Pulse: 81/min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure					
27	EMAN KAHEEL	Comorbid: Nil	BP: 100/70	Color-30/38	NAD	Age:	21

		Past Med Hx: Nil	SPO: 98			Gender:	Female
		Past Surg Hx: Nil	HR: 90				
		Vaccination Hx: Record attached in annexure	RR: 15 min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
28	OMER	Comorbid: Nil	BP: 120/90		NAD	Age:	22
		Past Med Hx: Nil	Pulse: 80 min	Color-30/38		Gender:	Male
		Past Surg Hx: Nil	SPO: 99%				
		Vaccination Hx: Record attached in annexure	RR: 15 min	Vision-30/38		Report of psychiatric evaluation attached as Annexure B	
29	MAHMOUD M.M. SHAIMA	Comorbid: Nil	BP:110/70		NAD	Age:	22
		Past Med Hx: Nil	Pulse: 76/min	Color-30/38		Gender:	Male
		Past Surg Hx: Nil	SPO: 99%			Report of psychiatric evaluation attached as Annexure B	
		Vaccination Hx: Record attached in annexure	RR: 15 min	Vision-30/38			

3. Orientation Day

The Orientation Day for Gaza students was successfully conducted on 2nd November 2024 at the New Teaching Block of Rawalpindi Medical University. The event aimed to welcome the students, provide them with essential academic information and familiarize them with RMU's facilities, resources, and administrative procedures. Chairpersons of Medicine, Community Medicine, Surgery, ENT and Family Medicine facilitated the session. The key objectives of the orientation were:

- To welcome the Gaza students to RMU and foster a sense of belonging.
- To introduce them to the academic environment and key faculty members.
- To outline the academic calendar, assessment policies, and clinical training requirements.
- To provide guidance on available student support services, including mentorship programs, extracurricular activities, and health services

Each chairperson introduced their respective department and provided an overview of their academic and clinical training programs:

- **Department of Medicine:** Overview of Internal medicine curriculum and clinical rotations.
- **Department of Surgery:** Introduction to surgical training, skills development, and clinical exposure.
- **Department of Community Medicine:** Overview of public health and community-based projects.
- **Department of Family Medicine:** Focus on primary care and patient-centered learning.
- **Department of ENT:** Introduction to otorhinolaryngology training and clinical practice.
- **Department of Radiology:**Overview of diagnostic imaging, including the role of radiology in patient care, and hands-on training with modern imaging technologies

  Students were given a guided tour of the New and Old Teaching Block and Holy Family Hospital, showcasing lecture halls, laboratories, wards, different departments and other facilities

4. Academic assessment

An academic assessment was conducted for the students from Al-Azhar University who have recently transferred to RMU to continue their studies. The assessment focused on evaluating their prior knowledge of basic sciences, which they had already studied during the first three years of their MBBS program at Al-Azhar University in Palestine.

Table of Specification for the assessment is:

Subjects	**Tool for assessment**	**No of MCQs**	**Cognition level**
Anatomy	MCQs	10	C2 & C3
Physiology	MCQs	10	C2 & C3
Biochemistry	MCQs	10	C2 & C3
Pharmacology	MCQs	10	C2 & C3
Pathology	MCQs	10	C2 & C3

Sample question paper attached as Annexure C. Following are the results of students:

Basic Sciences Evaluation of Al Azhar University Students Ghaza							
S.No	**Name**	**Anatomy(10)**	**Biochemistry (10)**	**Pharmacology (10)**	**Pathology (10)**	**Physiology (10)**	**Grand total(50)**
1	Abdallah W. A. Muhaisen	4	4	5	3	5	21
2	ABDULLA W A DAOUD	3	6	3	4	2	18
3	ALAA A. M. SOBOH	6	9	4	6	2	27
4	Alaa Omar AbedAlaqalek ALajjouri	3	2	1	3	4	13
5	Arwa R. M. Bolbol	7	6	3	5	2	23
6	Asmaa Zakria Ahmad Alnajjar	5	4	2	4	4	19
7	BASEL H.M. ABUSAQER	8	7	9	10	4	38
8	BISAN M.S.SAED	3	5	4	6	2	20
9	DIMA N. A. ALDALSA	4	3	4	2	2	15
10	EMAN H. H. KUHEIL	7	8	4	6	3	28
11	Ghaith	2	4	3	5	3	17
12	Hammam M S Helassa	3	5	2	2	1	13
13	HAYA M. A. ALFARRA	1	5	7	7	5	25
14	Haya M.S.Alkahlout	4	5	5	3	2	19
15	Heba M M Mourtaga	6	5	2	7	3	23
16	IBRAHIM F. A. MUHAISEN	4	2	5	3	2	16
17	Karim K. M. Altawashi	3	7	5	8	2	25
18	KARIM N. H. ALJURF	6	3	2	8	3	22
19	MAHMOUD M. M. SHAMIA	6	5	8	8	6	33
20	Marah Akram Hassan Nijim	6	2	6	6	3	23
21	Mohammed A. J. Iamad	5	4	3	6	1	19
22	MOHAMMED K S ZREID	3	2	0	6	0	11
23	MOMIN A. F. RADWAN	6	7	5	7	4	29
24	MONTHER B. A. KARAJA	4	5	3	6	4	22
25	NASER R. N. ABUSHAMMALA	5	5	5	8	5	28
26	OMAR J. S. ALDADAH	7	5	6	5	4	27
27	Tagreed M.M.Masoud	5	4	4	7	4	24
28	TAREQ J. Y. ELEYAN	5	4	5	3	2	19
29	YARA A. H. ALSAYEDSALIM	2	4	4	6	2	18
	Total students appeared: 29	**≥ 50% in Anatomy:15(51.7%)**	**≥ 50% in Biochemistry:16(55.7%)**	**≥ 50% in Pharmacology:12 (41.3%)**	**≥ 50% in Pathology:20(68.9%)**	**≥ 50% in Physiology:4(13.7%)**	
		≥ 70% in Anatomy:4(13.7%)	**≥ 70% in Biochemistry:5(17.3%)**	**≥ 70% in Pharmacology:3(10.3%)**	**≥ 70% in Pathology :9(31.03%)**	**≥ 70% in Physiology:0**	

Peer Lift: Mentorship & Friendship Program

➢ Faculty in charge

Prof. Dr. Muhammad Umar (S.I, H.I) (Vice Chancellor RMU)
Prof. Dr. Jahangir Sarwar Khan (Principal RMC)
Prof Nasir Khan (Professor in charge of Gaza program)
Dr Mehwish Riaz (Coordinator Gaza program)
Dr Omaima Asif (Coordinator DME)
Dr Khola Noreen (Basic Sciences Faculty)
Prof Ahmed Hassan (Clinical faculty)
Dr Hina Sattar (Clinical faculty)
Dr Farhan (Old campus coordinator)

➢ Student body

Syed Tabeer Hussain (Students Council President)

Saba Sajid (Students Council President)

Uswa Iftikhar (Program facilitator)

Program Objectives:

- Facilitate a smooth transition for Al Azhar University students into RMU's academic and clinicalsystems.
- Develop clinical, academic, and professional skills tailored to evidence-based learning.Foster a support system that includes
- faculty mentorship and peer mentoring.
- Enhance personal and professional growth through structured guidance, feedback, anddevelopment activities.
- To ensure academic vigilance by familiarizing the newly admitted students with Prof. Umar's Model of Integrated Lecture

Mentorship Team Set-up:

- **Basic Sciences Mentor**: Oversees academic guidance and career advice, holds regular check-ins, and provides feedback on students' progress.
- **Clinical Sciences Mentor**: Assists with clinical skill development and offers one-on-one guidance for problem-solving in clinical rotations.
- **Peers (Friends):** Final-year and 4th-year RMU students provide day-to-day support, share academicstrategies, and offer social support for smooth integration.

Program Components :

- **Orientation and Introduction:**

Introduction to RMU's academic structure, grading system, and campus resources.Overview of the mentorship program, its objectives, and mentor-mentee expectations.

- ***Clinical Skills Development:***

C*ommunication and Bedside Manner Training*: Focus on effective communication skills,history-taking, and patient interaction.

C*ultural Sensitivity in Clinical Practice*: Understanding patient backgrounds and culturaldynamics in Pakistan's healthcare system.

- ***Peer-Led Academic Support:***

Led by final-year students, this program shall facilitate study strategy sessions introducingeffective study techniques, exam preparation strategies, and resources.

- ***Exam Review and Practice Sessions*:** Peer mentors organize mock exams and provideguidance on RMU's examination style and expectations.

Regular review of core concepts and challenging topics with practical tips for scoring wellon assessments.

- ***Professional Development and Career Guidance:***

Career Planning Workshops: Mentors discuss career pathways in medicine, options forfurther specialization, and postgraduate opportunities. Guidance on developing a CV, personal statement, and interview preparation skills.

- ***Bioethics and Professionalism Workshops****:*

Discussions on medical ethics, responsibilities of healthcare professionals, and maintainingprofessionalism in clinical settings.

- ***Social and Cultural Integration Activities:***

Monthly Social Gatherings and Networking Events: Group dinners, social events, andcultural outings to help students bond with their peers and mentors.

- ***Cultural Awareness Seminars*:** Sessions on local culture, customs, and expectations inpatient care to help students adapt to the cultural context of RMU's patient population.
- ***Student-Led Societies and Extracurricular Activities:***

Encouragement to join RMU's societies (e.g. sports, debating) for holistic integration andrelationship building.

TEAM 1

Basic Sciences Mentor:
Dr. Mehwish Riaz
(AP Community Medicine)

Clinical Sciences Mentor:
Dr. Ahmed Hassan
(Professor ENT)

GROUP 1

Final Year Peer:
Taha Iftikhar
Abdul Rehman
Fourth Year Peer:
Zain Tariq

Mentees:
Karim K M Altawashi
Karim N H Aljurf
MAHMOUD M. M. SHAMIA

GROUP 2

Final Year Peer:
Hamna Ali
Abdul Rehman
Fourth Year Peer:
Amna Ayub

Mentees:
Alaa soboh
Lamis alfarra
Haya alkahlout

GROUP 3

Final Year Peer:
Sara Rashid
Abdul Rehman
Fourth Year Peer:
Usman Haider

Mentees:
Ghaith Alrayyes
Hammam Helassa
Mohammed zreid

TEAM2

Basic Sciences Mentor:
Dr. Omaima Asif
(DME)

Clinical Sciences Mentor:
Dr. Hina Sattar
(AP Paediatric Medicine)

GROUP 4

Final Year Peer:
Uswa Iftikhar
Noor
Fourth Year Peer:
Muhammad Saleh

Mentees:
Ibrahim F. A. Muhaisen Mohammed
A. M. Almeghari
Mohammed Imad

GROUP 5

Final Year Peer:
Noor-e-Jannat
Noor
Fourth Year Peer:
Zaynab Iftikhar

Mentees:
Deema Aldaalsa
Yara saleem
Eman kuheil

TEAM3

Basic Sciences Mentor:
Dr. Sana Bilal
(Assoc Prof Community Medicine)

Clinical Sciences Mentor:
Dr. Saima Ambreen
(AP Internal Medicine)

GROUP 6

Final Year Peer:
Joshua Jamil
Reem
Fourth Year Peer:
Umar Mansoor

Mentees:

Basel H M Abusaqer
Naser R N Abushammala
Marah A H Nijim

GROUP 7

Final Year Peer:
Bushra Ali
Reem
Fourth Year Peer:
Sahaab Noor

Mentees:

Arwa Bolbol
Taghreed Masoud
Heba mourtaga

GROUP 8

Final Year Peer:
Hareem Mehmood
Reem
Fourth Year Peer:
Sheikh Muhammad Ahmed

Mentees:

Asmaa AlNajjar
Bisan Saed
Haya Alkahlot
Alaa AlAjjori

TEAM 4

Basic Sciences Mentor:
Dr. Khola
(Assoc Proff Community Medicine)

Clinical Sciences Mentor:
Dr. Saira Satti
(SR Opthamology)

GROUP 9

Final Year Peer:
Saleha Hussain
Layla
Fourth Year Peer:
Sibgha Arshad

Mentees:

Abdallah Muhaisen
Mohammed Tahtawi
Abdallah Daoud

GROUP 10

Final Year Peer: *Sanabil Gul* *Layla* **Fourth Year Peer:** *Khalil Abbas Lashari*	**Mentees:** *Momin radwan* *Omar* *aldahdah* *Tareq eleyan*

6. Extracurricular activities

The extracurricular activities are arranged for Al Azhar University students joining Rawalpindi Medical University (RMU) every Saturday to support their overall well-being, offering a break from their academic responsibilities while encouraging physical health and teamwork. Joint extracurricular activities are planned for students from Gaza who have joined PIMS, FUSH, and STMU. Objectives of these activities are

- **Physical Fitness:** Encourage students to engage in regular physical exercise.
- **Team Building:** Foster teamwork and collaboration through group sports.
- **Stress Relief:** Provide an opportunity for students to unwind and reduce academic stress.
- **Cultural Exchange:** Encourage interaction among students from different backgrounds, fostering a sense of community.

Section B

Curriculum

- **Overview**
- **Al Azhar University Curriculum**
- **RMU & Al-Azhar University joint academic calendar & session**

Overview (1st to 4th year MBBS)

1st Year MBBS

Completed at Al Azhar University

2nd Year MBBS

Completed at Al Azhar University

3rd Year MBBS

Completed at Al Azhar University

4th Year MBBS

5 of 8 weeks of a course completed at Al Azhar University

Year I

- Arabic Language
- Palestine: Nature & Environment
- Hebrew Language I
- World Civilization
- General Physiology
- General Histology
- English Language I
- General Anatomy & Embryology
- Behavior Sciences
- Organic Chemistry
- Research Methodology & Bio stats
- First Aid
- General Biology
- Communication Skills
- Medical Physics
- General Chemistry for Health
- Palestine Land & Environment

Year II

- General Biochemistry
- General Pharmacology
- General Microbiology
- Immunology
- General Pathology
- Molecular Biology & Genetics
- Metabolic Biochemistry
- Public Health
- Respiratory System
- CVS
- Islamic Culture
- Hebrew Language II
- Logical Thinking

Year III

- Renal System
- Reproductive system
- Digestive system
- Neuroscience I
- Blood & Lymphatic
- Neuroscience II
- Skin & Locomotor System

Year IV

- Introduction to Clinical Medicine

Curriculum of Al-Azhar University (4th to 6th Year)

The medical curriculum at Al-Azhar University is designed to provide students with a comprehensive, rigorous, and patient-centered education. The program spans a number of years, progressing from foundational biomedical sciences to advanced clinical training, with a strong emphasis on developing the knowledge, skills, and ethical values necessary for a successful medical career.

For students in the 4th, 5th, and 6th years of the MBBS program, the curriculum focuses primarily on clinical education and practical training, preparing students to take on the responsibilities of practicing medicine. These years are crucial as students transition from theoretical learning to real-world application in hospitals, clinics, and other healthcare settings.

Division of subjects & Credit Hours:

الرقم:
Ref:
التاريخ:
Date: 03/11/2024

Palestine Faculty of Medicine 4th year Plan

Rotation	Credit Hours	type
Introduction to Clinical Medicine	8 hours	Major
Internal Medicine	10 hours	Major
General Surgery	10 hours	Major
Cardiology	2 hours	Minor
Urology	2 hours	Minor
Orthopedics	4 hours	Minor
Ear, Nose & Throat	2 hours	Minor
Medical Imaging	2 hours	Minor
Dermatology	2 hours	Minor
Community and Family Medicine	6 hours	Minor
Health Economics	2 hours	Minor

Palestine Faculty of Medicine 5th year Plan

Rotation	Duration	type
Obstetric & Genecology	8 hours	Major
Pediatrics	8 hours	Major
Psychiatry & Behavioral disorders	6 hours	Minor
Neurology	4 hours	Major
Neurosurgery	2 hours	Minor
Forensic Medicine	2 hours	Minor
Pediatric Surgery	2 hours	Minor
Vascular and Cardiothoracic Surgery	2 hours	Minor
Hematology and Oncology	2 hours	Minor
Endocrinology and Metabolic Disorders	2 hours	Minor
Ophthalmology	2 hours	Minor

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www.alazhar.edu.ps

Ref:

Date: 03/11/2024

الرقم:

التاريخ:

Palestine Faculty of Medicine 6th year Plan

Rotation	Duration	type
Obstetric & Genecology	6 hours	Major
Pediatrics	6 hours	Major
Surgery	6 hours	Major
Internal Medicine	6 hours	Major
Anesthesia	2 hours	Minor
Emergency	2 hours	Minor

Once again, please accept our deepest appreciation for your continued support. During this period of studies and collaboration, I, as Dean of Medicine at Al-Azhar University, will serve as the primary point of connection for all matters related to our students. I am committed to ensuring that they remain fully supported throughout their academic journey, and I look forward to working closely with you and your esteemed institution.

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Dean, Faculty of Medicine
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MDCN4813	**Introduction to Clinical Medicine**		
Course type	**Major Needs**	**Hours**	**8**

Course Objectives

Introduce students to the clinical environment: Familiarize students with the clinical setting, including hospitals, clinics, and other healthcare facilities, to provide an understanding of the structure, organization, and functioning of healthcare systems.

1. Introduce medical history-taking and physical examination
2. Introduction to medical terminology and documentation Students should learn to accurately and efficiently
3. Document patient encounters, including medical histories, physical examination findings, and treatment plan:
4. Introduce common medical conditions and diseases
5. Development of synaptic thinking and interpretation of clinical data
6. Development of communication skills with teaching staff, peers, seniors, hospital staff...etc

Intended Learning Outcomes

Knowledge and Understanding

- Communicate effectively and empathetically with patients, families, and healthcare team members.
- Medical History-Taking and Documentation
- Conduct a focused and systematic physical examination.
- Perform accurate and reliable vital sign measurements
- Demonstrate knowledge of common medical conditions, including their pathophysiology, clinical presentation, and basic management approaches.
- Constructing provisional diagnosis and differential diagnosis by integration of clinical data

Course Contents

1. Medical History-Taking
2. Physical Examination Skills
3. Approaches to formulating differential diagnoses and developing a problem list.
4. Common Medical Conditions
5. Clinical Rotations

Teaching and Learning Methods

1. Lectures: Traditional lectures are often used to present foundational knowledge and concepts related to clinical medicine.
2. Case-based Learning: Case-based learning involves presenting clinical cases or scenarios for students to analyze and discuss.
3. Small Group Discussions
4. Clinical Skills Workshops: Clinical skills workshops allow students to practice and refine their clinical skills, such as history-taking, physical examination techniques, and basic medical procedures.
5. Clinical Rotations and Preceptorships

Students Assessment

Assessment Method	Time	Marks
Theoretical MCQ exam	2hr	100

Books and References

Course notes

MacLeod's Clinical Examination

MDCN4101	Internal Medicine I (Junior)		
Course type	**Major Needs**	**Hours**	**8**

Course Objectives

1. Obtain a complete and/or focused medical history from patients
2. Perform physical examinations on patients
3. Documentation of patient health information in a concise, complete way
4. Order appropriate investigations and interpret its results for the common or important diseases
5. Develop a problem list and differential diagnosis based on the history, physical findings and initial investigations.
6. Recognize life threatening emergencies and initiate appropriate primary intervention

Intended Learning Outcomes

Knowledge and Understanding	• Understand how to recognize sick medical patient and how to diagnose and treat common emergency and nonemergency presentations.
Intellectual Skills	• Understand the role of decision making in the clinical environment and the main theoretical models of decision making
Professional skills	• Reflect how patient safety may be compromised by poor decision making and ineffective healthcare environments and create strategies to overcome these
General skills	• Communicate ideas and arguments effectively • Respect superiors, colleagues and any other members of the health profession.

Course Contents

1. General Approach to the Medical Patient
2. Communication with Patients
3. Medical Respiratory Diseases
4. Medical Cardiac Diseases
5. Medical Gastrointestinal and Liver Diseases
6. Medical Infectious Diseases
7. Medical Nephrology and urological Diseases

8. Medical Fluid, electrolytes, blood gas Diseases
9. Medical Gastrointestinal Diseases
10. Medical Neurological Diseases
11. Medical Endocrine Diseases
12. Medical Rheumatology Diseases
13. Medical Hematology and Oncology Diseases

Teaching and Learning Methods

1. Lectures
2. Theoretical interactive lectures
3. Case scenario simulation of common clinical cases
4. Bed-side teaching
5. Videos and simulation labs

Teaching and Learning Methods for the Disabled Students

1. Lectures
2. Help each student according to his needs and his condition

Students Assessment

Assessment Method	Time	Marks
Multiple choice exam	120	50
Practical OSCE exam	60	20
Static OSCE exam	60	20
Case history and long case	50	10

Books and References

Essential books

- CURRENT Diagnosis & Treatment in Internal Medicine
- Kumar and Clark in internal medicine

Recommended books

- Macleod for clinical examination

MDCN4212	**Cardiology**		
Course type	**Minor Needs**	**Hours**	**2**

Course Objectives

1. Communicate with patients and their families effectively
2. Obtain a complete and/or focused cardiovascular history from patients.
3. Perform cardiovascular physical examination on patients.
4. Order appropriate investigations and interpret its results for the common or important diseases
5. Recognize common and important abnormal clinical finding

6. Develop a problem list and differential diagnosis based on the history, physical findings and initial investigation
7. Provide patient education for their health problems
8. Recognize life-threatening cardiovascular emergencies and initiate appropriate primary intervention

Intended Learning Outcomes

Knowledge and understanding	• Understand how to recognize the sick cardiovascular patient and how to diagnose and treat common cardiovascular emergency and nonemergency presentations.
Intellectual Skills	• Understand the role of decision making in the clinical environment and the main theoretical models of decision making
Professional skills	• Reflect how patient safety may be compromised by poor decision making and ineffective healthcare environments and create strategies to overcome these
General skills	• Communicate ideas and arguments effectively • Respect superiors, colleagues and any other members of the health profession.

Course Contents

1. General Approach to the Cardiovascular Patient
2. Communication with cardiovascular Patients
3. Acute Coronary Syndrome
4. Hypertension
5. Valvular Heart Diseases
6. Cardiomyopathies
7. ECG reading
8. Cardiovascular Emergencies
9. Pericardial Diseases
10. Infective Endocarditis
11. Myocarditis

Teaching and Learning Methods

1. Seminars.
2. Bed-side teaching
3. Outpatient clinics
4. lectures

Teaching and Learning Methods for the Disabled Students

1. Lectures
2. Help each student according to his needs and his condition

Students Assessment

Assessment Method	**Time**	**Marks**
Multiple choice exam	60	60
Practical OSCE exam	60	20
Attendance	0	10

Case history	10	10

Books and References

Course notes
- Lectures

Essential books
- CURRENT Diagnosis & Treatment in Cardiology

Recommended books
- 500 ECG

Knowledge and skill matrix

Main course content	Study week	Knowledge and understanding	Intellectual skills	Professional skills	General skills
Communication with Cardiovascular Patients	1	Knowledge about main cardiac Symptoms	Able to analyze Patient complains		
Acute coronary syndrome	1	Able to differentiate between types of ACS	Diagnose a Case with IHD		
Hypertension	1	Understand the Definitions of Hypertensive Patient and how to diagnose it	Able to diagnose patients came with dangerous features of HTN	Able to prescribe Appropriate Medications	
Valvular heart diseases	1	Knowledge of different valvular lesions and their Complications	Understand Consequences of Valvular diseases		
Cardiomyopathies	2	Knowledge of Common Disorders affect Cardiac muscles	Able to suspect these diseases before their progression		
ECG reading	2	Understand the Basics of Electrical Pathophysiology Of the heart	Able to interpret an ECG		Use ECG in diagnosing ACS
Cardiovascular Emergencies	2	Knowledge of Common Emergent Cardiac Conditions	Able to approach to these cases efficiently		Rapid Recognition Of these Cases Improve Patient Mortality And Morbidity Outcomes

MDCN4423	**Orthopedics**		
Course type	**Minor Needs**	**Hours**	**2**

Course Objectives

1. Obtain a complete and/or focused Orthopedic history from patients.
2. Perform Orthopedic physical examination on patients
3. Order appropriate investigations and interpret its results for the common or important disease

4. Develop a problem list and differential diagnosis based on the history, physical findings, and initial Investigations

Intended Learning Outcomes

Knowledge and understanding	• Understand how to recognize the patient and how to diagnose and treat common Orthopedic emergency and nonemergency presentations.
Intellectual Skills	• Understand the role of decision-making in the clinical environment and the main theoretical models of decision making
Professional skills	• Reflect on how patient safety may be compromised by poor decision making and ineffective healthcare environments and create strategies to overcome these
General skills	• Communicate ideas and arguments effectively • Respect superiors, colleagues and any other members of the health profession.

Course Contents

1. General Approach to the Orthopedic Patient
2. Communication with Orthopedic Patients
3. Orthopedic Emergencies
4. Anatomy of Musculoskeletal system
5. Fractures and dislocations
6. Knee Joint Diseases
7. Ankle Joint Diseases
8. Shoulder Joint Diseases
9. Hip Joint Diseases
10. Common pediatric orthopedic problems

Teaching and Learning Methods

1. Morning report
2. Seminars
3. Bed-side teaching
4. Outpatient clinics

Teaching and Learning Methods for the Disabled Students

1. Lectures
2. Help each student according to his needs and his condition

Students Assessment

Assessment Method	**Time**	**Marks**
Multiple choice exam	120	60
Static OSCE exam	60	20
Attendance	0	10
Case history	10	5
Logbook	0	5

Books and References

Course notes	• Lectures/Tutorials
Essential books	• CURRENT Diagnosis & Treatment in Orthopedics
Recommended books	• Apleys Concise System of Orthopedics and Fractures

Knowledge and skill matrix

Main course content	Study week	Knowledge and understanding	Intellectual skills	Professional skills	General skills
Introduction to orthopedics and principles of fractures	1	How to take a proper history and to do Physical examination	To know the principles of orthopedic X-Ray		To identify the general investigations of orthopedics
Bone and Joint Infections	1	Diagnose different types of fractures. Classify fractures Identify the signs and symptoms of bone and joint infections	To identify the mechanism of fractures		Outline the treatment ways
Hip disorders and Developmental Dysplasia of the Hip (DDH).	1	Outline the etiological theories		Demonstrate the clinical skills necessary for clinical diagnosis	Outline treatment measures
Knee Problems	1	Classify Knee Disorders Investigations of knee disorders			How to examine the Knee
Hand	1	Understand important anatomical aspects Identify hand infections			Outline the treatment principles for hand problems
Spine	2	Classify spinal disorders Highlight the importance of neurological findings		Examine the spine	Treatment plan for different spinal disorders
Shoulder and elbow joints	2	Classify shoulder and elbow disorders		Demonstrate clinical skills in finding abnormal signs	Plan treatment protocols For disorders affecting these joints
Ankle and foot	2	To know the normal gait and stand Investigate disorders of the ankle and foot		Demonstrate clinical skills in finding abnormal signs	To treat the most common disorders of the area
Complications of fractures	2	To know the early general and local complications To know the late complications			How to treat The complications

MDCN4221	**Urology**		
Course type	**Minor Needs**	**Hours**	**2**

Course Objectives

1. Knowledge Acquisition: The course aims to provide students with a comprehensive understanding of the urology-related structures' anatomy, physiology, and pathophysiology.
2. Surgical Skills Development: Students should acquire the necessary surgical skills and techniques required for performing various procedures within the specialty.
3. Patient Evaluation and Diagnosis: The course aims to teach students how to evaluate and diagnose patients presenting with a wide range of urological conditions.
4. Collaboration and Multidisciplinary Care: Urology surgeons often work as part of a multidisciplinary team, especially in cases involving complex conditions or comorbidities

Intended Learning Outcomes

Knowledge and Understanding	• Knowledge Acquisition: Acquire a comprehensive understanding of the anatomy, physiology, and pathology of the urinary system, as well as the principles and practices of urological care.
Intellectual Skills	• Diagnostic skills: Develop the ability to obtain a thorough urological history from patients, perform appropriate physical examinations, and interpret relevant diagnostic tests and imaging studies
Professional skills	• Patient Care: Develop the ability to provide comprehensive, compassionate, and patient-centered urological care, considering the physical, emotional, and psychosocial aspects of patients and their families
General skills	• Diagnostic Skills: Develop the ability to obtain a thorough urological history from patients, perform appropriate physical examinations, and interpret relevant diagnostic tests and imaging studies.

Course Contents

1. Basic Anatomy and Physiology of the Urinary System
2. Urological Investigations and Diagnostic Techniques
3. Benign Prostatic Hyperplasia (BPH) and Lower Urinary Tract Symptoms (LUTS)
4. Urinary Tract Infections and Inflammatory Conditions
5. Urologic Oncology: Prostate, Bladder, Kidney, and Testicular Cancers
6. Urinary Stone Disease: Diagnosis, Management, and Surgical Approaches
7. Urologic Trauma: Evaluation and Surgical Interventions
8. Male Sexual Health and Erectile Dysfunction

9. Male Infertility and Assisted Reproductive Techniques
10. Female Urology: Incontinence, Prolapse, and Urinary Tract Fistulas
11. Urologic Emergencies: Acute Scrotum, Priapism, and Urosepsis
12. Urologic Complications and Management Strategies

Teaching and Learning Methods

1. Clinical Rotations: students work in Urology surgery departments under the guidance and supervision of experienced surgeon
2. Moring Rounds: participation in surgical grand rounds, where interesting or challenging surgical cases are presented and discussed by faculty and students
3. Lectures: Traditional lectures are commonly used to present fundamental concepts, principles, an theoretical knowledge related to ENT surgery

Case-based Learning: This approach involves presenting students with clinical cases that require surgical interpretation and analysis

Teaching and Learning Methods for the Disabled Students

1. Lectures
2. Help each student according to his needs and his condition

Students Assessment

Assessment Method	Time	Marks
Multiple choice exam	60	100

Books and References

Course notes	• Lectures/Tutorials
Essential books	• Campbell-Walsh Urology • Smith and Tanaghos General Urology
Recommended books	• Clinical Manual of Urology

MDCN4102	**General Surgery 1(Junior)**		
Course type	**Major Needs**	**Hours**	**8**

Course Objectives

1. Knowledge acquisition: The course aims to provide students with a comprehensive understanding of the principles, theories, and concepts related to General Surgery.
2. Diagnostic skills: Students are taught how to evaluate patients with surgical conditions, interpret diagnostic tests and imaging studies, and arrive at a proper diagnosis. They learn to identify surgical emergencies and develop the ability to prioritize and manage patients accordingly.
3. Surgical skills development: Students acquire hands-on experience and technical skills necessary for performing common surgical procedures. This includes learning aseptic techniques, suturing, knot tying, and using surgical instruments. They may also have opportunities to observe or assist in surgeries performed by experienced surgeons.
4. Patient management: The course aims to train students in managing pre-operative, intra-operative, and post-operative care of surgical patients.

Intended Learning Outcomes

Knowledge and understanding	• Demonstrate knowledge and understanding of the anatomical structures, physiological functions, and pathophysiological processes relevant to General Surgery.
Intellectual Skills	• Apply principles of evidence-based medicine to evaluate and diagnose surgical conditions, and formulate appropriate management plans
Professional skills	• Develop proficiency in performing basic surgical procedures, including wound closure, suturing techniques, and minor surgical interventions
General skills	• Acquire skills in pre-operative assessment, including patient history-taking, physical examination, and ordering and interpreting relevant investigations.

Course Contents

1. Introduction to General Surgery: includes overview of the field of General Surgery, history-taking, physical examination, and ordering and interpreting relevant investigations
2. Surgical Lectures: Didactic lectures covering essential topics in General Surgery, including specific surgical conditions, principles of surgical management, and surgical techniques
3. Surgical Skills Workshops: which includes hands-on training to develop and improve surgical skills, and simulation-based training using surgical models or virtual reality platforms to practice basic and advanced surgical procedures
4. Clinical rotations in surgical departments or surgical specialty services, providing opportunities for direct patient care, observation of surgeries, and participation in patient management.

Teaching and Learning Methods

1. Lectures: Didactic lectures delivered by experienced surgeons or faculty members provide an overview of the theoretical concepts, principles, and surgical techniques relevant to General Surgery.
2. Clinical Rotations: Clinical rotations allow students to gain firsthand experience by observing surgeries, participating in patient care, and assisting in surgical procedures under supervision.
3. Simulation-based Learning: Simulation-based learning uses realistic virtual or physical environments to replicate surgical scenarios
4. Case-based discussions to analyze and discuss surgical cases, including pre-operative evaluation, surgical decision-making, and post-operative management
5. Morning Rounds: participation in surgical grand rounds, where interesting or challenging surgical cases are presented and discussed by faculty and students

Teaching and Learning Methods for the Disabled Students

1. Lectures
2. Help each student according to his needs and his condition

Students Assessment

Assessment Method	Time	Marks
Multiple choice exam	120	50
Static OSCE exam	45	20
Dynamic OSCE exam	45	20
Attendance	0	10

Books and References

Course notes	• Lectures/Tutorials
Essential books	• Bailey & Loves Short Practice of Surgery, 27th Edition • Browses Introduction to the Symptoms & Signs of Surgical Disease
Recommended books	• Schwartzs Principles of Surgery • Surgical Recall

Knowledge and skill matrix

Main course content	Study week	Knowledge and understanding	Intellectual skills	Professional skills	General skills
Introduction to General Surgery, Lectures, Surgical Skills Workshops, and Clinical rotations	8 weeks	Demonstrate knowledge and understanding of the anatomical structures, physiological functions, and pathophysiological processes relevant to General Surgery	Apply principles of evidence-based medicine to evaluate and diagnose surgical conditions, and formulate appropriate management plans	Develop proficiency in performing basic surgical procedures, including wound closure, suturing techniques, and minor surgical interventions.	Acquire skills in pre-operative assessment, including patient history-taking, physical examination and ordering and interpreting relevant investigations

MDCN4225	**Medical Imaging**		
Course type	**Minor Needs**	**Hours**	**2**

Course Objectives

1. Knowledge acquisition: The course aims to provide students with a comprehensive understanding of the principles, techniques, and applications of radiology
2. Skill development: Students are trained in the practical aspects of radiology, including positioning and handling of patients, operating radiographic equipment, and obtaining high-quality images. They also learn about image processing, manipulation, and enhancement techniques
3. Image interpretation: Students should be able to develop the ability to interpret radiographic images accurately.
4. Communication and teamwork: Radiologists often work as part of a multidisciplinary team, so the course emphasizes the development of effective communication skills. Students learn how to convey radiological findings clearly and concisely to other healthcare professionals, collaborate in patient care, and participate in multidisciplinary discussions.
5. Professionalism and ethics: Students are introduced to ethical considerations and professional responsibilities in radiology, including patient privacy, informed consent, and radiation safety

Intended Learning Outcomes

Knowledge and understanding	• Knowledge: Students should demonstrate a comprehensive understanding of radiographic imaging modalities, including their principles, advantages, limitations, and app
Intellectual Skills	• Diagnostic Skills: Develop the ability to use radiological imaging as a diagnostic tool effectively, correlating imaging findings with clinical information to make accurate diagnoses and contribute to patient management plans

Professional skills	• Technical Skills: Acquire proficiency in the practical aspects of radiology, including patient positioning and handling, operation of radiographic equipment, and obtaining high-quality images
General skills	• Image Interpretation: Apply knowledge and critical thinking skills to interpret radiographic images accurately, identify normal anatomical structures, recognize pathological conditions, and differentiate between various disease processes and injuries.

Course Content

1. Introduction to Diagnostic Radiology: History, Scope, and Importance
2. Radiographic Techniques: Principles and Equipment
3. X-ray Imaging: Interpretation and Common Findings
4. CT Imaging: Abdomen and Pelvis
5. CT Imaging: Chest and Cardiovascular System
6. MRI Imaging: Brain and Spinal Cord
7. MRI Imaging: Musculoskeletal System
8. Ultrasound Imaging: Abdominal and Pelvic Organs
9. Interventional Radiology: Principles and Techniques
10. Nuclear Medicine Imaging: Principles and Applications
11. Chest Radiology: Interpretation and Imaging of Pulmonary Diseases

Teaching and Learning Methods

1. Lectures: Traditional lectures are commonly used to present fundamental concepts, principles, and theoretical knowledge related to radiology.

Clinical Rotations: students work in radiology departments under the guidance and supervision of experienced radiologists.

2. Case-based Learning: This approach involves presenting students with clinical cases that require radiological interpretation and analysis
3. Hands-on Training: Students often have opportunities to practice radiographic positioning and imaging techniques in a supervised setting

Teaching and Learning Methods for the Disabled Students

1. Lectures
2. Help each student according to his needs and his condition

Students Assessment

Assessment Method	Time	Marks
Multiple choice exam	60	100

Books and References

Course notes	• Lectures/Tutorials
Essential books	• Grainger & Allisons Diagnostic Radiology: A Textbook of Medical Imaging
Recommended books	• Learning Radiology: Recognizing the Basics • Fundamentals of Diagnostic Radiology

MDCN4225	**Dermatology**

Course type	Minor Needs	Hours	2

Course Objectives

1. Understand the Anatomy and Physiology of the Skin: Students should develop a comprehensive understanding of the structure, function, and biology of the skin, including its layers, appendages, and immunological properties
2. Identify and Diagnose Dermatological Conditions: Students should learn to recognize and diagnose common dermatological conditions, including infectious, inflammatory, neoplastic, and autoimmune skin disorders, through clinical examination, history-taking, and appropriate use of diagnostic tools
3. Understand Dermatopathology: Students should gain knowledge of dermatopathology, including the interpretation of skin biopsies, histological patterns, and immunohistochemistry, to aid in the diagnosis and management of dermatological conditions
4. Learn Principles of Dermatological Therapy: Students should understand the principles and modalities of dermatological therapy, including topical treatments, systemic medications, phototherapy, laser therapy, and surgical interventions, and their indications, contraindications, and potential adverse effects
5. Develop Clinical Skills in Dermatology: Students should acquire skills in performing dermatological procedures, such as skin biopsies, cryotherapy, suturing, and wound management, as well as performing and interpreting dermatological tests, including patch testing and skin allergy testing
6. Understand Dermatological Emergencies: Students should be familiar with dermatological emergencies, including Stevens-Johnson syndrome toxic epidermal necrolysis, severe drug reactions, and acute allergic reactions, and develop skills in their recognition, management, and referral
7. Develop Patient Communication and Counseling Skills: Students should acquire effective communication skills to establish rapport with patients, convey diagnoses, treatment plans, and prognosis, and provide counseling on sun protection, skincare, and management of chronic skin conditions
8. Understand Dermatological Research and Evidence-Based Practice: Students should be familiar with research methodologies in dermatology, critically appraise scientific literature, and understand the importance of evidence-based practice in dermatological care and treatment decisions
9. Promote Ethical and Professional Conduct: Students should uphold ethical principles, respect patient autonomy, maintain confidentiality, and demonstrate professionalism in their interactions with patients, colleagues, and the healthcare team

Intended Learning Outcomes

Knowledge and understanding	• Students should demonstrate a comprehensive understanding of the anatomy, physiology, and histology of the skin, including its layers appendages, vascular supply, and immune responses • Students should be able to identify and classify common dermatological conditions, including infectious diseases, inflammatory disorders, neoplastic conditions, autoimmune diseases, and genetic skin disorders. They should possess knowledge of the etiology, pathogenesis, clinical features, and differential diagnosis of these conditions • Students should develop an understanding of dermatopathology, including the interpretation of skin biopsy specimens, recognition of characteristic histological patterns, immunohistochemistry, and molecular diagnostics in dermatological diseases • Students should learn and apply various diagnostic techniques used in dermatology, such as dermatoscopy, skin scraping, KOH examination, patch testing, and skin allergy testing. They should understand the indications, limitations, and interpretation of these diagnostic tools

	• Students should acquire knowledge of the principles and modalities of dermatological therapy, including topical medications, systemic therapies, phototherapy, laser treatment, cryotherapy, and surgical interventions. They should understand the indications, contraindications, potential side effects, and monitoring requirements for these treatment modalities
Intellectual Skills	• Students should develop the ability to critically analyze and evaluate clinical information, research findings, and diagnostic results to formulate accurate diagnoses, differential diagnoses, and treatment plans for dermatological conditions • Students should be able to synthesize and integrate patient history, physical examination findings, laboratory results, and diagnostic tests to develop logical and evidence-based management strategies for dermatological conditions • Students should develop skills in generating and narrowing down differential diagnoses based on clinical features, laboratory findings, and histopathological data, and employing a systematic approach to arrive at accurate diagnoses • Students should be able to interpret and analyze diagnostic test results, including dermatopathology reports, laboratory findings, and imaging studies, to guide clinical decision-making and treatment planning • Students should apply critical appraisal skills to evaluate and incorporate relevant scientific literature, guidelines, and clinical research into their practice, ensuring evidence-based dermatological care and treatment decisions
Professional skills	• Students should develop effective patient communication skills, including the ability to explain diagnoses, treatment options, and prevention strategies in clear and understandable language. They should provide appropriate counseling on sun protection, skincare, medication adherence, and self-care • Students should acquire skills in accurate and comprehensive clinical documentation, including medical history, physical examination findings , treatment plans, and progress notes, ensuring proper communication, continuity of care, and legal and ethical standards
General skills	• Students should develop critical thinking skills to analyze and evaluate complex dermatological cases, research literature, and emerging trends, allowing them to make informed clinical decisions and adapt to varying patient presentations • Students should acquire problem-solving skills in the context of dermatology, enabling them to identify and address clinical challenges, consider alternative approaches, and develop creative solutions for the management of dermatological conditions • Students should cultivate strong interpersonal skills, enabling them to interact with patients, colleagues, and other healthcare professionals with respect, empathy, cultural sensitivity, and professionalism • Students should acquire skills in efficiently managing and organizing dermatological information, including patient data, research literature, and clinical guidelines, to facilitate effective decision-making, continuity of care, and documentation

	• Students should demonstrate proficiency in utilizing relevant technological tools and platforms used in dermatology practice, including electronic health records, imaging software, telemedicine platforms, and mobile applications for dermatological assessment and monitoring • Students should develop skills in managing their time effectively, prioritizing tasks, and organizing resources to optimize productivity and maintain workflow efficiency in a dermatology setting.

Course Content

1. Introduction to Dermatology
2. Dermatological Anatomy and Physiology
3. Diagnostic Techniques in Dermatology
4. Dermatological Conditions
5. Dermatological Procedures and Therapies
6. Dermatological Emergencies and Urgent Conditions
7. Dermatological Disorders in Specific Populations
8. Dermatological Research and Innovations
9. Professional Skills and Practice Management

Teaching and Learning Methods

1. Lectures
2. Case-Based Learning
3. Small-Group Discussions
4. Dermatopathology Sessions
5. Clinical Rotations
6. Dermatology Ward Rounds
7. Dermatology Clinics
8. Dermatological Procedures Workshops
9. Virtual Dermatology Modules
10. Dermatology Conferences and Guest Lectures

Students Assessment

Assessment Method	**Time**	**Marks**
1st exam	20	20
Attendance	0	10
Research		20
Final exam	60	50

Books and References

Course notes	• Lectures/Tutorials
Essential books	• Clinical Dermatology by Thomas P. Habif
Recommended books	• Dermatology: An Illustrated Colour Text by David Gawkrodger and Michael R. Ardern-Jones

Other references	• American Academy of Dermatology (AAD) https://www.aad.org • Dermatology Online Journal (DOJ) https://escholarship.org/uc/derm

	Community Medicine		
Course type	**Minor Needs**	**Hours**	**2**

Course Objectives

1. Arrive at community diagnosis of pattern of health and morbidity & utilization of available health care services.
2. Document 10-15 case histories of community and clinical cases or problems of interest.
3. Implement health education plans based on community diagnosis to improve people's health.
4. Select relevant research methods in addressing a particular research aim or objective.
5. Analyse data using relevant statistical tests and computer software programs Like SPSS, Epiinfo, Minitab.
6. Assess environmental hazards and problems in family settings.
7. Prescribe an appropriate line of management in an antenatal health care setting.

Intended Learning Outcomes

Knowledge and Understanding	• Students should demonstrate a comprehensive understanding of community problems
Intellectual Skills	• Assessing epidemiological data to identify health trends and risk factors. • Formulating hypotheses for public health research. • Designing intervention strategies for health promotion and disease prevention. • Foster an understanding of how various factors interact within healthcare systems.
Professional skills	• Train students to collect and analyze data for public health decision-making systematically
General skills	• Developing health education messages and programs • Ensure students can communicate effectively with individuals, communities, and stakeholders. • Prepare students to handle changing circumstances in dynamic public health environments.

Course Content

1. **Community Diagnosis**
   - Collect, analyze and interpret demographic, socio-economic, and ecological basic data about the population
   - Identify the health needs and priorities and the possible answers to health problems as perceived by people
   - Gauge the size of a particular health problem by a cross-sectional survey and other methods
   - Assess the utilization of available healthcare services and the factors responsible for their underutilization
   - Identify environmental health hazards
2. **Epidemiology**
   - Identifying causes of disease
   - Investigating an outbreak
   - Improving clinical diagnosis

- Measuring disease occurrence
- Assessing efficacy of therapy
- natural history of disease-prognosis

3. **Maternal and child health**
    - maternal health assessment
    - infant & child health assessment
4. **Patient care – Evidence Based Medicine**
    - consultation & counseling
    - prevention & screening
    - Evidence Based Practice

5. **Environmental Health & Occupational Medicine**
    - relationship of environment and medicine
    - Environmental health hazards
    - Role of physician in environmental health
    - Occupational medicine
    - Investigating occupational asthma

Teaching and Learning Methods

1. Lectures presenting case studies on: epidemiology, research methods, health promotion, patient care, MCH care and environmental health.
2. Field Training
3. Carry out field investigation following sequential steps of a basic research design
4. Group presentation of field projects
5. Organization of health education Programs
6. Observation and participation in health center activities
7. Discussion with faculty, health center staff and community

Students Assessment

Assessment Method	**Time**	**Marks**
Multiple choice exam	60	60

Books and References

Course notes	• Lectures/Tutorials
Essential books	• Epidemiology by Leon Gordis
Recommended books	• K Park's preventive medicine

MDCN5224	ENT		
Course type	**Minor Needs**	**Hours**	**2**

Course Objectives

1. The students are expected to know the main diseases related to ENT, their presentations, diagnostic methods, and management options.
2. Order appropriate investigations and interpret their results for the common or important diseases.
3. Recognize common and important abnormal clinical findings.
4. Develop a problem list and differential diagnosis based on the history, physical findings, and initial investigations.
5. Provide patient education for their health problems.
6. Recognize life-threatening emergencies and initiate appropriate primary intervention.
7. Continually reevaluate management plans based on the progress of the patient's condition

Intended Learning Outcomes

On completion of this course, the student will be able to:

1. Communicate with patients and their families effectively.
2. Obtain a complete and/or focused medical history from patients.
3. Perform physical examinations on patients.
4. Order appropriate investigations and interpret its results for the common or important diseases.
5. Recognize common and important abnormal clinical findings.
6. Develop a problem list and differential diagnosis based on the history, physical findings, and initial investigations.

Course content

1. Introduction anatomy.
2. History and examination.
3. External ear diseases.
4. Middle ear diseases.
5. Inner ear diseases.
6. Pharynx diseases.
7. Upper Respiratory airway diseases.
8. Neck masses.
9. Paranasal sinus diseases.

Teaching and Learning Methods

1. Lectures
2. Clinical Rotations
3. Case-based Learning
4. Hands-on Training:

Students Assessment

Assessment Method	Time	Marks

Static OSCE	60	20
Multiple choice exam	60	100

MDCN4232	**Health Economics**		
Course type	**Minor Needs**	**Hours**	**2**

Course Objectives

1. Understand the fundamental principles and concepts of health economics and their application to healthcare systems.
2. Develop skills in economic evaluation and analysis to inform healthcare decision-making, resource allocation, and policy development
3. Apply economic theories and frameworks to critically analyze healthcare financing, cost-effectiveness, and healthcare delivery models

Intended Learning Outcomes

Knowledge and Understanding	• Comprehend the basic principles of health economics, including supply and demand, market dynamics, and efficiency in healthcare. • Understand the concepts of healthcare financing, insurance, and risk pooling, and their implications for healthcare access and affordability. • Gain knowledge of economic evaluation methods, such as cost-effectiveness analysis and cost-benefit analysis, and their role in informing healthcare decision-making
Intellectual Skills	• Critically analyze economic factors influencing healthcare delivery, including reimbursement systems, payment models, and provider incentives • Evaluate the economic impact of healthcare interventions, technologies, and policies on population health outcomes and healthcare costs. • Apply economic theories and frameworks to assess healthcare systems efficiency, equity, and sustainability and propose strategies for improvement
Professional skills	• Apply economic evaluation methods, such as cost-effectiveness analysis and cost-benefit analysis, to assess healthcare interventions and programs • Analyze healthcare markets, insurance systems, and financing mechanisms to understand their impact on healthcare access, quality, and affordability. • Collaborate effectively with healthcare stakeholders to address resource allocation challenges and optimize healthcare delivery

Course content

1. Introduction to Health Economics
2. Supply and Demand in Healthcare
3. Healthcare Financing and Insurance

4. Economic Evaluation in Healthcare
5. Healthcare Delivery and Efficiency
6. Healthcare Policy and Reform
7. Equity and Access in Healthcare.

Teaching and Learning Methods

1. Lectures
2. Seminars
3. Small Group Activities
4. Self-Directed Study
5. Small Group Discussions

Students Assessment

Assessment Method	**Time**	**Marks**
Quiz		30
Midterm		30
Final term examination		60

Books and References

Course notes

- Lectures/Tutorials

Recommended books

- Health Economics and Policy" by James W. Henderson, Thomas E. Getzen
- "The Economics of Health and Health Care" by Sherman Folland, Allen C. Goodman, Miron Stano
- "Health Economics" by Jay Bhattacharya, Timothy Hyde, Peter Tu

MDCN5811	Gynecology and Obstetrics I (Junior)		
Course type	**Minor Needs**	**Hours**	**6**

Course Objectives

1. Understand the normal anatomy and physiology of the female reproductive system, including the menstrual cycle, conception, pregnancy, and childbirth.
2. Recognize and manage high-risk pregnancies, including complications such as gestational diabetes, preeclampsia, and multiple pregnancies.
3. Acquire knowledge and skills related to antenatal care, including prenatal screening, ultrasound examination, and management of common pregnancy-related issues.
4. Develop proficiency in conducting normal deliveries and managing obstetric emergencies, such as postpartum hemorrhage, shoulder dystocia, and fetal distress.
5. Demonstrate effective communication skills and provide compassionate care to women, respecting their autonomy, privacy, and cultural beliefs.

Identify and manage common gynecological conditions such as menstrual disorders, pelvic pain, infections

6. Provide counseling and education on contraception methods, their mechanisms of action, effectiveness, and appropriate use.

Intended Learning Outcomes

Knowledge and Understanding	• Demonstrate a comprehensive understanding of the normal anatomy and physiology of the female reproductive system. • Explain the etiology, pathophysiology, and natural history of common gynecological conditions and obstetric complications. • Describe the principles and indications for various diagnostic procedures, medical treatments, and surgical interventions in OB/GYN. • Perform a thorough history and physical examination of women, including gynecological and obstetric evaluations. • Recognize and interpret findings from diagnostic tests, such as laboratory investigations, imaging studies, and fetal monitoring. • Demonstrate proficiency in conducting normal vaginal deliveries and managing common obstetric emergencies • Provide comprehensive antenatal care, including risk assessment • Manage high-risk pregnancies and complications effectively, ensuring the well-being of both the mother and fetus • Demonstrate effective communication skills when interacting with patients, families, and healthcare teams. • Provide counseling and education on contraception methods, their mechanisms of action, effectiveness, and appropriate use.

Course content

1. Introduction: includes overview of the field of obstetric and gynecology, history-taking, physical examination, and ordering and interpreting relevant investigations
2. Lectures: Didactic lectures covering essential topics in obstetric and gynecology
3. Attending In-patient Floors and learn clinical assessment, examination and management methods supervised by consultants and fellows
4. Attending the delivery room and learn clinical assessment , examination and management of normal labour, attending operative deliveries and caesarean section
5. Attending in operation theatres for observing gynaecological procedures & operations.

Teaching and Learning Methods

1. Didactic Lectures: Lectures are used to deliver foundational knowledge and theoretical concepts in OB/GYN. Faculty members present information on anatomy, physiology, pathophysiology, and management approaches through structured presentations. Lectures may include multimedia resources, case discussions, and interactive elements to engage students.
2. Problem-Based Learning (PBL): PBL is an active learning approach that involves presenting students with clinical scenarios or problems related to OB/GYN. Students work in small groups to identify and analyze the issues, develop hypotheses, and propose solutions based on available evidence. Facilitators guide the process and stimulate discussion and self-directed learning.
3. Clinical Skills Training: Clinical skills training focuses on developing practical skills essential for OB/GYN practice
4. Simulation-Based Training: Simulation-based training involves using simulated patient scenarios,mannequins, and task trainers to replicate clinical situations
5. Clinical Rotations and Clerkships: Clinical rotations and clerkships provide students with direct exposure to patient care in OB/GYN settings. Under supervision, students participate in obstetric and gynecological evaluations, prenatal care, labor and delivery, and postpartum care. They engage in clinical discussions, observe procedures, and learn from experienced clinicians.
6. Case-Based Learning: Case-based learning involves presenting students with real or hypothetical patient cases that require analysis and problem-solving. Students review medical records, interpret diagnostic tests, and formulate management plans based on the presented cases

Students Assessment

Assessment Method	**Time**	**Marks**
Theoretical MCQ exam	2 hrs	50
OSCE static	1 hr	15
OSCE dynamic	1 hr	25
Clinical rotation attendance	6 weeks	10

Books and References

Course notes

- Lectures/Tutorials

Recommended books

- Hacker & Moores Essentials of Obstetrics and Gynecology
- Illustrated obstetrics and Gynaecology

MDCN5214	**Hematology and oncology**		
Course type	**Minor Needs**	**Hours**	**6**

Course Objectives

1. Be familiar with the diagnosis, evaluation, and management of hematologic malignancies
2. Recognize principles of new developments in biologic therapy of cancer
3. Recognize the latest advances in cancers of the lung, the breast, and the gastrointestinal tract
4. Analyse and discuss issues related to diverse personal, disease and treatment characteristics and their potential impact on the cancer journey

Intended Learning Outcomes

Knowledge and Understanding	• Understand red cell disorders • Understand both established information and recent clinical advances in • Coagulopathies, anticoagulant and thrombolytic therapies • Understand the most recent advances in the pharmacology and toxicology of anti-neoplastic drugs Understand the principles of management of gynecologic and other genito-urinary malignancies.
General skills	• Communicate ideas and arguments effectively

Course content

1. Hemoglobinopathies and sickle cell disorders
2. Classification of anemias
3. Bone marrow failure syndromes
4. Leukopenia and leukocytosis/ WBC disorders
5. Lymph nodes disorders and lymphoma
6. Tumour lysis syndrome and haematological emergencies
7. Thrombophilias and antiphospholipid syndrome
8. Acute leukemias and myelodysplastic syndromes
9. Chemotherapeutic agents
10. Febrile neutropenia.

Teaching and Learning Methods

1. doctors lectures notes
2. case scenario simulation of common clinical cases
3. Bed-side teaching

4. videos and simulation labs

Students Assessment

Assessment Method	Time	Marks
Theoretical MCQ exam	120	60
Quiz	15	30
Case presentation	10	10

Books and References

Course notes	• Lectures/Tutorials
Essential books	• Robbins and Cotran Pathologic basis of disease TENTH Edition • Robbins and Cotran Pathologic basis of disease tenth Edition

MDCN5215	**Vascular and Cardiothoracic Surgery**		
Course type	**Minor Needs**	**Hours**	**6**

Course Objectives

1. Integrate basic science knowledge-including anatomy, physiology and pathology to the practice of vascular surgery
2. Perform and analyze a complete medical history and physical examination

Intended Learning Outcomes

Knowledge and Understanding	• Integrate basic science knowledge-including anatomy, physiology and pathology to the practice of vascular surgery. • Recognize the clinical manifestations, complications, diagnostic modalities, outcomes and treatment plans for common and/or important vascular surgical problems, with special emphasis on emergencies and malignancies
Intellectual skills	• Perform and analyze an emergency-directed examination for patients with common vascular surgical emergencies • Interpret patient symptoms and physical findings in terms of their anatomic, pathologic and functional diagnostic significances
Professional skills	• Perform full physical examination appropriate to age and gender in acute and conditions • Provide first aid measures (Resuscitate) for emergency patients; injured and/or critically-ill
General skills	• Respect Patients confidentiality and deliver care in an honest, considerate and compassionate manner

Course content

1. Compartment syndrome
2. Aneurysms
3. Lower limb amputations
4. Acute ischemia
5. Chronic ischemia
6. Atherosclerosis
7. Mesentric ischemia
8. Ulcers and diabetic foot
9. Peripheral arterial disease

Teaching and Learning Methods

1. Lectures
2. videos and simulation labs
3. Bed-side teaching

Students Assessment

Assessment Method	Time	Marks
Theoretical MCQ exam	120	60
Attendance		10
Quiz	15	30

Books and References

Course notes

- Lectures/Tutorials

MDCN5216	Paediatric Surgery		
Course type	**Minor Needs**	**Hours**	**6**

Course Objectives

1. Understand the unique anatomical, physiological, and developmental aspects of pediatric patients as they relate to surgical conditions.
2. Recognize and describe the clinical manifestations and presentations of common pediatric surgical conditions.
3. Understand the pathophysiology, natural history, and complications associated with various pediatric surgical diseases.
4. Acquire comprehensive knowledge of common pediatric surgical conditions, including congenital anomalies,pediatric trauma, pediatric oncology, and pediatric surgical emergencies.
5. Develop proficiency in conducting comprehensive pediatric surgical histories and physical examinations

6. Understand the principles of surgical management for common pediatric surgical conditions, including indications, techniques, and outcomes.

Intended Learning Outcomes

Knowledge and Understanding	• Develop proficiency in conducting thorough pediatric surgical histories and physical examinations. • Acquire skills in interpreting relevant diagnostic tests and imaging studies commonly used in pediatric surgical evaluations. • Recognize and diagnose common pediatric surgical conditions, including congenital anomalies, pediatric trauma, and pediatric surgical emergencies. • Understand the principles of preoperative, intraoperative, and postoperative management specific to pediatric surgical patients. • Gain exposure to a variety of pediatric surgical procedures and develop an understanding of the indications, techniques, and potential complications associated with these procedures.
General skills	• Communicate ideas and arguments effectively

Course content

1. Introduction to Pediatric Surger
2. Pediatric Surgical Anatomy and Physiology
3. Congenital anomalies
4. Pediatric oncology
5. Trauma
6. Pediatric surgical emergencies
7. Diagnostic Approaches in Pediatric Surgery
8. Introduction to common pediatric surgical procedures, including appendectomy, hernia repair, circumcision, and pyloromyotomy
9. Postoperative care and management of pediatric surgical patients, including pain management, wound care, and prevention of complications.

Teaching and Learning Methods

1. Lectures
2. Case-based learning
3. Surgical observation and scrubbing
4. Clinical rotations
5. Case presentations and discussions

Students Assessment

Assessment Method	**Time**	**Marks**
Attendance		20
Final exam	End of semester	80

Books and References

Course notes	• Lectures/Tutorials
Essential books	• "Essentials of Pediatric Surgery" by Peter Mattei and Robert Carachi • "Pediatric Surgery: Diagnosis and Management" by Mark Davenport and John G. R. H. Davidson

MDCN5217	**Endocrinology and Metabolic Disorders**		
Course type	**Minor Needs**	**Hours**	**6**

Course Objectives

1. The regulation of hormone synthesis and secretion
2. common endocrine disorders and how to diagnose it
3. management of overproduction or reduction of different hormones
4. Take a full history from patients and make a differential diagnosis
5. perform complete physical examination to patients

Intended Learning Outcomes

Knowledge and Understanding	• Understand the regulation and physiological effect of different hormones • Discuss the major disorders associated with selected endocrine gland • Describe different methods for diagnosis of endocrine-related disorders
Intellectual skills	• Explain the symptoms for the disorders associated with hormonal imbalance
Professional skills	• Interpret hormone test results to diagnose the cause of medical condition
General skills	• Ability to analyze and solve problems related to hormone tests

Course content

1. Introduction to Endocrinology
2. Hormones & Hormone Action
3. Medical disorders of Hypothalamus & Pituitary Gland
4. Medical disorders of thyroid and parathyroid
5. Medical disorders of growth
6. Medical disorders of adrenal gland
7. Medical disorders of male and female reproductive system
8. Medical disorders of metabolic bone disease

Teaching and Learning Methods

1. Lectures
2. videos and simulation labs

3. Bed-side teaching
4. case scenario simulation of common clinical cases

Students Assessment

Assessment Method	Time	Marks
Theoretical MCQ exam	120	60
Case history and long case	50	15
presentations	20	10

Books and References

Course notes	• Lectures/Tutorials
Essential books	• Greenspan's Basic & Clinical Endocrinology • Williams Textbook of Endocrinology (12th edition, 2011) by Shlomo Melmed, Kenneth S. • Polonsky, P. Reed Larsen & Henry M. Kronenberg, Elsevier
Recommended books	• CURRENT Diagnosis & Treatment in endocrinology

MDCN5213	**Forensic Medicine**		
Course type	**Minor Needs**	**Hours**	**6**

Course Objectives

1. Understanding the role of forensic medicine: Exploring the purpose and importance of forensic medicine in the legal system, including its role in investigating and preventing crime, identifying victims, and providing expert witness testimony in court.
2. Knowledge of forensic pathology: Developing a comprehensive understanding of forensic pathology, including the study of autopsies, determining causes and mechanisms of death, forensic toxicology, and the interpretation of post-mortem findings.
3. Forensic investigation techniques: Learning the various techniques and methods used in the investigation of crime scenes, including evidence collection, preservation, analysis, and documentation. Forensic identification and anthropology: Understanding the techniques used to identify victims and perpetrators of crimes, including fingerprinting, DNA profiling, forensic odontology, and forensic anthropology.
4. Documentation and reporting: Developing skills in accurately and effectively documenting findings, writing forensic reports, and presenting expert testimony in court.
5. Legal aspects of forensic medicine: Understanding the legal framework surrounding forensic medicine, including relevant laws, regulations, and legal processes related to criminal investigations, post-mortem examinations, and the role of the forensic medical examiner within the legal system.
6. Ethical considerations: Discussing ethical considerations in forensic medicine, including patient confidentiality, consent, and the professional responsibilities of forensic practitioners.
7. Interdisciplinary collaboration: Recognizing the importance of interdisciplinary collaboration between forensic medicine professionals, law enforcement agencies, legal professionals, and other relevant stakeholders in the criminal justice system.

Intended Learning Outcomes

Knowledge and Understanding	• Explain various medicolegal aspects of malpractice &ethics • Describe different medicolegal aspects of living and dead individuals regarding personal identification diagnosis of death, causes and manner of death, postmortem changes Explain medicolegal aspects of blood grouping and DNA in forensic field • Examine and write a proper primary report for a cases of wounds and injuries • Explain medicolegal aspects of different cases of sexual offences
Intellectual skills	• Recognize common ethical dilemmas and suggest a proper solution. • Analyze different malpractice problems. • Analyze and recognize a clinical forensic cases
Professional skills	• Identify living and dead individuals • Estimate time pass since death through assessment of postmortem changes • Identify different mechanisms and manners of death • Examine different wounds and injuries and write a proper primary
General skills	• Know when and how to ask for senior consultation • Achieve informed consent from the patient or the patients surrogate for the treatment plan • Utilize IT skills and biostatics properly to present significant work

Course content

1. Introduction in forensic medicine: Terminology& different medicolegal systems
2. Thanatology
3. Identification of living and dead individuals
4. Wounds and its interpretation
5. Sexual offences and its legal aspects
6. Medico-legal aspects of infanticide
7. Violent asphyxia
8. Bodies recovered from water
9. Child abuse
10. Medicolegal aspects of pregnancy, abortion, delivery
11. Medicolegal aspects of mental diseases
12. Medical ethics & Malpractice

Teaching and Learning Methods

1. Lectures
2. Tutorials and case-based discussion
3. Practical sessions

Students Assessment

Assessment Method	Time	Marks

Assignment		20
Final exam		60
Practical exam		20

Books and References

Course notes	• Lectures/Tutorials
Essential books	• Keith Simpson Forensic medicine
Recommended books	• Forensic medicine Encyclopedia

MDCN5423	**Neurology**		
Course type	**Minor Needs**	**Hours**	**6**

Course Objectives

1. Understanding Neuroanatomy: Medical students should develop a solid understanding of the structure and function of the nervous system, including the brain, spinal cord, and peripheral nerves. This includes learning about different regions, pathways, and connections within the nervous system.
2. Recognizing Neurological Disorders: Students should become familiar with the common neurological disorders encountered in clinical practice, such as stroke, epilepsy, neurodegenerative diseases (e.g., Alzheimers disease, Parkinsons disease), multiple sclerosis, and peripheral neuropathies
3. Performing a Neurological Examination: Medical students should learn how to conduct a comprehensive neurological examination, which includes assessing cranial nerves, motor and sensory function, coordination, reflexes, and mental status
4. Interpreting Diagnostic Tests: Students should gain knowledge and skills in interpreting diagnostic tests commonly used in neurology, such as brain imaging (MRI, CT scans), electroencephalography (EEG), nerve conduction studies, and lumbar puncture
5. Developing Differential Diagnoses: Students should learn how to generate a differential diagnosis for patients presenting with neurological symptoms, considering both common and rare conditions.
6. Formulating Management Plans: Medical students should develop the ability to formulate management plans for patients with neurological disorders.

Intended Learning Outcomes

Knowledge and Understanding	• Understanding the structure and function of the nervous system, including neuroanatomy and neurophysiology. • Knowledge of common neurological disorders, their etiology, pathophysiology, and clinical presentations. • Understanding the principles of neuroimaging techniques and their interpretation in diagnosing neurological conditions. • Familiarity with the basic principles of neuropharmacology and the use of medications in neurological treatment. • Knowledge of the different diagnostic tests used in neurology, such as electroencephalography (EEG), electromyography (EMG), and lumbar puncture, and their indications and interpretation.

	• Understanding the principles of neurological examination, including assessment of cranial nerves, motor and sensory functions, and reflexes • Knowledge of the common neurological emergencies and appropriate management strategies. • Knowledge of the major neurodegenerative diseases, such as Alzheimers disease and Parkinsons disease, and their management.
Intellectual skills	• Clinical Reasoning: Develop the ability to critically analyze patient information, including medical history, examination findings, and diagnostic tests, to arrive at accurate diagnoses and formulate appropriate management plans • Problem Solving: Apply knowledge of neurology principles and concepts to identify and solve clinical problems related to neurological disorders. • Data Interpretation: Analyze and interpret clinical and investigative data, such as neuroimaging studies, EEG recordings, or laboratory results, to understand the underlying pathophysiology and make informed clinical decisions. • Decision Making: Make evidence-based decisions in the management of neurological conditions, weighing the risks and benefits of different treatment options and considering individual patient factors. • Clinical Judgment: Develop the ability to make sound judgments and decisions based on clinical experience and knowledge of neurology,considering patient preferences, ethical considerations, and the overall context of care.
Professional skills	• Clinical Assessment: Demonstrate proficiency in conducting comprehensive neurological assessments, including history-taking, physical examination, and interpretation of relevant findings • Diagnostic Skills: Develop the ability to accurately diagnose and classify various neurological disorders based on clinical presentations, examination findings, and diagnostic test results. • Treatment Planning: Formulate evidence-based management plans for patients with neurological conditions, considering the available treatment options, potential risks and benefits, and individual patient factors

Course content

1. Introduction to Neurology
2. Neuroanatomy
3. Neurological Examination
4. Common Neurological Disorders
5. Neurological Diagnostics
6. Neurological Emergencies
7. Neuropharmacology

Teaching and Learning Methods

1. Lectures
2. Small Group Discussions
3. Case-Based Learning
4. Bedside Teaching
5. Clinical Skills Simulation

Students Assessment

Assessment Method	Time	Marks
Final exam	1 hr	100

Books and References

Course notes	• Lectures/Tutorials

MDCN5224	**Neurosurgery**		
Course type	**Minor Needs**	**Hours**	**6**

Course Objectives

1. Understand the anatomy and physiology of the central nervous system: The course should provide a comprehensive understanding of the structure and function of the brain, spinal cord, and peripheral nerves
2. Develop proficiency in neurosurgical techniques: Students should learn and master various neurosurgical techniques, including diagnostic procedures, surgical interventions, and postoperative management
3. Acquire knowledge of neurosurgical diseases and conditions: The course should cover a wide range of neurosurgical diseases and conditions, including brain tumors, vascular disorders, traumatic brain and spinal cord injuries, neurodegenerative diseases, and congenital anomalies
4. Learn to diagnose and evaluate patients with neurological disorders: Students should be able to perform a thorough neurological examination, interpret diagnostic tests such as MRI and CT scans, and make accurate diagnoses based on clinical findings and imaging studies
5. Develop effective communication and teamwork skills: Neurosurgery often requires a multidisciplinary approach, involving collaboration with other healthcare professionals. Students should learn effective communication skills to interact with patients, families, colleagues, and other members of the healthcare tea
6. Understand ethical and legal considerations in neurosurgery: The course should address ethical issues related to neurosurgical practice, including patient autonomy, informed consent, end-of-life decisions, and confidentiality. Students should also be familiar with legal and regulatory aspects of neurosurgery
7. Gain proficiency in neurosurgical procedures through practical training: The course should provide hands-on experience through practical training, such as surgical simulations, cadaveric dissections, and supervised surgical rotations in the operating room
8. Understand the principles of neurosurgical research and evidence-based practice: Students should be familiar with research methodologies, study designs, and statistical analysis relevant to neurosurgery. They should also understand the importance of evidence-based practice in guiding clinical decision

9. Develop decision-making skills in neurosurgical management: The course should emphasize the development of critical thinking and decision-making skills in managing neurosurgical patients, including determining the appropriate surgical approach, selecting the most suitable treatment options, and managing complications.

Intended Learning Outcomes

Knowledge and understanding	• Students should demonstrate a comprehensive understanding of the anatomy of the central nervous system, including the brain, spinal cord, and peripheral nerves, including their structures, functions, and interconnections • Students should possess knowledge of the fundamental principles of neurophysiology, including the electrical properties of neurons, synaptic transmission, neural signaling, and the organization of neural circuits • Students should be able to identify, classify, and describe the etiology, pathophysiology, clinical presentation, and natural history of various neurosurgical diseases and conditions, such as brain tumors, cerebrovascular diseases, epilepsy, neurodegenerative disorders, and traumatic brain and spinal cord injuries • Students should have an understanding of the pharmacological agents commonly used in neurosurgery, including anesthetics, analgesics, neuromuscular blocking agents, antiepileptic drugs, and neuroprotective medications, including their mechanisms of action, dosages, and potential adverse effects • Students should understand the basic principles of research methodology, study design, and statistical analysis in neurosurgery. They should be able to critically appraise scientific literature, apply evidence-based practice in clinical decision-making, and interpret and communicate research
Intellectual skills	• Students should be able to critically analyze complex neurosurgical cases, evaluate diagnostic findings, and formulate evidence-based treatment plans, considering the available scientific literature, patient-specific factors, and potential risks and benefits • Students should develop effective problem-solving skills in the context of neurosurgical practice, including the ability to identify and address clinical challenges, anticipate and manage potential complications, and make informed decisions in dynamic and time-sensitive situations • Students should demonstrate the ability to integrate clinical information, including history, physical examination findings, imaging results, and laboratory data, to arrive at accurate diagnoses, formulate differential diagnoses, and develop appropriate management plans for patients with neurosurgical conditions • Students should possess strong analytical skills, enabling them to critically evaluate research studies, interpret complex neuroimaging findings, and analyze surgical outcomes data to inform clinical practice and advance the field of neurosurgery • Students should demonstrate proficiency in technical skills related to neurosurgical procedures, including surgical techniques, instrument handling, and precision in executing surgical maneuvers

Professional skills	• Students should develop and demonstrate the technical skills necessary to perform neurosurgical procedures safely and effectively, including surgical techniques, instrument handling, suturing, and hemostasis • Students should possess the skills to conduct thorough neurological examinations, including obtaining a detailed medical history, performing neurological tests, interpreting imaging studies, and formulating accurate diagnoses • Students should learn how to effectively communicate with patients and their families, explaining diagnoses, treatment options, potential outcomes, and risks involved, and obtaining informed consent for surgical interventions • Students should develop the ability to work collaboratively with other healthcare professionals, such as neurologists, radiologists, anesthesiologists, and physical therapists, to provide comprehensive care and ensure optimal patient outcomes • Students should demonstrate a commitment to providing patient-centered care, respecting patients autonomy, cultural and socioeconomic backgrounds, and preferences, and involving them in shared decision-making processes • Students should develop leadership skills, including the ability to effectively lead a surgical team, delegate tasks, manage resources, and make informed decisions in complex and dynamic clinical situations • Students should cultivate a commitment to lifelong learning, engaging in continuous professional development activities, attending conferences, participating in research, and staying up-to-date with advancements in neurosurgery to provide the best possible care to patients
General skills	• Students should be able to identify and address clinical challenges, develop innovative solutions, and adapt to unexpected situations during neurosurgical practice • Students should acquire effective communication skills, including listening, speaking, and writing, to effectively communicate with patients, families,colleagues, and other healthcare professionals • Students should develop strong interpersonal skills, including empathy, compassion, cultural sensitivity, and the ability to establish rapport and build trust with patients and their families • Students should demonstrate the ability to work effectively as part of a multidisciplinary team, collaborating with other healthcare professionals to provide comprehensive and coordinated care to neurosurgical patients • Students should recognize the importance of lifelong learning and engage in continuous professional development, staying updated with the latest advancements, research, and best practices in neurosurgery • Students should develop the ability to adapt to changing circumstances, handle stress, and maintain resilience in challenging situations inherent to neurosurgical practice

Course content

1. Introduction to Neurosurgery
2. Neuroanatomy

3. Neurophysiology and Neuropathology
4. Neuroimaging
5. Neurosurgical Techniques and Procedure
6. Neurosurgical Diseases and Conditions
7. Neurocritical Care
8. Pediatric Neurosurgery
9. Neurosurgical Research and Innovation
10. Professional and Communication Skills

Teaching and Learning Methods

1. Lectures
2. Case-Based Learning
3. Surgical Simulations
4. Clinical Rotations
5. Small-Group Discussions
6. Surgical Observations
7. Team-Based Learning
8. Online Resources and e-Learning
9. Research Projects
10. Presentations and Grand Rounds

Students Assessment

Assessment Method	**Time**	**Marks**
First exam	6th week	20
Attendance	At the end of course	10
Research	8th week	20
Final exam	At the end of course	50

Books and References

Course notes	• Lectures/Tutorials
Recommended books	• Kaplan and Sadocks Comprehensive Textbook of Psychiatry" by Benjamin J. Sadock,Virginia A. Sadock, and Pedro Ruiz. • "The American Psychiatric Association Publishing Textbook of Psychiatry" edited by Laura Weiss Roberts and Philip R. Muskin. • "Diagnostic and Statistical Manual of Mental Disorders (DSM-5)" published by the American • Psychiatric Association. • "Oxford Textbook of Psychiatry" edited by Michael G. Gelder, Nancy C. Andreasen, Juan J. Lopez-Ibor, and John R. Geddes

MDCN5622	Psychiatry & Behavioral disorders		
Course type	**Minor Needs**	**Hours**	**6**

Course Objectives

1. Engage with a patient and establish and maintain rapport including demonstrating the use of cognitive empathy, respect, sensitivity to the developmental level of the patient, cultural awareness, recognition of the social determinants of health, and seeking to understand the conceptual context of the illness.
2. Conduct a psychiatric diagnostic workup in an organized prioritized manner. This should include: acquiring and organizing the psychiatric history; performing the Mental Status Examination; assessing pertinent features of the physical exam; developing a differential diagnosis; determining need for further diagnostic studies; developing an initial plan of care (including discharge planning from the time of admission); and, documenting this in a written report.
3. Describe and employ DSM-5 criteria for the diagnosis of patients in the context of complex clinical presentations while taking into account the clinical history, life stressors, challenging psychosocial situations, and patient personality variables
4. Explain the range of psychiatric interventional therapeutics for various treatment options: psychopharmacologic agents, electroconvulsive therapies, psychotherapies (including fundamentals of psychodynamic, behavioral and cognitive approaches), and psychosocial interventions.
5. Identify psychiatric emergencies in the clinical setting and describe appropriate interventions for the same

Intended Learning Outcomes

Knowledge and Understanding	• Understanding Psychiatric Disorders: Acquire knowledge of various psychiatric disorders, including their etiology, clinical presentations, diagnostic criteria, and natural course. • Neurobiology of Mental Illness: Understand the neurobiological basis of psychiatric disorders, including the role of neurotransmitters, genetics, and brain circuitry in the development and manifestation of mental illnesses. • Psychopathology: Develop a comprehensive understanding of the symptoms, signs, and psychopathological features of different psychiatric disorders, such as mood disorders, anxiety disorders, psychotic disorders, personality disorders, and substance use disorders. • Diagnostic Skills: Learn the skills necessary to conduct psychiatric interviews, gather relevant clinical information, and make accurate psychiatric diagnoses based on standardized diagnostic criteria, such as the DSM-5(Diagnostic and Statistical Manual of Mental Disorders). • Treatment Modalities: Gain knowledge of various treatment modalities available for psychiatric disorders, including psychopharmacology, psychotherapy approaches (such as cognitive-behavioral therapy),electroconvulsive therapy (ECT), and other somatic treatments. • Psychiatric Emergencies: Understand the assessment and management of psychiatric emergencies, such as suicidal behavior, acute psychosis, mania, severe anxiety, and aggression.
Intellectual skills	• Perform mental status assessments and psychiatric evaluations while caring for patients who exhibit symptoms of a psychiatric disorder

	• Hypothesize the relationship between selected medical conditions and psychiatric symptoms • Write the results of a comprehensive psychiatric history and evaluation in an accurate, organized and systematic manner • Orally present psychiatric findings clearly and effectively to patients, family members, and appropriate medical personnel • Design a treatment plan that demonstrates: 1) familiarity with the biological, psychological and social aspects of treatment planning, and 2) awareness of the patient, family and community resources • Summarize the indications, basic mechanisms of action, common side effects and important drug interactions of each class of commonly used psychotropic medication
Professional skills	• Demonstrate communication consistent with professional, ethical, practice when working with other professionals, patients, families, carer groups and non-government organisations: identifying the roles and responsibilities of these partners to improve continuity of care in a transition across selected practice context. • Demonstrate understanding of the principles of interprofessional practice and discusses the impact upon collaboration with people with lived experience and their supporters. • Describe the principles of quality improvement and discuss their application to improve recovery-oriented care within a selected service setting
General skills	• Adhere to the attendance policy. • Demonstrate interpersonal skills necessary to maintain professionalism communicate appropriately with patients, their families, and other medic and paramedical personnel involved in patient care

Course content

1. Introduction to Psychiatry.
2. Psychiatric interview.
3. Psychiatric assessment (MAA-GAF).
4. Mental state examination.
5. Depression and related Mood disorders.
6. Schizophrenia and related Psychotic disorders
7. Anxiety and related disorders
8. Somatic Symptom and Related Disorders
9. Eating disorders.
10. Factitious and related disorders
11. Sexual and gender identity disorders
12. Personality disorders
13. Sleep disorders.
14. Amnestic and Dissociative disorders.
15. Substance-Related and Addictive Disorders

16. Psychopharmacology.
17. Psychotherapy.

Teaching and Learning Methods

1. Lectures
2. Laboratory/Studio
3. Tutorial

Students Assessment

Assessment Method	Time	Marks
Final examination	3 hours	100

Books and References

Course notes	• Lectures/Tutorials
Recommended Books	• Kaplan and Sadocks Comprehensive Textbook of Psychiatry" by Benjamin J. Sadock, Virginia A. Sadock, and Pedro Ruiz. • "The American Psychiatric Association Publishing Textbook of Psychiatry" edited by LauraWeiss Roberts and Philip R. Muskin. • "Diagnostic and Statistical Manual of Mental Disorders (DSM-5)" published by the American Psychiatric Association. • "Oxford Textbook of Psychiatry" edited by Michael G. Gelder, Nancy C. Andreasen, Juan J.L?pez-Ibor, and John R. Geddes.

Knowledge and skill matrix

Main course content	Study week	Knowledge and understanding	Intellectual skills	Professional skills	General skills
Introduction to Psychiatry. • Psychiatric interview	1	1,2	1,2		
Psychiatric assessment (MAA-GAF). • Mental state examination	1	1,2	1,2	1,2	
Depression and related Mood disorders.	1	1,2	1,2	1,2	
Schizophrenia and related	1	1,2	1,2	1,2	

Psychotic disorders					
Anxiety and related disorders	2	1,2	1,2	1,2	
Somatic Symptom and Related Disorders	2	1,2	1,2	1,2	
Eating disorders.	2	1,2	1,2	1,2	
Factitious and related disorders.	2	1,2	1,2	1,2	
Sexual and gender identity disorders.	2	1,2	1,2	1,2	
Personality disorders	3	1,2	1,2	1,2	
Sleep disorders.	3	1,2	1,2	1,2	
Amnestic and Dissociative disorders.	3	1,2	1,2	1,2	
Substance-Related and Addictive Disorders	3	1,2	1,2	1,2	
Psychopharmacology	4	1,2	1,2	1,2	
Psychotherapy	4	1,2	1,2	1,2	

RMU & Al-Azhar University joint academic calendar & session

Introduction:

Welcome to the Academic Calendar for Al-Azhar University students enrolled at Rawalpindi Medical University (RMU). This calendar is an essential guide to the academic year, outlining key dates, deadlines, and important events that will shape your educational journey. It is designed to help you plan effectively and stay on track throughout the semester.

Al-Azhar University, renowned for its commitment to excellence in education, is proud to partner with Rawalpindi Medical University in delivering a comprehensive medical curriculum. As part of this collaboration, students will engage in a rigorous academic program that blends traditional learning with hands-on clinical experience. The academic calendar provides detailed information about semester start and end dates, holidays, examination schedules, and other academic-related activities, ensuring students can manage their time and responsibilities efficiently.

Students have completed their 5 weeks of 4^{th} year in Al Azhar University and joined RMU on 30^{th} October 2024

Foundation Module:

It is with great pleasure that we welcome you to the **Foundation Module** at **RMU**, specially designed to provide you with an intensive, one-week review and overview of core subjects in the medical sciences. This program has been developed with the aim of helping you transition smoothly into the academic environment at RMU, while reinforcing and enhancing your foundational knowledge in **Anatomy**, **Physiology**, **Biochemistry**, **Pharmacology**, and **Pathology**.

Module Objectives

The **Foundation Module** serves as an important introduction to the advanced medical courses that you will encounter in your academic journey. Over the course of this week, you will have the opportunity to revisit key concepts from each subject, ensuring that you are well-prepared for the more specialized and in-depth learning that lies ahead. Our goal is to:

- **Recap essential concepts** from the basic sciences that form the foundation of medicine.
- Strengthen your understanding of how the body functions, how drugs interact with the body, and how diseases develop and progress.
- **Foster collaborative learning** through interactive sessions, group discussions, and practical workshops.
- Provide an overview of **RMU's academic resources**, teaching methods, and support systems available to you during your time here.

Time Table of Foundation Module

From 04-11-24 to 9-11-24

	8:00 AM – 9:00 AM	09:00am – 10:00am	10:00-11:00 am	BREAK 11:00AM – 11.30 AM	11:30am – 2pm	
Monday 04-11-24	**Anatomy** **Overview of Anatomy** **Lecture hall 3** Dr Maria (AP)	**Physiology** **Overview of Physiology** **Lecture hall 3** Dr Kamil	**Biochemistry** **Overview of Biochemistry** **Lecture hall 3** Dr Kashif (AP)		**CLINICAL ROTATION IN MEDICINE DEPARTMENT** **(MU 1 & MU 2) Holy Family Hospital**	
Tuesday 05-11-24	**Pharmacology** **Overview of Pharmacology** **Lecture hall 3** Dr Attiya (AP)	**Physiology** **Overview of Physiology** **Lecture Hall 3** Dr Kamil	**Biochemistry** **Overview of Biochemistry** **Lecture hall 3** Dr Rahat		**CLINICAL ROTATION IN MEDICINE DEPARTMENT** **(MU 1 & MU 2) Holy Family Hospital**	
Wednesday 06-11-24	**Anatomy** **Overview of Anatomy** **lecture hall 3** Dr Arsalan (Assoc Prof)	**Surgery** **Overview of Pathology** **Lecture Hall 3** Prof Dr Faryal	**Medicine** **Overview of Medicine** **Lecture hall 3** Dr Saima Ambreen (Assoc Prof)		**CLINICAL ROTATION IN SURGERY DEPARTMENT** **(SU 1 & SU 2) Holy Family Hospital**	
Thursday 07-11-24	**Pathology** **Overview of Pathology** **Lecture hall 3** Dr Kiran (AP)	**Pharmacology** **Overview of Pharmacology** **Lecture hall 3** Dr Haseeba (AP)	**Community Medicine** **Overview of Public Health and Research** **Lecture hall 3** Dr Khola Noreen (Assoc Prof)		**CLINICAL ROTATION IN SURGERY DEPARTMENT** **(SU 1 & SU 2) Holy Family Hospital**	
Friday 8-11-24	**08:00AM – 09:00AM** **Medicine** **Overview of Medicine** **Prof Muhammad Khurram**	**09:00 AM-10:00AM** **Surgery** **Overview of Surgery** **Prof Waqas Raza**	**10:00AM – 11:00 AM** **Pathology** **Overview of Pathology** **Dr Fatima tuz Zahara (AP)**	**11:00-12:00AM** **Radiology** **Overview of Radiology** **Prof Nasir Khan**		
Saturday 9-11-24	**Workshop Family Medicine** **Dr Saadia Khan** **DME Conference Hall**					

Academic Calendar for 4th, 5th & 6th Year MBBS

Summary plan for Al Azhar -RMU students

Academic year	Total weeks	Teaching weeks	Preparatory leave weeks	Examination leaves	End-of-year leaves	Dates of year 4 (including examination and prep leaves)
4th year	41	31 weeks	4 weeks	4 weeks	2 weeks	11/11/2024 to 13/9/2025
5th year	42	33 weeks	3 weeks	4 weeks	2 weeks	15/9/2025 to 12/7/2026
6th year		20 weeks	3 weeks	4 weeks		13/7/2026 to 24/1/2027

4th-year Academic Calendar

Courses		Start date	End date	Weeks per subject	Assessments	Total weeks
Community Medicine ENT		11/11/24	7/12/24	2 2	End-of-course End-of-year	4
Medicine		9/12/24	31/1/25	8	End-of-course End-of-year	8
MEDICINE & ALLIED	Cardiology Dermatology Radiology	3/2/24 17/2/24 24/2/24	15/2/25 22/2/25 8/3/25	2 1 2	End-of-course End-of-year	5
Family Medicine		10/3/25	22/3/2025	2	End-of-course End-of-year	2
Ramadan and Eid ul Fitar Holidays		24/3/25	2/4/25			
Surgery		3/4/25	31/5/25	8	End-of-course End-of-year	8
SURGERY & ALLIED	Orthopedics Urology Eid Ul Adha Break (6/6/25 to 9/6/25)	3/6/25 17/6/25	15/6/25 29/6/25	2 2	End-of-course End-of-year	4
Health Economics Summer Course		30/6/25	12/7/25	2	End-of-course End-of-year	2
Exam Preparation		14/7/25	2/8/25	4	----	4
Annual Professional Assessment		4/7/25	30/8/25	4	Written (to be conducted by Al Azhar University) OSCE (static & Dynamic to be conducted by RMU)	4
End of year break		1/9/2025	13/9/2025	2		

Total weeks					41

5th year Academic Calendar

Courses	Start date	End date	Weeks per subject	Assessments	Total weeks
Gynae/Obstetrics	15/9/25	24/10/25	6	End-of-course End-of-year	6
Pediatrics	27/10/25	5/12/25	6	End-of-course End-of-year	6
Psychiatry & Behavior Disorders	8/12/25	2/1/26	4	End-of-course End-of-year	4
Neurology	5/1/26	23/1/26	3	End-of-course End-of-year	3
Neurosurgery	26/1/26	6/2/25	2	End-of-course End-of-year	2
Forensic Medicine & Toxicology	9/2/26	20/2/26	2	End-of-course End-of-year	2
Plastic surgery	23/3/26	6/3/26	2	End-of-course End-of-year	2
Vascular & Cardiothoracic Surgery	9/3/26	20/3/26	2	End-of-course End-of-year	2
Hematology & Oncology	23/2/26	3/4/26	2	End-of-course End-of-year	2
Endocrinology & Metabolic Disorders	6/4/26	17/4/26	2	End-of-course End-of-year	2
Ophthalmology	20/4/26	1/5/26	2	End-of-year End-of-course	2
Exam Preparation Time	4/5/26	29/5/26	4	--	3
Annual Professional Exam	1/6/26	26/6/26	4	Written (to be conducted by Al Azhar University) OSCE (static & Dynamic to be conducted by RMU)	4
End of year leaves	29/6/25	12/7/26	2		

Total weeks					**40**

6th year Academic Calendar

Courses	Start date	End date	Weeks per subject	Assessments	Total weeks
Internal Medicine	13/7/26	7/8/26	4	End-of- course End-of-year	4
General Surgery	10/8/26	4/9/26	4	End-of-course End-of-year	4
Gynae/Obstetrics	7/9/26	2/10/26	4	End-of-course End-of-year	4
Pediatrics	5/10/26	30/10/26	4	End-of-course End-of-year	4
Anesthesia	2/11/26	13/11/26	2	End-of-course End-of-year	2
Emergency	16/11/26	27/11/26	2	End-of-course End-of-year	2
Exam Preparation	30/11/26	25/12/26	4	----	2
Annual Professional Assessment	26/12/26	24/1/27	4	Written (to be conducted by Al Azhar University) OSCE (static & Dynamic to be conducted by RMU)	4
Total weeks					**26**

Assessment framework

Type of assessment	Strategies	Tool of assessment		Number of assessments
		Theory	Practical	
Formative assessment	LMS Based	MCQs	-----	1 per week
Summative assessment	End of course exam (All Major& minor courses)	MCQs	OSCE	1
End-of-year assessment	Course-based assessment (All Major courses)	---	OSCE	

Major Subjects

10% Internal Evaluation

End of ward OSCE exam 7%

Attendance 3%

Greater than 80%--3%

70%--80%---2.5%

60%-70%----2%

50%-60%----1.5%

Less than 50%----1%

Minor Subjects

20% Internal Evaluation

15%

End of ward exam (presentations,Resarch,Surveys)

Attendance 5%

Greater than 80%--5%

60-70%----4%

50-60%----3%

50--60%----2%

Less than 50%----1%

Community Medicine & ENT
Time Duration: 4 Weeks
Time Table Week 1 (11-11-24 to 16-11-24)

	8:30 AM – 9:30 AM	09:30am – 10:30am	BREAK 10:30AM – 11:000AM	11:00am – 2:00 pm
Monday 11-11-24	**Community Medicine** **Introduction to epidemiology** **Lecture hall 3** Dr Sana Bilal	**ENT** **Hearing Loss & Vertigo** **Lecture hall 3** Dr Nida		**Clinical Clerkship Community Medicine**
Tuesday 12-11-24	**ENT** **Acute & Chronic Otitis Externa** **Lecture hall 3** Dr Arshad	**Community Medicine** **Descriptive studies** **Lecture hall 3** Dr Khola Noreen		**Clinical Clerkship Community Medicine**
Wednesday 13-11-24	**ENT** **Acute & Chronic Otitis Externa** **lecture hall 3** Dr Haitham Akash	**Community Medicine** **Analytical studies** **Lecture hall 3** Dr Mehwish Riaz		**Clinical Clerkship Community Medicine**
Thursday 14-11-24	**Community Medicine** **Measures of morbidity and mortality** **Lecture hall 3** Dr Sana Bilal	**ENT** **ASOM/CSOM with Complications** **Lecture hall 3** Dr Ashar Alamgir		**Clinical Clerkship Community Medicine**
Friday 15-11-24	**08:30AM – 12:30 PM** **Introduction to Clinical Medicine** **Clinical Clerkship** Roll No 1-15 MU1	Roll No 16-31 MU2		
Saturday 16-11-24	**08:30AM – 2:00 PM** **ENT** **Clinical Clerkship**			

Hours taught in a week:

Community Medicine: 18 hours **ENT: 14 hours** **Clinical Medicine: 4 hours**

Time Table week 2 (18-11-24 to 23-11-24)

	8:30 AM – 9:30 AM	09:30am – 10:30am		11:00am – 2:00 pm	
Monday 18-11-24	**Community Medicine**	**ENT**		**Community Medicine (11:00-12:30)**	**Community Medicine (12:30-2:00)**
	Outbreak investigation	**Anatomy and Physiology of larynx, trachea and bronchi**		**Research Session 1**	**Clinical Clerkship Community Medicine**
	Lecture hall 3	**Lecture hall 3**		**Lecture hall 3**	**Lecture hall 3**
	Dr Narjis Zaidi	Dr Nida		Dr Khola Noreen, Dr Mariya	Dr Saba Maryam
Tuesday 19-11-24	**ENT**	**Community Medicine**		**Community Medicine (11:00-12:30)**	**Community Medicine (12:30-2:00)**
	Benign Diseases of the Larynx	**Disease association and causation**		**Research session 2**	**Community diagnosis by household survey**
				Lecture hall 3	
	Lecture hall 3	**Lecture hall 3**		Dr Afifa Kulsoom, Dr Mariya	Dr Mehrish Saleem
	Dr Arshad	Dr Khola Noreen			
Wednesday 20-11-24	**ENT**	**Community Medicine**		**Community Medicine (11:00-12:30)**	**Community Medicine (12:30-2:00)**
	Laryngeal Carcinoma	**Improvement in clinical diagnosis**		**Research session 3**	**Community diagnosis by household survey**
				Lecture hall 3	**Lecture hall 3**
	lecture hall 3	**Lecture hall 3**		Dr Mehwish Riaz, Dr Mariya	Dr Mehrish Saleem
	Dr Haitham Akash	Dr Farrah Pervaiz			
Thursday 21-11-24	**Community Medicine**	**ENT**		**Community Medicine (11:00-12:30)**	**Community Medicine (12:30-2:00)**
	Natural History of disease	**Foreign Body of Air passages**		**Research session 4**	**Community diagnosis by household survey**
				Lecture hall 3	**Lecture hall 3**
	Lecture hall 3	**Lecture hall 3**		Dr Imrana Saeed, Dr Mehrish	Dr Saba Maryam
	Dr Farrah Pervaiz	Dr Ashar Alamgir			
Friday 22-11-24	**08:30AM – 12:30 PM**				
	Clinical ENT				
	Clinical Clerkship				
Saturday 23-11-24	**08:30AM – 2:00 AM**				
	Clinical ENT				
	Clinical Clerkship				

BREAK 10:30 AM – 11:00 AM

Hours taught in a week:

Community Medicine: 18 hours **ENT: 14 hours**

Time Table week 3 (25-11-24 to 30-11-24)

	8:30 AM – 9:30 AM	09:30am – 10:30am	BREAK 10:30AM – 11:00 AM	11:00am – 2:00 pm		
Monday 25-11-24	Community Medicine	ENT		Community Medicine (11:00 am – 12:00 pm)	Community Medicine (12:00 pm – 1:00 pm)	Community Medicine (1:00 pm – 2:00 pm)
	Developing health education programs	Anatomy and physiology of nose and paranasal sinuses		Efficacy of therapy	Levels of prevention	Community diagnosis by household survey
	Lecture hall 3	Lecture hall 3		Lecture hall 3	Lecture hall 3	Lecture hall 3
	Dr Mehjabeen	Dr Tabassum		Dr Afifa Kulsoom	Dr Narjis Zaidi	Dr Saba Maryam
Tuesday 26-11-24	Community Medicine	ENT		Clinical ENT (11:00 am – 2:00 pm)		
	screening	Acute & Chronic Rhinosinusitis		Clinical Clerkship		
	Lecture hall 3	Lecture hall 3				
	Dr Farah Pervaiz	Dr Arshad				
Wednesday 27-11-24	ENT	Community Medicine		Community Medicine (11:00am – 2:00 pm)		
	Juvenile Nasopharyngeal Angiofibroma, epistaxis, trauma to face	Maternal health assessment		Research Session 5,6		
	lecture hall 3	Lecture hall 3		Lecture hall 3		
	Dr Haitham Akash	Dr Imrana Saeed		Dr Mehwish Riaz, Dr Narjis Zaidi, Dr Mehrish Saleem		
Thursday 28-11-24	Community Medicine	ENT		Clinical ENT (11:00am – 2:00 pm)		
	Infant and child health assessment	Nose and PNS malignancies		Clinical Clerkship ENT		
	Lecture hall 3	Lecture hall 3				
	Dr Farrah Pervaiz	Dr Ashar Alamgir				
Friday 29-11-24	08:00AM – 12:00 PM					
	Clinical ENT					
	Clinical Clerkship					
Saturday 30 -11-24	08:00AM – 11:00 AM	11:00 – 1:00 PM				
	Clinical ENT	Co curricular Activity				
	Clinical Clerkship	Sports Ground Main Campus RMU				

Hours taught in a week: Community Medicine: 11 hours ENT: 18 hours

Time Table week 4 (02-12-24 to 07-12-24)

	8:30 AM – 9:30 AM	09:30am – 10:30am		11:00am – 2:00 pm			
Monday 2-12-24	**Community Medicine**	**ENT**		**Clinical ENT**			
	Screening	**Anatomy and physiology of Oral Cavity, pharynx**					
	Lecture hall 3	**Lecture hall 3**		**Clinical Clerkship ENT (history & examination relevant to pharynx & larynx)**			
	Dr Farrah Pervaiz	Dr Tabassum					
Tuesday 3-12-24	**Community Medicine**	**Community Medicine**		**Community Medicine (11:00-11:45)**	**Community Medicine (11:45-12:30)**	**Community Medicine (12:30-1:15)**	**Community Medicine (1:15-2:00)**
	Role of physician in occupational health, Investigating occupational asthma	**Evidence based practice**		**Levels of prevention**	**Health education & Counselling**	**Environment and medicine**	**Assessing efficacy of therapy**
	Lecture hall 3	**Lecture hall 3**		**Lecture hall 3**	**lecture hall 3**	**Lecture hall 3**	**Lecture hall 3**
	Dr Mehjabeen	Dr Khola Noreen		Dr Narjis	Dr Mehjabeen	Dr Afifa Kulsoom	Dr Afifa Kulsoom
Wednesday 4-12-24	**ENT**	**Community Medicine**		**Community Medicine (11:00-11:45)**	**Community Medicine (11:45-12:45)**	**Community Medicine (12:45-2:00)**	
	Head and Neck space infections	**Environmental health hazards**		**Maternal health assessment**	**Research class**	**Household survey**	
	lecture hall 3	**Lecture hall 3**		**Lecture hall 3**	**Lecture hall 3**	**Lecture hall 3**	
	Dr Haitham Akash	Dr Imrana		Dr Imrana	Dr Narjis, Dr Mehrish	Dr Saba, Dr Mariya, Dr Mehrish	
Thursday 5-12-24	**ENT**	**ENT**		**Clinical ENT**			
	Acute & Chronic tonsillitis, pharyngitis, Juvenile Nasopharyngeal Angiofibroma, epistaxis, trauma to face	**ENT Emergencies and surgical procedures**		**Clinical Clerkship ENT (history & examination relevant to Ear)**			
	Lecture hall 3	**Lecture hall 3**					
	Dr Arshad	Dr Ashar Alamgir					
Friday 6-12-24	**08:30AM – 12:00 PM**						
	Clinical ENT						
	Clinical Clerkship history & examination relevant to Nose)						
Saturday 7-12-24	**08:30AM – 02:00 PM**						
	Clinical ENT						
	Clinical Clerkship history & examination relevant to throat)						

BREAK 10:30 AM – 11:00AM

Medicine

Time Table Week 1 (9-12-24 to 14-12-24)

	8:30 AM – 9:30 AM	BREAK 9:30AM – 10:00AM	10:00-12:00	12:00-1:00	1:00-2:00
	LGIS		**Clinical Examination Skills Procedures /Diagnostics**	**SGD/Topic Presentation**	**SDL**
Monday 9-12-24	**Medicine** Obstructive Lung Disease **Lecture hall 3** **Dr Arsalan**		**Clinical Medicine-Pulmonology** Respiratory Examination Back of chest	Case of episodic shortness of breath and wheeze. Case of fever, cough, and right-sided chest pain.	
Tuesday 10-12-24	**Medicine** Respiratory infections **Lecture hall 3** **Dr Arsalan**		**Clinical Medicine -Pulmonology** How to read a CXR	Case of long-standing progressive shortness of breath, swelling of abdomen and feet	
Wednesday 11-12-24	**Medicine** Restrictive Lung Disease and Malignancy **lecture hall 3** **Dr Arsalan**		**Clinical Medicine-Pulmonology** Respiratory Examination Front of chest	Case of headaches and dizziness with occasional blurred vision with high Blood pressure	
Thursday 12-12-24	**Medicine** Hypertension and Ischemic Heart disease **Lecture hall 3** **Dr Asad**		**Clinical Medicine -Pulmonology** ECG leads Placement	History taking and Physical Examination	
Friday 13-12-24	**08:30AM – 9:30 PM** **Clinical Medicine -Cardiology** **Clinical Examination Skills Procedures /Diagnostics** Pleural Tap and Interpretation		**9:30-12:30** **Clinical Medicine** **SDL**		
Saturday 14-12-24	**HOLIDAY**				

Medicine

Time Table Week 2 (16-12-24 to 21-12-24)

	8:30 AM – 9:30 AM	BREAK 9:30AM – 10:00AM	10:00-12:00	12:00-1:00	1:00-2:00
	LGIS		**Clinical Examination Skills Procedures /Diagnostics**	**SGD/Topic Presentation**	**SDL**
Monday 16-12-24	**Medicine** Valvular heart disease **Lecture hall 3** **Dr Asad**		**Clinical Medicine-Pulmonology** Precordium Examination	Case with sudden palpitations, dizziness, tachycardia	
Tuesday 17-12-24	**Medicine** Dysrhythmia and cardiac resuscitation **Lecture hall 3** **Dr Arsalan**		**Clinical Medicine -Pulmonology** Basics of ECG	Case of jaundice, fatigue, and right upper quadrant pain	
Wednesday 18-12-24	**Medicine** Acute Hepatitis **lecture hall 3** **Dr Arsalan**		**Clinical Medicine-Gastrology & Hepatology** Abdominal Examination	Case of ant-HCV positive patient complains of confusion and abdominal distension having bizarre behaviour and tremors.	
Thursday 19-12-24	**Medicine** Chronic Liver Disease **Lecture hall 3** **Dr Asad**		**Clinical Medicine -Gastrology & Hepatology** Endoscopy basics	History taking and Physical Examination	
Friday 20-12-24	**08:30AM – 9:30 PM** **Clinical Medicine -Gastrology & Hepatology** **Clinical Examination Skills Procedures /Diagnostics** Ascitic Tap and Interpretation		**9:30-12:30** **Clinical Medicine** **SDL**		
Saturday 21-12-24	**RECON**				

Medicine

Time Table Week 3 (23-12-24 to 28-12-24)

	8:30 AM – 9:30 AM	BREAK 9:30AM – 10:00AM	10:00-12:00	12:00-1:00	1:00-2:00
	LGIS		**Clinical Examination Skills Procedures /Diagnostics**	**SGD/Topic Presentation**	**SDL**
Monday 23-12-24	**Medicine** Pancreatitis **Lecture hall 3** **Dr Tanveer**		**Clinical Medicine-Gastrology & Hepatology** KUB Examination	Case with decreased urine output for last 12 hours.	
Tuesday 24-12-24	**Medicine** Acute kidney injury **Lecture hall 3** **Dr Asmara**		**Clinical Medicine -Nephrology Fluid, Electrolyte and Acid-Base Imbalance** Urine RE interpretation	Case of generalized edema and periorbital puffiness and frothy urine Case with history of hematuria for last 2 days	
Wednesday 25-12-24	**PUBLIC HOLIDAY**		**PUBLIC HOLIDAY**		
Thursday 26-12-24	**Medicine** Glomerulonephritis **Lecture hall 3** **Dr Asmara**		**Clinical Medicine -Nephrology Fluid, Electrolyte and Acid-Base Imbalance** Electrolyte Imbalance Blood Chemistry Interpretation	History taking and Physical Examination	
Friday 27-12-24	**08:30AM – 9:30 PM** **Clinical Medicine -Nephrology** **Clinical Examination Skills Procedures /Diagnostics** General Physical Examination/Signs Of fluid overload		**9:30-12:30** **Clinical Medicine** **SDL** A 60 year old diabetic and hypertensive male presented with anorexia, nausea, lethargy and easy fatiguability for last 2 months. He also reported multiple episodes of hypoglycemia over last few days		
Saturday 28-12-24	**RECON**				

Medicine

Time Table Week 4 (30-12-24 to 3-1-25)

	8:30 AM – 9:30 AM	BREAK 9:30AM – 10:00AM	10:00-12:00	12:00-1:00	1:00-2:00
	LGIS		**Clinical Examination Skills Procedures /Diagnostics**	**SGD/Topic Presentation**	**SDL**
Monday 30-12-24	**Medicine** Renal Replacement Therapy **Lecture hall 3** **Dr Mudassar AP Nephrology**		**Clinical Medicine-Nephrology Fluid, Electrolyte and Acid-Base Imbalance**		
			RFTs Interpretation	A 50-year-old known diabetic and hypertensive male complains of increasing shortness of breath, fatigue and persistent vomiting	
Tuesday 31-12-24	**Medicine** Potassium Disorders **Lecture hall 3** **Dr Mudassar**		**Clinical Medicine -Nephrology Fluid, Electrolyte and Acid-Base Imbalance**		
			General Physical Examination	A 23-year-old female presented with confusion and fatigue following persistent vomiting.	
Wednesday 1-1-25	**Medicine** Hyponatremia **Lecture hall 3** **Dr Usama**		**Clinical Medicine -Nephrology Fluid, Electrolyte and Acid-Base Imbalance**		
			Abdominal examination	A 65-year-old female presents with confusion and headaches after increasing her water intake during a marathon training session	
Thursday 2-1-25	**Medicine** Hypernatremia **Lecture hall 3** **Dr Usama**		**Clinical Medicine -Nephrology Fluid, Electrolyte and Acid-Base Imbalance**		
			ABGs interpretation	An 80-year-old male with a history of dementia is admitted with signs of dehydration and lethargy, likely resulting from insufficient fluid intake	
Friday 3-1-25	**08:30AM – 9:30 PM**		**9:30-12:30**		
	Medicine	**Clinical Medicine - Nephrology**	**Clinical Medicine**		
	Acid base disorders	CVP/Dialysis Catheter	**SDL**		
	Dr Mudassar		A 45 years old male patient, history of CKD on conservative management, presented with vomiting and shortness of breath. ABGs show PH- 7.23 pCO2- 25 HCO3- 5.4 2.		
Saturday 28-12-24					

Medicine

Time Table Week 5 (6-1-25 to 11-1-25)

	8:30 AM – 9:30 AM	BREAK 9:30AM – 10:00AM	10:00-12:00	12:00-1:00	1:00-2:00
	LGIS		**Clinical Examination Skills Procedures /Diagnostics**	**SGD/Topic Presentation**	**SDL**
Monday 6-1-25	**Medicine** Viral Infections specifically dengue, HIV and Respiratory Viral Infections **Lecture hall 3** Dr. Mujeeb Khan		**Clinical Medicine -Infectious Diseases**		
			Interpretation of Serological Tests (Hepatitis, Brucellosis, Amoebiasis, HIV etc.)	.	
Tuesday 7-1-25	**Medicine** Bacterial infections (enteric fever) **Lecture hall 3** Dr. Mujeeb Khan		**Clinical Medicine -Infectious Diseases**		
Wednesday 8-1-25	**Medicine** Parasitic Infections Malaria **Lecture hall 3** Dr. Mujeeb Khan		**Clinical Medicine -Infectious Diseases**		
Thursday 2-1-25 Thursday 9-1-25	**Medicine** **lecture hall 3** Dr. Mujeeb Khan **Medicine**		**Clinical Medicine -Infectious Diseases**		

Friday 10-1-25	**08:30AM – 9:30 PM**	**Clinical Medicine -Nephrology**	**9:30-12:30** **Clinical Medicine**
		Clinical Examination Skills Procedures /Diagnostics	**SDL**
Saturday 11-1-25			

Medicine

Time Table Week 5 (6-1-25 to 11-1-25)

	8:30 AM – 9:30 AM	BREAK 9:30AM – 10:00AM	10:00am – 2:00 pm	
Monday 6-1-25	**Medicine** Viral Infections specifically dengue, HIV and Respiratory Viral Infections **Lecture hall 3** Dr. Mujeeb Khan		**Clinical Medicine -Infectious Diseases**	
			Roll No 1-16 MU1	Roll No 17-34 MU2
Tuesday 7-1-25	**Medicine** Bacterial infections (enteric fever) **Lecture hall 3** Dr. Mujeeb Khan		**Clinical Medicine Infectious Diseases**	
			Roll No 1-16 MU1	Roll No 17-34 MU2
Wednesday 8-1-25	**Medicine** Parasitic Infections Malaria **lecture hall 3** Dr. Mujeeb Khan		**Clinical Medicine Infectious Diseases**	
			Roll No 1-16 MU1	Roll No 17-34 MU2
Thursday 9-1-25	**Medicine** Acid peptic disease **Lecture hall 3** Dr Sadia		**Clinical Medicine Gastroenterology and Hepatology**	
			Roll No 1-16 MU1	Roll No 17-34 MU2
Friday 10-1-25	**08:00AM – 12:00 PM** **Clinical Medicine Gastroenterology and Hepatology** **Clinical Clerkship**		**Assessment on LMS**	
	Roll No 1-16 MU1	Roll No 17-34 MU2		
Saturday 11-1-25				

Time Table Week 6 (13-1-2025 to 18-1-25)

	8:30 AM – 9:30 AM	BREAK 9:30AM – 10:00AM	10:00am – 2:00 pm	
Monday 13-1-25	**Medicine** Diarrhea and Malabsorption **Lecture hall 3** Dr. Tanveer/ AP		**Clinical Medicine Gastroenterology and Hepatology**	
			Roll No 1-16 MU1	Roll No 17-34 MU2
Tuesday 14-1-25	**Medicine** GI bleed **Lecture hall 3** Dr. Tanveer/ AP		**Clinical Medicine Gastroenterology and Hepatology**	
			Roll No 1-16 MU1	Roll No 17-34 MU2
Wednesday 15-1-25	**Medicine** Stroke **lecture hall 3** Dr. Waqas		**Clinical Medicine Neurology**	
			Roll No 1-16 MU1	Roll No 17-34 MU2
Thursday 16-1-25	**Medicine** CNS infections **Lecture hall 3** Dr. Waqas		**Clinical Medicine Neurology**	
			Roll No 1-16 MU1	Roll No 17-34 MU2
Friday 17-1-25	**08:30AM – 12:00 PM** **Clinical Medicine Neurology** **Clinical Clerkship**			
	Roll No 1-16 MU1	Roll No 17-34 MU2		
Saturday 18-1-25			**Assessment on LMS**	

Time Table Week 7 (20-1-25 to 25-1-25)

	8:30 AM – 9:30 AM	BREAK9:30AM – 10:00AM	10:00am – 2:00 pm	
Monday 20-1-25	**Medicine** Epilepsy **Lecture hall 3** Dr Waqas		**Clinical Medicine Neurology**	
			Roll No 1-16 MU1	Roll No 17-34 MU2
Tuesday 21-1-25	**Medicine** Diabetes **Lecture hall 3** Dr. Lubna		**Clinical Medicine Endocrinology**	
			Roll No 1-16 MU1	Roll No 17-34 MU2
Wednesday 22-1-25	**Medicine** Thyroid Disorders **lecture hall 3** Dr. Lubna		**Clinical Medicine Endocrinology**	
			Roll No 1-16 MU1	Roll No 17-34 MU2
Thursday 23-1-25	**Medicine** Endocrinopathies **Lecture hall 3** Dr. Lubna		**Clinical Medicine Endocrinology**	
			Roll No 1-16 MU1	Roll No 17-34 MU2
Friday 24-1-25	**08:30AM – 12:00 PM** **Clinical Medicine Endocrinology** **Clinical Clerkship**		**Assessment on LMS**	
	Roll No 1-16 MU1	Roll No 17-34 MU2		
Saturday 25-1-25				

Time Table Week 8 (27-1-25 to 1-2-25)

	8:30 AM – 9:30 AM	BREAK 9:30AM – 10:00AM	10:00am – 2:00 pm	
Monday 27-1-25	**Medicine** Rheumatoid Arthritis **Lecture hall 3** Dr Arif		**Clinical Medicine Rheumatology**	
			Roll No 1-16 MU1	Roll No 17-34 MU2
Tuesday 28-1-25	**Medicine** SLE and vasculotidies **Lecture hall 3** Dr Arif		**Clinical Medicine Rheumatology**	
			Roll No 1-16 MU1	Roll No 17-34 MU2
Wednesday 29-1-25	**Medicine** Anemia **lecture hall 3** Dr Arif		**Clinical Medicine -Hematology and Related Oncology**	
			Roll No 1-16 MU1	Roll No 17-34 MU2
Thursday 30-1-25	**Medicine** Platelet disorders and hematological malignancy **Lecture hall 3** Dr Arif		**Clinical Medicine -Hematology and Related Oncology**	
			Roll No 1-16 MU1	Roll No 17-34 MU2
Friday 31-1-25	**08:30AM – 12:00 PM** **Clinical Medicine Hematology and Related Oncology** **Clinical Clerkship**			
	Roll No 1-16 MU1		Roll No 17-34 MU2	

Medicine & Allied
Cardiology
Time Table Week 1 (3-2-25 to 8-2-25)

	8:30 AM – 9:30 AM	09:30am – 10:30am	BREAK 10:00AM – 10:30AM	11:00am – 2:00 pm
Monday 3-2-25	Cardiology	Cardiology		Clinical clerkship Cardiology
	Lecture hall 3	Lecture hall 3		General Approach to the cardiovascular Patient
	General Approach to the Cardiovascular Patient	Communication with Cardiovascular Patients		
Tuesday 4-2-25	Cardiology	Cardiology		Clinical clerkship Cardiology
	Acute Coronary Syndrome: Clinical Features and Management	HYPERTENSION		Communication with cardiovascular Patients
	Lecture hall 3	Lecture hall 3		
Wednesday 5-2-25	Cardiology	Cardiology		Clinical clerkship Cardiology
	Valvular Heart Diseases: Etiology, Diagnosis, and Management	Cardiomyopathies: Types, Diagnosis, and Treatment		Case discussion related to Acute coronary syndrome
	lecture hall 3	Lecture hall 3		
Thursday 6-2-25	Cardiology	Cardiology		Clinical clerkship Cardiology
	Lecture hall 3	Lecture hall 3		Case discussion related to Valvular heart disease
	Basics of ECG Reading: Understanding Normal and Abnormal Patterns	Advanced ECG: Arrhythmias and Conduction Disorders		
Saturday 8-2-25	Cardiology		Clinical Cardiology	
			Clinical Clerkship	
	Lecture hall 3			
			ECG reading, Cardiovascular Emergencies	

Medicine & Allied
Cardiology
Time Table Week 2 (10-2-25 to 15-2-25)

	8:30 AM – 9:30 AM	09:30am – 10:30am		11:00am – 2:00 pm
Monday 10-2-25	**Cardiology**	**Cardiology**	**BREAK 10:30AM – 11:00 AM**	**Clinical clerkship Cardiology**
	Cardiovascular Emergencies: Tamponade, STEMI, and Aortic Dissection	**Pericardial Diseases: Diagnosis and Management**		
	Lecture hall 3	**Lecture hall 3**		**Outpatient Clinics: General Cardiology Cases**
Tuesday 11-2-25	**Cardiology**	**Cardiology**		**Clinical clerkship Cardiology**
	Infective Endocarditis: Diagnosis, Duke Criteria, and Treatment	**Myocarditis: Causes, Presentation, and Management**		
	Lecture hall 3	**Lecture hall 3**		**Observing common cardiac procedures**
Wednesday 12-2-25	**Cardiology**	**Cardiology**		**Clinical clerkship Cardiology**
	lecture hall 3	**Lecture hall 3**		**Case discussion related to Valvular heart disease**
	Preventive Cardiology: Risk Factor Management	Cardiovascular Pharmacology: Antiplatelets, Anticoagulants, and Beta-Blockers		
Thursday 13-2-25	**Cardiology**	**Cardiology**		**Clinical clerkship Cardiology**
	Lecture hall 3	**Lecture hall 3**		**Case discussion related to Heart Failure**
	Case based discussion Ischemic heart disease, heart failure	Case based discussion Arrhythmia, valvular heart disease		
Friday 14-2-25	**08:00AM – 12:00 PM**			
	Clinical Cardiology			
	Clinical Clerkship			
	ECG READING, CARDIOVASCULAR EMERGENCIES			
Saturday 15-2-25				

Medicine & Allied
Dermatology
Time Table Week 1 (17-2-25 to 22-2-25)

	8:30 AM – 9:30 AM	09:30am – 10:30am	BREAK 10:03AM – 11:00AM	11:00am – 2:00 pm
Monday 17-2-25	Dermatology	Dermatology		Clinical clerkship Dermatology
	Lecture hall 3	Lecture hall 3		
Tuesday 18-2-25	Dermatology	Dermatology		Clinical clerkship Dermatology
	Lecture hall 3	Lecture hall 3		
Wednesday 19-2-25	Dermatology	Dermatology		Clinical clerkship Dermatology
	lecture hall 3	Lecture hall 3		
Thursday 20-2-25	Dermatology	Dermatology		Clinical clerkship Dermatology
	Lecture hall 3	Lecture hall 3		
Friday 21-2-25	08:00AM – 12:00 PM			
	Clinical Dermatology			
	Clinical Clerkship			
Saturday 22-2-25	08:30AM – 10:30 PM	11:00am – 2:00 pm		
	Clinical Dermatology	Co-curricular Activity		
	Clinical Clerkship	Sports Ground Main Campus RMU		

Medicine & Allied

Radiology Time Table Week 1 (24-2-25 to 1-3-25)

	8:30 AM – 9:30 AM	09:30am – 10:30am		11:00am – 2:00 pm
Monday 24-2-25	**Radiology**	**Radiology**	**BREAK 10:30AM – 11:00AM**	**Clinical clerkship Radiology -- Radiology department Round & X Ray Unit**
	Introduction to Radiology and Radiographic Techniques	**Basics of X-Ray Positioning & Interpretation**		
	Conference Room, Radiology Department HFH	Conference Room, Radiology Department HFH		
	Dr. Riffat Raja	**Dr. Riffat Raja**		
Tuesday 25-2-25	**Radiology**	**Radiology**		**Clinical clerkship Radiology- CT Scan Unit**
	Chest Radiography: pulmonary Pathologies	**Basics Of CT Chest & Common Pathologies**		
	Conference Room, Radiology Department HFH	Conference Room, Radiology Department HFH		
	Dr. Beenish Nadeem	**Dr. Beenish Nadeem**		
Wednesday 26-2-25	**Radiology**	**Radiology**		**Clinical clerkship Radiology— Ultrasound Unit**
	Basics Of Ultrasound	**Scanning Of abdomen and Pelvis**		
	Conference Room, Radiology Department HFH	Conference Room, Radiology Department HFH		
	Dr. Aniqua Saleem	**Dr. Aniqua Saleem**		
Thursday 27-2-25	**Radiology**	**Radiology**		**Clinical clerkship Radiology--- Radiation safety protocols**
	Introduction to Nuclear Medicine	**Radiation Safety**		
	Conference Room, Radiology Department HFH	Conference Room, Radiology Department HFH		
	Dr Saba Binte Kashmir	**Dr Saba Binte Kashmir**		
Friday 28-2-25	**08:00AM – 12:00 PM**			
		Clinical Radiology		
		Clinical Clerkship		
		Equipment Handling		
Saturday 1-3-25				

Medicine & Allied
Radiology Time Table Week 2 (3-3-25 to 8-3-25)

	8:30 AM – 9:30 AM	09:30am – 10:30am	BREAK 10:30AM – 11:00AM	11:00am – 2:00 pm
Monday 03-3-25	**Radiology**	**Radiology**		**Clinical clerkship Radiology -- CT and MRI Unit**
	Brain Imaging	**Spine Imaging**		
	Conference Room, Radiology department HFH	Conference Room, Radiology department HFH		
	Dr. Riffat Raja	**Dr. Riffat Raja**		
Tuesday 04-3-25	**Radiology**	**Radiology**		**Clinical clerkship Radiology- CT Unit to observe CT Angiography**
	Introduction to Cardiovascular Imaging	**Common Pathologies in CVS imaging**		
	Conference Room, Radiology department HFH	Conference Room, Radiology department HFH		
	Dr. Beenish Nadeem	**Dr. Beenish Nadeem**		
Wednesday 05-3-25	**Radiology**	**Radiology**		**Clinical clerkship Radiology— X Ray, CT & MRI Unit**
	Introduction to Musculoskeletal Imaging	**Common Musculoskeletal Pathologies**		
	Conference Room, Radiology department HFH	Conference Room, Radiology department HFH		
	Dr. Aniqua Saleem	**Dr. Aniqua Saleem**		
Thursday 06-3-25	**Radiology**	**Radiology**		**Clinical clerkship Radiology--- Observation of Interventional Procedures**
	Introduction to Interventional Radiology	**Common Interventional Procedures**		
	Conference Room, Radiology department HFH	Conference Room, Radiology department HFH		
	Dr Saba Binte Kashmir	**Dr Saba Binte Kashmir**		
Friday 07-3-25	**08:00AM – 12:00 PM**			
	Clinical Radiology			
	Clinical Clerkship			
	Case Reviews and Clinical Correlation			
Saturday 08-3-25				

Family Medicine

Week 1(10-3-2025 to 15-3-2025)

	8:30 AM – 9:30 AM	09:30am – 10:30am	BREAK 10:30AM –11:00AM	11:00am – 2:00 pm
Monday 10-3-25	Family Medicine	Family Medicine		Clinical clerkship Family Medicine
	Lecture hall 3	Lecture hall 3		
Tuesday 11-3-25	Family Medicine	Family Medicine		Clinical clerkship Family Medicine
	Lecture hall 3	Lecture hall 3		
Wednesday 12-3-25	Family Medicine	Family Medicine		Clinical clerkship Family Medicine
	lecture hall 3	Lecture hall 3		
Thursday 13-3-25	Family Medicine	Family Medicine		Clinical clerkship Family Medicine
	Lecture hall 3	Lecture hall 3		
Friday 14-3-25	Family Medicine	Clinical clerkship Family Medicine (9:30-12:30)		
	Lecture hall 3			
Saturday 15-3-25	Assessment on LMS			

Family Medicine

Week 2(17-3-2025 to 22-3-2025)

	8:30 AM – 9:30 AM	09:30am – 10:30am	BR	11:00am – 2:00 pm
Monday	Family Medicine	Family Medicine		Clinical clerkship Family Medicine

17-3-25	**Lecture hall 3**	**Lecture hall 3**		
Tuesday 18-3-25	**Family Medicine**	**Family Medicine**		**Clinical clerkship Family Medicine**
	Lecture hall 3	**Lecture hall 3**		
Wednesday 19-3-25	**Family Medicine**	**Family Medicine**		**Clinical clerkship Family Medicine**
	lecture hall 3	**Lecture hall 3**		
Thursday 20-3-25	**Family Medicine**	**Family Medicine**		**Clinical clerkship Family Medicine**
	Lecture hall 3	**Lecture hall 3**		
Friday 21-3-25	**Family Medicine**	**Clinical clerkship Family Medicine (9:30-12:30)**		
	Lecture hall 3			
Saturday 22-3-25	**Assessment on LMS**			

Ramadan holidays

	8:30 AM – 9:30 AM	**09:30am – 10:30am**		**11:00am – 2:00 pm**

Monday 24-3-25	**Ramadan Holidays**		**Ramadan Holidays**
Tuesday 25-3-25	**Ramadan Holidays**		**Ramadan Holidays**
Wednesday 26-3-25	**Ramadan Holidays**		**Ramadan Holidays**
Thursday 27-3-25	**Ramadan Holidays**		**Ramadan Holidays**
Friday 28-3-25	**Ramadan Holidays**		
Saturday 29-3-25	**Ramadan Holidays**		

Surgery

Week 0 (3-4-2025 to 6-4-2025)

	8:30 AM – 9:30 AM	09:30am – 10:30am	BREAK 10:00AM – 10:30AM	11:00am – 2:00 pm	
Monday 31-3-25	**Eid holidays**			**Eid holidays**	
Tuesday 1-4-25	**Eid holidays**			**Eid holidays**	
Wednesday 2-4-25	**Eid holidays**			**Eid holidays**	
Thursday 3-4-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
				Roll No 1-16 SU1	Roll No 17-34 SU2
	Lecture hall 3	**Lecture hall 3**			
Friday 5-4-25	**08:00AM – 12:00 PM**			**Assessment on LMS**	
	Clinical Surgery				
	Clinical Clerkship				
	Roll No 1-16 SU1		Roll No 17-34 SU2		
Saturday 6-4-25	**08:30AM – 10:30 PM**		**11:00am – 2:00 pm**		
	Clinical Surgery		**Co-curricular Activity**		
	Clinical Clerkship		**Sports Ground Main Campus RMU**		
	Roll No 1-16 SU1	Roll No 17-34 SU2			

Surgery

Week 1 (8-4-2025 to 13-4-2025)

	8:30 AM – 9:30 AM	09:30am – 10:30am	BREAK 10:30AM – 11:00AM	11:00am – 2:00 pm	
Monday 8-4-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	Lecture hall 3	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Tuesday 9-4-25 -	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	Lecture hall 3	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Wednesday 10-4-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	lecture hall 3	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Thursday 11-4-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	Lecture hall 3	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Friday 12-4-25	**08:30AM – 12:00 PM**				
	Clinical Surgery				
	Clinical Clerkship				
	Roll No 1-16 SU1			Roll No 17-34 SU2	
Saturday 13-4-25	**08:30AM – 10:30 PM**			**11:00am – 2:00 pm**	
	Clinical Surgery			**Co curricular Activity**	
	Clinical Clerkship			**Sports Ground Main Campus RMU**	
	Roll No 1-16 SU1	Roll No 17-34 SU2			

Assessment on LMS

Surgery

Week 2 (15-4-2025 to 20-4-2025)

	8:30 AM – 9:30 AM	09:30am – 10:30am	BR	11:00am – 2:00 pm
Monday	**Surgery**	**Surgery**		**Clinical clerkship Surgery**

15-4-25	**Lecture hall 3**	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Tuesday 16-4-25 -	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	Lecture hall 3	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Wednesday 17-4-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	lecture hall 3	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Thursday 18-4-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	Lecture hall 3	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Friday 19-4-25	**08:30AM – 12:00 PM** **Clinical Surgery** **Clinical Clerkship**			Roll No 1-16 SU1	Roll No 17-34 SU2
Saturday 20-4-25	**08:30AM – 10:30 PM** **Clinical Surgery** **Clinical Clerkship**		**11:00am – 2:00 pm** **Co curricular Activity** **Sports Ground Main Campus RMU**		
	Roll No 1-16 SU1	Roll No 17-34 SU2			

Assessment on LMS

Surgery

Week 3 (22-4-2025 to 27-4-2025)

	8:30 AM – 9:30 AM	09:30am – 10:30am	B	11:00am – 2:00 pm
Monday	**Surgery**	**Surgery**		**Clinical clerkship Surgery**

22-4-25	**Lecture hall 3**	**Lecture hall 3**			
				Roll No 1-16 SU1	Roll No 17-34 SU2
Tuesday 23-4-25 -	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	Lecture hall 3	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Wednesday 24-4-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	lecture hall 3	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Thursday 25-4-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	Lecture hall 3	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Friday 26-4-25	**08:30AM – 12:00 PM** **Clinical Surgery** **Clinical Clerkship**				
	Roll No 1-16 SU1		Roll No 17-34 SU2		
Saturday 27-4-25	**08:30AM – 10:30 PM**		**11:00am – 2:00 pm**		
	Clinical Surgery		**Co curricular Activity**		
	Clinical Clerkship		**Sports Ground Main Campus RMU**		
	Roll No 1-16 SU1	Roll No 17-34 SU2			

Assessment on LMS

Surgery

Week 4 (29-4-2025 to 4-5-2025)

	8:30 AM – 9:30 AM	09:30am – 10:30am	BREAK	11:00am – 2:00 pm	
Monday 29-4-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	Lecture hall 3	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2

Tuesday 30-4-25 -	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
				Roll No 1-16 SU1	Roll No 17-34 SU2
	Lecture hall 3	**Lecture hall 3**			
Wednesday 1-5-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
				Roll No 1-16 SU1	Roll No 17-34 SU2
	lecture hall 3	**Lecture hall 3**			
Thursday 2-5-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
				Roll No 1-16 SU1	Roll No 17-34 SU2
	Lecture hall 3	**Lecture hall 3**			
Friday 3-5-25	**08:30 AM – 12:00 PM**				
	Clinical Surgery				
	Clinical Clerkship				
	Roll No 1-16 SU1		Roll No 17-34 SU2		
Saturday 4-5-25	**08:30AM – 10:30 PM**		**11:00am – 2:00 pm**		
	Clinical Surgery		**Co-curricular Activity**		
	Clinical Clerkship		**Sports Ground Main Campus RMU**		
	Roll No 1-16 SU1	Roll No 17-34 SU2			

Assessment on LMS

Surgery

Week 5 (6-5-2025 to 11-5-2025)

	8:30 AM – 9:30 AM	**09:30am – 10:30am**		**11:00am – 2:00 pm**	
Monday 6-5-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
				Roll No 1-16 SU1	Roll No 17-34 SU2
	Lecture hall 3	**Lecture hall 3**			
Tuesday 7-5-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	

BREAK

-	**Lecture hall 3**	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Wednesday 8-5-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	lecture hall 3	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Thursday 9-5-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	Lecture hall 3	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Friday 10-5-25	**08:00AM – 12:00 PM** **Clinical Surgery** **Clinical Clerkship**			**Assessment on LMS**	
	Roll No 1-16 SU1	Roll No 17-34 SU2			
Saturday 11-5-25	**08:30AM – 10:30 PM** **Clinical Surgery**	**11:00am – 2:00 pm** **Co-curricular Activity**			
	Clinical Clerkship	**Sports Ground Main Campus RMU**			
	Roll No 1-16 SU1	Roll No 17-34 SU2			

Surgery

Week 6 (13-5-2025 to 18-5-2025)

	8:30 AM – 9:30 AM	09:30am – 10:30am	BREAK 10:00AM –	11:00am – 2:00 pm	
Monday 13-5-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	Lecture hall 3	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Tuesday 14-5-25 -	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	Lecture hall 3	**Lecture hall 3**		Roll No 1-16	Roll No 17-34

				SU1	SU2
Wednesday 15-5-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	lecture hall 3	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Thursday 16-5-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	Lecture hall 3	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Friday 17-5-25	**08:00AM – 12:00 PM**			**Assessment on LMS**	
	Clinical Surgery				
	Clinical Clerkship				
	Roll No 1-16 SU1		Roll No 17-34 SU2		
Saturday 18-5-25	**08:30AM – 10:30 PM**		**11:00am – 2:00 pm**		
	Clinical Surgery		**Co curricular Activity**		
	Clinical Clerkship		**Sports Ground Main Campus RMU**		
	Roll No 1-16 SU1	Roll No 17-34 SU2			

Surgery

Week 7 (29-4-2025 to 25-5-2025)

	8:30 AM – 9:30 AM	**09:30am – 10:30am**	**BREAK 10:00AM –**	**11:00am – 2:00 pm**	
Monday 20-5-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	Fracture Classifications Complications				
	Lecture hall 3	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Tuesday 21-5-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	

-	**Lecture hall 3**	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Wednesday 22-5-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	lecture hall 3	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Thursday 23-5-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**	
	Lecture hall 3	**Lecture hall 3**		Roll No 1-16 SU1	Roll No 17-34 SU2
Friday 24-5-25	**08:00AM – 12:00 PM** **Clinical Surgery** **Clinical Clerkship**			**Assessment on LMS**	
	Roll No 1-16 SU1	Roll No 17-34 SU2			
Saturday 25-5-25	**08:30AM – 10:30 PM** **Clinical Surgery**	**11:00am – 2:00 pm** **Co curricular Activity**			
	Clinical Clerkship	**Sports Ground Main Campus RMU**			
	Roll No 1-16 SU1	Roll No 17-34 SU2			

Surgery

Surgery Week 8 (27-5-2025 to 1-6-2025)

	8:30 AM – 9:30 AM	09:30am – 10:30am	BREAK 10:00AM –	11:00am – 2:00 pm
Monday 27-5-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**
	Lecture hall 3	**Lecture hall 3**		
Tuesday 28-5-25 -	**Surgery**	**Surgery**		**Clinical clerkship Surgery**
	Lecture hall 3	**Lecture hall 3**		

Wednesday 29-5-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**
	lecture hall 3	**Lecture hall 3**		
Thursday 30-5-25	**Surgery**	**Surgery**		**Clinical clerkship Surgery**
	Lecture hall 3	**Lecture hall 3**		
Friday 31-5-25	**08:00AM – 12:00 PM**			**Assessment on LMS**
	Clinical Orthopedic			
	Clinical Clerkship			
Saturday 1-6-25	**08:30AM – 10:30 PM**	**11:00am – 2:00 pm**		
	Clinical Orthopedic	**Co-curricular Activity**		
	Clinical Clerkship	**Sports Ground Main Campus RMU**		

Surgery& Allied

Orthopedics Week 1 (3-6-2025 to 8-6-2025)

	8:30 AM – 9:30 AM	09:30am – 10:30am		11:00am – 2:00 pm
Monday 3-6-25	**Orthopedics**	**Orthopedic**	**BREAK**	**Clinical clerkship Orthopedic**
	Lecture hall 3	**Lecture hall 3**		
Tuesday 4-6-25	**Orthopedic**	**Orthopedic**		**Clinical clerkship Orthopedic**

	Lecture hall 3	**Lecture hall 3**		
Wednesday 5-6-25	**Orthopedic**	**Orthopedic**		**Clinical clerkship Orthopedic**
	lecture hall 3	**Lecture hall 3**		
Thursday 6-6-25	**Eid Ul Adha Break**			**Eid Ul Adha Break**
Friday 7-6-25	**Eid Ul Adha Break**			**Eid Ul Adha Break**
Saturday 8-6-25	**Eid Ul Adha Break**			

Surgery& Allied

Orthopedics Week 2 (10-6-2025 to 15-6-2025)

	8:30 AM – 9:30 AM	**09:30am – 10:30am**		**11:00am – 2:00 pm**
Monday 10-6-25	**Orthopedics**	**Orthopedics**	**BREAK 10:00AM –**	**Clinical clerkship Orthopedics**
	Lecture hall 3	**Lecture hall 3**		
Tuesday 11-6-25 -	**Orthopedics**	**Orthopedics**		**Clinical clerkship Orthopedics**
	Lecture hall 3	**Lecture hall 3**		

Wednesday 12-6-25	Orthopedics	Orthopedics		Clinical clerkship Orthopedics
	lecture hall 3	Lecture hall 3		
Thursday 13-6-25	Orthopedics	Orthopedics		Clinical clerkship Orthopedic
	Lecture hall 3	Lecture hall 3		
Friday 14-6-25	08:00AM – 12:00 PM			Assessment on LMS
	Clinical Orthopedic			
	Clinical Clerkship			
Saturday 15-6-25	08:30AM – 10:30 PM	11:00am – 2:00 pm		
	Clinical Orthopedic	Co-curricular Activity		
	Clinical Clerkship	Sports Ground Main Campus RMU		

Surgery& Allied

Urology Week 1 (17-6-2025 to 22-6-2025)

	8:30 AM – 9:30 AM	09:30am – 10:30am	BREAK 10:00AM – 10:30AM	11:00am – 2:00 pm
Monday 17-6-25	Urology	Urology		Clinical clerkship Urology
	Lecture hall 3	Lecture hall 3		
Tuesday 18-6-25 -	Urology	Urology		Clinical clerkship Urology
	Lecture hall 3	Lecture hall 3		
Wednesday 19-6-25	Urology	Urology		Clinical clerkship Urology

	lecture hall 3	Lecture hall 3		
Thursday 20-6-25	**Urology**	**Urology**		Clinical clerkship **Urology**
	Lecture hall 3	Lecture hall 3		
Friday 21-6-25	08:00AM – 12:00 PM			Assessment on LMS
	Clinical **Urology**			
	Clinical Clerkship			
Saturday 22-6-25	08:30AM – 10:30 PM	11:00am – 2:00 pm		
	Clinical **Urology**	Co-curricular Activity		
	Clinical Clerkship	Sports Ground Main Campus RMU		

Surgery& Allied

Urology Week 2 (24-6-2025 to 28-6-2025)

	8:30 AM – 9:30 AM	09:30am – 10:30am		11:00am – 2:00 pm
Monday 24-6-25	**Urology**	**Urology**	BREAK 10:00AM – 10:30AM	Clinical clerkship **Urology**
	Lecture hall 3	Lecture hall 3		
Tuesday 25-6-25 -	**Urology**	**Urology**		Clinical clerkship **Urology**
	Lecture hall 3	Lecture hall 3		
Wednesday 26-6-25	**Urology**	**Urology**		Clinical clerkship **Urology**
	lecture hall 3	Lecture hall 3		
Thursday 27-6-25	**Urology**	**Urology**		Clinical clerkship **Urology**
	Lecture hall 3	Lecture hall 3		

Friday 28-6-25	**08:00AM – 12:00 PM**			**Assessment on LMS**
	Clinical Urology			
	Clinical Clerkship			
Saturday 29-6-25	**08:30AM – 10:30 PM**	**11:00am – 2:00 pm**		
	Clinical Urology	**Co-curricular Activity**		
	Clinical Clerkship	**Sports Ground Main Campus RMU**		

Monitoring

Monitoring of the RMU-Al Azhar Collaboration

Effective monitoring is essential to ensure that the objectives of the academic collaboration are achieved and that both institutions benefit from the partnership. The following framework outlines key aspects of monitoring:

1. Monitoring Objectives

- **Assess Progress**: Evaluate the implementation of planned activities, including student exchange programs, clinical training, and research projects.
- **Ensure Quality**: Monitor the quality of education, mentorship, and resources provided to students and faculty.
- **Identify Challenges**: Detect issues early, such as logistical problems, academic gaps, or cultural barriers, and take corrective actions.
- **Evaluate Impact**: Measure the impact of the collaboration on students' learning outcomes, faculty development, and institutional growth.

2. Key Monitoring Indicators

Academic Indicators

- Performance in assessments, clinical skills, and research outputs.

Support for Gaza Students

- Accessibility of psychosocial support services for war-affected students.
- Retention rates and academic performance of Gaza students in RMU programs.

3. Monitoring Mechanisms

Regular Reporting

- Prepare periodic reports detailing achievements, challenges, and recommendations.
- Include input from students, faculty, and administrators from both institutions.

Feedback Collection

- Conduct regular surveys and interviews with participating students and faculty to gather insights.
- Use feedback to improve program activities and address concerns promptly.

Technology Use

- Utilize digital tools like learning management systems (LMS) and data analytics to track student progress and program outcomes.
- Maintain a shared platform for real-time updates and collaboration.

Visit of Al-Khidmat and Doctors of Rehman for monitoring

Annexure A

S. No	Name	Gender	Blood group	Typhoid vaccine	Influenza vaccine	Date	Hepatitis B vaccine	Date
1	Alaa a. M. Soboh	F	B Positive	Done	Done	20/11/024	First dose given	31/10/2024
2	Alaa Omar Abedalaqalek Alajjouri	F	B Positive	Done	Done	18/11/2024	First dose given	31/10/2024
3	Arwa R. M. Bolbol	F	O Positive	Done	Done	19/11/2024	First dose given	31/10/2024
4	Asmaa Zakria Ahmad Alnajjar	F	A Positive	Done	Done	19/11/ 2024	First dose given	31/10/2024
5	Bisan M S.Saed	F		Done	Done	18/11/2024	First dose given	31/10/2024
6	Dima N. A. Aldalsa	F	A Positive	Done	Done	19 /11/ 2024	First dose given	31/10/2024
7	Eman H. H. Kuheil	F	O Negative	Done	Done	20/11/2024	First dose given	31/10/2024
8	Haya M. A. Alfarra	F	B positive	Done	Done	19/11/ 2024	First dose given	31/10/2024
9	Haya M.S. Alkahlout	F						
10	Heba M M Mourtaga	F	A Positive		Done	19/11/2024	First dose given	31/10/2024

11	Lamis A A. Alfarra	F	B Positive	Done	Done	19/11/2024	First dose given	31/10/2024
12	Marah Akram Hassan Nijim	F	A Positive	Done	Done	19/11/2024	First dose given	31/10/2024
13	Nour T M Diab	F		Done	Done	19/11/2024	First dose given	31/10/2024
14	Tagreed M. M. Masoud	F	A Positive		Done	19 /11/2024	First dose given	31/10/2024
15	Yara a. H. Alsayedsalim	F	A Positive	Done	Done	19/11/2024	First dose given	31/10/2024
16	Abdallah W. A. Muhaisen	M	B Positive	Done	Done	19/11/2024	First dose given	31/10/2024
17	Abdulla W A Daoud	M					First dose given	31/10/2024
18	Basel H M. Abusaqer	M	A Positive	Done	Done	19/11/2024	First dose given	31/10/2024
19	Ghaith N H Airayyes	M	O Positive	Done	Done	19/11/2024	First dose given	31/10/2024
20	Ibrahim F. A. Muhaisen	M	B Positive	Done	Done	19/11/2024	First dose given	31/10/2024
21	Karim k. M. Altawashi	M	O Positive	Done	Done	20/11/2024	First dose given	31/10/2024
22	Karim N. H. Aljurf	M	A Positive	Done	Done	20/11/2024	First dose given	31/10/2024
23	Mahmoud M. M. Shamia	M	AB Positive	Done	Done	19/11/2024	First dose given	31/10/2024
24	Mohamed R M Tahtawi	M				20/11/2024	First dose given	31/10/2024
25	Mohammed a. J. Iamad	M	A Positive	Done	Done	19/11/2024	First dose given	31/10/2024

27	Mohammed k s zreid	M	O positive	Done	Done	19 /11/2024	First dose given	31/10/2024
29	Naser r. N. Abushammala	M	B Positive	Done	Done	20/11/2024	First dose given	31/10/2024
30	Omar J. S. Aldadah	M	O Positive	Done	Done	19/11/2024	First dose given	31/10/2024
31	Tareq J. Y. Eleyan	M	O Negative	Done	Done	20/11/2024	First dose given	31/10/2024
32	Monther B. A. Karaja	M	O Positive	Done	Done	19/11/2024	First dose given	31/10/2024
33	Mohammed S. S. Jaber	M	O Positive	Done	Done	19/11/2024	First dose given	31/10/2024
34	Hammam M. S. Helassa	M	O Negative	Done	Done			

Annexure B
Psychological Assessment Report (2-11-2024)
Rawalpindi Medical University

Sr. No	Name	Age	Gender	PHQ-9 Score	Interpretation
01	Karim K.M. Ahawashi	23	Male	07	Mild
02	Arwa Bolbol	22	Female	10	Moderate
03	Basel Sager	27	Male	05	Mild
04	Karim Naji Aljurf	27	Male	12	Moderate
05	Yara Alsayed Salim	22	Female	12	Moderate
06	Naser Abu Shammala	22	Male	00	Normal
07	Mohammed	24	Male	10	Moderate
08	Ghaith	22	Male	20	Severe
09	Abdallah Muhaisen	22	Male	09	Mild
10	Ibrahim Muhaisen	21	Male	06	Mild
11	Monther Karaja	22	Male	25	Severe
12	Haya Alkah	23	Female	25	Severe
13	Mohammed A.J. Jamal	22	Male	21	Severe
14	Marah Nijim	22	Female	19	Moderately Severe

15	Hammam	22	Male	11	Moderate
16	Alaa Soboh	22	Female	15	Moderately Severe
17	Haya Alfarra	22	Female	10	Moderate
18	Bisan Maher Saed	22	Female	10	Moderate
19	Alaa O.A.Alajjuri	-	Female	07	Mild
20	Asmaa Z.A Alnajjar	-	Female	17	Moderately Severe
21	Mohammed 0K.S.Zreid	22	Male	02	Minimal
22	Momin	22	Male	08	Mild
23	Tareq Eleyan	23	Male	02	Minimal
24	Heba M.M Mourlaga	22	Male	10	Moderate
25	Tagreed Masoud	21	Female	07	Mild
26	Abdulla Daoud	22	Male	06	Mild
27	Eman Kaheel	21	Female	16	Moderately Severe
28	Omer	22	Male	09	Mild
29	Mahmoud M.M.Shamia	22	Male	19	Moderately Severe

Note:

PHQ-9 Score	Depression Severity
0-4	Non-Minimal
5-9	Mild
10-14	Moderate
15-19	Moderately Severe
20-27	Severe

Annexure C

RAWALPINDI MEDICAL UNIVERSITY

EVALUATION OF AL-AZHAR UNIVERSITY STUDENTS
Date:1/11/2024
Time allocated:50 minutes

Anatomy

1. Which statement accurately describes the function and structure of parietal cells that they are?

a. Located in the neck region of glands and secrete pepsinogen.
b. Found in the lower half of the gastric glands and secrete bicarbonates.
c. Found mainly in the upper half of the gastric glands and secrete hydrochloric acid (HCl).
d. Present throughout all regions of the stomach and produce mucus.
e. Abundant in the pyloric glands and release gastrin to stimulate gastric secretions.

2. During abdominal surgery, a surgeon notes a structure formed by the modification of the external oblique muscle near the inguinal region. The surgeon explains the functional significance of this modification in the prevention of abdominal hernias. The modification of external oblique muscle includes
    a. Rectus sheath
    b. Internal spermatic fascia
    c. Conjoint tendon
    d. Fascia transversalis
    e. Deep inguinal ring
3. A neonate is born with a visible protrusion of abdominal contents covered by a thin sac at the base of the umbilical cord. The pediatric surgeon explains that the condition is due to an embryological defect in the return of intestinal loops to the abdominal cavity during development. Failure of the intestinal loops to return to the abdominal cavity results in
    a. Vitelline fistula
    b. Omphalocele
    c. Gastroschisis
    d. Left sided colon
    e. Hirschsprung's disease
4. A patient presents with flank pain, and the physician suspects a kidney-related condition. The physician applies gentle pressure over the renal angle to elicit tenderness. The renal angle is defined as the space between the lower border of the 12th rib and the outer border of a muscle. Based on the anatomy, which muscle is involved in this anatomical landmark
    a. Erector spinae
    b. Latissimus dorsi
    c. Quadratus lumborum

d. Spinalis capitus
e. Psoas major

5. In a roadside accident, a 34-year-old patient presented with extensive hemorrhage from the basilar artery. Which of these will be the most prominent symptom in this patient?
   a. Ipsilateral paralysis of limbs
   b. Contralateral facial paralysis
   c. Pinpoint pupils
   d. Dysphagia
   e. Hemiparesis
6. A 28-year-old pregnant woman underwent routine second-trimester maternal serum screening. The results showed significantly elevated levels of alpha-fetoprotein (AFP). Given this finding, the obstetrician suspected a potential neural tube defect in the developing fetus. The following condition is most commonly associated with elevated maternal serum AFP levels?
   a. Down syndrome
   b. Spina bifida
   c. Arnold Chiari Syndrome
   d. Microcephaly
   e. Turner syndrome
7.
   a. It contains the medullary sinuses which drain lymph to the efferent lymph vessel.
   b. It is contains subcapsular sinus, cortical sinus
   c. It is the site where B cells differentiate into plasma cells.
   d. It consists of groups of mainly inactivated T cells
   e. It primarily consists of reticular fibers and macrophages with no distinct structure.
8. A Radiologist reported a fracture of left 9^{th} and 10^{th} rib of a boy in road traffic accident. Which structure is prone to get injured?
   a. Thymus
   b. Liver
   c. Spleen
   d. Left bronchus
   e. Bilateral Vagus nerve
9. A 45-year-old woman presented to the dermatologist with a complaint of persistent and itchy rash on her forearm. Dermatologist noticed the rash was located primarily in the epidermal layer of the skin. Which cells most likely plays a key role in her symptoms?
   a. Keratinocytes
   b. Melanocytes
   c. Langerhans cells

d. Fibroblasts.
e. Merkel cells.

10. The most powerful extensor of the hip is:
    a. Gluteus maximus
    b. Psoas major
    c. Iliacus
    d. Obturator externus
    e. Piriformis

Biochemistry

11. A researcher is studying the effects of temperature changes on the behavior of cell membranes in a variety of organisms. The researcher observes that at lower temperatures, the membrane becomes more rigid, while at higher temperatures, it becomes more fluid. Fluidity of cell membrane is maintained by:
    a. Water
    b. Triglycerides
    c. Cholesterol
    d. Integral protein
    e. Peripheral protein

12. A patient with diabetes is undergoing a metabolic evaluation, and the endocrinologist explains how glucose enters cells via specific transporters. The doctor emphasizes that these transporters allow glucose to cross the cell membrane without direct energy expenditure but still depend on concentration gradients. Glucose transporters are examples of which type of transport mechanism:
    a. Passive
    b. Facilitated
    c. Primary active
    d. Secondary active
    e. Endocytosis

13. A pharmaceutical scientist is formulating an emulsion for a topical medication. The emulsion is a mixture of oil and water, and it is observed that without an emulsifying agent, the two phases separate quickly. In the phenomenon of emulsion, the role of emulsifying agent is to:
    a. Stabilize the oil water interface
    b. Solubilize the water interface
    c. Intermix the oil water interface
    d. Making soap solution
    e. Formation of detergent

14. A researcher is studying the effects of a newly discovered drug on an enzymatic reaction. The drug binds to an enzyme at a site other than the active site, leading to a decrease in the reaction rate, regardless of the substrate concentration. This suggests the drug is a non-competitive inhibitor.

a. Don’t affect Vmax
b. Increase Vmax
c. Bind active site of enzyme
d. Compete with substrate
e. Don’t affect Km

15. A patient presented in the emergency room with severe anterior abdominal pain radiating to the back. Laboratory examination revealed an elevated serum amylase. The patient is most likely suffering from:
a. Myocardial infarction
b. Acute parotitis
c. Acute pancreatitis
d. Stroke
e. Skeletal muscle injury in epigastric region

16. When O2 supply is inadequate, pyruvate is converted to:
a. Phosphoenol pyruvate
b. Acetyl CoA
c. Lactate
d. Alanine
e. Oxaloacetate

17. The enterokinase activates the following zymogen present in pancreatic juice:
a. Trypsinogen
b. Pepsinogen
c. Proelastase
d. Chymotrypsinogen
e. Procarboxypeptidase

18. Which glycoside contains fructose and should be avoided when feeding or treating patient of Hereditary Fructose Intolerance?
a. Sucrose
b. Ouabain
c. Lactose
d. Maltose
e. Trehalose

19. A 55-year-old patient with a history of hypertension and recurrent episodes of leg swelling visits the clinic for a follow-up. The physician advises the patient to restrict sodium intake as part of their management plan. The patient asks why sodium restriction is necessary for their condition. In which of the following conditions is sodium restriction commonly advised as part of the management plan?
a. Addison’s disease
b. Diarrhea
c. Hypertension

d. Asthma
e. Diabetes Mellitus

20. The following is the post-transnationally modified amino acid present in collagen:
    a. Acetyl histidine
    b. Hydroxyproline
    c. Phosphorylated tyrosine
    d. Cystine
    e. Glycosylated asparagine

Pharmacology

21. A 30-year-old patient presents to the emergency department with nausea, vomiting, and abdominal pain after intentionally ingesting a large quantity of acetaminophen tablets. Laboratory tests reveal elevated liver enzymes and a prolonged prothrombin time, indicating liver dysfunction.What is the most common type of liver injury associated with acetaminophen (paracetamol) overdose?
    a. Cholestatic liver injury
    b. Hepatocellular necrosis
    c. Mixed liver injury
    d. Steatosis
    e. Phospholipoids

22. Which of the following drugs is commonly associated with idiosyncratic cholestatic liver injury?
    a. Amoxicillin-clavulanate
    b. Amphotericin
    c. Isoniazid
    d. Rifampicin
    e. Simvastatin

23. A patient develops abnormal liver function tests after initiation of antitubercular therapy. Which drug is most likely responsible?
    a. Isoniazid
    b. Rifampicin
    c. Pyrazinamide
    d. Ethambutol
    e. Streptomycin

24. During labor, a woman experiences strong uterine contractions that help facilitate the delivery of her baby. The attending obstetrician explains that these contractions are triggered and regulated by a specific hormone released during childbirth. What is the primary function of oxytocin during childbirth?
    a. Stimulate fetal heart rate
    b. Relax uterine muscles
    c. Induce uterine contractions

d. Reduce cervical dilation
e. Promote placental separation

25. What is the primary route of oxytocin administration?
    a. Oral
    b. Intravenous
    c. Intramuscular
    d. Subcutaneous
    e. Transdermal
26. A 60-year-old patient with hypertension is prescribed a thiazide diuretic to control their blood pressure. During a follow-up visit, the patient reports mild muscle cramps and weakness. What is a common side effect of thiazide diuretics?
    a. Hyperkalemia
    b. Hypokalemia
    c. Hypernatremia
    d. Hyponatremia
    e. Hypercalcemia
27. A 45-year-old patient with liver cirrhosis presents with abdominal swelling and lower extremity edema. The physician prescribes a specific diuretic to manage the fluid retention, explaining that it is particularly effective for conditions involving aldosterone-mediated fluid retention Which diuretic is often used to treat edema associated with liver cirrhosis?
    a. Furosemide
    b. Spironolactone
    c. Hydrochlorothiazide
    d. Amiloride
    e. Triamterene
28. What is the primary indication for potassium-sparing diuretics?
    a. Hypertension
    b. Heart failure
    c. Nephrotic syndrome
    d. Hyperaldosteronism
    e. Ascites
29. What is the primary mechanism of action of aspirin as an antiplatelet agent?
    a. Inhibits ADP receptor
    b. Blocks thromboxane A2 synthesis
    c. Enhances prostacyclin production
    d. Inhibits phosphodiesterase
    e. Increases nitric oxide levels
30. Which of the following is a potential side effect of benzodiazepines?

a. Increased alertness
b. Improved memory
c. Enhanced cognitive function
d. Respiratory stimulation
e. Sedation

Pathology

31. Which of these statements about normal flora is true?
a. They are always harmful to the host.
b. They are present in the internal organs
c. They can protect against pathogenic microbes.
d. They are primarily found in the bloodstream.
e. They are absent in the gastrointestinal tract.

32. A 45-year-old patient with a history of anemia undergoes a bone marrow biopsy to assess hematopoietic activity. The physician explains that hematopoiesis, the process of blood cell production, is limited to specific sites in adults and shifts from its widespread distribution during early development. In adult life hemopoiesis is confined to:
a. Spleen
b. Liver
c. All bones
d. Vertebra and ribs
e. Spleen and liver

33. Most common cause of microcytic hypochromic anaemia is:
a. Iron deficiency
b. Folate deficiency
c. Vitamin B12 deficiency
d. Pernicious anaemia
e. Vitamin B 6 deficiency

34. A blood transfusion is being prepared for a patient with blood group O. The laboratory technician explains that the blood group is determined by specific antigens on the surface of red blood cells (RBCs). Blood group O individuals are unique because of the lack of certain antigens. Person having blood group O has the following antigen of the surface of RBC:
a. A
b. B
c. AB
d. No antigen
e. Both A &B antigen

35. Which of the following types of necrosis is most commonly associated with ischaemic injury?
a. Coagulative necrosis

b. Liquefactive necrosis
c. Caseous necrosis
d. Fat necrosis
e. Gangrenous necrosis

36. Which of the following statement is correct regarding metaplasia?
a. Reversible change in the cells
b. Increased nuclear: cytoplasmic ratio
c. Increase in the size and number of cells
d. Pleomorphic cells
e. Abnormal mitosis

37. A clean incised wound heals by:
a. Primary intention
b. secondary intention
c. excessive scarring
d. contracture formation
e. Keloid formation

38. Which of the following is the Hallmark of acute inflammation?
a. Neutrophils
b. Lymphocytes
c. Macrophages
d. Granulation tissue
e. Granuloma formation

39. Regarding Septic shock, which statement is correct?
a. Is basically due to inadequate blood or plasma volume
b. Is never seen in gram-positive septicemia
c. Is mostly the result of gram-negative endotoxemia
d. Does not require urgent intervention
e. Is mediated by Immunoglobulin IgE

40. The best method which destroy the spores is:
a. Dry heat
b. Boiling
c. Autoclaving
d. Gamma radiation
e. Hot air oven

Physiology

41. Angiotensin-II is responsible for:

a. Stimulation of thirst center
b. Inhibition of thirst center
c. Dilatation of systemic arterioles
d. Salt retention by distal portions of the nephron
e. Stimulation of renin secretion

42. Gastric emptying is enhanced by:
a. Gastric distension
b. Enterogastrone
c. Sectioning of vagus
d. Hyperosmolarity of duodenal chyme
e. Presence of proteins in the duodenum

43. A 19 years old boy got his brachial artery cut in a motorcycle accident. The greatest percentage of the blood volume for compensation will come from:
a. Aorta
b. Muscular arteries
c. Small arteries
d. Arterioles and capillaries
e. Veins and venules

44. A characteristic clinical feature of right ventricular failure is:
a. Mitral stenosis
b. Raised JVP
c. Splenomegaly
d. Pulsus alternans
e. Triple rhythm

45. An old lady often experiences episodes of backache which are relieved upon massage of the painful area. The physiological basis of relief is the:
a. Stimulation of alpha fibers
b. Stimulation of beta fibers
c. Stimulation of delta fibers
d. Inhibition of beta fibers
e. Generation of graded potentials in C-type fibers

46. A young diabetic lady develops neuropathy in the sensory neurons related with the free nerve endings. The sensation with increased threshold for stimulation is likely to be:
a. Two point discrimination
b. Vibration
c. Temperature

d. Pressure
e. Joint position

47. Arterial hypercapnia is going to stimulate:
    a. Pulmonary chemoreceptors
    b. Medullary chemoreceptors
    c. Hypothamalic chemoreceptors
    d. Aortic bodies
    e. Carotid bodies
48. Increased production of both insulin and glucagon from pancreatic islets occurs when there is an increase in the plasma levels of:
    a. Glucose
    b. Amino acid
    c. Cholecystokinin
    d. Somatostatin
    e. Exogenous insulin
49. The hormone which is secreted in normal concentrations during pregnancy is :
    a. Prolactin
    b. Thyroxine
    c. Parathyroid hormone
    d. Growth hormone
    e. ACTH
50. Mother's milk is a poor source of :
    a. Casein
    b. Lactalbumin
    c. Lactoferrin
    d. Iron
    e. Calcium