Fifth year curriculum map				
code	Subject	The ory	Practice	Units
(SURG 501)	Surgery	105	135	11.5
(MEDI 502)	Internal medicine	75	75	7.5
(OBST 503)	Gynecology	60	30	5
(PAED 504)	<u>Pediatrics</u>	60	30	5
(PSYC 505)	<u>Psychiatry</u>	30	30	4
(DERM 506)	DERMATOLOGY	30	30	3
(OPTH 507)	<u>Ophthalmology</u>	30	30	3
(OTOR 508)	E.N.T	30	30	3
	Extracurricular Activity	30		
		450	290	42

Surgery



Fifth grade

Academic Program Description

This academic program description summarizes the course's most essential qualities and the learning objectives that the student is expected to attain, indicating whether he or she made advantage of all of the resources that are accessible.

Educational Establishmet	University of Al-Ameed
Scientific Department	Surgical department
Name of the Professional Academic Program.	Modified traditional curriculum
Final Graduation Certificate	بكالوريوس طب وجراحة عامة . M.B.Ch.B
Educational system. Annual/courses/other	Annual
Approved accreditation program	Approved accreditation program Iraqi National Guideline on Standards for Established and Accrediting Medical School
Other external factors	1-Availability of relevant scientific research in the field of specialization 2-Access to global electronic networks 3-Access to traditional and digital libraries 4-Teaching aids such as data show and PowerPoint presentations 5-Availability of equipped classrooms 6-Use of free online communication platforms (e.g., Free Conference Call

Date the description was	1/4/2025
written	

Academic program objective

- 1-Graduate doctors with a strong foundation in surgery, enabling them to understand, diagnose, and treat surgical cases in emergency departments, surgical wards, and outpatient clinics. Strengthen students' clinical skills through theoretical and practical discussions, clinical patient examinations in hospitals, and hands-on training in skills laboratories. Additionally, conduct surgical workshops at the college to discuss surgical cases and explore their management.
- 2-Provide training and skills to practice surgery safely by diagnosing and treating common and urgent surgical cases, as well as managing trauma and emergency situations.
- 3-Integrate modern educational techniques and advanced technology into teaching methods and surgical programs, while utilizing information and communication technologies to share knowledge, conduct research, and develop surgical curricula.
- 4-Promote cultural exchange and establish bilateral partnerships with medical schools and professional surgical organizations at the Arab and international levels to expand academic and scientific collaboration in the field of surgery.
- 5-Strengthen collaboration between the college and the community by organizing seminars, conferences, and workshops that address national surgical and health issues.
- 6-Support the preparation of future leaders in the field of surgery, empowering them to achieve excellence and leadership in their medical specialties.
- 7-Understand global health and public health strategies related to surgical care .access, safe surgery initiatives, and trauma system development
- 8- Discussing the importance of patient education Explain the importance -8 of early screening programs and understand the role of lifestyle modification, Identify risk factors

Promote trauma prevention

The most reliable resources for program information are

- 1- Morgan & Mikhail's clinical anesthesiology 6th edition 2018 (Anesthesia).
- 2- General Ophthalmology.
- 3- Kansaki, Clinical Ophthalmology (Ophthalmology).
- 4- Adam's, Outline of orthopedics (Orthopedics).
- 5- Adam's, Outline of fractures (Fracture).
- 6- Apley's System of Orthopaedics and Fractures 10TH Edition (Orthopaedics)
- 7- Diseases of Ear, Nose & Throat (ENT).
 - 8- Peter Armstrong diagnostic radiology 7th edition 2013 (Radiology).
 - 9- Essential neurosurgery 3rd edition (Neurosurgery).
- 10- Bailey & Love's Short Practice of Surgery (Plastic Surgery).
- 11. Sabiston and spencer surgery of the chest 9th edition

Surgery \ Grade 5

Code: SURG 501 11.5 Credits

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Principles in r fractures	management of			
SURG1.1	 A. Explain the biomechanics of bone healing, including primary and secondary fracture healing, and the factors that influence this process. B. Classify fractures based on location, pattern, and mechanism of injury, utilizing common classification systems (e.g., AO classification). C. Health promotion Promote fall prevention in the elderly: home safety checks, proper footwear, and balance exercises. D. Encourage calcium and vitamin D intake through diet or supplements. E. Promote weight-bearing exercises to maintain bone density. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	F. Screen for osteoporosis in at-risk populations			
SURG1.2	A. Differentiate between open and closed fractures and outline the principles of initial management, including wound care, splinting, and antibiotic prophylaxis B. Discuss the indications for conservative versus surgical management of fractures, including casting, external fixation, and internal fixation techniques	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
	C. Explain the principles of post- fracture rehabilitation, including weight-bearing restrictions and physiotherapy protocols				
Complications	s of fractures		l		
SURG2.1	 A. Describe the pathophysiology of fracture nonunion and malunion and discuss treatment options such as bone grafting and revision surgery. B. Explain the mechanism and clinical presentation of compartment syndrome, including indications for fasciotomy C. Describe the management of infection in open fractures, including surgical debridement, antibiotic therapy, and staged reconstruction technique 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
SURG2.2	 A. Describe post-traumatic osteoarthritis as a long-term complication of intra-articular fractures and its management strategies. B. Explain the principles of management of fat embolism syndrome and its differentiation from other causes of acute respiratory distress in trauma patients 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
Injuries of the upper limb					
SURG3.1	Describe the mechanisms, clinical presentation, and management of common shoulder dislocations, including anterior and posterior dislocations	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
SURG3.2	Differentiate between rotator cuff tears and adhesive capsulitis based on clinical features and imaging findings	K/S	LARGE GROUP TEACHING	SHORT ANSWER	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
				QUESTION /MCQ		
Injuries of the	upper limb					
SURG4.1	Explain the pathophysiology and treatment of supracondylar fractures of the humerus in children, including indications for closed reduction and percutaneous pinning.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		
SURG4.2	Discuss the management of radial head fractures and Monteggia and Galeazzi fractures based on stability and displacement.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		
Injuries of the	upper limb					
SURG5.1	Interpret imaging findings in carpal fractures, particularly scaphoid fractures, and discuss the risk of avascular necrosi	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		
SURG5.2	Discuss the surgical and non-surgical management of distal radius fractures, including Colles and Smith fractures.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		
Injuries of the	lower limb					
SURG6.1	Describe the classification and management of femoral neck fractures, including indications for fixation versus arthroplasty.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		
SURG6.2	Describe the principles of open reduction and internal fixation (ORIF) in lower limb fractures	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		
Injuries of the	Injuries of the lower limb					
SURG7.1	Discuss the management of patellar fractures and extensor mechanism injuries.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG7.2	Explain the clinical presentation and management of tibial plateau fractures and their impact on knee joint function	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Injuries of the	lower limb			
SURG8.1	Discuss the indications for total hip and knee replacement following post-traumatic arthritis	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG8.2	Formulate a rehabilitation protocol for patients recovering from lower limb fractures and joint surgeries.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Injuries of the	pelvis			
SURG8.1	Discuss the indications for total hip and knee replacement following post-traumatic arthritis	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG8.2	Formulate a rehabilitation protocol for patients recovering from lower limb fractures and joint surgeries.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Principles and	diagnosis in orthopaedics			
SURG9.1	 A. Explain the role of history-taking and physical examination in diagnosing musculoskeletal conditions. B. Describe the indications and limitations of common orthopedic imaging techniques, including X-ray, CT, MRI, and ultrasound. C. Health promotion Educate on proper lifting techniques and ergonomic workstation setup. D. Promote physical activity and core strengthening to prevent low back pain. E. Counsel overweight individuals on weight loss to reduce joint stress. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	F. Encourage early management of joint injuries to prevent chronic problems.			
SURG9.2	 A. Differentiate between inflammatory and mechanical musculoskeletal pain based on clinical features and laboratory tests. B. Discuss the role of bone biopsy in diagnosing orthopedic infections and tumors. C. Differentiate between inflammatory and mechanical musculoskeletal pain based on clinical features and laboratory tests. Explain the importance of gait analysis in diagnosing lower limb pathologies 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Treatment of o	orthopedic disorders, Amputations, Diabet	ic foot		
SURG9.1	 A. Discuss the indications for limb amputation, including trauma, malignancy, and chronic infection. B. Explain the principles of diabetic foot ulcer management, including wound debridement, offloading, and vascular assessment 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG9.2	 A. Describe the classification of diabetic foot infections and their implications for limb salvage. BInterpret Doppler ultrasound findings in peripheral vascular disease related to diabetic foot complications. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Osteomyelitis				
SURG10.1	A. Describe the pathophysiology of osteomyelitis, including the mechanisms of hematogenous spread, contiguous infection, and direct inoculation. Classify osteomyelitis into acute, subacute,	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number		Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
		and chronic types, and differentiate between pyogenic and tuberculous osteomyelitis.			
SURG10.2		Discuss the microbiology of osteomyelitis, including the role of Staphylococcus aureus and the importance of culture-guided antibiotic therapy.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	C.	Explain the principles of surgical debridement in chronic osteomyelitis and indications for sequestrectomy and bone grafting			
	D.	Describe the role of antibiotic therapy in osteomyelitis, including the use of biofilm-active agents and duration of treatment.			
Septic arthritis	s and	l TB			
SURG11.1		Describe the pathophysiology of septic arthritis, including hematogenous spread and direct inoculation mechanisms. Explain the clinical presentation of septic arthritis and differentiate it from other causes of acute monoarthritis.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG11.2		Describe the management of septic arthritis, including emergent joint aspiration, intravenous antibiotics, and indications for arthroscopic lavage. Explain the pathophysiology and clinical presentation of tuberculous arthritis, including Pott's disease and its musculoskeletal complications.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Osteochondrit	is, C	Steoarthritis and Rheumatoid arthritis			
SURG12.1		Describe the pathophysiology of osteochondritis dissecans and its impact on joint integrity. Differentiate between primary and secondary osteoarthritis based on	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	etiology, risk factors, and clinical features. C. Interpret radiographic findings of osteoarthritis, including joint space narrowing, osteophyte formation, and subchondral sclerosis			
SURG12.2	 A. Compare non-surgical management options for osteoarthritis, including NSAIDs, intra-articular injections, and physiotherapy. B. Explain the indications and surgical techniques for total joint replacement in end-stage arthritis. C. Describe the complications of rheumatoid arthritis affecting the musculoskeletal system, including atlantoaxial subluxation. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Bone Tumors				
SURG13.1	 A. Classify bone tumors into benign and malignant types, and differentiate between primary and metastatic bone tumors. B. Describe the clinical presentation of osteosarcoma, Ewing's sarcoma, and chondrosarcoma, and their typical age distributions. Interpret radiographic features of benign and malignant bone tumors, including periosteal reactions (sunburst, Codman's triangle) 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG13.2	 A. Discuss the role of biopsy (needle vs. open) in diagnosing bone tumors and the importance of staging. B. Explain the principles of limbsalvage surgery and the indications for amputation in bone tumor management. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
SURG14.1	 A. Describe the genetic basis and clinical features of common skeletal dysplasias, including achondroplasia and osteogenesis imperfecta Discuss the role of growth factor mutations in disorders such as fibrous dysplasia and multiple hereditary exostoses. B. Interpret radiographic and genetic testing findings in skeletal dysplasias. C. Explain the pathophysiology and orthopedic complications of osteogenesis imperfecta, including fracture susceptibility and scoliosis. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
SURG14.2	 A. Describe the indications for limblengthening procedures in short stature syndromes. B. Explain the role of bisphosphonates in managing brittle bone diseases 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
Metabolic bon	ne diseases				
SURG15.1	Discuss the diagnosis and treatment of osteomalacia and rickets. Describe the clinical features and management of Paget's disease of bone	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
SURG15.2	Discuss the role of calcium, vitamin D, and bisphosphonates in metabolic bone disease. Explain the management of hyperparathyroidism and its skeletal effects	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
Poliomyelitis	Poliomyelitis and neuropathic disorders				
SURG16.1	Discuss the clinical presentation, diagnosis, and management of post- polio syndrome, emphasizing its late- onset progressive muscle weakness, fatigue, and functional impairment	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG16.2	Describe the pathophysiology of poliomyelitis, including its viral etiology, effects on the anterior horn cells of the spinal cord, and the resulting flaccid paralysis and muscle atrophy	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Peripheral ner	ve injuries			
SURG17.1	 A. Classify peripheral nerve injuries using Seddon's and Sunderland's classifications. B. Describe the clinical presentation of common upper limb nerve injuries, including median, ulnar, and radial nerve palsies. C. Discuss the pathophysiology of nerve regeneration and factors affecting recovery A. Describe the indications for surgical nerve repair, including neurorrhaphy, nerve grafting, and tendon transfers. B. Explain the management of nerve compression syndromes, such as carpal tunnel syndrome and cubital tunnel syndrome. C. Discuss the role of physiotherapy and rehabilitation in recovering nerve function 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ SHORT ANSWER QUESTION /MCQ
Disorders of the	he shoulder & elbow			
SURG18.1	Discuss the diagnosis and treatment of shoulder impingement syndrome and adhesive capsulitis (frozen shoulder)	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG18.2	Describe the mechanisms, clinical presentation, and treatment options for elbow epicondylitis (tennis elbow and golfer's elbow).	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Disorders of the	he shoulder &			
SURG19.1	Differentiate between primary and secondary osteoarthritis of the shoulder and elbow and discuss treatment options.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG19.2	Explain the pathophysiology between primary and secondary osteoarthritis of the shoulder and elbow.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Disorders of the	he wrist and hand			
SURG20.1	Explain the pathophysiology, clinical features, and management of carpal tunnel syndrome and trigger finger	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG20.1	Discuss the pathophysiology and management of De Quervain's tenosynovitis.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Disorders of the	he wrist and hand			
SURG21.1	Formulate a treatment plan for Dupuytren's contracture, including indications for surgical intervention Describe the approach to diagnosing and managing wrist arthritis, including	K/S	LARGE GROUP TEACHING LARGE GROUP	SHORT ANSWER QUESTION /MCQ SHORT ANSWER
	inflammatory and degenerative cause		TEACHING	QUESTION /MCQ
Disorders of the hip				
SURG22.1	Differentiate between developmental dysplasia of the hip (DDH) and slipped capital femoral epiphysis (SCFE).	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG22.2	interpret gait abnormalities related to hip disorders, such as Trendelenburg gait	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Disorders of the	he hip			
SURG23.1	Discuss the etiology, clinical features, and diagnostic workup of Transient Synovitis of the hip, emphasizing its differentiation from septic arthritis through laboratory markers and imaging (Kocher criteria).	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG23.2	Explain the clinical presentation, risk factors, and diagnostic approach to Slipped Capital Femoral Epiphysis (SCFE), including the role of Klein's line on radiographs and indications for urgent surgical fixation.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Disorders of the	he knee			
SURG24.1	Discuss the diagnosis and treatment of ACL and PCL injuries, including surgical reconstruction techniques.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG24.2	Describe the clinical features and management of prepatellar and infrapatellar bursitis.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Disorders of the	he knee			
SURG25.1	Discuss complications following knee surgery, such as deep vein thrombosis and implant loosening	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG25.2	Discuss the pathophysiology and treatment of chondromalacia patella	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Disorders of the ankle and foot				
SURG26.1	Describe the surgical and non-surgical management of hallux valgus (bunion) Describe the biomechanics of the ankle and foot, including the role of the plantar fascia	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG26.2	Discuss the diagnosis and treatment of Achilles tendon rupture	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Radiodiagnosi	s: introduction to radiology			
SURG27.1	 A. Explain the basic principles of radiographic imaging, including X-ray, ultrasound, CT, MRI, and nuclear medicine, and their respective indications. B. Describe the advantages and limitations of different imaging modalities in the diagnosis of common diseases such as pneumonia, fractures, and abdominal pathologies. C. Interpret normal radiographic anatomy and identify key landmarks in different imaging techniques. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG27.2	 A. Differentiate between normal and pathological findings on various imaging modalities, such as airspace opacities in pneumonia or masses in cancer. B. Explain the indications and contraindications for different imaging modalities in emergency settings 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Radiodiagnosi	s: Imaging of chest I	·		
SURG28.1	 A. Explain the radiographic features of common lung pathologies, including pneumonia, tuberculosis, pulmonary edema, and lung cancer. B. Differentiate between obstructive and restrictive lung diseases on imaging, including COPD and interstitial lung diseases. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
SURG28.2	 A. Interpret common chest radiographic patterns, such as alveolar versus interstitial opacities, air bronchograms, and cavitary lesions. B. Discuss the imaging findings of pleural diseases, including pleural effusion, pneumothorax, and pleural thickening. C. Discuss the indications and limitations of different imaging techniques in evaluating chest pathologies 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
Radiodiagnosi					
chest 2					
SURG29.1	 A. Differentiate between benign and malignant pulmonary nodules based on radiological characteristics. B. Interpret the radiologic features of infectious lung diseases such as tuberculosis, fungal infections, and viral pneumonias A. Identify radiographic signs of chest trauma, such as rib fractures, hemothorax, and lung contusions. B. Discuss the imaging approach to airway diseases, including bronchiectasis and tracheomalacia. C. Interpret the radiologic findings of aspiration pneumonia and differentiate it from other 	K/S K/S	LARGE GROUP TEACHING LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ SHORT ANSWER QUESTION /MCQ	
	infectious processes				
Radiodiagnosis: Mediastinum					
SURG30.1	 A. Explain the differential diagnosis of an anterior mediastinal mass, including thymoma, teratoma, thyroid goiter, and lymphoma. B. Interpret imaging findings in middle mediastinal pathologies, such as bronchogenic cysts and lymphadenopathy. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG30.2	 A. Describe the radiologic features of posterior mediastinal lesions, including neurogenic tumors. B. Differentiate between benign and malignant mediastinal masses using imaging characteristics on CT and MRI. C. Discuss the role of imaging in diagnosing mediastinitis and its complications. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Radiodiagnosi	s: Breast imaging and screening for malig	nancy		
SURG31.1	 A Describe the principles of mammography, breast ultrasound, and breast MRI in the detection of breast pathology. B. Differentiate between benign and malignant breast lesions based on imaging characteristics. C. Explain the indications and limitations of breast screening programs, including the role of BI-RADS classification. D. Interpret mammographic findings of common breast conditions, including fibroadenomas, cysts, and invasive carcinoma. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG31.2	 A. Describe the imaging features of inflammatory breast disorders, such as mastitis and abscesses. B. Explain the indications and technique of image-guided breast biopsies, including stereotactic, ultrasound-guided, and MRI-guided biopsies. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Radiodiagnosis: hepatobiliary imaging				
SURG32.1	A. Describe the imaging modalities used for evaluating liver diseases, including ultrasound, CT, MRI, and nuclear medicine.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	 B. Interpret imaging findings of hepatic tumors, including hepatocellular carcinoma (HCC), metastases, and hemangiomas. C. Explain the role of MRCP in evaluating biliary obstructions, including choledocholithiasis and biliary strictures. 			
SURG32.2	 A Discuss the role of contrastenhanced ultrasound in liver lesion characterization. B. Interpret imaging findings in acute and chronic liver infections, including hepatic abscesses and viral hepatitis. C. Explain the imaging approach to liver trauma and parenchymal injuries. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Radiodiagnosi	s: Imaging of Pancreas and spleen			
SURG33.1	 A. Describe the normal radiologic anatomy of the pancreas and spleen. B. Interpret imaging findings of acute and chronic pancreatitis on ultrasound, CT, and MRI. C. Discuss the role of MRI in characterizing pancreatic cystic lesions, including mucinous and serous cystadenomas. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG33.2	 A. Describe the imaging findings in splenic trauma, including lacerations and hematomas. B. Discuss the radiologic approach to diagnosing splenomegaly and infiltrative splenic disorders. C. Interpret the role of nuclear medicine in assessing splenic function. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Radiodiagnosi	s: urinary tract imaging			
SURG34.1	 A. explain the imaging findings and diagnostic approach to urinary tract infections (UTIs), including pyelonephritis and emphysematous pyelonephritis. B. Differentiate nephrolithiasis from other causes of flank pain using KUB X-ray, ultrasound, and CT KUB. C. Discuss the role of imaging in the evaluation of obstructive uropathy, including hydronephrosis and ureteric strictures. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG34.2	 A. Interpret the radiologic features of renal masses, distinguishing between benign (angiomyolipoma) and malignant (renal cell carcinoma) lesions. B. Describe the role of nuclear medicine studies such as DMSA and MAG3 scans in assessing renal function and obstruction. C. Discuss the imaging approach to congenital anomalies of the urinary tract, including horseshoe kidney and vesicoureteral reflux. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Radiodiagnosi	s: Imaging in Female genital tract			
SURG35.1 SURG35.2	Describe the imaging modalities used in gynecologic imaging, including ultrasound (transabdominal and transvaginal), MRI, and hysterosalpingography. Interpret ultrasound findings of common uterine pathologies, such as fibroids, adenomyosis, and endometrial hyperplasia.	K/S K/S	LARGE GROUP TEACHING LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
	Radiodiagnosis: Imaging in Female genital tract				
SURG36.1	Differentiate between benign and malignant ovarian masses using imaging criteria, including the O-RADS classification.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
SURG36.2	 A. Discuss the role of imaging in the diagnosis of polycystic ovary syndrome (PCOS), including ovarian volume and follicle count. B. Explain the imaging approach to pelvic inflammatory disease (PID) and tubo-ovarian abscess. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
Radiodiagnosi	s: plain abdomen				
SURG37.1	 A. Describe the normal radiographic anatomy of the abdomen on plain X-ray, including bowel gas patterns, soft tissue shadows, and calcifications. B. Interpret the radiologic features of common acute abdominal conditions, including pneumoperitoneum, bowel perforation, and volvulus. C. Differentiate between small bowel and large bowel obstruction based on plain abdominal radiographs. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
SURG37.2	 A. Discuss the role of plain X-rays in the evaluation of renal and gallbladder calculi, including their limitations and the need for further imaging. B. Explain the radiologic findings associated with paralytic ileus and its differentiation from mechanical obstruction. C. Describe the imaging approach to gastrointestinal bleeding, including the role of contrast studies and alternative modalities like CT angiography. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Peritoneal Cav	vity and Retroperitoneum			
SURG38.1	 A. Describe the normal anatomy of the peritoneal and retroperitoneal spaces using ultrasound, CT, and MRI. B. Discuss the imaging features of peritoneal carcinomatosis and its differentiation from peritoneal tuberculosis. C. Interpret radiologic findings of ascites, including differentiation between transudative and exudative ascites using ultrasound and CT. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG38.2	 A. Explain the role of imaging in diagnosing retroperitoneal hematomas, including their causes (trauma, anticoagulation, ruptured aneurysm). B. Recognize the radiologic features of retroperitoneal fibrosis and its impact on ureters and surrounding structures. C. Discuss the imaging approach to adrenal gland pathology, including incidental adrenal masses, pheochromocytomas, and adrenal metastases 			
Radiodiagnosi	s: GIT-I imaging			
SURG39.1	Describe the gross and microscopic anatomy of the large intestine and its functional role in water absorption and stool formation.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG39.2	A. Differentiate between diverticulosis and diverticulitis, including risk factors, clinical presentation, and complications (perforation, abscess, fistula) B. Health promotion Advocate for colorectal cancer screening (e.g.,	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
	colonoscopy) starting at age 45 or earlier if family history exists. C. Educate on warning signs like rectal bleeding, change in bowel habits, and unexplained weight loss.				
Radiodiagnosi	s: GIT-II imaging				
SURG40.1	 A. interpret the radiologic features of inflammatory bowel disease (Crohn's disease and ulcerative colitis) using fluoroscopy, CT enterography, and MRI enterography. B. Differentiate between infectious and inflammatory colitis using radiologic criteria. C. Describe the imaging findings in colorectal cancer and the role of CT colonography in screening. D. Discuss the role of contrast fluoroscopy and cross-sectional imaging in diagnosing diverticular disease and its complications. A. Explain the imaging approach to small bowel obstruction and large bowel obstruction, including closed-loop obstruction. B. Recognize the radiologic signs of mesenteric ischemia and bowel infarction on CT angiography. 	K/S	LARGE GROUP TEACHING LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ SHORT ANSWER QUESTION /MCQ	
	C. Interpret the imaging findings of appendicitis and its complications, including perforation and abscess formation.				
Radiodiagnosi	Radiodiagnosis: Bone-I imaging				
SURG41.1	A. Describe the normal radiographic anatomy of bones, including the cortical and trabecular structures.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	 B. Explain the radiologic approach to evaluating bone trauma, including common fracture patterns. C. Differentiate between benign and malignant bone tumors based on radiographic features such as periosteal reaction and matrix mineralization 			
SURG41.2	 A. Interpret the imaging findings of metabolic bone diseases, including osteoporosis and rickets. B. Discuss the role of MRI in detecting bone marrow abnormalities, including osteomyelitis and metastatic disease. C. Recognize the radiographic features of bone infections, including Brodie's abscess in subacute osteomyelitis. D. Explain the use of nuclear medicine bone scans in detecting metastatic bone disease 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	s: Bone-II imaging		,	
SURG42.1	Explain the role of imaging in bone infections, including septic arthritis and tuberculous osteomyelitis. Discuss the radiologic features of Paget's disease and its complications, including secondary osteosarcoma	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG42.2	Differentiate between inflammatory and degenerative joint diseases based on radiographic and Explain the role of dual-energy X-ray absorptiometry (DEXA) in assessing bone mineral density and diagnosing osteoporosis MRI findings.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Radiodiagnosi	s: Imaging of Joints			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG43.1	Describe the normal radiographic and MRI anatomy of major joints, including the shoulder, knee, and hip. Interpret the imaging findings of osteoarthritis, including joint space narrowing, osteophytes, and subchondral sclerosis. Differentiate between inflammatory and infectious arthritis using radiologic criteria.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG43.2	 A. Explain the role of ultrasound in assessing joint effusions, synovitis, and guided aspirations. B. Discuss the imaging approach to ligamentous and meniscal injuries of the knee using MRI. C. Recognize the radiologic features of crystal arthropathies, including gout and pseudogout. D. Interpret the imaging findings of rotator cuff tears and labral injuries on MRI 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	s: Spine Imaging			
SURG44.1	 A. Interpret the imaging features of degenerative spine diseases, including spondylosis, disc herniation, and spinal stenosis. B. Differentiate between traumatic spinal fractures, including stable vs. unstable fractures and their classification systems (Denis and AO). 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG44.2	 A. Discuss the role of MRI in diagnosing spinal cord injuries, myelopathy, and nerve root compression. B. Interpret imaging findings in spinal infections, including pyogenic spondylodiscitis and tuberculous Pott's disease. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	C. Describe the radiologic approach to spinal tumors, including primary bone tumors, metastases, and spinal cord neoplasms.			
Radiodiagnosi	s: Skeletal trauma imaging			
SURG45.1	Describe the basic principles of fracture imaging, including proper positioning and selection of X-ray views. Interpret MRI findings in occult fractures and stress fractures,	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG45.2	Interpret radiologic findings of common long bone fractures, including femoral shaft, tibial plateau, and humeral fractures. Differentiate between open and closed fractures and discuss the radiologic criteria for assessing fracture healing	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Vascular and I	nterventional Radiology			
SURG46.1	 A. Describe the principles and techniques of vascular imaging, including ultrasound Doppler, CT angiography (CTA), and MR angiography (MRA). B. Discuss the role of interventional radiology in managing peripheral arterial disease, including angioplasty and stenting. C. Interpret imaging findings of acute arterial occlusions, including embolism, thrombosis, and traumatic vascular injuries. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG46.2	 A. Explain the role of catheter-directed thrombolysis in deep vein thrombosis (DVT) and pulmonary embolism (PE). B. Discuss the imaging approach and interventional management of aortic aneurysms and dissections. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	C. Describe the role of embolization in managing gastrointestinal and genitourinary bleeding.			
Skull and brain	n imaging			
SURG47.1	A. Describe the normal anatomy of the brain and skull as seen on CT and MRI.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION
	B. Interpret imaging findings of acute stroke, including ischemic and hemorrhagic subtypes, and the role of CT perfusion.			/MCQ
	C. Discuss the role of CT in evaluating traumatic brain injury, including skull fractures, intracranial hemorrhage, and diffuse axonal injury.			
SURG47.2	A. Differentiate between primary and secondary brain tumors using MRI features, including contrast	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION
	enhancement patterns. B. Explain the imaging approach to hydrocephalus and intracranial pressure abnormalities.			/MCQ
	C. Describe the role of MR spectroscopy and functional MRI in neuroimaging.			
Skull and brai	n imaging			
SURG48.1	 A. Describe the normal radiologic anatomy of the paranasal sinuses, orbits, and neck using CT and MRI. B. Interpret the imaging features of common sinus pathologies, including acute and chronic sinusitis, mucoceles, and fungal infections. C. Discuss the role of imaging in orbital trauma, including blowout fractures and retrobulbar hematomas. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG48.2	A. Explain the radiologic findings of thyroid and parathyroid disorders, including goiter, nodules, and	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION
	hyperparathyroidism. B. Differentiate between benign and malignant salivary gland tumors using ultrasound and MRI criteria.			/MCQ
	C. Recognize the imaging features of deep neck infections, including			
Thoracic and	vascular trauma			
SURG49.1	 A. Describe the mechanisms of thoracic trauma, including blunt and penetrating injuries, and their effects on respiratory and hemodynamic stability. B. Explain the pathophysiology, clinical presentation, and surgical management of pneumothorax, hemothorax, and tension pneumothorax. C. Interpret the imaging findings (X-ray, CT, FAST) for thoracic trauma, including rib fractures, flail chest, pulmonary contusions, and aortic injury 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG49.2	 A. Describe the classification and management of vascular trauma, including penetrating injuries, blunt aortic injury, and iatrogenic vascular injuries. B. Explain the principles of damage 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	control surgery in major vascular and thoracic trauma.			
Esophagoscop	C. Recognize the complications of thoracic trauma, including ARDS, cardiac tamponade, and post-traumatic empyema.			
Bronchoscopy				

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG50.1	 A. Describe the indications, contraindications, and techniques of rigid and flexible esophagoscopy and bronchoscopy. B. Interpret normal and abnormal findings in endoscopic evaluation of the esophagus and tracheobronchial tree, including strictures, ulcers, and tumors. C. Discuss the role of esophagoscopy in the diagnosis and management of esophageal foreign bodies, caustic injuries, and Barrett's esophagus 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG50.2	 A. Describe the indications and techniques for endoscopic biopsy, dilation, and stent placement in esophageal disease. B. Explain the role of bronchoscopy in diagnosing and managing airway obstruction, hemoptysis, and lung infections. C. Recognize the endoscopic features of lung cancer and its role in tissue diagnosis through biopsy and bronchoalveolar lavage. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Pleural disease	es, pneumothorax & hemothorax			
SURG51.1	Neck: Cysts, Tumors & Lymphadenopathy . Differentiate between congenital, inflammatory, and neoplastic neck masses based on clinical and imaging findings.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG51.1	. Explain the role of fine-needle aspiration cytology (FNAC), ultrasound, and CT/MRI in the diagnosis of neck masses	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Neoplasms of				
SURG52.1	A. Classify lung neoplasms, including small cell and non-small cell lung	K/S	LARGE GROUP TEACHING	SHORT ANSWER

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	carcinoma, mesothelioma, and benign lung tumors. B. Explain the risk factors, genetic mutations, and pathogenesis of lung cancer.			QUESTION /MCQ
	C. Interpret radiologic findings (X-ray, CT, PET-CT) in lung cancer, including primary lesions, nodal involvement, and metastases.			
SURG52.1	 A. Discuss the principles of lung cancer staging and its impact on treatment decisions. B. Describe the role of biopsy techniques, including bronchoscopy, transthoracic needle aspiration, and mediastinoscopy, in lung cancer diagnosis. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Mediastinal tu	mors			
SURG53.1	 A. Classify mediastinal tumors based on anatomic compartments (anterior, middle, and posterior) and their common differentials. B. Describe the imaging characteristics of mediastinal masses using X-ray, CT, MRI, and PET-CT 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG53.2	 A. Describe the indications and principles of surgical resection for mediastinal tumors. B. Recognize the role of chemotherapy and radiation therapy in non-surgical management of mediastinal malignancies. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods			
Vascular tumo	Vascular tumors						
SURG54.1	Discuss the surgical approach to oral cavity cancers, including resection, reconstruction, and postoperative rehabilitation.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ			
SURG54.2	 A. Explain the pathophysiology, clinical presentation, and management of salivary gland infections (sialadenitis) and sialolithiasis. B. Differentiate between benign and malignant salivary gland tumors. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ			
Surgical aspec	ets of congenital heart diseases						
SURG55.1	 A. Describe the embryological development of the heart and the pathophysiology of congenital heart defects (CHDs). B. Classify CHDs into cyanotic and acyanotic conditions and their clinical manifestations. C. Interpret echocardiographic and cardiac catheterization findings in common CHDs such as Tetralogy of Fallot, ASD, VSD, and TGA. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ			
SURG55.2	 A. Discuss the indications and timing of surgical intervention for CHDs. B. Explain the principles of corrective surgeries, including arterial switch operation, Fontan procedure, and Blalock-Taussig shunt. C. Describe the perioperative care and potential complications in pediatric cardiac surgery. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
Surgical aspec	Surgical aspects of valvular heart diseases					
SURG56.1	 A. Classify valvular heart diseases based on etiology, including rheumatic, degenerative, and infective causes. B. Explain the pathophysiology and 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		
	hemodynamic consequences of aortic and mitral valve diseases. C. Interpret echocardiographic findings in valvular heart disease,					
	including stenosis and regurgitation severity. D. Discuss indications for valve repair versus valve replacement surgery.					
SURG56.2	A. Describe the surgical techniques of valve replacement, including mechanical and bioprosthetic valve options.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		
	 B. Explain postoperative complications, including thromboembolism, endocarditis, and prosthetic valve dysfunction. C. Discuss anticoagulation management in patients with 					
Surgical aspec	mechanical heart valves. ts of ischemic heart					
SURG57.1	 A. Describe the pathophysiology of ischemic heart disease (IHD), including the role of atherosclerosis, endothelial dysfunction, and plaque rupture. B. Interpret diagnostic modalities for IHD, including ECG, stress testing, coronary angiography, and cardiac CT. C. Explain the indications and patient selection criteria for coronary artery bypass grafting (CABG) 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	versus percutaneous coronary intervention (PCI)			
SURG57.2	 A. Discuss the surgical techniques for CABG, including on-pump and off-pump procedures, graft choices, and anastomosis strategies. B. Describe the perioperative management of patients undergoing CABG, including preoperative optimization and postoperative care. C. Recognize common complications of CABG, including graft failure, arrhythmias, myocardial infarction, and stroke. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
		Cardiopu	lmonary bypass a	nd resuscitation
SURG58.1	 A. Describe the principles and components of cardiopulmonary bypass (CPB), including the oxygenator, heat exchanger, and pump system. B. Explain the physiological effects of CPB on the cardiovascular, pulmonary, renal, and hematologic systems. C. Discuss the indications for CPB and extracorporeal membrane oxygenation (ECMO) in cardiac surgery and critical care settings. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG58.2	A. Describe the technique of myocardial protection during CPB, including cardioplegia solutions and hypothermia.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	 B. Recognize the complications of CPB, including systemic inflammatory response syndrome (SIRS), coagulopathy, and neurological dysfunction. C. Discuss the role of mechanical circulatory support devices, including intra-aortic balloon pumps (IABP) and ventricular assist devices (VADs). 			
	Intr	oduction and b	pasic principles of	f plastic surgery
SURG59.1	 A. Explain the principles of wound healing, tissue repair, and scar formation relevant to plastic surgery. B. Describe the fundamental surgical techniques used in plastic surgery including debridement, skin closure, and tension-free suturing. 		LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG59.2	 A. Recognize the importance of preoperative planning and patient counseling in reconstructive and aesthetic procedures. B. Discuss the role of plastic surger in trauma, cancer reconstruction, and congenital anomalies. C. Identify common complications in plastic surgery, including wound dehiscence, infection, and hematoma formation. 	у	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	Intr	oduction and b	pasic principles of	f plastic surgery
SURG60.1	 A. Describe the concept of reconstructive surgery using the reconstructive ladder, from primary closure to free tissue transfer. B. Discuss the principles of tissue expansion and its applications in burn reconstruction and congenitation and congenitation. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	 C. Health promotion Promote the use of sunscreen (SPF 30+), protective clothing, and avoidance of peak sun hours (10 AM – 4 PM). D. Discourage use of tanning beds. E. Encourage regular skin self-exams and dermatology visits for suspicious lesions. 			
SURG60.2	 A. Recognize the psychological impact of plastic surgery and strategies for managing patient expectations. B. Discuss advances in minimally invasive and robotic-assisted plastic surgical techniques. C. Explain the role of plastic surgery in gender-affirming procedures and their ethical considerations 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Skin graft				
SURG61.1	 A. Define the types of skin grafts (split-thickness, full-thickness, and composite grafts) and their indications. B. Explain the physiology of skin graft take, including plasmatic imbibition, inosculation, and revascularization. C. Discuss the indications and contraindications for skin grafting in burns, chronic wounds, and traumatic injuries. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG62.2	 A. Describe the steps of skin graft harvesting, preparation, and application, including donor site care. B. Recognize complications of skin grafting, such as graft failure, contractures, and pigmentation changes. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	C. Interpret the role of dermal substitutes and bioengineered skin in reconstructive surgery.			
Flaps	5 ,			
SURG63.1	 A. Define different types of flaps (local, regional, free flaps) and their indications in reconstructive surgery. B. Explain the classification of flaps based on blood supply, including random-pattern and axial-pattern 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	flaps. C. Describe the surgical techniques for commonly used local flaps, including Z-plasty, rotation flaps, and advancement flaps.			
SURG63.2	A. Recognize the factors influencing flap survival, including ischemia-reperfusion injury and venous congestion.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	B. Describe the role of perforator flaps in modern reconstructive surgery and their advantages over traditional flaps.C. Explain the management of flap complications, including flap loss,			
	partial necrosis, and infection.			
Cleft lip and p	alate			
SURG64.1	 A. Explain the embryological basis and pathophysiology of cleft lip and palate formation. B. Describe the classification systems for cleft lip and palate, including unilateral, bilateral, and complete/incomplete clefts. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG64.2	A. Explain the multidisciplinary approach to cleft care, involving plastic surgeons, speech therapists, and orthodontists.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number		Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
		Describe the role of pre-surgical orthopedics (e.g., NAM – nasoalveolar molding) in cleft lip and palate management.			
Burns					
SURG65.1	В.	Describe the classification of burns based on depth (superficial, partial-thickness, full-thickness) and total body surface area (TBSA). Explain the pathophysiology of burn injury, including the systemic inflammatory response and fluid shifts. Discuss the principles of burn resuscitation, including the Parkland formula and appropriate	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG65.2	А.	fluid management. Recognize the early signs of airway injury in inhalational burns and the indications for early intubation. Describe the role of escharotomy in circumferential burns and its indications. Explain the principles of wound	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
		care in acute burns, including topical antimicrobial agents and dressing selection.			
Burns					
SURG66.1	В.	Describe the indications and timing for early excision and grafting in burn patients. Discuss the different types of skin grafts and their role in burn reconstruction. Explain the use of dermal substitutes and artificial skin in severe burn cases.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG66.2	 D. Health promotion educate families on safe cooking practices, especially around children. E. Promote safe handling of chemicals, hot liquids, and electrical devices. F. Install smoke detectors and promote fire safety A. Describe the role of flaps in burn 	K/S	LARGE	SHORT
	reconstruction, including pedicled and free flaps. B Discuss contracture prevention and management using splints and physiotherapy. C. Recognize the psychological impact of burns and the role of rehabilitation.		GROUP TEACHING	ANSWER QUESTION /MCQ
Burns				
SURG67.1	 A. Explain the long-term complications of burn injuries, including hypertrophic scarring and keloids. B. Discuss the pathophysiology and treatment of burn contractures and their impact on function. C. Describe the role of pressure garments and silicone therapy in burn scar management. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG67.2	 A. Explain the surgical techniques for contracture release, including Z-plasty and tissue expansion. B. Discuss the risk factors and prevention of burn wound infections and chronic ulcers. C. Recognize the psychosocial challenges faced by burn survivors and the role of support groups. D. Explain the principles of secondary burn 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Electrical inju	ries			
SURG68.1	A. Describe the mechanisms of electrical injuries and their effects on skin, muscles, and internal organs.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	B. Recognize the different types of electrical burns, including high-voltage, low-voltage, and flash burns.			
	C. Discuss the principles of acute management, including fluid resuscitation and cardiac monitoring.			
SURG68.2	A. Explain the role of early surgical debridement and fasciotomy in electrical burns with compartment syndrome.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	B. Describe the pathophysiology and management of deep tissue necrosis and delayed burn injury progression.			
	C. Recognize the systemic complications of electrical injuries, including arrhythmias, rhabdomyolysis, and renal failure.			
	D. Discuss long-term functional rehabilitation strategies for patients with electrical burns.			
CNS congenit	al disorders (spina bifida and congenital h	ydrocephal	us)	
SURG69.1	 A. Describe the embryological development of the central nervous system and the pathophysiology of neural tube defects, including spina bifida. B. Classify spina bifida into occulta, meningocele, and myelomeningocele, and explain their clinical presentations. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	C. Discuss the role of prenatal screening, including maternal serum alpha-fetoprotein (AFP) and			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	fetal ultrasound, in detecting spina bifida.			
SURG69.2	 A. Explain the surgical management of spina bifida and associated complications, including tethered cord syndrome and Chiari malformation. B. Define congenital hydrocephalus, its etiologies (e.g., aqueductal stenosis, Arnold-Chiari 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	malformation), and clinical manifestations. C. Describe the imaging modalities used to diagnose hydrocephalus, including cranial ultrasound, CT, and MRI.			
CNS space oc	cupying lesions (CNS tumor and infection)		
SURG70.1	 A. Classify CNS tumors based on their origin (primary vs. secondary) and histological types (gliomas, meningiomas, pituitary adenomas, etc.). B. Describe the clinical presentation of CNS tumors, including signs of increased intracranial pressure, focal neurological deficits, and seizures. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	C. Explain the role of neuroimaging (MRI with contrast, CT, PET scans) in the diagnosis and localization of CNS tumors.			
SURG70.2	 A. Explain the surgical approaches to CNS tumors, including craniotomy, stereotactic biopsy, and endoscopic tumor removal. B. Discuss adjuvant treatment options for CNS tumors, including radiotherapy (stereotactic radiosurgery, whole-brain radiation) and chemotherapy. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	D. Describe complications of CNS tumors, such as herniation syndromes, hydrocephalus, and			
	peritumoral edema, and their management.			
CNS space oc	cupying lesions (CNS tumor and infection	n)	L	
SURG71.1	A. Differentiate between bacterial, viral, fungal, and parasitic CNS infections that can present as	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION
	space-occupying lesions. B. Explain the pathophysiology of brain abscess formation, including common pathogens and risk factors.			/MCQ
	C. Describe the clinical presentation of CNS infections, including fever, headache, altered mental status, and focal neurological deficits.			
SURG71.2	A. Discuss the imaging findings of CNS infections, including ringenhancing lesions in brain abscesses on MRI/CT scans.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	B. Explain the medical management of CNS infections, including empirical antibiotic therapy, antifungal/antiviral treatments,			
	C. Describe the indications and techniques for surgical drainage of brain abscesses and decompressive procedures.			
Traumatic bra	in injuries			
SURG72.1	A. Classify traumatic brain injuries (mild, moderate, severe) based on the Glasgow Coma Scale (GCS) and clinical presentation.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	B. Describe the pathophysiology of primary (coup-contrecoup, shear injury) and secondary brain injury (ischemia, swelling,			
	inflammation). C. Explain the role of imaging (CT, MRI) in evaluating TBI, including			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	detecting contusions, hematomas, and diffuse axonal injury. D. Health promotion Promote helmet use during motorcycling, biking, skateboarding, and contact sports. E. Advocate for seatbelt use in all vehicles and child car seat safety. F. Encourage fall prevention strategies for the elderly: handrails, non-slip mats, proper lighting, and regular vision checks.			
SURG72.2	 A. Discuss initial resuscitation of TBI patients, including airway protection, intracranial pressure (ICP) control, and hemodynamic stabilization. B. Describe indications for surgical intervention in TBI, including craniotomy for hematoma evacuation and decompressive craniectomy. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Intracranial he	morrhage and skull fractures			
SURG73.1	 A. Differentiate between types of intracranial hemorrhages (epidural, subdural, subarachnoid, intracerebral) based on etiology and imaging findings. B. Describe the clinical presentation of intracranial hemorrhages, including the classic "lucid interval" in epidural hematomas. C. Explain the indications for conservative versus surgical management of intracranial hemorrhages 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG73.2	A. Discuss the role of ICP monitoring and medical management (osmotic therapy, blood pressure control) in hemorrhagic brain injury.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	B. Describe types of skull fractures (linear, depressed, basilar) and their clinical significance.C. recognize signs of basilar skull fractures, including Battle's sign, raccoon eyes, and cerebrospinal fluid (CSF) leaks.			
Spine and Spin	nal Cord injuries			
SURG74.1	 A. Classify spinal cord injuries (complete vs. incomplete) and their associated syndromes (Brown-Séquard, central cord, anterior cord syndromes). B. Describe the principles of spinal stabilization in trauma, including the use of cervical collars and log- roll techniques. C. Discuss the role of imaging (X-ray, CT, MRI) in diagnosing spinal fractures and spinal cord injury. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG74.2	 A. Explain the acute management of spinal cord injury, including methylprednisolone use and neurogenic shock treatment. B. Recognize complications of spinal cord injury, including pressure ulcers, deep vein thrombosis (DVT), and autonomic dysreflexia. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Spine and Spin	nal Cord injuries – Management			
SURG75.1	 A. Explain the indications for conservative versus surgical management of spinal injuries. B. Describe the role of spinal decompression surgery in cases of acute spinal cord compression. C. Discuss the use of spinal fusion techniques in cases of unstable fractures. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	D. Explain post-operative care in spinal surgery, including infection prevention and pain management.			
SURG75.2	 A. Explain complications of spinal injury management, including failed back syndrome. B. Describe the indications and outcomes of spinal cord stimulation therapy. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Non traumatic	disorders of the spine - I			
SURG76.1	 A. Describe the pathophysiology and natural history of degenerative spine diseases, including spondylosis, spinal stenosis, and disc herniation. B. Explain the clinical presentation of degenerative spine disorders, including radiculopathy, myelopathy, and neurogenic claudication. C. Discuss the role of imaging (X-ray, MRI, CT) in diagnosing degenerative spinal conditions and differentiating them from other causes of back pain 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG76.2	A. Describe conservative management options, including physical therapy, analgesia, and spinal injections for degenerative spine conditions. B. Explain indications for surgical interventions such as laminectomy, discectomy, and spinal fusion. C. Recognize complications of untreated spinal degeneration, including	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	chronic pain syndromes and progressive neurological deficits			
Non traumatic spine- II	disorders of the			
SURG77.1	 A. Describe the pathophysiology of spinal infections, including vertebral osteomyelitis, discitis, and spinal epidural abscess. B. List common causative organisms (e.g., Staphylococcus aureus, Mycobacterium tuberculosis) and their routes of spread. C. Explain the clinical presentation of spinal infections, including fever, back pain, neurological deficits, and systemic symptoms. D. Discuss the role of laboratory markers (CRP, ESR, blood cultures) and imaging (MRI with contrast) in diagnosing spinal infections. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG77.2	 A. Describe the indications for surgical intervention, including decompression, drainage of abscesses, and spinal stabilization procedures. B. Recognize complications of spinal infections, including deformity, paralysis, and systemic sepsis. C. Discuss preventive strategies, including early recognition of infections in high-risk patients (e.g., diabetics, IV drug users). 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Non traumatic spine- III	disorders of the			
SURG78.1	 A. Classify spinal tumors into primary (benign vs. malignant) and secondary (metastatic) lesions. B. Describe the clinical presentation of spinal tumors, including axial pain, radiculopathy, myelopathy, and systemic symptoms. C. Explain the diagnostic approach to spinal tumors, including MRI with contrast, CT, and biopsy techniques. D. Discuss the principles of surgical management, 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	including en bloc resection, decompression, and spinal stabilization.			
SURG78.2	A. Explain the role of adjuvant therapies, including radiotherapy and chemotherapy, in managing spinal tumors.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	B. Recognize complications of spinal tumors, including pathological fractures, spinal cord compression, and paraplegia.			
	C. Discuss the prognosis and quality-of-life considerations for patients with spinal tumors			
Anaesthesia: d & types	efinition, history			
SURG79.1	 A. Define anaesthesia and classify its types (general, regional, and local), explaining their mechanisms of action. B. Describe the historical evolution of anaesthesia, including major discoveries 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	like ether, chloroform, and modern inhalational agents. C. Compare and contrast the indications, advantages, and limitations of general,			
SURG79.2	regional, and local anaesthesia. A. Identify common diseases that impact anaesthetic management, such as chronic obstructive pulmonary disease (COPD), heart failure, and obstructive sleep apnea. B. Describe the ethical and medico-legal aspects of anaesthesia, including patient consent and safety protocols.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	oreoperative evaluation			
SURG80.1	General anaesthesia	K/S	LARGE	SHORT
	 A. Conduct a comprehensive preoperative assessment, including airway evaluation, cardiovascular status, and comorbidities like diabetes and hypertension. B. Recognize the importance of ASA (American Society of Anesthesiologists) classification in risk stratification for surgical patients. C. Identify laboratory tests and imaging studies required before anaesthesia, particularly in patients with conditions like chronic kidney disease and anemia 		GROUP TEACHING	ANSWER QUESTION /MCQ
SURG80.2	A. Discuss the principles of fasting guidelines, including their importance in preventing aspiration pneumonia and Mendelson's syndrome.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	 B. Explain the impact of common systemic diseases (e.g., coronary artery disease, asthma, chronic liver disease) on anaesthetic choice and perioperative management. C. Describe premedication protocols, including anxiolytics, anticholinergics, and prophylactic antibiotics. D. Outline the management of patients on chronic medications (e.g., anticoagulants, insulin, beta- 			
	blockers) before surgery.			
-	n anaesthesia. And			
complications	A Describe the observation of	V/C	LADCE	CHORT
SURG81.1	 A. Describe the physiological process of emergence from anaesthesia and the role of the post-anaesthesia care unit (PACU). B. Identify criteria for safe discharge from PACU, including airway patency, hemodynamic stability, and return of protective reflexes. C. Discuss common postoperative complications such as nausea and vomiting, respiratory depression, and hypothermia. D. Explain the pathophysiology, recognition, and management of post-operative delirium, especially in elderly patients. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG81.2	 A. Recognize the causes and treatment of post-operative respiratory failure, including atelectasis and pulmonary embolism. B. Discuss cardiovascular complications such as hypotension, arrhythmias, and myocardial infarction in high-risk surgical patients. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	C. Outline strategies for managing post-operative pain using multimodal analgesia, including opioids, NSAIDs, and regional technique.			
Regional & sp	pinal anaesthesia.			
SURG82.1	 A. Differentiate between spinal, epidural, and peripheral nerve blocks, explaining their indications and contraindications. B. Describe the physiological effects of spinal anaesthesia, including sympathetic blockade, vasodilation, and hypotension. C. Explain the technique of spinal anaesthesia, including patient positioning, landmark identification, and complications like post-dural puncture headache. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG82.2	 A. Recognize the advantages of regional anaesthesia in highrisk patients, such as those with respiratory diseases (e.g., COPD) or cardiovascular compromise. B. Discuss common complications of regional anaesthesia, including hypotension, high spinal block, and nerve injury. C. Explain the use of ultrasound-guided regional anaesthesia and its role in improving precision and safety. D. Describe the use of regional anaesthesia in orthopedic procedures, such as knee and hip replacements 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Pharmacology drugs.	of anaesthetic			
SURG83.1	 A. Classify commonly used anaesthetic drugs, including inhalational agents, intravenous induction agents, and adjuvants. B. Explain the pharmacokinetics and pharmacodynamics of volatile anaesthetics (e.g., sevoflurane, desflurane) and their impact on organ function. C. Describe the mechanisms of intravenous anaesthetics, including propofol, etomidate, ketamine, and barbiturates. D. Recognize the clinical applications and side effects of neuromuscular blocking agents and their reversal drugs. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG83.2	 A. Discuss opioid analgesics used in anaesthesia, including fentanyl, morphine, and their role in multimodal pain management. B. Identify common local anaesthetics (e.g., lidocaine, bupivacaine), their toxicity profiles, and treatment of local anaesthetic systemic toxicity (LAST). C. Describe the pharmacological considerations in patients with hepatic or renal impairment. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Anaesthesia ir pediatrics & tl	ne old			
SURG84.1	 A. Discuss the physiological changes in pregnancy and their impact on anaesthetic management. B. Explain the principles of anaesthesia for cesarean sections, including spinal and epidural anaesthesia. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG84.2	C. Identify the risks of general anaesthesia in pregnancy, including aspiration and difficult airway management. D. Describe the physiological differences in pediatric patients and how they affect anaesthetic drug metabolism and dosing. A. Recognize common anaesthetic complications in neonates and infants, including apnea and	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION
	hypoglycemia. B. Explain the considerations for anaesthesia in elderly patients, focusing on reduced organ function and increased sensitivity to drugs. C. Discuss the role of regional anaesthesia in elderly patients with hip fractures to minimize systemic complications.			/MCQ
The Principles unit in surgica	s of intensive care			
SURG85.1	 A. Define the role of the ICU in perioperative and critical care management. B. Describe the principles of mechanical ventilation and its indications in post-operative patients. C. Recognize common post-operative ICU complications such as sepsis, acute respiratory distress syndrome (ARDS), and multiorgan failure. D. Discuss fluid resuscitation and hemodynamic monitoring in critically ill surgical patients 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG85.2	 A. Identify the management of electrolyte imbalances, particularly in patients with renal failure and major trauma. B. Explain the principles of sedation and analgesia in ventilated patients. C. Describe the criteria for ICU 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
T . 1	admission and discharge in surgical patients.			
Definition, An	Pediatric Surgery, atomical &			
	considerations.			
SURG86.1	A. Define pediatric surgery and describe its scope, including congenital anomalies, neonatal emergencies, and acquired surgical conditions in children. B. Explain the anatomical and physiological differences between pediatric and adult patients, focusing on the respiratory, cardiovascular, and gastrointestinal systems. C. Describe the impact of immature organ function (e.g., liver metabolism, renal clearance) on perioperative care and anesthesia in pediatric surgery	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG86.2	 A. Identify the principles of fluid and electrolyte management in neonates and children, considering conditions like dehydration and sepsis. B. Discuss common neonatal surgical emergencies, including Hirschsprung's disease, anorectal malformations, and abdominal wall defects. C. Explain the importance of early diagnosis and timely surgical intervention in pediatric surgical 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	conditions to prevent long-term complications.			
Hirschsprung's Anorectal Mal				
SURG87.1	A. Explain the embryological basis, pathophysiology, and clinical presentation of Hirschsprung's disease, including the absence of ganglion cells in the enteric nervous system. B. Describe the diagnostic approach to Hirschsprung's disease, including barium enema, anorectal manometry, and rectal biopsy. C. Outline the surgical management of Hirschsprung's disease, including pull-through procedures and management of complications like enterocolitis. D. Classify anorectal malformations (high, intermediate, low), explaining their embryology, clinical features, and associated congenital anomalies.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG87.2	 A. Discuss the diagnostic workup for anorectal malformations, including perineal examination, abdominal ultrasound, and contrast studies. B. Describe the principles of surgical management for anorectal malformations, including posterior sagittal anorectoplasty (PSARP) and staged procedures. C. Identify postoperative complications and long-term outcomes, including fecal incontinence and constipation. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	ntestinal atresia, neconium ileus.			
SURG88.1	A. Explain the embryology and pathophysiology of duodenal atresia, jejunoileal atresia, and colonic atresia, including vascular insult theories. B. Describe the clinical presentation of neonatal intestinal obstruction, including bilious vomiting, abdominal distension, and failure to pass meconium. C. Discuss the diagnostic approach, including plain abdominal X-rays, contrast studies (upper GI series for malrotation), and ultrasound.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG88.2	 A. Explain the principles of surgical management, including duodenoduodenostomy, resection with primary anastomosis, and Ladd's procedure for malrotation. B. Recognize the association between meconium ileus and cystic fibrosis, including diagnostic tests (sweat chloride test, genetic testing). C. Describe the non-operative (N-acetylcysteine enema) and operative management (resection, ileostomy) of meconium ileus 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods				
Tracheoesopha Congenital dia	Esophageal atresia & Tracheoesophageal fistula, Congenital diaphragmatic hernia & Eventration.							
SURG89.1	A. Explain the embryology and classification (Gross and Vogt) of esophageal atresia and tracheoesophageal fistula. B. Describe the clinical features of esophageal atresia, including excessive salivation, choking with feeds, and respiratory distress. C. Discuss the diagnostic and preoperative management of esophageal atresia, including the "inability to pass an NG tube" test and contrast studies. A. Outline the surgical options for esophageal atresia, including primary anastomosis and staged repair. B. Describe the pathophysiology of congenital diaphragmatic hernia (CDH) and its impact on pulmonary development. C. Recognize the clinical presentation of CDH, including respiratory distress, scaphoid abdomen, and mediastinal shift. D. Explain the principles of preoperative stabilization (gentle ventilation, nitric oxide, ECMO) and surgical repair of CDH.	K/S	LARGE GROUP TEACHING LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ SHORT ANSWER QUESTION /MCQ				

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	asia, Hypertrophic is. GIT foreign body &			
caustic ingesti				
SURG90.1	A. Explain the pathophysiology of GERD in infants and children, including transient lower esophageal sphincter relaxation. B. Discuss the indications for medical management (proton pump inhibitors, lifestyle changes) and surgical intervention (Nissen fundoplication) in GERD. C. Describe the pathophysiology of achalasia and its diagnosis using esophageal manometry and barium swallow. D. Outline the treatment options for achalasia, including pneumatic dilation, botulinum toxin, and Heller myotomy.hormonal profile.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG90.2	A Recognize the clinical presentation of hypertrophic pyloric stenosis and its characteristic "olive-shaped" mass. B. Discuss the diagnostic role of ultrasound and the principles of surgical management (Ramstedt pyloromyotomy). C. Describe the management of GIT foreign body	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	L	earning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
		ingestion and caustic			
		ingestion, including indications for endoscopy			
		and surgical removal.			
		and surgical removal.			
Neck mass in	children (Cy	stic			
hygroma, Thy	roglossal cys	st,			
Branchial cyst	c). Obstructiv	re			
Jaundice, Bilia	ary atresia,				
Choledochal c	<u> </u>			,	
SURG91.1	A.	Discuss the surgical	K/S	LARGE	SHORT
		management of congenital		GROUP	ANSWER
		neck masses, including the		TEACHING	QUESTION
		Sistrunk procedure for			/MCQ
		thyroglossal cysts.			
	В.	Explain the			
		pathophysiology of biliary			
		atresia and its progressive			
		nature leading to liver			
		failure.			
	C.	Recognize the clinical			
		features of neonatal			
		obstructive jaundice and			
		the role of liver function			
		tests and ultrasound in			
		diagnosis.			
SURG91.2	Α.	Outline the Kasai	K/S	LARGE	SHORT
201107112		portoenterostomy and its	12 2	GROUP	ANSWER
		role in biliary atresia		TEACHING	QUESTION
		management.			/MCQ
	В.	Describe the classification			
		and management of			
		choledochal cysts,			
		including cyst excision			
		with hepaticojejunostomy.			
	C.	Recognize complications			
		such as cholangitis and			
		biliary cirrhosis in			
		untreated biliary			
		anomalies.			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	D. Discuss the role of liver transplantation in end-stage biliary atresia.			
Congenital ab	dominal wall			
SURG92.1	 A. Differentiate between omphalocele and gastroschisis, including their embryology, clinical features, and management. B. Discuss emergency management of neonates with abdominal wall defects, including temperature regulation and fluid 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	resuscitation. C. Explain the pathophysiology and management of inguinal hernia and hydrocele in infants			
SURG92.2	 A. Describe the presentation and management of acute scrotum, including testicular torsion and epididymo-orchitis. B. Discuss the causes, diagnosis, and treatment of undescended testis, including the role of orchidopexy. C. Recognize the complications of untreated testicular torsion, including testicular infarction and infertility 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Omphalocele, Gastroschisis, Umbilical hernia), Inguinoscrotal conditions & acute scrotum, Inguinal hernia & Hydrocele. Undescended testis, Testicular torsion.				
SURG93.1	. Explain the surgical principles in the repair of abdominal wall defects and their long-term outcomes	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG93.2 Acute abdomi Appendicitis,	Discuss the importance of early intervention in congenital inguinoscrotal conditions to prevent complications. nal pain, Intussusception,	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Meckel's dive				
SURG94.1	 A. Differentiate the causes of acute abdominal pain in children based on age, location, and associated symptoms. B. Describe the pathophysiology, clinical presentation, and complications of acute appendicitis, including perforation and abscess formation. C. Discuss the diagnostic approach to appendicitis, including clinical scoring systems (Alvarado score), ultrasound, and CT scan indications 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG94.2	 A. Explain the surgical management of appendicitis, including laparoscopic versus open appendectomy and post-operative care. B. Describe the pathophysiology of intussusception, including the role of lead points and the classic "currant jelly stool" presentation. C. Outline the diagnostic and treatment options for intussusception, including air enema reduction and surgical intervention for failed cases. 	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	childhood tumors,			
•	na (Wilms' tumor),			
	a, Sacrococcygeal			
teratoma. SURG95.1	A Classify modiate tymons	K/S	LARGE	SHORT
SUKG93.1	A. Classify pediatric tumors	K/S		
	based on their origin (renal, neural,		GROUP TEACHING	ANSWER
	soft tissue) and differentiate between		TEACHING	QUESTION
	benign and malignant lesions. B. Explain the pathophysiology.			/MCQ
	_ · · _ · · · · · · · · · · · · · · · ·			
	genetic associations (WT1 gene mutations), and clinical presentation of			
	Wilms' tumor.			
	C. Discuss the diagnostic			
	approach to Wilms' tumor, including			
	abdominal ultrasound, CT scan, and			
	histopathology.			
SURG95.2	A. Outline the treatment protocol for	K/S	LARGE	SHORT
50KG/3.2	Wilms' tumor, including	IL/S	GROUP	ANSWER
	nephrectomy, chemotherapy, and		TEACHING	QUESTION
	radiotherapy.		TEMETHI (G	/MCQ
	B. Describe the embryology and			/WEQ
	pathophysiology of			
	neuroblastoma, including its			
	association with adrenal glands			
	and paraneoplastic syndromes.			
	C. Explain the clinical presentation			
	and staging of neuroblastoma,			
	including bone marrow metastasis			
	and elevated catecholamine			
	metabolites.			

Practical NEUROSURGERY

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
	CNS Congenital Disorders (Spina Bifida & Congenital Hydrocephalus)				
SURG1.1	1-Diagnose spina bifida and congenital hydrocephalus using clinical presentation and imaging findings. 2-Outline the surgical management of spina bifida, including early closure and long-term complications.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA	
SURG1.2	1 Describe the indications and techniques for ventriculoperitoneal shunting in hydrocephalus 2-Identify and manage common postoperative complications, including infection and shunt malfunction.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA	
CNS Space- & Infection	Occupying Lesions (Tumors				
SURG2.1	1 Differentiate between benign and malignant brain tumors based on clinical and imaging findings. 2- Explain the principles of surgical resection, radiotherapy, and chemotherapy for brain tumors.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA	
SURG2.2	.1- Recognize the signs of brain abscess and meningitis and outline the surgical and medical management 2- Discuss the role of corticosteroids and intracranial pressure (ICP) management in CNS mass lesions.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Traumatic E	Brain Injuries			
SURG3.1	1-Perform initial assessment and triage using the Glasgow Coma Scale (GCS) and trauma protocols.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA
	2- Describe indications for emergency craniotomy and decompressive craniectomy in severe head trauma			
SURG3.2	1-Manage increased intracranial pressure (ICP) using medical and surgical interventions.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA
	2-Outline the rehabilitation process and long-term complications of traumatic brain injuries.			
	Hemorrhage & Skull			
Fractures SURG4.1	1-Differentiate between epidural, subdural, and intracerebral hemorrhages using clinical and imaging features. 2-Explain the surgical	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA
	indications for hematoma evacuation and craniotomy			
SURG4.2	1-Manage skull fractures conservatively or surgically, depending on severity and complications. 2-Recognize signs of cerebrospinal fluid (CSF) leak and discuss management strategies.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Spine & Spi	nal Cord Injuries			
SURG5.1	1- Perform a thorough neurological assessment using the ASIA impairment scale for spinal cord injuries.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA
	2-Describe indications for spinal stabilization surgery and decompression in trauma cases.			
SURG5.2	1-Manage acute spinal cord injury using steroids, immobilization, and surgical interventions. 2-Outline rehabilitation strategies for patients with paraplegia and quadriplegia	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA

Practical Anesthesia

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Indications, Complication Anesthesia	ons of General & Local			
SURG6.1	1- Identify indications and contraindications for general, spinal, and epidural anesthesia. 2- Recognize and manage anesthesia-related complications such as hypotension, malignant hyperthermia, and local anesthetic toxicity.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION VIVA
SURG6.2	1 Differentiate between regional and general anesthesia in terms of risks, benefits, and indications. 2- Discuss the preoperative assessment required to select an appropriate anesthetic plan.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION VIVA
	ve, Intraoperative, & ve Anesthesia Management			
SURG7.1	1 Conduct a preoperative anesthesia risk assessment, including ASA classification. 2- Implement intraoperative monitoring techniques for oxygenation, ventilation, and hemodynamic stability.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION VIVA
SURG7.2	.1- Recognize and manage postoperative complications such as pain, nausea, and delayed emergence. 2-Describe the principles of postoperative pain management, including multimodal analgesia.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION VIVA
Scoring Sys	tems Used in Anesthesia			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Indications, Complication Anesthesia	ons of General & Local			
SURG8.1	1-Apply the ASA (American Society of Anesthesiologists) classification in preoperative evaluation.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION VIVA
	2- Utilize the Mallampati score for airway assessment and difficult intubation prediction.			
SURG8.2	1- Explain the Glasgow Coma Scale (GCS) in anesthesia for neurological monitoring 2-Use the BIS (Bispectral Index) score to monitor depth of anesthesia during surgery.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION VIVA
Instruments	& Devices in Anesthesia			
SURG9.1	1- Demonstrate the proper use of anesthesia machines and ventilators. 2-Identify and manage airway devices such as endotracheal tubes, laryngeal mask airways (LMAs), and fiberoptic scopes	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION VIVA
SURG9.2	 1 -Recognize and troubleshoot common issues with anesthesia monitoring equipment. 2- Understand the principles of patient-controlled analgesia (PCA) and regional anesthesia devices. 	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION VIVA

Practical orthopedics

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Most comm	on upper limb fracture			
SURG10.1	1- Assess and manage common upper limb fractures, including non-surgical and surgical approaches. 2-Perform closed reduction and splinting for Colles' and Smith's fractures	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	VIVA CIVA
SURG10.2	1 Recognize complications such as nonunion, malunion, and neurovascular injury 2- Describe indications for open reduction and internal fixation (ORIF) in upper limb fractures	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	VIVA CIVA
Most comm	on lower limb fracture			
SURG11.1	1 Differentiate between stable and unstable lower limb fractures using clinical and radiological findings. 2-Explain the principles of weight-bearing restrictions and rehabilitation in lower limb fractures.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	VIVA CIVA
SURG11.2	.1 Manage hip fractures surgically with hemiarthroplasty, total hip replacement, or internal fixation. 2- Recognize and treat complications such as deep vein thrombosis (DVT) and fat embolism.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	VIVA CIVA
Additional	orthopedics important			
SURG12.1	1-Recognize open fractures and describe the principles of	K/S/A/C	SMALL GROUP TEACHING	VIVA CIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
CLID C12.2	emergency management, including debridement, irrigation, and fixation. 2- Explain the role of traction in managing femoral shaft fractures and its indications	K/S/A/C	OUTPATIENT CLININC	VIIVA
SURG12.2	3-Identify and manage complications of fractures, including compartment syndrome and avascular necrosis. 4Describe the principles of post-fracture rehabilitation, including weight-bearing status and physical therapy	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	VIVA CIVA
Additional of	orthopedics important			
SURG13.1	1-Differentiate between pathologic fractures and traumatic fractures based on clinical and imaging findings. 2- Explain the use of external fixation in complex fractures and open injuries.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	VIVA CIVA
SURG13.2	1 - Recognize and manage pediatric fractures, including growth plate injuries and remodeling potential.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	VIVA CIVA

Practical Radiology

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Chest Ra	diology			
SURG14.1	1- Interpret chest X-rays to diagnose pneumonia, pneumothorax, pleural effusion, and heart failure. 2-Differentiate between obstructive and restrictive lung diseases on imaging.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION
SURG14.2	1 Recognize mediastinal widening and its differential diagnoses.2- Describe indications for CT thorax in chest pathology.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION
Abdomin	al Radiology			
SURG15.1	1 Identify radiological signs of bowel obstruction and perforation.2- Recognize hepatosplenomegaly and its causes using ultrasound and CT.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION
SURG15.2	.1- Interpret contrast studies for gastrointestinal diseases.2- Describe the indications for MRI abdomen in hepatic and pancreatic disorders.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION
Radiology – Additional Learning Objectives				
SURG16.1	1- Interpret spinal X-rays to identify fractures, spondylolisthesis, and degenerative changes.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION CIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG 16.2	2- Recognize the imaging findings of deep vein thrombosis (DVT) using Doppler ultrasound. 3-Interpret musculoskeletal X-rays for common fractures, dislocations, and bone tumors. 4-Recognize the radiologic signs of abdominal aortic aneurysm (AAA) and its complications. 1-Explain the role of nuclear medicine imaging (bone scan, PET scan) in oncological and infection-related diagnoses. 2-Explain the role of nuclear medicine imaging (bone scan, PET scan) in oncological and infection-related diagnoses. 3-Understand the role of contrast-enhanced imaging in diagnosing renal, hepatic, and pancreatic diseases.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION CIVA

Practical Plastic surgery

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
Burns mana	Burns management				
SURG17.1	1- Classify burns based on depth and total body surface area (TBSA). 2-Apply the Parkland formula for fluid resuscitation in severe burns.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION	
SURG17.2	 Recognize indications for early excision and grafting. Manage inhalation injury and associated complications. 	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION	
Skin Grafts	& Flaps				
SURG18.1	1 Differentiate between split-thickness and full-thickness skin grafts.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION	
	2- Explain the principles of flap surgery, including local, regional, and free flaps.				
SURG18.2	.1 Recognize complications such as graft failure and necrosis. 2-Discuss the use of skin substitutes in wound management.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION	

Practical Thoracic surgery

			T 1 '		
NI1	I as maior a Objective	Domain	Teaching	Assessment	
Number	Learning Objective	K/S/A/C	Learning Methods	Methods	
			Methods		
Chest X-ra	y				
SURG19.1	1- Interpret common chest X-	K/S/A/C	SMALL	CIVA	
	ray findings related to trauma,		GROUP		
	including pneumothorax,		TEACHING		
	hemothorax, and rib fractures		OUTPATIENT		
			CLININC		
SURG19.2	1 Differentiate between	K/S/A/C	SMALL	CIVA	
	normal and abnormal		GROUP		
	anatomical structures on a		TEACHING		
	chest X-ray to aid in rapid		OUTPATIENT		
	trauma assessment		CLININC		
Chest Traun	na				
SURG20.1	1- Identify and classify	K/S/A/C	SMALL	CIVA	
	different types of chest		GROUP		
	trauma, including blunt and		TEACHING		
	penetrating injuries.		OUTPATIENT		
			CLININC		
SURG20.2	.1- Outline the initial	K/S/A/C	SMALL	CIVA	
	management and stabilization		GROUP		
	of patients with chest trauma		TEACHING		
	following Advanced Trauma		OUTPATIENT		
	Life Support (ATLS)		CLININC		
	guidelines.				
Chest Drain	Chest Drain				
SURG21.1	1- Describe the indications,	K/S/A/C	SMALL	CIVA	
	contraindications, and		GROUP		
	complications of chest drain		TEACHING		
	insertion.		OUTPATIENT		
			CLININC		
SURG21.2	1- Demonstrate the correct	K/S/A/C	SMALL	CIVA	
	technique for insertion and		GROUP		
	securement of an intercostal		TEACHING		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	chest drain in a simulated or clinical setting.		OUTPATIENT CLININC	
Vascular Tra	auma			
SURG22.1	1 Recognize signs and symptoms of major vascular injuries and understand their implications in trauma patients.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA
SURG22.2	1- Discuss the principles of emergency management and surgical intervention in vascular trauma, including hemorrhage control and limb salvage.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA

Practical Thoracic surgery

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Kidney Sto	ones			
SURG23.1	1- Diagnose kidney stones using clinical presentation and imaging techniques (US, CT KUB). 2-Outline medical management options, including hydration and alkalinization therapy	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION
SURG23.2	1 Describe indications for extracorporeal shock wave lithotripsy (ESWL) and ureteroscopy 2-Recognize and manage complications such as obstruction and infection.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION
Kidney & F	Bladder Trauma			
SURG24.1	1 Classify renal and bladder injuries based on severity and imaging findings. 2-Outline conservative vs. surgical management approaches in renal trauma.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION
SURG24.2	.1-Describe the role of cystography in diagnosing bladder rupture 2- Manage associated complications, such as urinary extravasation and hemorrhage	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
urinary Tra	ct Infections (UTIs)			
SURG25.1	 Differentiate between uncomplicated and complicated UTIs. 2-Describe the role of urine culture and antibiotic selection in treatment. 	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION
SURG25.2	1- Recognize indications for hospitalization and IV antibiotics in pyelonephritis. 2- Explain preventive strategies for recurrent UTIs. Recognize open fractures and describe the principles of emergency management, including debridement, irrigation, and fixation.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION

Internal medicine



Fifth grade

Academic program discretion

This academic program description provides a brief overview of the key features of the program and the expected learning outcomes for the student, demonstrating whether the student has made the most of the available opportunities. It is accompanied by a description of each course within the program.

1 Educational Establishment	University of al-ameed
2-Scientific Department	College of medicine
3-Name of the Professional Academic Program.	Modified traditional curriculum
4-Final Graduation Certificate	M.B.Ch.B
5- Educational system: Annual/courses/other	Annual
6-Approved accreditation program	Applied for Iraqi National Guideline on Standards for Established and Accrediting Medical School
7-Other external factors	 Availability of relevant scientific research in the field of specialization Access to global electronic networks Access to traditional and digital libraries Teaching aids such as data show and PowerPoint presentations Availability of equipped classrooms Use of free online communication platforms (e.g., Free Conference Call)
8-Date the description was written	2024/9/15

9- objectives of academic program

- 1- Graduate doctors with a comprehensive understanding of internal medicine, enabling them to diagnose, manage, and treat a wide range of medical conditions encountered in hospital wards, outpatient clinics, and emergency settings. Enhance students' clinical reasoning and problem-solving skills through integrated theoretical teaching, bedside clinical rounds, and practical hands-on training.
- 2- Provide students with the necessary skills and knowledge to perform thorough patient history taking, physical examination, and interpretation of diagnostic tests specific to internal medicine. Equip them to formulate evidence-based management plans for common and complex medical cases.
- 3- Incorporate modern educational technologies and active learning methods such as simulation, case-based discussions, and e-learning platforms to improve student engagement and clinical competence in internal medicine.
- 4- Foster professional and ethical attitudes by promoting patient-centered care, teamwork, confidentiality, and lifelong learning. Encourage participation in research, community health activities, and interdisciplinary collaboration to prepare future leaders in internal medicine.
- 10) The most reliable resources for program information are :

REFERENCES:

Hutchison's clinical methods

Macleod's clinical examination

Systematic guide to physical diagnosis

Moby's guide to physical examination

The common symptom guide

Skills for communicating with patient

Davidson's principles and practice of medicine

Kumar and Clark's clinical medicine

Harrison's principles of internal medicine

Oxford textbook of medicine

Internal medicine\ Grade 5

Code: MEDI 502 7.5 Credits

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Toxicology				
MEDI.1.1	Describe general principles of toxicology, including types of toxins and doseresponse relationships.	K	Large Group Teaching	MCQ, Short answer question
MEDI.1.2	Identify clinical features and lab findings in common toxicities (e.g., paracetamol, organophosphates, opioids).	K/S	Large Group Teaching	MCQ, Short answer question
MEDI.1.3	Explain the initial management steps and antidote use in common poisonings.	A	Large Group Teaching	MCQ, Short answer question
MEDI.1.4	Discuss public health and ethical considerations related to toxic exposures and overdose prevention.	С	Large Group Teaching	MCQ, Short answer question
Principles of	antibiotic therapy			
MEDI.2.1	Explain mechanisms of action, spectrum, and classification of major antibiotic groups.	K	Large Group Teaching	MCQ, Short answer question
MEDI.2.2	Identify appropriate empirical antibiotics for common infections (e.g., pneumonia, UTI).	A	Large Group Teaching	MCQ, Short answer question
MEDI.2.3	Describe how to adjust antibiotic therapy based on lab data and renal function.	A	Large Group Teaching	MCQ, Short answer question
MEDI.2.4	Discuss principles of antibiotic stewardship and resistance.	С	Large Group Teaching	MCQ, Short answer question
Steroids: Indi	cations, precautions, and side effects			
MEDI.3.1	Describe pharmacological properties of glucocorticoids and mineralocorticoids.	K	Large Group Teaching	MCQ, Short answer question
MEDI.3.2	List major indications for steroid therapy in clinical practice.	K	Large Group Teaching	MCQ, Short answer question
MEDI.3.3	Explain common adverse effects and monitoring strategies for steroid use.	A	Large Group Teaching	MCQ, Short answer question
MEDI.3.4	Discuss tapering protocols and patient education regarding steroid safety.	С	Large Group Teaching	MCQ, Short answer question

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Number	I comin a Objective	Domain	Teaching	Assessment	
Number	Learning Objective	K/S/A/C	Learning Methods	Methods	
			Wicthods		
Functional Anatomy and Physiology of Bone Remodeling					
MEDI.4.1	Describe the anatomy of bones and joints	K	Large	MCQ, SAQ	
	relevant to rheumatologic conditions.		Group		
			Teaching		
MEDI.4.2	Explain the hormonal and cellular control	K	Large	MCQ, SAQ	
	of bone remodeling.		Group		
MEDIAO	B: (1 1 6 (11)	17	Teaching	MGO GAO	
MEDI.4.3	Discuss the roles of osteoblasts,	K	Large	MCQ, SAQ	
	osteoclasts, and RANK/RANKL pathway.		Group Teaching		
MEDI.4.5	Apply knowledge of remodeling to clinical	A	Outpatient	CIVA,	
WIED1.4.5	conditions like osteoporosis.	Λ	Clinic	OSCE	
			Cilific	OSCE	
Investigation	of MSK Diseases				
MEDI.5.1	Identify imaging techniques (X-ray, MRI,	K	Large	MCQ, SAQ	
	US) used in MSK diagnostics.		Group		
15777.5.6		~	Teaching	0000	
MEDI.5.2	Interpret typical findings in arthritis and	S	Outpatient	OSCE,	
MEDI 5.2	soft tissue disorders.	I/	Clinic	SAQ	
MEDI.5.3	List key laboratory markers used in rheumatology (RF, anti-CCP, ANA).	K	Large Group	MCQ, SAQ	
	ineumatology (Kr, anti-CCF, ANA).		Teaching		
MEDI.5.4	Integrate clinical, imaging, and lab findings	A	Outpatient	CIVA,	
1,1221,01	in diagnosis.		Clinic	OSCE	
Drosantin a Dr					
ŭ	oblems in MSK (Arthritis, Back Pain)				
MEDI.6.1	Differentiate mechanical vs inflammatory	K	Large	MCQ, SAQ	
	joint pain based on history.		Group		
MEDICO	T1 ('C 1C)		Teaching	OCCE	
MEDI.6.2	Identify red flag symptoms in low back	A	Outpatient Clinic	OSCE,	
MEDI.6.3	pain (e.g., cauda equina). Classify patterns of joint involvement in	K	Large	SAQ MCQ, SAQ	
WIEDI.U.5	arthritis.	K	Group	MCQ, SAQ	
	ditilities.		Teaching		
MEDI.6.4	Use patient presentations to develop	A	Outpatient	CIVA,	
	differential diagnoses.		Clinic	OSCE	
Regional MS	K Pain				
MEDI.7.1	List causes of common regional pain	K	Large	MCQ, SAQ	
	syndromes (shoulder, hip, knee).		Group		
MEDI 7.2	Eliait fooysad history and about all finds	S	Teaching	OSCE	
MEDI.7.2	Elicit focused history and physical findings to localize pain.	3	Outpatient Clinic	OSCE, CIVA	
MEDI.7.3	Discuss diagnostic approaches for regional	A	Large	MCQ, SAQ	
1,112,1.7.3	MSK pain.	11	Group	11100, 5/10	
	- F		Teaching		
MEDI 7.4	Correlate anatomical structures with	A	Outpatient	CIVA,	
MEDI.7.4	Correlate arratorifical structures with		Carpationt	O1 1 1 1,	

			Taaahina		
Number	Learning Objective	Domain	Teaching Learning	Assessment	
Nullibei	Learning Objective	K/S/A/C	Methods	Methods	
			ll .		
Principles of Management of MSK Diseases (Analgesics, NSAIDs, DMARDs, Biologics)					
MEDI.8.1	Explain indications, mechanisms, and side	K	Large	MCQ, SAQ	
	effects of NSAIDs and analgesics.		Group		
			Teaching		
MEDI.8.2	Describe uses and mechanisms of	K	Large	MCQ, SAQ	
	DMARDs and biologics in autoimmune		Group		
1.555.00	diseases.		Teaching		
MEDI.8.3	Formulate treatment plans based on disease	A	Outpatient	CIVA,	
MEDIO	severity and comorbidities.	A	Clinic	OSCE	
MEDI.8.4	Identify monitoring strategies for safety	A	Outpatient	OSCE,	
	and efficacy of MSK drugs.		Clinic	SAQ	
Osteoarthriti	s (OA)				
MEDI.9.1	Describe the pathophysiology and risk	K	Large	MCQ, SAQ	
	factors of OA.		Group		
			Teaching		
MEDI.9.2	Recognize clinical presentation and	K/S	Outpatient	OSCE,	
	diagnostic criteria of OA.		Clinic	SAQ	
MEDI.9.3	Interpret radiological findings specific to	S	Large	MCQ, SAQ	
	OA.		Group		
			Teaching		
MEDI.9.4	Outline non-pharmacological and	A	Outpatient	CIVA,	
	pharmacological management strategies.		Clinic	OSCE	
Crystal Arthu	itis (Gout and Pseudogout)				
MEDI.10.1	Explain the biochemical and	K	Large	MCQ, SAQ	
	pathophysiological basis of crystal		Group		
	deposition.		Teaching		
MEDI.10.2	Identify clinical features and joint	K/S	Outpatient	OSCE,	
	aspiration findings of gout and pseudogout.		Clinic	SAQ	
MEDI.10.3	Describe acute and chronic management of	A	Large	MCQ, SAQ	
	gout including urate-lowering therapy.		Group		
			Teaching		
MEDI.10.4	Differentiate gout from other monoarthritis	A	Outpatient	CIVA,	
	conditions clinically and diagnostically.		Clinic	OSCE	
Rheumatoid	Arthritis (RA)				
MEDI.11.1	Describe the immunopathogenesis and risk	K	Large	MCQ, SAQ	
	factors of RA.		Group	,	
			Teaching		
MEDI.11.2	Identify clinical features, deformities, and	K/S	Outpatient	OSCE,	
	extra-articular manifestations of RA.		Clinic	SAQ	
MEDI.11.3	Interpret lab markers (e.g., RF, anti-CCP)	S	Large	MCQ, SAQ	
	and imaging in RA diagnosis.		Group		
			Teaching		
MEDI.11.4	Discuss stepwise treatment approach	A	Outpatient	CIVA,	
	including DMARDs and biologics.		Clinic	OSCE	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
Septic Arthrit	Septic Arthritis and Fibromyalgia					
MEDI.12.1	Explain the etiology, risk factors, and microbiology of septic arthritis.	K	Large Group Teaching	MCQ, SAQ		
MEDI.12.2	Recognize red flags and urgent features of septic arthritis.	A	Outpatient Clinic	OSCE, CIVA		
MEDI.12.3	Identify clinical criteria for diagnosis of fibromyalgia.	K	Large Group Teaching	MCQ, SAQ		
MEDI.12.4	Outline treatment principles for both infectious and non-inflammatory causes of arthritis.	A	Outpatient Clinic	OSCE, SAQ		
Spondyloarth Arthritis)	ropathies (Ankylosing Spondylitis, Psoriatic A	rthritis, Rea	ctive Arthritis	, Enteropathic		
MEDI.13.1	Describe the shared features and HLA-B27 association in spondyloarthropathies.	K	Large Group Teaching	MCQ, SAQ		
MEDI.13.2	Identify distinct clinical patterns in ankylosing spondylitis, psoriatic and reactive arthritis.	K/S	Outpatient Clinic	OSCE, SAQ		
MEDI.13.3	Interpret imaging findings (e.g., sacroiliitis, bamboo spine) in axial SpA.	S	Large Group Teaching	MCQ, SAQ		
MEDI.13.4	Discuss management including NSAIDs, biologics, and physical therapy.	A	Outpatient Clinic	CIVA, OSC		
Systemic Lup	ous Erythematosus (SLE) and Sjögren Syndron	ne				
MEDI.14.1	Describe the immunopathology, clinical features, and diagnostic criteria of SLE.	K	Large Group Teaching	MCQ, Short Answer Question		
MEDI.14.2	Recognize glandular and extraglandular manifestations of Sjögren syndrome.	K	Outpatient Clinic	OSCE, Short Answer Question		
MEDI.14.3	Identify laboratory markers (ANA, anti- dsDNA, SSA/SSB antibodies) for diagnosis.	S	Large Group Teaching	MCQ, Short Answer Question		
MEDI.14.4	Discuss treatment approaches including immunosuppressants and symptom management.	A	Outpatient Clinic	CIVA, OSCE		
Dermatomyo	sitis and Polymyositis					
MEDI.15.1	Describe muscle and skin manifestations of dermatomyositis.	K	Large Group Teaching	MCQ, Short Answer Question		
MEDI.15.2	Recognize diagnostic features including EMG, muscle enzymes, and biopsy findings.	S	Outpatient Clinic	OSCE, Short Answer Question		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.15.3	Differentiate polymyositis from dermatomyositis and inclusion body myositis.	K/A	Large Group Teaching	MCQ, Short Answer Question
MEDI.15.4	Outline treatment including corticosteroids and immunosuppressants.	A	Outpatient Clinic	CIVA, OSCE
Vasculitis (G	iant Cell Arteritis, Polyarteritis Nodosa, ANCA	A-Associate	d Vasculitis)	
MEDI.16.1	Classify vasculitides based on vessel size and associated antibodies (e.g., ANCA).	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.16.2	Identify clinical presentations and systemic complications of common vasculitis syndromes.	K/S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.16.3	Interpret relevant investigations (biopsy, ANCA, ESR, imaging).	S	Large Group Teaching	MCQ, Short Answer Question
MEDI.16.4	Discuss immunosuppressive treatment strategies and indications for urgent referral.	A	Outpatient Clinic	CIVA, OSCE
Osteoporosis				
MEDI.17.1	Describe the pathophysiology, risk factors, and complications of osteoporosis.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.17.2	Recognize diagnostic criteria and interpretation of DEXA scans.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.17.3	Identify lifestyle, nutritional, and pharmacologic treatment options.	A	Large Group Teaching	MCQ, Short Answer Question
MEDI.17.4	Apply knowledge to prevent fractures in high-risk populations.	A	Outpatient Clinic	CIVA, OSCE
Osteomalacia	and Rickets			
MEDI.18.1	Explain the role of vitamin D, calcium, and phosphate in bone metabolism.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.18.2	Identify clinical and radiologic features of osteomalacia and rickets.	K/S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.18.3	Interpret lab findings (e.g., ALP, calcium, phosphate) in metabolic bone disease.	S	Large Group Teaching	MCQ, Short Answer Question
MEDI.18.4	Outline treatment approaches including supplementation and diet.	A	Outpatient Clinic	CIVA, OSCE
Systemic Scle	erosis and Rheumatologic Manifestations of			

MEDI.19.1 Describe cutaneous and visceral manifestations of systemic sclerosis. Group Teaching Question	Number	Learning Objective	Domain K/S/A/C	Teaching Learning	Assessment Methods
MEDI.19.2 Recognize rheumatologic signs in systemic diseases (e.g., SLE, diabetes, thyroid disease). K Outpatient Clinic Answer Question MEDI.19.3 Interpret relevant antibodies (e.g., anticentromere, anti-Sc1-70). S Large MCQ, Short Answer Question MEDI.19.4 Discuss multidisciplinary approach in management of systemic disease with MSK involvement. A Outpatient ClivA, OSCE MEDI.20.1 Recognize patterns of non-inflammatory MSK conditions (e.g., hypermobility, EDS). K Large Group Answer Question MEDI.20.2 Identify overlapping syndromes and diagnostic challenges. K/A Outpatient Outpatient Clinic Short Answer Question MEDI.20.3 Describe management options tailored to patient needs and rare diseases. A Large Group Answer Question MEDI.20.4 Appreciate the importance of individualized care in rare rheumatologic presentations. C Outpatient Outpatient OSCE, Clinic Clini				Methods	
MEDI.19.2 Recognize rheumatologic signs in systemic diseases (e.g., SLE, diabetes, thyroid disease). MEDI.19.3 Interpret relevant antibodies (e.g., anticentromere, anti-Scl-70). MEDI.19.4 Discuss multidisciplinary approach in management of systemic disease with MSK involvement. MISCELLANCE Recognize patterns of non-inflammatory MSK conditions (e.g., hypermobility, EDS). MEDI.20.1 Recognize patterns of non-inflammatory MSK conditions (e.g., hypermobility, EDS). MEDI.20.2 Identify overlapping syndromes and diagnostic challenges. MEDI.20.3 Describe management options tailored to patient needs and rare diseases. MEDI.20.4 Appreciate the importance of individualized care in rare rheumatologic presentations. Juvenile Idiopathic Arthritis (JIA) MEDI.21.1 Classify the subtypes of JIA based on ILAR criteria. MEDI.21.2 Identify clinical features of oligoarticular, systemic, and polyarticular JIA. MEDI.21.3 Describe treatment principles including NSAIDs, DMARDs, and biologics. MEDI.21.4 Recognize the long-term complications and importance of early diagnosis. MEDI.21.4 Recognize the long-term complications and importance of early diagnosis. MEDI.21.4 Describe the types of physical modalities MEDI.21.5 Describe the types of physical modalities MEDI.22.1 Describe the dispersion of the properties	MEDI.19.1		K	•	_
MEDI.19.2 Recognize rheumatologic signs in systemic diseases (e.g., SLE, diabetes, thyroid diseases). Short Answer Question		manifestations of systemic sclerosis.		_	
diseases (e.g., SLE, diabetes, thyroid disease). MEDI.19.3 Interpret relevant antibodies (e.g., anticentromere, anti-Scl-70). MEDI.19.4 Discuss multidisciplinary approach in management of systemic disease with MSK involvement. MISCELLANCE Recognize patterns of non-inflammatory MSK conditions (e.g., hypermobility, EDS). MEDI.20.1 Identify overlapping syndromes and diagnostic challenges. MEDI.20.2 Identify overlapping syndromes and diagnostic challenges. MEDI.20.3 Describe management options tailored to patient needs and rare diseases. MEDI.20.4 Appreciate the importance of individualized care in rare rheumatologic presentations. Juvenile Idiopathic Arthritis (JIA) MEDI.21.1 Classify the subtypes of JIA based on ILAR criteria. MEDI.21.2 Identify clinical features of oligoarticular, systemic, and polyarticular JIA. MEDI.21.3 Describe treatment principles including NSAIDs, DMARDs, and biologics. MEDI.21.4 Recognize the long-term complications and importance of early diagnosis. MEDI.21.4 Describe the types of physical modalities used in musculoskeletal rehabilitation. MEDI.22.1 Describe the types of physical modalities used in musculoskeletal rehabilitation. MEDI.22.1 Describe the types of physical modalities used in musculoskeletal rehabilitation.					_
MEDI.19.3 Interpret relevant antibodies (e.g., anticentromere, anti-Scl-70). S Large Group Teaching Question	MEDI.19.2		K	-	· ·
MEDI.19.3 Interpret relevant antibodies (e.g., anticentromere, anti-Scl-70). MEDI.19.4 Discuss multidisciplinary approach in management of systemic disease with MSK involvement. Miscellaneous Rheumatologic Conditions MEDI.20.1 Recognize patterns of non-inflammatory MSK conditions (e.g., hypermobility, EDS). MEDI.20.2 Identify overlapping syndromes and diagnostic challenges. MEDI.20.3 Describe management options tailored to patient needs and rare diseases. MEDI.20.4 Appreciate the importance of individualized care in rare rheumatologic presentations. MEDI.21.1 Classify the subtypes of JIA based on ILAR criteria. MEDI.21.2 Identify clinical features of oligoarticular, systemic, and polyarticular JIA. MEDI.21.3 Describe treatment principles including NSAIDs, DMARDs, and biologics. MEDI.21.4 Recognize the long-term complications and importance of early diagnosis. MEDI.21.4 Recognize the long-term complications and importance of early diagnosis. MEDI.21.5 Describe the types of physical modalities MEDI.21.6 Describe the types of physical modalities MEDI.22.1 Describe		, <u> </u>		Clinic	
MEDI.19.3 Interpret relevant antibodies (e.g., anticentromere, anti-Scl-70). S Large Group Teaching Question		disease).			
Centromere, anti-Scl-70). Group Teaching Question					_
MEDI.19.4 Discuss multidisciplinary approach in management of systemic disease with MSK involvement.	MEDI.19.3	_	S	•	~
MEDI.19.4 Discuss multidisciplinary approach in management of systemic disease with MSK involvement. A Clinic		centromere, anti-Scl-70).		-	
Miscellaneous Rheumatologic Conditions				_	
Miscellaneous Rheumatologic Conditions	MEDI.19.4	2 4 22	A		
Miscellaneous Rheumatologic Conditions MEDI.20.1 Recognize patterns of non-inflammatory MSK conditions (e.g., hypermobility, EDS). K Large Group Teaching Question MCQ, Short Answer Question MEDI.20.2 Identify overlapping syndromes and diagnostic challenges. K/A Outpatient Clinic OSCE, Short Answer Question MEDI.20.3 Describe management options tailored to patient needs and rare diseases. A Large Group Teaching CIVA, Group Answer Question MEDI.20.4 Appreciate the importance of individualized care in rare rheumatologic presentations. C Outpatient Clinic OSCE, CIVA Juvenile Idiopathic Arthritis (JIA) MEDI.21.1 Classify the subtypes of JIA based on ILAR criteria. K Large Group Teaching MCQ, Short Answer Question MEDI.21.2 Identify clinical features of oligoarticular, systemic, and polyarticular JIA. K/S Outpatient Clinic OSCE, Short Answer Question MEDI.21.3 Describe treatment principles including NSAIDs, DMARDs, and biologics. A Large Group Answer Question MEDI.21.4 Recognize the long-term complications and importance of early diagnosis. C Outpatient OSCE, Clinic OSCE, Clinic					

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	ultrasound, and cryotherapy.		Teaching	Question
MEDI.22.3	Identify contraindications and precautions for physical modality use.	A	Outpatient Clinic	OSCE, Short Answer Question
MEDI.22.4	Evaluate the role of modalities in reducing pain and improving function.	A	Outpatient Clinic	CIVA, OSCE
MEDI.22.5	Health promotion Promote awareness of non-pharmacological pain management options to reduce reliance on opioids.	С	Large Group Teaching	MCQ, Short Answer Questio
Medical Reha	abilitation: Therapeutic Exercises			
MEDI.23.1	Classify therapeutic exercises into types (e.g., strengthening, ROM, endurance, aerobic).	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.23.2	Discuss the principles of exercise prescription in MSK and rheumatologic conditions.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.23.3	Demonstrate appropriate exercise recommendations for osteoarthritis and fibromyalgia.	S/A	Outpatient Clinic	OSCE, Short Answer Question
MEDI.23.4	Assess a patient's functional capacity and tailor exercise plans accordingly.	A	Outpatient Clinic	CIVA, OSCE
MEDI.23.5	Educate patients and the public on the long-term health benefits of regular therapeutic exercise in preventing musculoskeletal deterioration.	С	Outpatient Clinic	OSCE, CIVA
Medical Reha	abilitation: Orthoses and Prostheses			
MEDI.24.1	Define the types and roles of orthoses (e.g., splints, braces) in joint support.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.24.2	Explain indications and functional goals of limb prostheses in amputees.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.24.3	Recognize how orthoses and prostheses improve mobility and prevent deformities.	A	Outpatient Clinic	OSCE, Short Answer Question

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.24.4	Counsel patients on fitting, training, and adaptation with assistive devices.	С	Outpatient Clinic	CIVA, OSC
MEDI.24.5	Advocate for early referral to rehabilitation services to improve mobility and prevent complications in disabled individuals.	С	Large Group Teaching	Short Answer Question, CIVA
Medical Reha	abilitation: Adaptation for Activities of Daily L	iving (ADL	us)	
MEDI.25.1	Identify key limitations in ADLs in patients with rheumatologic or MSK disease.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.25.2	Discuss environmental and behavioral adaptations to support independence.	K/A	Large Group Teaching	MCQ, Short Answer Question
MEDI.25.3	Evaluate assistive technologies and tools that enhance functional status.	A	Outpatient Clinic	OSCE, Short Answer Question
MEDI.25.4	Educate patients on practical strategies to optimize daily living with chronic conditions.	С	Outpatient Clinic	OSCE, CIV
MEDI.25.5	Promote the use of adaptive equipment and environmental modifications to preserve independence and prevent caregiver burden.	С	Outpatient Clinic	OSCE, CIVA
Medical Reha	abilitation: Gait Aids and Gait Patterns			
MEDI.26.1	List types of gait aids (e.g., canes, walkers, crutches) and their indications.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.26.2	Describe different gait patterns (e.g., 2-point, 3-point, swing-through) and their biomechanical basis.	K	Large Group Teaching	MCQ, Short Answer Question

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
MEDI.26.3	Demonstrate appropriate gait aid prescription based on balance, strength, and condition.	S	Outpatient Clinic	OSCE, Short Answer Question	
MEDI.26.4	Evaluate the effect of assistive devices on gait safety and patient independence.	A	Outpatient Clinic	CIVA, OSC	
MEDI.26.5	Health promotion: Support fall-prevention programs through appropriate education on gait aid use in elderly and high-risk patients.	С	Outpatient Clinic	MCQ, OSC	
Introduction	to Neurology				
MEDI.27.1	Define key neurological terms and classify neurological disorders.	K	Large Group Teaching	MCQ, Short Answer Question	
MEDI.27.2	Outline the components of a structured neurological history and examination.	K/S	Large Group Teaching	OSCE, Short Answer Question	
MEDI.27.3	Describe basic neuroanatomy relevant to clinical neurology.	K	Large Group Teaching	MCQ, Short Answer Question	
MEDI.27.4	Explain the role of neurology in multidisciplinary care.	С	Outpatient Clinic	CIVA, Short Answer Question	
Coma					
MEDI.28.1	Classify causes of coma using structural and metabolic frameworks.	K	Large Group Teaching	MCQ, Short Answer Question	
MEDI.28.2	Assess a comatose patient using the Glasgow Coma Scale and neurological exam.	S	Outpatient Clinic	OSCE, CIVA	
MEDI.28.3	Interpret neuroimaging and lab results relevant to comatose states.	S	Large Group Teaching	MCQ, Short Answer Question	
MEDI.28.4	Discuss emergency management and prognosis in coma.	A	Outpatient Clinic	OSCE, Short Answer Question	
Diseases of th	Diseases of the Spinal Cord				
MEDI.29.1	Recognize clinical syndromes of spinal cord injury (e.g., Brown-Séquard, anterior cord).	K/S	Large Group Teaching	MCQ, Short Answer Question	
MEDI.29.2	Identify common causes of non-traumatic myelopathy.	K	Outpatient Clinic	MCQ, Short Answer Question	
MEDI.29.3	Interpret spinal MRI findings in	S	Large	Short	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	compressive and inflammatory cord diseases.		Group Teaching	Answer Question, CIVA
MEDI.29.4	Plan appropriate acute and rehabilitative management.	A	Outpatient Clinic	OSCE, CIVA
Diseases of th	ne Peripheral Nerves			
MEDI.30.1	Classify peripheral neuropathies (mononeuropathy, polyneuropathy, plexopathy).	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.30.2	Identify clinical signs of sensory, motor, and autonomic neuropathies.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.30.3	Discuss common etiologies including diabetes, infections, and toxins.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.30.4	Evaluate patients for early diagnosis and prevention of disability.	A/C	Outpatient Clinic	OSCE, CIV
Diseases of th	ne Muscles (Myopathies)			
MEDI.31.1	Describe patterns of muscle weakness in common myopathies.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.31.2	Differentiate between myopathic and neurogenic weakness.	A	Outpatient Clinic	OSCE, CIVA
MEDI.31.3	Interpret CPK, EMG, and biopsy results in muscle disease.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.31.4	Promote early recognition and lifestyle adaptation for chronic muscle disorders.	С	Outpatient Clinic	Short Answer Question, OSCE
Epilepsy				
MEDI.32.1	Classify seizure types according to ILAE criteria.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.32.2	Describe the diagnostic approach using EEG and imaging.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.32.3	Outline pharmacological and surgical treatment options.	A	Outpatient Clinic	OSCE, Short Answer Question
MEDI.32.4	Identify social and driving restrictions, and psychosocial impact.	С	Outpatient Clinic	CIVA, OSCE
MEDI.32.5	Health Promotion: Educate patients and	C	Outpatient	Short

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
	families about medication adherence and seizure precautions to prevent injury and stigma.		Clinic	Answer Question, CIVA		
Infections of	Infections of the Nervous System (e.g., Meningitis, Encephalitis)					
MEDI.33.1	Recognize clinical features of meningitis and encephalitis.	K	Large Group Teaching	MCQ, Short Answer Question		
MEDI.33.2	Interpret CSF findings and imaging in CNS infections.	S	Large Group Teaching	Short Answer Question, CIVA		
MEDI.33.3	Differentiate bacterial, viral, fungal, and TB infections of the CNS.	K	Outpatient Clinic	MCQ, Short Answer Question		
MEDI.33.4	Plan emergency treatment and isolation precautions.	A	Outpatient Clinic	OSCE, Short Answer Question		
MEDI.33.5	Health Promotion: Promote vaccination (e.g., meningococcal, Hib) and early recognition of red flag symptoms to reduce neurological sequelae.	С	Large Group Teaching	MCQ, Short Answer Question		
Brain Space-0	Occupying Lesions (Brain SOL)					
MEDI.34.1	List causes of intracranial SOLs (tumors, abscess, hematoma).	K	Large Group Teaching	MCQ, Short Answer Question		
MEDI.34.2	Identify signs of raised intracranial pressure and focal deficits.	K/S	Outpatient Clinic	OSCE, Short Answer Question		
MEDI.34.3	Interpret imaging (CT/MRI) findings in common SOLs.	S	Large Group Teaching	Short Answer Question, CIVA		
MEDI.34.4	Discuss treatment options including surgery, chemotherapy, and palliative care.	A	Outpatient Clinic	OSCE, Short Answer Question		
MEDI.34.5	Health Promotion: Encourage early medical consultation for persistent headaches, seizures, or personality changes to enable timely intervention.	С	Outpatient Clinic	Short Answer Question, CIVA		
Vertigo vs At	Vertigo vs Ataxia					
MEDI.35.1	Differentiate vertigo from ataxia based on clinical features.	K	Large Group Teaching	MCQ, Short Answer Question		
MEDI.35.2	Identify peripheral and central causes of	K	Outpatient	MCQ, Short		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	vertigo and gait disturbances.		Clinic	Answer Question
MEDI.35.3	Perform bedside tests (Romberg, Dix- Hallpike, heel-to-shin) to localize pathology.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.35.4	Describe treatment strategies for BPPV, vestibular neuritis, and cerebellar lesions.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.35.5	Health Promotion: Educate elderly patients about fall prevention strategies and balance training to reduce injury risk.	С	Outpatient Clinic	OSCE, Short Answer Question
Abnormal Mo	ovements (e.g., tremor, dystonia, chorea)			
MEDI.36.1	Classify abnormal movements and recognize key clinical patterns.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.36.2	Distinguish between Parkinsonism, essential tremor, and choreiform movements	K/A	Outpatient Clinic	OSCE, Short Answer Question
MEDI.36.3	Interpret neurological findings and assess functional impact.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.36.4	Outline medical and surgical management (e.g., levodopa, DBS).	A	Outpatient Clinic	OSCE, Short Answer Question
MEDI.36.5	Health Promotion: Promote early diagnosis and multidisciplinary care to improve function and reduce social disability in movement disorders.	С	Outpatient Clinic	Short Answer Question, CIVA
Headache (e.	g., Migraine, Tension-type, Cluster)			
MEDI.37.1	Classify primary and secondary headaches based on ICHD criteria.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.37.2	Recognize red flag signs requiring urgent investigation (e.g., sudden onset, neurological deficits).	K/A	Outpatient Clinic	OSCE, Short Answer Question
MEDI.37.3	Outline acute and preventive management for common headache types.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.37.4	Interpret patient history to differentiate between headache subtypes.	S	Outpatient Clinic	OSCE, CIVA

		ъ .	Teaching	
Number	Learning Objective	Domain K/S/A/C	Learning Methods	Assessment Methods
MEDI.37.5	Health Promotion: Educate patients about	С	Outpatient	Short
	headache triggers, lifestyle modifications, and medication overuse prevention.		Clinic	Answer Question,
	and medication overuse prevention.			CIVA
Stroke (Ische	mic Stroke)			
MEDI.38.1	Describe the pathophysiology and risk	K	Large	MCQ, Short
	factors of ischemic stroke.		Group Teaching	Answer Question
MEDI.38.2	Identify clinical features based on vascular	S	Outpatient	OSCE,
	territory affected.		Clinic	Short
				Answer
				Question
MEDI.38.3	Outline acute management including	A	Large	Short
	thrombolysis and stroke unit care.		Group Teaching	Answer Question,
			reaching	CIVA
MEDI.38.4	Interpret brain imaging (CT/MRI) and	S	Outpatient	CIVA,
141221.30.1	vascular studies.		Clinic	Short
				Answer
				Question
MEDI.38.5	Health Promotion: Promote public	С	Large	Short
	awareness of FAST signs and early		Group	Answer
	hospital presentation to improve stroke outcomes.		Teaching	Question, CIVA
	outcomes			
T . 1 1				
	Hemorrhage (ICH)	T	T	T
MEDI.39.1	Recognize clinical presentation and imaging findings of ICH.	K/S	Large Group	MCQ, Short Answer
	imaging initings of ICH.		Teaching	Question
MEDI.39.2	Differentiate between ischemic and	K	Outpatient	MCQ, Short
	hemorrhagic stroke.		Clinic	Answer
MEDI.39.3	Outline amergancy management including	A	Outpetient	Question OSCE,
ועבוואו. אוויאו	Outline emergency management including BP control and neurosurgical indications.	A	Outpatient Clinic	Short
				Answer
				Question
MEDI.39.4	Monitor for complications such as raised	A	Large	Short
	ICP and herniation.		Group Teaching	Answer Question,
			reaching	CIVA
	l	1	1	C1 1/1

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.39.5	Health Promotion: Promote hypertension control and anticoagulation safety to reduce the risk of ICH.	С	Outpatient Clinic	Short Answer Question, CIVA
Neurodegene	rative Diseases (e.g., Parkinson's, Alzheimer's	s, ALS)		
MEDI.40.1	Describe the clinical features and diagnostic criteria of major neurodegenerative disorders.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.40.2	Compare the progression patterns and management of Alzheimer's vs Parkinson's disease.	K/A	Outpatient Clinic	OSCE, Short Answer Question
MEDI.40.3	Interpret cognitive testing tools and motor assessments.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.40.4	Outline multidisciplinary approaches to long-term care and support.	A	Outpatient Clinic	OSCE, CIVA
MEDI.40.5	Health Promotion: Encourage early screening, caregiver education, and support resources to improve quality of life.	С	Outpatient Clinic	Short Answer Question, CIVA
Multiple Scle	rosis (MS)			
MEDI.41.1	Describe the immunopathology and clinical variants of MS.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.41.2	Recognize common symptoms (e.g., optic neuritis, sensory loss, fatigue).	K/S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.41.3	Interpret MRI and CSF findings for MS diagnosis.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.41.4	Discuss disease-modifying treatments and symptom management.	A	Outpatient Clinic	OSCE, Short Answer Question
MEDI.41.5	Health Promotion: Raise awareness of early MS symptoms to reduce diagnostic delay and disability progression.	С	Outpatient Clinic	Short Answer Question,

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				CIVA
Hematopoies	is & Aplastic Anemia			
MEDI.42.1	Describe normal hematopoiesis and blood cell lineages.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.42.2	Identify clinical and laboratory features of aplastic anemia.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.42.3	Interpret CBC, bone marrow biopsy, and reticulocyte count in marrow failure.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.42.4	Outline management strategies including immunosuppressive therapy and transplant.	A	Outpatient Clinic	OSCE, CIVA
MEDI.42.5	Health Promotion: Encourage early evaluation of persistent fatigue and pancytopenia to reduce diagnostic delays.	С	Outpatient Clinic	Short Answer Question, CIVA
Megaloblastic	c Anemia			
MEDI.43.1	Explain the roles of vitamin B12 and folate in DNA synthesis and erythropoiesis.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.43.2	Identify signs and lab features of megaloblastic anemia.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.43.3	Differentiate between folate and B12 deficiency clinically and biochemically.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.43.4	Plan dietary and pharmacologic treatment.	A	Outpatient Clinic	OSCE, CIVA
MEDI.43.5	Health Promotion: Educate the community about nutritional sources of B12 and folate, especially in pregnancy and vegan diets.	С	Large Group Teaching	Short Answer Question, CIVA
Iron Deficien	cy Anemia			
MEDI.44.1	Describe iron metabolism and causes of iron deficiency.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.44.2	Recognize symptoms and signs of iron deficiency anemia.	S	Outpatient Clinic	OSCE, Short Answer

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.44.3	Interpret iron studies (ferritin, TIBC, serum iron).	S	Large Group Teaching	Question Short Answer Question, CIVA
MEDI.44.4	Discuss oral and parenteral iron therapy and underlying cause management.	A	Outpatient Clinic	OSCE, CIVA
MEDI.44.5	Health Promotion: Promote iron-rich nutrition and screen for occult bleeding, especially in menstruating women and children.	С	Outpatient Clinic	Short Answer Question, CIVA
Hemolytic Ar	nemia			
MEDI.45.1	Define hemolysis and classify hemolytic anemias (inherited vs acquired).	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.45.2	Identify signs and lab markers of hemolysis (LDH, bilirubin, haptoglobin, Coombs test).	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.45.3	Discuss management of autoimmune and hereditary hemolytic anemias.	A	Large Group Teaching	OSCE, Short Answer Question
MEDI.45.4	Monitor complications such as gallstones and iron overload.	A	Outpatient Clinic	CIVA, Short Answer Question
MEDI.45.5	Health Promotion: Raise awareness of hereditary hemolytic conditions in highrisk populations and emphasize genetic counseling.	С	Large Group Teaching	Short Answer Question, CIVA
Thalassemia				
MEDI.46.1	Describe the genetic basis and pathophysiology of alpha and beta thalassemia.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.46.2	Identify clinical severity types (minor, intermedia, major) and features.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.46.3	Interpret Hb electrophoresis and peripheral smear findings.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.46.4	Outline management including transfusion, chelation, and potential curative options.	A	Outpatient Clinic	OSCE, CIVA
MEDI.46.5	Health Promotion: Support carrier screening and premarital counseling in endemic regions to reduce disease burden.	С	Outpatient Clinic	Short Answer Question,

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
				CIVA		
Sickle Cell A	Sickle Cell Anemia					
MEDI.47.1	Explain the genetic mutation and pathophysiology of sickle cell disease.	K	Large Group Teaching	MCQ, Short Answer Question		
MEDI.47.2	Recognize acute and chronic complications (e.g., pain crisis, stroke, splenic sequestration).	K/S	Outpatient Clinic	OSCE, Short Answer Question		
MEDI.47.3	Outline management strategies including hydroxyurea, transfusion, and pain control.	A	Large Group Teaching	OSCE, CIVA		
MEDI.47.4	Monitor for and prevent long-term organ damage.	A	Outpatient Clinic	CIVA, Short Answer Question		
MEDI.47.5	Health Promotion: Raise awareness about newborn screening, hydration, and crisis prevention in sickle cell patients.	С	Outpatient Clinic	Short Answer Question, CIVA		
Immune Thro	ombocytopenic Purpura (ITP)					
MEDI.48.1	Describe the autoimmune pathogenesis of ITP.	K	Large Group Teaching	MCQ, Short Answer Question		
MEDI.48.2	Identify clinical signs of bleeding and diagnostic criteria.	S	Outpatient Clinic	OSCE, Short Answer Question		
MEDI.48.3	Outline treatment options including corticosteroids, IVIG, and splenectomy.	A	Large Group Teaching	OSCE, CIVA		
MEDI.48.4	Monitor response to therapy and relapse.	A	Outpatient Clinic	Short Answer Question, CIVA		
MEDI.48.5	Health Promotion: Educate patients about avoiding trauma and self-monitoring for bleeding symptoms.	С	Outpatient Clinic	Short Answer Question, CIVA		
Hemophilia						
MEDI.49.1	Explain the genetic and coagulation defect in hemophilia A and B.	K	Large Group Teaching	MCQ, Short Answer Question		
MEDI.49.2	Identify bleeding patterns and severity classification.	S	Outpatient Clinic	OSCE, Short Answer Question		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.49.3	Discuss treatment with factor replacement, DDAVP, and prophylaxis.	A	Outpatient Clinic	OSCE, CIVA
MEDI.49.4	Prevent complications such as hemarthrosis and inhibitors.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.49.5	Health Promotion: Promote early diagnosis in male infants and emphasize adherence to prophylaxis.	С	Outpatient Clinic	Short Answer Question, CIVA
Thrombotic T	Chrombocytopenic Purpura (TTP)			
MEDI.50.1	Describe the pathophysiology of TTP involving ADAMTS13 deficiency.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.50.2	Recognize the pentad of symptoms and lab features.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.50.3	Outline emergency treatment (plasma exchange, steroids, rituximab).	A	Outpatient Clinic	OSCE, CIVA
MEDI.50.4	Monitor complications and response to therapy.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.50.5	Health Promotion: Emphasize importance of early recognition to prevent fatal outcomes.	С	Outpatient Clinic	Short Answer Question, CIVA
Disseminated	Intravascular Coagulation (DIC)			
MEDI.51.1	Describe the triggers and pathogenesis of DIC.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.51.2	Recognize signs of bleeding, thrombosis, and lab findings (PT, aPTT, D-dimer, fibrinogen).	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.51.3	Discuss management including treating the underlying cause, supportive care, and transfusions.	A	Outpatient Clinic	OSCE, CIVA
MEDI.51.4	Monitor coagulation profile and organ function during therapy.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.51.5	Health Promotion: Raise awareness of DIC in obstetric emergencies, sepsis, and trauma settings.	С	Large Group Teaching	Short Answer Question, CIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
Henoch-Schö	Henoch-Schönlein Purpura (HSP) & von Willebrand Disease					
MEDI.52.1	Describe the pathophysiology and clinical features of HSP as a small vessel vasculitis.	K	Large Group Teaching	MCQ, Short Answer Question		
MEDI.52.2	Identify the types, genetics, and bleeding patterns of von Willebrand disease.	K	Outpatient Clinic	OSCE, Short Answer Question		
MEDI.52.3	Interpret diagnostic tests such as IgA levels (for HSP) and vWF antigen/activity (for vWD).	S	Large Group Teaching	Short Answer Question, CIVA		
MEDI.52.4	Outline the management of both conditions, including supportive care and desmopressin use.	A	Outpatient Clinic	OSCE, CIVA		
MEDI.52.5	Health Promotion: Encourage early evaluation of unexplained bruising, hematuria, or mucosal bleeding in children and adolescents.	С	Outpatient Clinic	Short Answer Question, CIVA		
Thrombophil	ia (Inherited and Acquired)					
MEDI.53.1	Classify inherited (e.g., Factor V Leiden, Protein C/S deficiency) and acquired (e.g., APS) thrombophilias.	K	Large Group Teaching	MCQ, Short Answer Question		
MEDI.53.2	Recognize clinical scenarios that warrant thrombophilia work-up.	A	Outpatient Clinic	OSCE, Short Answer Question		
MEDI.53.3	Interpret thrombophilia lab profiles including lupus anticoagulant, anticardiolipin, and homocysteine.	S	Large Group Teaching	Short Answer Question, CIVA		
MEDI.53.4	Discuss long-term anticoagulation indications and risk stratification.	A	Outpatient Clinic	OSCE, CIVA		
MEDI.53.1	Health Promotion: Educate patients and families with genetic predisposition about avoiding triggering factors (e.g., OCPs, immobility, smoking).	С	Outpatient Clinic	Short Answer Question, CIVA		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Acute Leuker	nias (ALL & AML)			
MEDI.54.1	Differentiate between the clinical features and pathophysiology of ALL and AML.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.54.2	Identify key diagnostic findings: peripheral smear, blasts, bone marrow biopsy, cytogenetics.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.54.3	Outline phases of treatment (induction, consolidation, maintenance) and supportive care.	A	Outpatient Clinic	OSCE, CIVA
MEDI.54.4	Monitor for complications such as tumor lysis syndrome and neutropenic fever.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.54.5	Health Promotion: Promote awareness of early signs (fatigue, bleeding, infection) to ensure timely diagnosis and improve prognosis.	С	Large Group Teaching	Short Answer Question, CIVA
Acute Manag	ement in Hematology (Emergencies)			
MEDI.55.1	Recognize acute hematologic emergencies such as neutropenic sepsis, hyperleukocytosis, TLS, and hemorrhagic shock.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.55.2	Describe initial emergency management principles and stabilization steps.	A	Outpatient Clinic	OSCE, Short Answer Question
MEDI.55.3	Prioritize intervention for life-threatening complications in patients with hematologic malignancies.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.55.4	Communicate effectively in urgent hematology situations including escalation and multidisciplinary coordination.	С	Outpatient Clinic	OSCE, CIVA
MEDI.55.5	Health Promotion: Advocate for early patient education about warning signs to reduce delays in emergency presentation.	С	Outpatient Clinic	Short Answer Question, CIVA
Chronic Mye	loid Leukemia (CML)			
MEDI.56.1	Describe the pathophysiology of CML including the BCR-ABL fusion gene.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.56.2	Identify clinical phases (chronic, accelerated, blast crisis) and presenting symptoms.	K/S	Outpatient Clinic	OSCE, Short Answer Question

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.56.3	Interpret CBC, bone marrow findings, and PCR for BCR-ABL.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.56.4	Outline the role of tyrosine kinase inhibitors (e.g., imatinib) in management.	A	Outpatient Clinic	OSCE, CIVA
MEDI.56.5	Health Promotion: Encourage medication adherence and routine monitoring to maintain remission and prevent progression.	С	Outpatient Clinic	Short Answer Question, CIVA
Hodgkin's Ly	mphoma			
MEDI.57.1	Describe the epidemiology and Reed- Sternberg cell pathology of Hodgkin's lymphoma.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.57.2	Recognize the typical presentation: painless lymphadenopathy, B-symptoms.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.57.3	Discuss staging (Ann Arbor) and treatment options (ABVD chemotherapy, radiotherapy).	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.57.4	Monitor treatment response and late toxicities.	A	Outpatient Clinic	OSCE, CIVA
MEDI.57.5	Health Promotion: Promote early evaluation of persistent lymph node swelling and night sweats for early-stage diagnosis.	С	Outpatient Clinic	Short Answer Question, CIVA
Non-Hodgkin	's Lymphoma (NHL)			
MEDI.58.1	Classify NHL by cell origin and grade (indolent vs aggressive).	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.58.2	Identify clinical features and extranodal presentations.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.58.3	Interpret biopsy, immunophenotyping, and imaging findings.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.58.4	Outline treatment options (R-CHOP, targeted therapies) and prognosis.	A	Outpatient Clinic	OSCE, CIVA
MEDI.58.5	Health Promotion: Increase public awareness about lymphoma warning signs and the importance of biopsy over empirical treatment.	С	Outpatient Clinic	Short Answer Question, CIVA
Myelodysplas	tic Syndrome (MDS)			

			Teaching	
Number	Learning Objective	Domain	Learning	Assessment
		K/S/A/C	Methods	Methods
MEDI.59.1	Describe the clonal stem cell abnormalities	K	Large	MCQ, Short
	and ineffective hematopoiesis in MDS.		Group	Answer
			Teaching	Question
MEDI.59.2	Identify clinical features (cytopenias,	S	Outpatient	OSCE,
	fatigue, infections, bleeding).		Clinic	Short
				Answer
1.5551.50.0			-	Question
MEDI.59.3	Interpret blood smear, marrow biopsy, and	S	Large	Short
	cytogenetics in MDS.		Group	Answer
			Teaching	Question, CIVA
MEDI.59.4	Outline treatment options including	A	Outpatient	OSCE,
MED1.39.4	supportive care, growth factors, and	A	Clinic	CIVA
	transplant.		Cillic	CIVA
MEDI.59.5	Health Promotion: Promote early	С	Outpatient	Short
	evaluation of unexplained anemia or		Clinic	Answer
	leukopenia, especially in elderly patients.			Question,
	The state of the s			CIVA
Multiple Mye	ploma (MM)			
• •	<u> </u>	T	T	
MEDI.60.1	Describe plasma cell dyscrasia and CRAB	***	Large	MCQ, Short
	features (hyperCalcemia, Renal failure,	K	Group	Answer
MEDI.60.2	Anemia, Bone lesions).		Teaching	Question
MEDI.60.2	Identify clinical presentation including		Outpotiont	OSCE, Short
	Identify clinical presentation including bone pain, anemia, renal dysfunction.	S	Outpatient Clinic	Answer
	bone pain, aneima, tenai dystunction.		Cillic	Question
MEDI.60.3				Short
	Interpret SPEP, UPEP, serum free light	_	Large	Answer
	chains, and bone marrow findings.	S	Group	Question,
			Teaching	CIVA
MEDI.60.4	Outline treatment with proteasome		Outpotiont	OSCE,
	inhibitors, immunomodulators, steroids,	A	Outpatient Clinic	CIVA
	and transplant.		Cillic	
	Health Promotion: Educate at-risk			Short
MEDI.60.4	populations (elderly, African descent)	С	Outpatient	Answer
	about early signs and importance of bone		Clinic	Question,
	health monitoring.			CIVA
MEDI.61.1	Describe the pathogenesis of bone marrow	K	Large	MCQ, Short
	fibrosis and extramedullary hematopoiesis.		Group	Answer
			Teaching	Question
MEDI.61.2	Identify clinical features such as massive	S	Outpatient	OSCE,
	splenomegaly and anemia.		Clinic	Short
				Answer
		_	_	Question
MEDI.61.3	Interpret peripheral smear (tear drop cells),	S	Large	Short
	marrow biopsy, and JAK2 mutation		Group	Answer
	testing.	<u> </u>	Teaching	Question,

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				CIVA
MEDI.61.4	Outline treatment options including JAK inhibitors and supportive care.	A	Outpatient Clinic	OSCE, CIVA
MEDI.61.5	Health Promotion: Encourage early referral for unexplained anemia and splenomegaly to allow timely diagnosis.	С	Outpatient Clinic	Short Answer Question, CIVA
Polycythemia	a Rubra Vera (PRV)			
MEDI.62.1	Explain the myeloproliferative nature of PRV and its association with JAK2 mutation.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.62.2	Recognize symptoms such as pruritus, headache, thrombosis.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.62.3	Interpret lab findings: elevated hematocrit, low EPO, JAK2 positive.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.62.4	Describe therapeutic phlebotomy, cytoreduction, and antiplatelet therapy.	A	Outpatient Clinic	OSCE, CIVA
MEDI.62.5	Health Promotion: Educate patients on hydration, smoking cessation, and recognizing thrombotic symptoms.	С	Outpatient Clinic	Short Answer Question, CIVA
Blood Transf	usion and Component Therapy			
MEDI.63.1	List indications for transfusion of whole blood and components (RBCs, platelets, plasma, cryoprecipitate).	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.63.2	Explain compatibility testing, crossmatching, and transfusion protocols.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.63.3	Identify and manage transfusion reactions.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.63.4	Monitor response and complications of repeated transfusions (e.g., iron overload).	A	Outpatient Clinic	OSCE, CIVA
MEDI.63.5	Health Promotion: Promote safe donation practices and community awareness about blood donation needs.	С	Large Group Teaching	Short Answer Question, CIVA
Oncologic En	nergencies			
MEDI.64 .1	Recognize life-threatening complications: tumor lysis syndrome, spinal cord compression, hypercalcemia.	K	Large Group Teaching	MCQ, Short Answer Question

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Number	Lagraina Ohigatiya	Domain	Teaching	Assessment
Number	Learning Objective	K/S/A/C	Learning Mathada	Methods
MEDI (4.2	Describe and an arrangement	Δ.	Methods	OCCE
MEDI.64 .2	Describe emergency management	A	Outpatient	OSCE,
	protocols for each condition.		Clinic	Short
				Answer
			_	Question
MEDI.64 .3	Prioritize triage and stabilization of acutely	A	Large	Short
	ill hematology patients.		Group	Answer
			Teaching	Question,
				CIVA
MEDI.64 .4	Coordinate care with oncology, ICU, and	C	Outpatient	OSCE,
	nephrology teams.		Clinic	CIVA
MEDI.64 .5	Health Promotion: Educate patients with	C	Outpatient	Short
	hematologic malignancies on early warning		Clinic	Answer
	signs and when to seek urgent care.			Question,
				CIVA
Bone Marrow	Transplantation (BMT)			
MEDI.65.1	Explain types of BMT (autologous,	K	Large	MCQ, Short
	allogeneic) and their indications.		Group	Answer
	,		Teaching	Question
MEDI.65.2	Outline steps in donor matching,	K/S	Outpatient	OSCE,
	conditioning, and engraftment.		Clinic	Short
	• • • • • • • • • • • • • • • • • • •			Answer
				Question
MEDI.65.3	Identify complications such as GVHD,	A	Large	Short
1,1221.05.5	infections, and graft failure.	11	Group	Answer
	infections, and graft failure.		Teaching	Question,
			Teaching	CIVA
MEDI.65.4	Provide patient counseling regarding pre-	С	Outpatient	OSCE,
WILD1.03.4	and post-transplant care.		Clinic	CIVA
MEDI.65.5	Health Promotion: Raise public awareness	С	Large	Short
MILDI.03.3	on stem cell donation and the impact on		_	
			Group	Answer
	hematologic cancer survival.		Teaching	Question, CIVA
				CIVA
Porphyria				
MEDI.66.1	D 7 4 1 1 1 1 1 1 1 1		Large	MCQ, Short
	Describe the biochemical basis of	K	Group	Answer
	porphyrias and heme synthesis.		Teaching	Question
MEDI.66.2			1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	OSCE,
1.1221.00.2	Recognize clinical features of acute		Outpatient	Short
	intermittent porphyria and cutaneous	S	Clinic	Answer
	forms.			Question
MEDI.66.3				Short
MIED1.00.3	Interpret uring normhyrin testing and		Large	
	Interpret urine porphyrin testing and	S	Group	Answer
	triggers for acute attacks.		Teaching	Question,
MEDICA	0.41			CIVA
MEDI.66.4	Outline acute attack management and	A	Outpatient	OSCE,
	lifestyle modification.		Clinic	CIVA
·				
MEDI.66.5	Health Promotion: Educate patients about avoiding triggers (e.g., certain drugs,	С	Outpatient Clinic	Short Answer

			То1- '	
Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	fasting, alcohol) to prevent attacks.			Question, CIVA
Hypereosinop	philic Syndrome (HES)			
MEDI.67.1	Define hypereosinophilia and its	K	Large	MCQ, Short
	classifications (primary, secondary,		Group	Answer
	idiopathic).		Teaching	Question
MEDI.67.2	Identify signs of eosinophil-mediated organ	S	Outpatient	OSCE,
	damage.		Clinic	Short
				Answer
MEDI.67.3	Internat CDC haransan and	C	Tausa	Question Short
MEDI.67.3	Interpret CBC, bone marrow, and molecular tests (e.g., FIP1L1-PDGFRA).	S	Large	Answer
	inolecular tests (e.g., FIF1L1-PDOFKA).		Group Teaching	Question,
			Teaching	CIVA
MEDI.67.4	Discuss corticosteroids, cytoreduction, and	A	Outpatient	OSCE,
WIEDI.OT.	targeted therapies.	11	Clinic	CIVA
MEDI.67.5	Health Promotion: Encourage early	С	Outpatient	Short
	medical consultation for persistent		Clinic	Answer
	eosinophilia to prevent irreversible			Question,
	complications.			CIVA
Geriatrics :D	isease Presentation in the Elderly			
MEDI.68.1	Explain how aging alters the presentation	K	Large	MCQ, Short
	of common diseases (e.g., MI without chest		Group	Answer
15777 10 4	pain, infections without fever).	~	Teaching	Question
MEDI.68.2	Recognize atypical signs and symptoms in	S	Outpatient	OSCE,
	elderly patients, especially in cognitive, cardiovascular, and infectious diseases.		Clinic	Short Answer
	Cardiovascular, and infectious diseases.			Question
MEDI.68.3	Discuss how multimorbidity and	A	Large	Short
1,1221.00.5	polypharmacy influence clinical decision-		Group	Answer
	making.		Teaching	Question,
				CIVA
MEDI.68.4	Apply a holistic and functional approach in	A	Outpatient	OSCE,
	evaluating elderly patients with vague or		Clinic	CIVA
	nonspecific complaints.	~	,	
MEDI.68.5	Health Promotion: Educate healthcare	C	Outpatient	Short
	workers on early identification of "silent"		Clinic	Answer
	disease presentations in elderly to reduce diagnostic delays.			Question, CIVA
	·			CIVA
	ommon Problems in Geriatric Medicine			
MEDI.69.1	List the most common geriatric syndromes:	K	Large	MCQ, Short
	falls, incontinence, delirium, frailty,		Group	Answer
MEDICOO	immobility, and cognitive decline.	C	Teaching	Question
MEDI.69.2	Assess fall risk, cognitive function,	S	Outpatient	OSCE,
	nutritional status, and functional ability in elderly patients.		Clinic	Short Answer
	elucity patients.			Question
		<u> </u>		Question

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.69.3	Discuss management principles tailored to frail elderly patients including non-pharmacological strategies.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.69.4	Coordinate interdisciplinary care for patients with complex geriatric issues.	С	Outpatient Clinic	OSCE, CIVA
MEDI.69.5	Health Promotion: Promote regular screening for cognitive decline, fall risk, and malnutrition to enhance independent living and quality of life.	С	Outpatient Clinic	Short Answer Question, CIVA
Principles of	Oncology and Cancer Cell Biology			
MEDI.70.1	Describe the hallmarks of cancer and basic mechanisms of carcinogenesis.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.70.2	Identify genetic and environmental risk factors involved in tumor development.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.70.3	Discuss tumor progression, invasion, angiogenesis, and metastasis.	K	Large Group Teaching	Short Answer Question, CIVA
MEDI.70.4	Correlate molecular changes with therapeutic targets.	A	Outpatient Clinic	CIVA, OSCE
MEDI.70.5	Health Promotion: Promote public awareness of modifiable cancer risk factors (e.g., smoking, diet, infections).	С	Large Group Teaching	Short Answer Question, CIVA
Approach to l	Patients with Malignant Diseases			
MEDI.71.1	Take a comprehensive history and physical exam focused on suspected malignancy.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.71.2	Interpret key diagnostic tests: imaging, tumor markers, biopsy.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.71.3	Stage cancers using TNM and other systems.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.71.4	Communicate diagnosis and plan compassionately to patients and families.	С	Outpatient Clinic	OSCE, CIVA
MEDI.71.5	Health Promotion: Encourage early cancer screening and medical evaluation for suspicious symptoms.	С	Outpatient Clinic	Short Answer Question, CIVA
Chemotherap	у			

			T1:	
Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.72.1	Classify chemotherapy agents by	K	Large	MCQ, Short
11201.72.1	mechanism and cancer type.		Group	Answer
	meenamem and cancer type.		Teaching	Question
MEDI.72.2	Describe pharmacokinetics, dosing, and	K	Large	MCQ, Short
WILDI. 72.2	resistance mechanisms.	IX.	Group	Answer
	resistance mechanisms.		Teaching	Question
MEDI.72.3	Manage common side effects (nausea,	A	Outpatient	OSCE,
WIED1.72.3	neutropenia, mucositis).	A	Clinic	CIVA
MEDI.72.4	Monitor toxicity and adjust therapy	A	Outpatient	OSCE,
MILDI. 12.4	accordingly.	A	Clinic	Short
	accordingly.		Cillic	Answer
MEDI.72.5	Health Dramation, Educate nation to and	С	Outnotiont	Question Short
MEDI. 72.3	Health Promotion: Educate patients and		Outpatient	
	caregivers on managing side effects and the		Clinic	Answer
	importance of adherence to treatment.			Question,
				CIVA
Radiotherapy				
MEDI.73.1	Explain the principles of radiotherapy and	K	Large	MCQ, Short
	its biological effects.		Group	Answer
			Teaching	Question
MEDI.73.2	Identify indications for curative vs	K	Large	Short
	palliative radiotherapy.		Group	Answer
			Teaching	Question,
				CIVA
MEDI.73.3	Recognize acute and chronic side effects	S	Outpatient	OSCE,
	and their management.		Clinic	Short
				Answer
				Question
MEDI.73.4	Discuss advances such as IMRT,	A	Large	OSCE,
	stereotactic therapy, and brachytherapy.		Group	CIVA
	The state of the s		Teaching	
MEDI.73.5	Health Promotion: Inform patients about	С	Outpatient	Short
1,1221,70,0	the safety and benefits of radiotherapy as		Clinic	Answer
	part of multimodal cancer treatment.			Question,
	part of maternoous cancer treatment.			CIVA
Palliative Car	re			CIVII
MEDI.74.1	Define palliative care and its role in cancer	K	Large	MCQ, Short
	management.		Group	Answer
	management.		Teaching	Question
MEDI.74.2	Address physical symptoms (pain,	S	Outpatient	OSCE,
1,12,1,17,2	dyspnea, fatigue, anorexia) in terminally ill		Clinic	Short
	patients.			Answer
	patients.			Question
MEDI.75.3	Provide psychological, spiritual, and social	С	Outpatient	OSCE,
1411101.73.3	support for patients and families.		Clinic	CIVA
MEDI.75.4		С		Short
MILDI./3.4	Discuss end-of-life decision-making and advance directives.		Large	
	auvance unectives.		Group	Answer
	<u> </u>	I	Teaching	Question,

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
				CIVA		
MEDI.74.5	Health Promotion: Normalize conversations around palliative care and empower families to seek early supportive services.	С	Outpatient Clinic	Short Answer Question, CIVA		
Nuclear Medi	icine					
MEDI.74.1	Describe the principles of nuclear imaging and radiotracers (e.g., PET, bone scan).	K	Large Group Teaching	MCQ, Short Answer Question		
MEDI.74.2	Identify clinical indications for nuclear medicine in oncology.	K	Outpatient Clinic	MCQ, Short Answer Question		
MEDI.75.3	Interpret basic nuclear imaging findings in common malignancies.	S	Large Group Teaching	Short Answer Question, CIVA		
MEDI.75.4	Discuss the use of radioisotopes in both diagnosis and treatment.	A	Outpatient Clinic	OSCE, CIVA		
MEDI.74.5	Health Promotion: Address public misconceptions about radiation risk and reinforce the benefits of accurate imaging.	С	Large Group Teaching	Short Answer Question, CIVA		
Oncologic En	nergencies (e.g., TLS, neutropenic fever, hyper	rcalcemia, s	pinal cord com	pression)		
MEDI.76.1	Recognize the signs and symptoms of major oncologic emergencies.	K	Large Group Teaching	MCQ, Short Answer Question		
MEDI.76.2	Initiate appropriate emergency management protocols.	A	Outpatient Clinic	OSCE, Short Answer Question		
MEDI.76.3	Coordinate multidisciplinary intervention for rapid stabilization.	A	Large Group Teaching	Short Answer Question, CIVA		
MEDI.76.4	Monitor and follow up for complications or recurrence.	S	Outpatient Clinic	OSCE, CIVA		
MEDI.76.5	Health Promotion: Educate cancer patients on red flag symptoms and the importance of prompt emergency care.	С	Outpatient Clinic	Short Answer Question, CIVA		
Emergency O	Emergency Oncology					
MEDI.77.1	Identify common oncologic emergencies: tumor lysis syndrome (TLS), spinal cord compression, hypercalcemia of malignancy, neutropenic fever, and SIADH.	K	Large Group Teaching	MCQ, Short Answer Question		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning	Assessment Methods
			Methods	Wicthous
MEDI.77.2	Recognize early clinical signs and lab	S	Outpatient	OSCE,
	findings of oncologic emergencies and		Clinic	Short
	differentiate between them.			Answer
				Question
MEDI.77.3	Initiate appropriate emergency	A	Outpatient	OSCE,
	interventions: IV hydration,		Clinic	CIVA
	allopurinol/rasburicase (TLS), broad-			
	spectrum antibiotics (neutropenia), steroids			
	and urgent imaging (spinal compression).			
MEDI.77.4	Coordinate timely referral to oncology,	A/C	Outpatient	OSCE,
	critical care, and supportive services to		Clinic	CIVA
	prevent irreversible outcomes.			
MEDI.77.5	Health Promotion: Educate cancer patients	С	Outpatient	Short
	and caregivers about early warning signs		Clinic	Answer
	(e.g., new back pain, fever, confusion) and			Question,
	when to seek emergency care to prevent			CIVA
	complications.			
Introduction	to Disaster Medicine		1	-
MEDI.78.1	Define disaster, emergency, and	K	Large	MCQ, Short
	differentiate between natural and man-		Group	Answer
	made disasters.		Teaching	Question
MEDI.78.2	Describe the principles and phases of	K	Large	MCQ, Short
	disaster management (mitigation,		Group	Answer
	preparedness, response, recovery).		Teaching	Question
MEDI.78.3	Understand the role of emergency	K	Large	Short
	medicine in disaster response.		Group	Answer
			Teaching	Question,
				CIVA
MEDI.78.4	Apply disaster medicine principles in	A	Field	OSCE,
	theoretical disaster scenarios.		Simulation	CIVA
) (ED: 50 -	H M D	~	/ Clinic	G1
MEDI.78.5	Health Promotion: Raise public awareness	C	Large	Short
	about disaster preparedness and personal		Group	Answer
	emergency planning.		Teaching	Question,
				CIVA
Geriatrics				
MEDI.79.1	Describe the structure of command,	K	Large	MCQ, Short
	control, and coordination systems in		Group	Answer
	disasters (e.g., ICS).		Teaching	Question
MEDI.79.2	Perform risk assessment and develop risk-	A	Outpatient	OSCE,
	reduction strategies.		Clinic /	Short
			Simulation	Answer
				Question
MEDI.79.3	Understand triage systems (START,	S	Simulation	OSCE,
	SALT) and apply them in scenarios.		/ Field	CIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods Practice	Assessment Methods
MEDI.79.4	Outline roles of hospitals, EMS, and volunteers in disaster zones.	K	Large Group Teaching	Short Answer Question, CIVA
MEDI.79.5	Health Promotion: Advocate for community drills and volunteer training programs to improve disaster response.	С	Large Group Teaching	Short Answer Question, CIVA
Specific Med	ical Disaster Management			
MEDI.80.1 MEDI.80.2	Classify and describe the clinical effects of chemical agents (e.g., nerve, blistering agents). Recognize signs and initial management of	K S	Large Group Teaching Outpatient	MCQ, Short Answer Question OSCE,
	biological threats (e.g., anthrax, smallpox).		Clinic	Short Answer Question
MEDI.80.3	Understand health effects of radiation exposure and appropriate decontamination procedures.	K	Large Group Teaching	Short Answer Question, CIVA
MEDI.80.4	Apply protective protocols and resource planning in CBRN scenarios.	A	Simulation / Field Drill	OSCE, CIVA
MEDI.80.5	Health Promotion: Educate the public on basic protective actions during chemical or radiological incidents.	С	Large Group Teaching	Short Answer Question, CIVA
Mass Gatheri	ng Medicine			
MEDI.81.2	Define mass gathering and identify associated public health risks.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.81.2	Plan medical services for large-scale events (e.g., Hajj, sports events).	A	Simulation / Planning Session	Short Answer Question, CIVA
MEDI.81.3	Coordinate crowd control, surveillance, and health infrastructure.	A	Outpatient Clinic	OSCE, CIVA
MEDI.81.4	Discuss case studies of past mass gathering responses.	С	Large Group Teaching	Short Answer Question, CIVA
MEDI.81.2	Health Promotion: Promote awareness of personal health preparedness among attendees of mass events.	С	Large Group Teaching	Short Answer Question, CIVA
Complex Hui	manitarian Emergencies			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.82.1	Define complex emergencies and understand their causes (e.g., conflict, displacement, famine).	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.82.2	Identify the health priorities and minimum standards in refugee and IDP camps.	K	Outpatient Clinic	Short Answer Question, CIVA
MEDI.82.3	Manage outbreaks and malnutrition in resource-limited emergency settings.	A	Field Simulation	OSCE, CIVA
MEDI.82.4	Coordinate multidisciplinary humanitarian response with NGOs and international agencies.	С	Large Group Teaching	Short Answer Question, CIVA
MEDI.82.1	Health Promotion: Advocate for protection of vulnerable populations and access to essential health services in emergencies.	С	Large Group Teaching	Short Answer Question, CIVA
Complement	ary and Integrative medicine in Rheumatology	(CIM)		
MEDI.83.1	Remembering: Define complementary, alternative, and integrative medicine in rheumatology. Understanding: Explain main categories of complementary medicine with clinical examples. Applying: Identify potential herb—drug interactions in rheumatology patients. Analyzing: Compare evidence levels (strong, moderate, low) of CIM therapies in rheumatic diseases. Evaluating/Creating: Recommend safe integration of evidence-based CIM without replacing conventional therapy.	С	Large Group Teaching	Short Answer Question, CIVA

Practical Rheumatology

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
Introduction	Introduction & General MSK Exam					
MEDI.1.1	Identify major anatomical structures of the MSK system	K	Bedside & Outpatient clinic teaching	CIVA		
MEDI.1.2	Perform general MSK examination (inspection, palpation, ROM)	S	Bedside demonstration, clinical practice	OSCE		
MEDI.1.3	Differentiate inflammatory vs non-inflammatory MSK conditions	K	Case discussion in clinic	CIVA		
MEDI.1.4	Communicate findings professionally and respectfully during patient exam	C/A	Outpatient interaction, feedback	OSCE		
Examination	of Small Joints					
MEDI.2.1	Identify small joints of hands and feet and related surface anatomy	K	Bedside teaching	CIVA		
MEDI.2.2	Perform inspection, palpation, and functional assessment of small joints	S	outpatient clinic	OSCE		
MEDI.2.3	Recognize signs of inflammation or deformity in small joints	K	outpatient clinic	CIVA		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
MEDI.2.4	Present findings clearly during small joint examination	С	Bedside teaching	OSCE		
Examination	Examination of Large Joints					
MEDI.4.1	Identify major large joints (shoulder, elbow, hip, knee, ankle) and landmarks	K	Bedside teaching, Outpatient clinic	CIVA		
MEDI.4.2	Perform inspection, palpation, range of motion, and functional tests on large joints	S	outpatient clinic	OSCE		
MEDI.4.3	Recognize pathological signs (swelling, deformity, tenderness) in large joints	K	Bedside teaching	CIVA		
MEDI.4.4	Communicate clinical findings clearly during large joint examination	С	Bedside teaching	OSCE		
Spine & Back	k Examination					
MEDI.5.1	Identify key anatomical landmarks of the spine and back	K	Bedside teaching, Outpatient clinic	CIVA		
MEDI.5.2	Perform inspection, palpation, and range of motion of the spine and back	S	Bedside teaching, Outpatient clinic	OSCE		
MEDI.5.3	Recognize signs of spinal deformities, tenderness, and neurological deficits	K	Bedside teaching, Outpatient clinic	CIVA		
MEDI.5.4	Effectively communicate examination findings related to spine and back	С	Bedside teaching, Outpatient clinic	OSCE		
Monoarthritic	e & Polyarthritis Cases					
MEDI.6.1	Differentiate between monoarthritis and polyarthritis clinically	K	Bedside teaching, Outpatient clinic	CIVA		
MEDI.6.2	Identify common causes of monoarthritis and polyarthritis	K	Bedside teaching, Outpatient clinic	CIVA		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.6.3	Conduct focused joint examination relevant to monoarthritis and polyarthritis cases	S	Bedside teaching, Outpatient clinic	OSCE
MEDI.6.4	Communicate diagnosis and management plans clearly	С	Bedside teaching, Outpatient clinic	OSCE
Lab & Imagin	ng Interpretation			
MEDI.7.1	Identify common laboratory tests relevant to MSK disorders	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.7.2	Interpret basic lab results (e.g., ESR, CRP, Rheumatoid factor)	S/K	Bedside teaching, Outpatient clinic	CIVA
MEDI.7.3	Recognize common imaging modalities and their findings in MSK diseases	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.7.4	Integrate lab and imaging findings to assist clinical diagnosis	С	Bedside teaching, Outpatient clinic	OSCE
Pediatric & S	Seronegative Arthritis			
MEDI.8.1	Describe key clinical features of pediatric arthritis and seronegative types	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.8.2	Identify differences between seronegative arthritis and other arthritides	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.8.3	Perform relevant joint examination tailored to pediatric and seronegative cases	S	Bedside teaching, Outpatient clinic	OSCE
MEDI.8.4	Communicate diagnosis and management plans effectively	С	Bedside teaching, Outpatient clinic	OSCE
Rheumatolog	y Emergencies			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.9.1	Recognize common rheumatologic emergencies and their clinical presentations	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.9.2	Understand initial management steps for urgent rheumatology cases	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.9.3	Perform rapid clinical assessment relevant to rheumatology emergencies	S	Bedside teaching, Outpatient clinic	OSCE
MEDI.9.4	Communicate emergency findings and management plans effectively	С	Bedside teaching, Outpatient clinic	OSCE
Pharmacolog	ic & Non-Pharmacologic Treatment			
MEDI.10.1	Describe common pharmacologic treatments for MSK and rheumatologic disorders	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.10.2	Explain non-pharmacologic management options (e.g., physical therapy, lifestyle)	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.10.3	Apply principles of treatment selection based on patient condition	S	Bedside teaching, Outpatient clinic	OSCE
MEDI.10.4	Communicate treatment plans effectively to patients and healthcare team	С	Bedside teaching, Outpatient clinic	OSCE

Practical neuro Medicine

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
Consciousness						
MEDI.1.1	Define levels and components of consciousness	K	Bedside teaching, Outpatient clinic	CIVA		
MEDI.1.2	Perform clinical assessment of consciousness (e.g., Glasgow Coma Scale)	S	Bedside teaching, Outpatient clinic	OSCE		
MEDI.1.3	Recognize signs of altered consciousness and their causes	K	Bedside teaching, Outpatient clinic	CIVA		
MEDI.1.4	Effectively communicate clinical findings related to consciousness	С	Bedside teaching, Outpatient clinic	OSCE		
Speech & La	anguage					
MEDI.2.1	Describe the main components of speech and language function	K	Bedside teaching, Outpatient clinic	CIVA		
MEDI.2.2	Perform a clinical assessment of speech and language abilities	S	Bedside teaching, Outpatient clinic	OSCE		
MEDI.2.3	Recognize common speech and language disorders and their signs	K	Bedside teaching, Outpatient clinic	CIVA		
MEDI.2.4	Effectively communicate findings related to speech and language exam	С	Bedside teaching, Outpatient clinic	OSCE		
Memory						

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
MEDI.3.1	Describe types of memory (short-term, long-term, working)	K	Bedside teaching, Outpatient clinic	CIVA	
MEDI.3.2	Perform clinical memory assessment tests	S	Bedside teaching, Outpatient clinic	OSCE	
MEDI.3.3	Recognize memory impairment signs and possible causes	K	Bedside teaching, Outpatient clinic	CIVA	
MEDI.3.4	Communicate findings of memory evaluation effectively	С	Bedside teaching, Outpatient clinic	OSCE	
Cranial Nerv	e Examination				
MEDI.4.1	Identify and describe functions of the 12 cranial nerves	K	Bedside teaching, Outpatient clinic	CIVA	
MEDI.4.2	Perform a systematic clinical examination of all cranial nerves	S	Bedside teaching, Outpatient clinic	OSCE	
MEDI.4.3	Recognize signs of cranial nerve dysfunction	K	Bedside teaching, Outpatient clinic	CIVA	
MEDI.4.4	Communicate clinical findings of cranial nerve exam effectively	С	Bedside teaching, Outpatient clinic	OSCE	
Meningeal S	Meningeal Signs				
MEDI.5.1	Define meningeal signs and their clinical significance	K	Bedside teaching, Outpatient clinic	CIVA	
MEDI.5.2	Perform tests for meningeal irritation (e.g., Kernig's, Brudzinski's)	S	Bedside teaching,	OSCE	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
			Outpatient clinic	
MEDI.5.3	Recognize positive meningeal signs and implications	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.5.4	Present meningeal signs findings clearly and accurately	С	Bedside teaching, Outpatient clinic	OSCE
Motor Exami	nation of UL & LL			
MEDI.6.1	Describe the anatomy and function of muscles in upper and lower limbs	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.6.2	Perform systematic motor examination including tone, power, and reflexes	S	Bedside teaching, Outpatient clinic	OSCE
MEDI.6.3	Identify signs of motor deficits such as weakness, spasticity, and atrophy	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.6.4	Communicate motor exam findings clearly and effectively	С	Bedside teaching, Outpatient clinic	OSCE
Sensory exan	nination			
MEDI.7.1	Describe different sensory modalities (touch, pain, temperature, proprioception)	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.7.2	Perform clinical sensory testing using appropriate tools	S	Bedside teaching, Outpatient clinic	OSCE
MEDI.7.3	Identify abnormal sensory findings and their clinical significance	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.7.4	Communicate sensory exam results effectively	С	Bedside teaching,	OSCE

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
			Outpatient clinic	
Gait & Cereb	pellar Examination			
MEDI.8.1	Describe normal gait patterns, cerebellar functions, and common abnormalities	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.8.2	Perform clinical assessment of gait and cerebellar function using relevant tests	S	Bedside teaching, Outpatient clinic	OSCE
MEDI.8.3	Identify pathological gait types and cerebellar dysfunction signs (ataxia, dysmetria)	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.8.4	Communicate gait and cerebellar examination findings clearly and effectively	С	Bedside teaching, Outpatient clinic	OSCE
Neurological	Topics: Headache, Weakness, Seizure & Ve	rtigo		
MEDI.9.1	Describe clinical features, causes, and pathophysiology of headache, weakness, seizure, and vertigo	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.9.2	Perform focused history taking and clinical examination relevant to headache, weakness, seizure, and vertigo	S	Bedside teaching, Outpatient clinic	OSCE
MEDI.9.3	Identify red flags, emergencies, and serious conditions within these neurological presentations	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.9.4	Communicate assessment findings and management plans effectively for all four neurological problems	С	Bedside teaching, Outpatient clinic	OSCE

Gynecology



Fifth grade

This academic program provides a summary of the most important characteristics of the program and the learning outcomes expected of the student to achieve, proving whether he has made the most of the available opportunities. It is accompanied by a description of each course within the program.

1. Educational Establishment:	University of Al-Ameed
2. Scientific Department:	College of Medicine
3. Name of the Professional Academic Program:	Modified Traditional Curriculum
4. Final Graduation Certificate:	M.B.Ch.B
5. Educational system: Annual/courses/other	Annual System
6. Approved accreditation program:	Iraqi National Guideline on Standards for Established and Accrediting Medical School
7. Other external factors:	 Availability of relevant scientific research in the field of specialization. Access to global electronic networks. Access to traditional and digital libraries Teaching aids such as data show and PowerPoint presentations Availability of equipped classrooms. Use of free online communication platforms (e.g., Free Conference Call).
8. Date the description was written:	15/9/2024

9. Academic Program Objectives:

- Provide students with foundational knowledge of gynecological physiology, pathology, and common disorders.
- Develop clinical skills for diagnosing and managing gynecological conditions through history-taking, physical examination, and diagnostic procedures.
- Train students to recognize and manage gynecological emergencies, such as ectopic pregnancy and ovarian torsion.
- Enhance students' ability to perform and interpret essential gynecological investigations, including ultrasound, Pap smears, and hormone tests.
- Strengthen communication skills to ensure effective patient counseling and shared decision-making in gynecological care.
- Promote adherence to ethical and legal principles in gynecological practice, including patient confidentiality, informed consent, and reproductive rights.
- Encourage research and evidence-based practice in gynecology to improve patient outcomes and advance medical knowledge in women's health.
- Prepare students to actively apply health promotion principles in gynecological practice by recognizing risk factors, implementing preventive strategies, and educating women about reproductive and sexual health, with the aim of reducing disease burden and improving quality of life.
- 10) The Most reliable resources for program Information:
 - Ten Teacher Textbook.

Gynecology/Grade 5

Code: OBGY503 5 Credits

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
Embryology	y and Anatomy of genital tract			
OBGY1.1	Outline the embryological origins of the female genital tract, including Müllerian and Wolffian ducts, to understand the basis of congenital anomalies.	K	Large Group Teaching	Short answer questions &MCQ
OBGY1.2	Describe the process of vaginal development from the sinovaginal bulb and outline its timeline of canalization.	K	Large Group Teaching	Short answer questions &MCQ
OBGY1.3	Identify the anatomical structures of the uterus, fallopian tubes, and ovaries and understand their significance in clinical practice.	K	Large Group Teaching	Short answer questions &MCQ
OBGY1.4	Compare anatomical and histological changes in the genital tract before and after menopause to recognize age-related clinical variations.	K	Large Group Teaching	Short answer questions &MCQ
OBGY1.5	Analyze the role of hormonal signals in external genitalia development during embryogenesis, important for understanding intersex conditions.	K	Large Group Teaching	Short answer questions &MCQ
Maldevelop	ments of Female Genital Tract.			
OBGY2.1	Describe the embryological development of the female genital tract, with emphasis on the roles of the Müllerian and Wolffian ducts.	K	Large Group Teaching	Short answer questions &MCQ
OBGY2.2	Explain how disruptions in Müllerian duct development result in congenital anomalies of the uterus and upper vagina.	K	Large Group Teaching	Short answer questions &MCQ
OBGY2.3	Identify the most common congenital malformations of the female genital tract and their clinical presentation.	K	Large Group Teaching	Short answer questions &MCQ

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBGY2.4	Differentiate between types of uterine anomalies based on anatomical and reproductive implications.	K	Large Group Teaching	Short answer questions &MCQ
OBGY2.5	Recognize the impact of genital tract malformations on menstruation, fertility, and pregnancy outcomes.	К	Large Group Teaching	Short answer questions &MCQ
OBGY2.6	Evaluate the diagnostic approaches used to confirm these anomalies, including imaging and clinical criteria.	K	Large Group Teaching	Short answer questions &MCQ
OBGY2.7	Understad appropriate management strategies, both surgical and non-surgical, tailored to patient needs.	K	Large Group Teaching	Short answer questions &MCQ
Disorders of	f Sexual Development (Intersex).			
OBGY3.1	Understand the concept of DSDs by explaining their definitions, underlying causes, and the role of genetic and hormonal factors in sexual differentiation	K	Large Group Teaching	Short answer questions &MCQ
OBGY3.2	Classify the types of DSDs, including 46, XX DSD, 46,XY DSD, and ovotesticular DSD, based on chromosomal, gonadal, and phenotypic characteristics.	K	Large Group Teaching	Short answer questions &MCQ
OBGY3.3	Recognize common clinical features of specific DSDs such as congenital adrenal hyperplasia and androgen insensitivity syndrome.	K	Large Group Teaching	Short answer questions &MCQ
OBGY3.4	Explain the diagnostic approach to DSDs, including hormonal assays, imaging, genetic testing, and physical examination findings.	K	Large Group Teaching	Short answer questions &MCQ
OBGY3.5	Describe the available management options for DSDs, including medical treatment, surgical considerations, and long-term follow-up.	K	Large Group Teaching	Short answer questions &MCQ

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBGY3.6	Advocate for health promotion strategies in individuals with DSDs by supporting early detection, access to psychological care, and community-based support to reduce stigma and improve outcomes.	K	Large Group Teaching	Short answer questions &MCQ
Puberty and Developmen	Disorders of Pubertal			
OBGY4.1	Understand the normal process of puberty, including the hormonal regulation by the hypothalamic-pituitary-gonadal (HPG) axis, the sequence of physical changes (Tanner stages), and the expected age range for puberty in males and females.	K	Large Group &Bedsid e	Short answer questions &MCQ
OBGY4.2	Identify common disorders of pubertal development, such as precocious puberty (early puberty), delayed puberty, and disorders like central vs. peripheral causes of pubertal abnormalities.	K	Large Group &Bedsid e	Short answer questions &MCQ
OBGY4.3	Describe the clinical features and diagnostic approach for disorders like precocious puberty, delayed puberty, and pubertal abnormalities.	K	Large Group &Bedsid e	Short answer questions &MCQ
OBGY4.4	Recognize the clinical implications of pubertal disorders, such as their impact on growth, fertility, and psychosocial well-being.	K/S	Large Group &Bedside	Short answer question, MCQ & OSCE
OBGY4.5	Analyze the management strategies for pubertal disorders, including available treatment options.	K	Large Group &Bedside	Short answer questions &MCQ
Dysmenorrh	nea and Premenstrual syndrome.			
OBGY5.1	Explain the hormonal changes and inflammatory processes that contribute to painful menstruation, including both primary and secondary dysmenorrhea, as well as the underlying mechanisms of PMS symptoms.	К	Large Group Teaching	Short answer question, MCQ & OSCE

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBGY5.2	Identify the timing, severity, and nature of symptoms such as cramping, fatigue, mood swings, and bloating, and distinguish between dysmenorrhea and PMS based on symptom presentation.	K	Large group, small group Bedside, Clinical skills lab,	Short answer question, MCQ, logbook & OSCE
OBGY5.3	Describe the causes, risk factors, and clinical presentation of primary versus secondary dysmenorrhea, and differentiate them based on underlying conditions or pathophysiology.	К	case- based learning & Practical learning	
OBGY5.4	Recognize the range of treatments for dysmenorrhea and PMS, including non-pharmacological options like heat therapy, exercise, and stress management, as well as pharmacological treatments such as NSAIDs and hormonal therapies.	K	Large group, small group Bedside, Clinical skills	Short answer question, MCQ & OSCE
OBGY5.5	Evaluate the importance of health promotion by lifestyle modifications, including exercise, dietary adjustments, and stress management, in managing dysmenorrhea and PMS symptoms, and improving overall well-being.	К	lab, case- based learning & Practical learning	
Normal Phys	siology of Menstrual Cycle.			
OBGY6.1	Explain the hormonal regulation of the menstrual cycle, focusing on the interactions between the hypothalamus, pituitary gland, and ovaries.	K	Large Group Teaching	Short answer questions &MCQ
OBGY6.2	Identify the roles of GnRH, FSH, LH, estrogen, and progesterone in regulating the menstrual cycle.	K	Large Group Teaching	Short answer questions &MCQ
OBGY6.3	Describe the physiological events occurring during each phase of the menstrual cycle: follicular phase, ovulation, luteal phase, and menstruation.	K	Large Group Teaching	Short answer questions &MCQ

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods	
OBGY6.4	Recognize the clinical relevance of normal menstrual cycle physiology in maintaining reproductive health and fertility.	K	Large Group Teaching	Short answer questions &MCQ	
OBGY6.5	Analyze how hormonal imbalances can affect the menstrual cycle and contribute to common menstrual disorders.	K	Large Group Teaching	Short answer questions &MCQ	
Disorders of	f Menstrual cycle (Abnormal Uterine E	Bleeding).			
OBGY7.1	Identify the key terms used to describe various patterns of abnormal uterine bleeding.	K	Large group, small group	Short answer questions &MCQ	
OBGY7.2	Describe the difference between organic and non-organic causes of abnormal uterine bleeding	K	Bedside, Clinical skills lab &case- based learning	Short answer questions &MCQ	
OBGY7.3	Outline the essential components of a patient's history and physical examination when evaluating abnormal uterine bleeding.	K	Large		
OBGY7.4	Summarize the role of different investigations, including imaging and laboratory tests, in diagnosing the causes of AUB.	K	group, small group Bedside, Clinical	Short answer question, MCQ, logbook &	
OBGY7.5	Describe the general treatment approaches for abnormal uterine bleeding, considering potential underlying causes.	K	skills lab& case- based learning	OSCE, CIVA	
OBGY7.6	Outline the acute management strategies for heavy uterine bleeding, including both medical and supportive measures.	S	icarining		
Amenorrhea	Amenorrhea.				
OBGY8.1	Classify the types of amenorrhea into primary and secondary forms, based on age of onset and menstrual history.	K/S	Large group, small group	Short answer question, MCQ,	
OBGY8.2	Identify the common causes of amenorrhea, including hormonal,	K	Bedside, Clinical	logbook & OSCE,	

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
	structural, and lifestyle-related factors.		skills lab, case- based learning & Practical learning	CIVA
OBGY8.3	Describe the diagnostic approach for amenorrhea, including history taking, physical examination, laboratory tests, and imaging studies.	K/S	Large group, small group Bedside, Clinical	Short answer question, MCQ & OSCE
OBGY8.4	Recognize common conditions associated with amenorrhea, such as polycystic ovary syndrome (PCOS) and thyroid dysfunction.	К	skills lab, case- based learning &	Short answer question, MCQ & OSCE
OBGY8.5	Support health promotion by encouraging early evaluation, raising awareness of contributing to lifestyle and psychological factors, and guiding appropriate treatment strategies for amenorrhea.	A	Practical learning	Short answer question &MCQ
Poly Cystic	Ovarian Syndrome.			
OBGY9.1	Define Polycystic Ovary Syndrome (PCOS) using the Rotterdam criteria.	K	Large Group Teaching	Short answer questions &MCQ
OBGY9.2	Explain the pathophysiology of PCOS, including the roles of hyperandrogenism, LH hypersecretion, and insulin resistance.	K	Large group, small group Bedside,	Short answer question, MCQ, logbook &
OBGY9.3	Identify the common clinical features and symptoms associated with PCOS.	K	Clinical skills lab, case-	OSCE, CIVA
OBGY9.4	Describe the key investigations used in the diagnosis of PCOS, including ultrasound findings and hormonal assessments.	K	based learning & Practical	Short answer questions MCQ

Number OBGY9.5	Outline the various treatment options available for managing PCOS, considering the different clinical manifestations.	Domain K/S/A/ C	Teaching Learning Methods learning	Assessmen t Methods OSCE& CIVA
OBGY9.6	Summarize the potential long-term health sequelae associated with PCOS.	K		Short answer questions MCQ OSCE& CIVA
Hyperprola	ctinemia.			
OBGY10.	Define hyperprolactinemia with focusing on pathophysiology, including physiological, pathological, and drug-induced factors.	K	Large Group &Bedsid e	Short answer questions &MCQ
OBGY10.	Identify the key presenting symptoms that comes with hyperprolactinemia.	K/S	Large Group &Bedsid e	Short answer questions &MCQ
OBGY10.	Describe the diagnostic approach to hyperprolactinemia, including relevant laboratory tests and imaging studies.	K	Large Group &Bedsid e	Short answer questions &MCQ
OBGY10.	Summarize the treatment options for hyperprolactinemia, considering the etiology and the presence of micro- or macroadenomas.	K	Large Group &Bedsid e	Short answer questions &MCQ
Secondary A	Amenorrhea.			
OBGY11.	Describe the key historical and physical examination findings relevant to the diagnosis of secondary amenorrhea.	S	Bedside & Small group	OSCE
OBGY11.	Explain how to select appropriate initial laboratory investigations for a patient presenting with secondary amenorrhea.	K	Large group, small group	Short answer question, MCQ,
OBGY11.	Differentiate between common causes of secondary amenorrhea based on clinical presentation and	K	Bedside, Clinical skills	OSCE & CIVA

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
	diagnostic test results.		lab, case-	
OBGY11.	Outline general management principles for secondary amenorrhea, recognizing the need for etiology-specific treatment.	K	based learning & Practical learning	
Ultrasound	In Gynecology.			
OBGY12.	List the indications for using ultrasound in gynecology, such as infertility, ectopic pregnancy, and ovarian masses.	K	Large Group &Bedsid e	Short answer question, MCQ & OSCE
OBGY12. 2	Explain the difference in frequency used between transabdominal and transvaginal ultrasound and its effect on image resolution and tissue penetration.	K	Large Group &Bedsid e	Short answer question, MCQ & OSCE
OBGY12.	Describe the required preparation for a transabdominal ultrasound, including the need for a full bladder.	K	Large Group &Bedsid e	Short answer question, MCQ & OSCE
OBGY12.	Identify the key anatomical structures observed during a gynecological ultrasound, such as the uterus, ovaries, and endometrium.	K/S	Large Group &Bedsid e	Short answer question, MCQ & OSCE
Infertility.				
OBGY13.	Define infertility and distinguish between primary and secondary types based on the couple's reproductive history.	K	Large Group &Bedsid e	Short answer question, &MCQ
OBGY13.	Classify ovulation disorders using WHO criteria and relate each category to relevant clinical conditions.	K	Large Group &Bedsid e	
OBGY13.	Describe the essential steps in clinical evaluation of infertility, including history-taking and physical examination for both	S	Large group, small group,	Short answer question, MCQ,

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
	partners.		Bedside, Clinical	OSCE & CIVA
OBGY13.	Identify abnormal findings in investigations related to ovulation, tubal patency, and semen analysis, and link them to possible causes.	K	skills lab, Case Based Learning &	
OBGY13.	Explain the role of different diagnostic tools in assessing uterine and tubal factors affecting fertility.	K	Practical learning	
OBGY13.	Summarize the management strategies for different infertility causes, including ovulation induction, surgery, and ART.	K/S		
OBGY13. 7	Describe Briefly the classification, risk factors, clinical features, and management of ovarian hyperstimulation syndrome (OHSS).	K/S		
	productive Technologies.			
OBGY14.	List the essential investigations required before any form of assisted conception treatment.	K	Large group,, Bedside, Clinical skills lab, Case Based & Practical Learning	Short answer question, MCQ, OSCE & CIVA
OBGY14.	Describe the intrauterine insemination (IUI) procedure and its common indications.	K	Large group,, Bedside,	Short answer
OBGY14.	Outline the steps involved in the in vitro fertilization (IVF) process, from pituitary down-regulation to embryo transfer.	K	Clinical skills lab, Case Based &	question, MCQ, OSCE & CIVA
OBGY14.	Compare the indications and success rates of IUI and IVF.	K/S	Practical Learning	

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBGY14. 5	Explain the pathophysiology and risk factors of ovarian hyperstimulation syndrome (OHSS).	K		
OBGY14.	Describe the management strategies for ovarian hyperstimulation syndrome (OHSS).	K		
OBGY14.	Examine the role of health promotion (ART) by educating individuals about available treatment options, addressing factors influencing treatment success and emphasizing the importance of mental and emotional support to enhance outcomes and overall well-being.	A		
Fertility Co.	ntrol.			
OBGY15.	Understand the different methods of contraception, including hormonal methods (e.g., oral contraceptives, IUDs, implants, patches), barrier methods (e.g., condoms, diaphragms), permanent methods (e.g., tubal ligation, vasectomy), and natural methods (e.g., fertility awareness).	K	Large group, small group, Bedside, Clinical skills lab, Case Based Learning & Practical learning	Short answer question, MCQ, & OSCE
OBGY15.	Learn how each method works to prevent pregnancy, including their mechanisms of action, such as inhibiting ovulation, thickening cervical mucus, or altering the uterine lining.	K	Large group, small group, Bedside,	Short
OBGY15.	Identify the advantages, disadvantages, and contraindications of various contraceptive methods, focusing on effectiveness, convenience, side effects (e.g., weight gain, mood changes), and risks (e.g., blood clots, hormonal imbalances).	K	Clinical skills lab, Case Based Learning & Practical learning	question, MCQ, OSCE & CIVA

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBGY15.	Evaluate how patient age, health conditions, lifestyle, and reproductive plans influence the selection of an appropriate contraceptive method.	K		
OBGY15.	Recognize the role of healthcare providers in contraception counseling, including the importance of health promotion on educating patients about various options, addressing concerns, and supporting informed decisionmaking.	A	Large group	Short answer question, MCQ& OSCE
OBGY15.	Understand the need for follow-up care to monitor side effects, manage complications, and ensure ongoing contraceptive effectiveness.	A		USCE
Disorder of	Early Pregnancy (Miscarriage).			
OBGY16.	Describe the causes and types of miscarriage, including factors such as chromosomal abnormalities, maternal health conditions, and environmental influences.	K	Large group,	Short
OBGY16.	Identify the clinical signs and diagnostic tools used to evaluate miscarriage, such as vaginal bleeding, cramping, ultrasound findings, and hCG levels.	K	small group, Bedside, Clinical skills	answer question, MCQ, logbook & OSCE,
OBGY16.	Recognize the available management options for miscarriages, including expectant, medical, and surgical approaches.	K	lab, Case Based &Practic alearning	CIVA
OBGY16.	Explain the importance of providing emotional support to patients with miscarriage, including how emotional well-being can impact recovery.	K		
OBGY16. 5	Understand the key components of follow-up care after miscarriage, such as physical assessment, patient education, and guidance on future pregnancy planning.	A	Large group	Short answer question, &MCQ

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
Recurrent M	fiscarriage.			
OBGY17.	Understand the causes of recurrent miscarriage, including genetic factors, uterine abnormalities, hormonal disorders, immune dysfunction, and thrombophilia.	K	Large group, small group, Bedside, Clinical skills lab, Case Based & Practical learning	Short answer question, MCQ, logbook & OSCE, CIVA
OBGY17.	Identify the diagnostic approach, including history-taking, imaging (e.g., ultrasound, hysteroscopy), genetic testing, and blood tests for hormonal and clotting disorders.	К		Short answer question,
OBGY17.	Recognize management strategies for recurrent miscarriage, such as hormonal support, anticoagulants for thrombophilia, and surgical correction of uterine abnormalities.	K	Large group, small group, Bedside &Case Based Learning	MCQ, OSCE
OBGY17.	Understanding the role of health promotion by educating individuals on underlying causes, encouraging early medical evaluation, lifestyle modification and supporting emotional and psychological wellbeing to prevent future losses and enhance reproductive health.	K		Short answer question, MCQ& OSCE
Disorders of	Early Pregnancy (Ectopic Pregnancy)			
OBGY18.	Explain the causes and risk factors for ectopic pregnancy, including conditions that impair normal implantation such as pelvic inflammatory disease, prior ectopic pregnancy, tubal surgery, or endometriosis.	K	Large group, small group, Bedside, Clinical skills	Short answer question, MCQ, logbook & OSCE, CIVA
OBGY18.	Identify the clinical presentation of ectopic pregnancy, including common symptoms and signs of hemodynamic instability in severe cases.\	K/S	lab, Case Based & Practical learning	

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBGY18.	Describe the diagnostic approach for ectopic pregnancy, including the use of transvaginal ultrasound, serum hCG levels, and physical examination.	K	Large group, small	
OBGY18.	Recognize the available management options for ectopic pregnancy, including medical therapy (e.g., methotrexate) and surgical interventions (e.g., laparoscopic salpingectomy or salpingostomy).	K	group, Bedside &Case Based Learning	Short answer question, MCQ, OSCE & CIVA
OBGY18. 5	Emphasize the importance of early diagnosis and timely treatment in preventing complications and preserving fertility.	A		
Gestational	Trophoblastic Disease.			
OBGY19.	Describe the types and causes of gestational trophoblastic disease (GTD), including complete and partial hydatidiform mole, invasive mole, choriocarcinoma, and placental site trophoblastic tumor (PSTT), in relation to abnormal trophoblastic proliferation.	K	Large group, small group,	Short
OBGY19. 2	Identify the clinical features of GTD, such as abnormal vaginal bleeding, excessive nausea and vomiting, and uterine enlargement.	K	Bedside, Clinical skills lab, Case	answer question, MCQ, OSCE &
OBGY19.	Outline the diagnostic approach for GTD, including the role of β-hCG measurement, ultrasound imaging (e.g., "snowstorm" appearance), and histopathological examination.	K/S	Based Learning & Practical learning	CIVA
OBGY19.	Recognize the management strategies for GTD, such as suction evacuation in molar pregnancies, serial β-hCG monitoring, and chemotherapy for malignant forms.	K/S		

Number OBGY19. 5	Learning Objective Understand the role of health promotion in Gestational Trophoblastic Disease (GTD) by raising awareness about the importance of early detection, encouraging regular follow-ups, and providing emotional and psychological support to enhance treatment outcomes and protect reproductive health.	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods Short answer question, MCQ, OSCE & CIVA
Termination	n of Pregnancy (Induced Abortion).			
OBGY20.	Describe the types and methods of induced abortion, including medical methods (e.g., mifepristone and misoprostol) and surgical methods (e.g., aspiration, dilation and curettage, or dilation and evacuation).	K	Large Group Teaching	Short answer questions &MCQ
OBGY20.	Identify the factors influencing the choice of abortion method, such as gestational age and the patient's health condition.	K	Large Group Teaching	Short answer questions &MCQ
OBGY20.	Recognize the indications and risks associated with induced abortion, including maternal health issues, fetal abnormalities, psychosocial factors, and potential complications like infection, bleeding, and emotional responses.	K	Large Group Teaching	Short answer questions &MCQ
OBGY20.	Understand the ethical, legal, and psychological considerations related to induced abortion, focusing on informed consent, patient counseling, and support services before and after the procedure, and adherence to legal regulations in different regions.	A	Large Group Teaching	Short answer questions &MCQ
Genitourina				
OBGY21.	Identify the types and causes of genitourinary fistulas, including prolonged labor, surgical complications, radiation therapy,	K	Large Group &Bedsid e	Short answer questions &MCQ

Number	Learning Objective	Domain K/S/A/	Teaching Learning Methods	Assessmen t Methods
	infections, and malignancies.		Wicthods	
OBGY21.	Recognize the clinical features of genitourinary fistulas, such as continuous urinary or fecal leakage, recurrent infections, and irritation.	К	Large Group &Bedsid e	Short answer questions &MCQ
OBGY21.	Describe the diagnostic approach for genitourinary fistulas, including dye tests, cystoscopy, contrast-enhanced CT, and MRI to determine their location and extent.	K	Large Group &Bedsid e	Short answer questions &MCQ
OBGY21.	Outline management strategies for genitourinary fistulas, covering conservative methods (e.g., catheterization) and surgical repair techniques aimed at restoring continence and quality of life.	K/S	Large Group &Bedsid e	Short answer questions &MCQ
Second Trir	nester Miscarriage.			
OBGY22.	Recall the definition and basic facts related to second-trimester miscarriage.	K	Large Group Teaching	
OBGY22. 2	Understand the causes and management options for second-trimester miscarriage.	K	Large Group Teaching	Short
OBGY22.	Compare and contrast the different management options for second-trimester miscarriage, including expectant, medical, and surgical approaches.	K	Large group, Bedside	answer question, MCQ, OSCE & CIVA
OBGY22.	Analyze the risk factors and diagnostic methods for cervical incompetence.	K	& Case Based Learning	
OBGY22.	Outline the management plan for cervical incompetence	K		
Endometrio	sis And Adenomyosis.			
OBGY23.	Describe the pathophysiology of endometriosis and adenomyosis, including the location of ectopic	K	Large group, small	Short answer question,

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
	endometrial tissue and its effects on		group,	MCQ,
	pelvic organs.		Bedside,	logbook &
OBGY23.	Identify common symptoms of		Clinical	OSCE,
2	endometriosis and adenomyosis		skills	CIVA
	such as pelvic pain, dysmenorrhea,	K/S	lab, Case	
	dyspareunia, and abnormal uterine		Based	
OD CLIOS	bleeding.		Learning	
OBGY23.	Recognize the diagnostic tools used		& Practical	
3	in confirming endometriosis and	K		
	adenomyosis, including ultrasound, MRI, and laparoscopy.		learning	
OBGY23.	List the main medical treatment			
4	options, including hormonal	K		
'	therapy and pain relief measures.	11		Short
OBGY23.	Outline the surgical interventions			answer
5	available, such as excision of	17		question,
	lesions and hysterectomy, based on	K		MCQ,
	disease severity.			OSCE & CIVA
OBGY23.	Explain the importance of early			CIVA
6	recognition and appropriate			
	management to improve			
	reproductive health and quality of	K		
	life.			
Benign Disc	eases of the Cervix and			
Uterus.	cuses of the Col VIX and			
OBGY24.	Classify benign diseases of the		Large	Short
1	uterus and cervix based on tissue of	$\boldsymbol{\nu}$	Group	answer
	origin.	K	Teaching	questions
				&MCQ
OBGY24.	Describe the causes, symptoms, and		Large	
2	signs of common benign cervical	K	Group	
	conditions.	11	Teaching	
ODCV24	Communication and		T	
OBGY24.	Summarize the options treatments	v	Large	
3	of benign cervical conditions.	K	Group Teaching	
OBGY24.	Identify the rick factors symptoms		Teaching	Short
4 4 4.	Identify the risk factors, symptoms, and treatment options for		Large	answer
'	endometrial polyps.		group,	question,
	The state of the s	K	Bedside	MCQ,
			& Case	logbook &
			Based	OSCE,
			Learning	CIVA
OBGY24.	Explain the FIGO classification,	K	Large	Short

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
5	incidence, symptoms, and diagnosis of uterine leiomyomata (fibroids).		group, Bedside & Case	answer question, MCQ,
OBGY24.	Compare medical and surgical management options for uterine fibroids, including their indications and complications.	K	Based Learning	OSCE & CIVA
Post Menopa	nusal Bleeding.			
OBGY25.	Describe the causes of postmenopausal bleeding, including benign (e.g., endometrial atrophy, polyps) and serious conditions (e.g., endometrial hyperplasia, cancer), and explain the role of hormonal changes.	K	Large group, small group, Bedside, Clinical skills lab, Case Based Learning	Short answer question, MCQ, logbook & OSCE, CIVA
OBGY25.	Identify the initial steps in evaluating postmenopausal bleeding, including history-taking and physical examination.	K/S		
OBGY25.	Recognize the main diagnostic tools such as transvaginal ultrasound, hysteroscopy, and endometrial biopsy.	K		
OBGY25.	Differentiate between common causes of postmenopausal bleeding based on diagnostic findings.	K	& Practical learning	
OBGY25.	Explain the treatment options and when medical or surgical interventions are appropriate.	K		
Endometrial	Hyperplasia.			
OBGY26.	Describe the pathophysiology of endometrial hyperplasia, focusing on the role of prolonged unopposed estrogen in the abnormal thickening of the endometrium and its potential progression to malignancy.	K	Large group, small group, Bedside, Clinical skills lab, Case Based & Practical learning	Short answer question, MCQ, logbook & OSCE, CIVA
OBGY26.	Identify common clinical features	K	Large	Short

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
2	and risk factors of endometrial hyperplasia, including abnormal uterine bleeding, obesity, PCOS, and use of estrogen-only therapy.		group, small group, Bedside,	answer question, MCQ, OSCE &
OBGY26.	Explain the diagnostic tools used to evaluate endometrial hyperplasia, such as transvaginal ultrasound and endometrial biopsy.	K	Clinical skills lab, Case Based	CIVA
OBGY26.	Outline the treatment strategies, including hormonal therapy (e.g., progestins), regular monitoring, and surgical options when indicated.	K	Learning & Practical	
OBGY26. 5	Recognize the role of health promotion in endometrial hyperplasia by emphasizing lifestyle modifications, early detection through regular screenings, and awareness of abnormal bleeding to reduce risks and improve long-term health outcomes.	A		
Malignant D	isease of the Uterus.			
OBGY27.	Classify the types of uterine malignancies, including endometrial carcinoma and uterine sarcomas.	K	Large Group Teaching	Short answer questions MCQ& CIVA
OBGY27.	Identify the risk factors associated with uterine malignancies, such as obesity, diabetes, prolonged estrogen exposure, and history of endometrial hyperplasia.	K	Large Group Teaching	Short answer questions MCQ& CIVA
OBGY27.	Recognize the clinical features of uterine malignancies, including postmenopausal bleeding and pelvic pain.	K	Large Group Teaching	Short answer questions MCQ& CIVA
OBGY27.	Explain the diagnostic methods used in uterine cancer, including ultrasound, endometrial biopsy, hysteroscopy, and imaging for metastasis.	K	Large Group Teaching	Short answer questions MCQ& CIVA

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBGY27. 5	Describe the treatment options for uterine malignancies, including surgery, chemotherapy, radiation, and the role of staging.	K	Large Group Teaching	Short answer questions &MCQ
Sexual Trans	smitted Disease.			
OBGY28.	Classify the common types of sexually transmitted diseases (STDs) based on causative agents (bacterial, viral, parasitic) and describe their modes of transmission and associated risk factors.	K	Large Group Teaching & Bedside	Short answer questions &MCQ
OBGY28.	Identify the clinical features of common STDs, including genital ulcers, abnormal discharge, pelvic pain, and systemic symptoms.	K	Large Group Teaching & Bedside	Short answer questions &MCQ
OBGY28.	Explain the diagnostic approaches used for STDs, such as serological tests, NAATs, and microscopic examination.	K	Large Group	Short answer
OBGY28.	Describe the treatment and prevention strategies for STDs, including pharmacological therapy, vaccination, partner treatment, and education on safe sexual practices.	K	Teaching & Bedside	questions &MCQ
OBGY28.	Recognize the role of health promotion in the prevention and control of STDs.by educating individuals on safe sexual practices, the importance of regular screening, early diagnosis, partner notification, and reducing stigma	K	Large Group Teaching & Bedside	Short answer questions &MCQ
	nors of the Ovary.			
OBGY29.	Understand the types of benign ovarian tumors, including functional cysts, epithelial tumors, and germ cell tumors, based on origin, growth patterns, and clinical presentation.	K	Large Group Teaching	Short answer questions MCQ& CIVA
OBGY29.	Identify the clinical features of benign ovarian tumors, such as pelvic pain, bloating, or incidental findings on imaging.	K	Large Group Teaching	Short answer questions MCQ&

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
				CIVA
OBGY29.	Describe the diagnostic approach for benign ovarian tumors using imaging techniques and tumor markers.	K	Large Group Teaching	Short
OBGY29.	Explain the management options for benign ovarian tumors, including observation, medical therapy, and surgical intervention, while considering ovarian preservation and recurrence.	K	Large Group Teaching	answer questions MCQ& CIVA
OBGY29. 5	Understand the importance of health promotion in benign ovarian tumors by encouraging awareness of early symptoms, promoting routine gynecological check-ups, and educating women about when to seek medical evaluation to prevent complications and support timely management.	K	Large Group Teaching	Short answer questions MCQ& CIVA
Malignant 7	Sumors of Ovary and Fallopian Tube.			
OBGY30.	Understand the types of ovarian cancer, including epithelial ovarian cancers, germ cell tumors, and sex cord-stromal tumors.	K/S	Large Group Teaching	Short answer questions MCQ& CIVA
OBGY30.	Describe the risk factors for ovarian cancer, including family history, age, and genetic mutations (e.g., BRCA1/2).	K	Large Group Teaching	Short answer questions MCQ& CIVA
OBGY30.	Identify the clinical features of ovarian cancer, such as abdominal bloating, pelvic pain, early satiety, and changes in bowel habits.	K	Large Group Teaching	Short answer questions MCQ& CIVA

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBGY30.	Recognize the diagnostic approach for ovarian cancer, including imaging (ultrasound, CT, MRI), blood tests (e.g., CA-125), and biopsy or surgical exploration.	K	Large Group Teaching	Short answer questions MCQ& CIVA
OBGY30. 5	Outline the management strategies for ovarian cancer, including surgery, chemotherapy, and targeted therapies, emphasizing the importance of early detection, staging, and treatment	K	Large Group Teaching	Short answer questions MCQ& CIVA
Premaligna	nt Diseases of the Cervix.			
OBGY31.	Understand the types of cervical dysplasia, including LSIL and HSIL, and the role of persistent high-risk HPV infection as a primary cause.	K	Large Group Teaching & Bedside	Short answer questions MCQ& CIVA
OBGY31.	Describe the causes of cervical dysplasia, focusing on the mechanism of HPV-induced cellular changes.	K	Large Group Teaching & Bedside	Short answer questions MCQ& CIVA
OBGY31.	Identify the clinical features of cervical dysplasia, noting that it is often asymptomatic.	K	Large Group Teaching & Bedside	Short answer questions MCQ& CIVA
OBGY31.	Explain the diagnostic approach, including Pap smear, HPV testing, colposcopy, and biopsy.	K	Large Group Teaching & Bedside	Short answer questions MCQ& CIVA
OBGY31.	Recognize the management strategies for cervical dysplasia, such as monitoring, cryotherapy, LEEP, and conization.	K	Large Group Teaching & Bedside	Short answer questions MCQ& CIVA
OBGY31.	Recognize the importance of health promotion in premalignant cervical diseases by emphasizing patient education on HPV prevention, the value of regular Pap smears, HPV	A	Large Group Teaching & Bedside	Short answer questions &MCQ

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
	vaccination, and early follow-up to reduce progression to cervical cancer.			
Malignant I	Diseases of the Cervix.			
OBGY32.	Differentiate between types of cervical cancer based on histological features and associated high-risk factors, particularly HPV subtypes.	K	Large Group Teaching & Bedside	Short answer questions MCQ& CIVA
OBGY32.	Analyze how behavioral and clinical risk factors contribute to the pathogenesis and progression of cervical cancer.	K	Large Group Teaching & Bedside	Short answer questions MCQ& CIVA
OBGY32.	Identify the clinical features and diagnostic steps of cervical cancer, including the use of Pap smear, HPV testing, colposcopy, and biopsy.	K	Large Group Teaching & Bedside	Short answer questions MCQ& CIVA
OBGY32.	Recognize the available treatment strategies based on cancer stage, such as surgery, radiotherapy, and chemotherapy, emphasizing the value of early detection.	K/A	Large Group Teaching & Bedside	Short answer questions &MCQ
Benign And	Malignant Condition of the Vagina.			
OBGY33.	Classify common benign and malignant vaginal conditions based on their histological types and clinical relevance.	K	Large Group Teaching	Short
OBGY33.	Identify the clinical manifestations and appropriate diagnostic tools used in evaluating vaginal lesions.	K	Large Group Teaching	answer questions MCQ& CIVA
OBGY33.	Describe the treatment options for both benign and malignant vaginal conditions according to severity and diagnosis.	K	Large Group Teaching	C1111

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods		
OBGY33.	Recognize the role of health promotion in both benign and malignant vaginal conditions by understanding the importance of patient education, early symptom awareness, regular screening, and encouraging timely medical consultation to support early detection and better outcomes.	A	Large Group Teaching	Short answer questions &MCQ		
Benign Cond	ditions of The Vulva.					
OBGY34.	Define the common benign conditions of the vulva, such as Bartholin's cyst, lichen sclerosus, vulvar intraepithelial neoplasia (VIN), and benign tumors like fibromas and papillomas.	K	Large Group Teaching & Bedside	Short answer questions MCQ& CIVA		
OBGY34.	Analyze the clinical manifestations of vulvar lesions to determine potential causes based on symptom patterns such as itching, pain, swelling, or visible masses.	K		Short answer questions MCQ& CIVA		
OBGY34.	Explain the diagnostic approach to vulvar conditions, including physical examination, biopsy, and imaging when necessary.	K	Large Group	Short answer questions		
OBGY34.	Outline the management options including medical therapy, drainage procedures, and surgical excision.	K	Teaching & Bedside	MCQ& CIVA		
OBGY34. 5	Recognize the role of health promotion the importance of patient education, personal hygiene, early symptom recognition, and reducing stigma to encourage timely medical consultation and improve women's quality of life.	A		Short answer questions &MCQ		
Invasive Di	Invasive Diseases of the Vulva.					
OBGY35.	Describe the epidemiology of vulval cancer accurately, including age-related trends, histological types, and key etiological pathways such as HPV infection and lichen sclerosus.	K	Large Group Teaching & Bedside	Short answer question, MCQ & CIVA		

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBGY35.	Explain the risk factors and etiology of vulval cancer, focusing on associations with HPV, chronic skin conditions, and age-related differences.	K	Large Group Teaching & Bedside	Short answer question, MCQ & CIVA
OBGY35.	Identify the clinical features of vulval cancer, including symptoms, lesion appearances, and patterns of local and distant spread.	K	Large Group Teaching	Short answer question, MCQ & CIVA
OBGY35.	Summarize the FIGO staging system for vulval cancer, emphasizing the criteria for each stage and its impact on treatment decisions.	K	Large Group Teaching	Short answer questions &MCQ
OBGY35.	Explore the treatment options for vulval cancer, considering surgical techniques, the role of radiotherapy, and prognostic indicators like lymph node involvement.	K	Large Group Teaching	Short answer questions &MCQ
Infection In Infection).	Gynecology (The Lower Genital Tract			
OBGY36.	Differentiate between the common causes and types of lower genital tract infections (LGTIs), including bacterial, fungal, viral, and parasitic origins.	K	Large Group Teaching & Bedside	Short answer question, MCQ, logbook &
OBGY36. 2	Identify the clinical features of LGTIs and outline the diagnostic methods used, such as microscopy, cultures, PCR, and pH testing.	K	Large Group & Bedside	OSCE, CIVA
OBGY36.	Recognize the appropriate treatment strategies for different LGTIs, including the use of antimicrobial, antifungal, and antiviral agents.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE &
OBGY36.	Explain preventive approaches for LGTIs, emphasizing patient education, safe sexual practices, hygiene, and partner treatment.	K	Large Group & Bedside	CIVA

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
Infection In Infection).	Gynecology (The Upper Genital Tract			
OBGY37.	Describe the common causes and types of upper genital tract infections (UGTIs), including PID, endometritis, and tubo-ovarian abscess, along with their typical microbial origins.	K	Large Group Teaching & Bedside	Short answer question, MCQ & CIVA
OBGY37.	Identify the clinical features and diagnostic tools used in evaluating UGTIs, including physical findings and investigations like ultrasound or laparoscopy.	K	Large Group Teaching & Bedside	Short answer question,
OBGY37.	Recognize appropriate management options for UGTIs, including medical and surgical interventions.	K	Large Group & Bedside	MCQ & CIVA
OBGY37.	Explain the potential complications of untreated UGTIs and the importance of timely treatment to preserve reproductive health.	K	Large Group Teaching & Bedside	Short answer question, MCQ & CIVA
OBGY37.	Understand the role of health promotion in gynecological infections by understanding methods of prevention, importance of patient education, safe sexual practices, and early diagnosis to reduce complications and protect reproductive health.	A	Large Group Teaching & Bedside	Short answer questions &MCQ
Urogenital I	Prolapse.			
OBGY38.	Understand the types and causes of urogenital prolapse, including cystocele, rectocele, uterine prolapse, and vaginal vault prolapse, and their contributing factors such as childbirth, aging, and obesity.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
OBGY38.	Identify the clinical features and diagnostic approach for urogenital prolapse.	K	Deusiue	CIVA
OBGY38.	Recognize the diagnostic approach to urogenital prolapse, including pelvic examination, POP-Q staging, and imaging studies like MRI or	K	Large Group Teaching &	Short answer question, MCQ,

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
	ultrasound.		Bedside	OSCE & CIVA
OBGY38.	Describe the management strategies including conservative treatments like pelvic floor exercises and pessary use for mild cases, and surgical interventions such as vaginal or abdominal repair for severe cases.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
OBGY38.	Emphasize health promotion by educating women on the risk factors, importance of pelvic floor exercises, and early symptom recognition to prevent and manage urogenital prolapse.	A	Large Group Teaching & Bedside	Short answer questions &MCQ
Urinary Inco	ntinence.			
OBGY39.	Understand the types and causes of urinary incontinence, including stress, urge, overflow, and mixed incontinence, and the associated risk factors such as age, pregnancy, menopause, and obesity.	K	Large Group Teaching & Bedside	Short answer question,
OBGY39. 2	Identify the clinical features and diagnostic approach, including history taking, bladder diaries, physical examination, and diagnostic tools such as urinalysis, urodynamic studies, and post-void residual assessment.	K	Large Group Teaching & Bedside	MCQ, OSCE & CIVA
OBGY39.	Describe the management strategies for urinary incontinence, including behavioral therapies,	K	Large Group Teaching &	Short answer question,
OBGY39.	Recognize the role of health promotion and lifestyle modifications in preventing or minimizing urinary incontinence, such as weight loss, fluid adjustment, bladder training, and pelvic floor exercises.	A	Bedside	MCQ, OSCE & CIVA
Chronic Pelv	vic Pain.			

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBGY40.	Understand the definition and common causes of chronic pelvic pain (CPP), including gynecological, urological, gastrointestinal, musculoskeletal, and psychological origins.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
OBGY40.	Identify the clinical features and diagnostic approach, including history taking, pelvic examination, imaging techniques, and diagnostic laparoscopy.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
OBGY40.	Describe the management strategies for CPP, such as medical therapy, physiotherapy, psychological support, and surgical intervention when appropriate.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
OBGY40.	Recognize the importance of a multidisciplinary approach in evaluating and managing chronic pelvic pain to improve patient outcomes.	A	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
Menopause	and Hormone Replacement Therapy.			
OBGY41.	Explain how hormonal changes during menopause lead to physiological and symptomatic changes in the body.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
OBGY41.	Describe the common manifestations of menopause, including vasomotor symptoms and genitourinary changes.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
OBGY41.	Recognize the clinical methods used to evaluate menopause, including hormonal assays and patient history.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
OBGY41.	Outline the indications and types of hormone replacement therapy used	K	Large Group	Short answer

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
	in menopausal women.		Teaching & Bedside	question, MCQ, OSCE & CIVA
OBGY41.	Compare the advantages and potential complications of HRT based on individual risk factors.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
OBGY41.	Differentiate between hormonal and non-hormonal management strategies for menopausal symptoms.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
Gynecologi	cal Operations.			
OBGY42.	Identify the types of gynecological operations, including diagnostic procedures (hysteroscopy, laparoscopy), minor surgeries (D&C, cervical cerclage), and major surgeries (hysterectomy, myomectomy, ovarian cystectomy).	K	Large Group Small group,	Short answer question, MCQ, OSCE & CIVA
OBGY42.	Explain the indications and surgical approaches for gynecological surgeries, such as laparoscopic, hysteroscopic, and open surgeries, based on conditions like fibroids, endometriosis, abnormal bleeding, and malignancies.	K	Bedside & Clinical skills lab	Short answer question, MCQ, OSCE & CIVA
OBGY41. 3	Describe the preoperative and postoperative considerations, including patient evaluation, anesthesia choices, postoperative care, and potential complications like infection, bleeding, and adhesions. Understand the potential	K	Large Group Small group, Bedside & Clinical skills lab Large	Short answer question, MCQ, OSCE & CIVA

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
4	complications of gynecological surgeries, such as infection, bleeding, and adhesions, and how to minimize them through careful surgical planning and postoperative care.		Group Small group, Bedside & Clinical skills lab	answer question, MCQ, OSCE & CIVA
Gynecologi	cal Endoscopy.			
OBGY43.	Understand the types and applications of gynecological endoscopy, including hysteroscopy, laparoscopy, and colposcopy, used for various gynecological conditions.	K	Large Group Small group,	Short answer questions &MCQ
OBGY43.	Identify the indications for gynecological endoscopy, such as for abnormal uterine bleeding, infertility, pelvic pain, endometriosis, and ovarian cysts.	K	Bedside & Clinical skills lab	Short answer question, MCQ, OSCE & CIVA
OBGY43.	Recognize the potential complications of gynecological endoscopy, such as bleeding, infection, injury to surrounding organs, and anesthesia risks.	K	Large Group Small Group& Bedside	Short answer question, MCQ, OSCE & CIVA
OBGY44.	Evaluate the therapeutic benefits and outcomes of gynecological endoscopy, including faster recovery times, fewer complications, and better surgical results.	К	Large Group Small Group& Bedside	Short answer question, MCQ, OSCE & CIVA
	cal Problems in Adolescence and			
Childhood. OBGY44. 1	Understand common gynecological problems in adolescence and childhood, including menstruation-	K	Large Group Teaching	Short answer questions
OBGY44.	related issues such as primary amenorrhea and dysmenorrhea. Identify congenital gynecological conditions, such as Müllerian duct anomalies and overian cysts, and	K	Large Group	Short answer
OBGY44.	anomalies and ovarian cysts, and their implications. Apply diagnostic techniques for gynecological problems in younger	K	Teaching Large Group	questions &MCQ Short answer

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
	patients, including taking a thorough history such as menstrual history and sexual activity.		Teaching	questions &MCQ
OBGY44.	Utilize physical examination and diagnostic tools, such as ultrasound and laboratory tests, to assess gynecological conditions in adolescence and childhood."	K	Large Group Teaching	Short answer questions &MCQ
OBGY44. 5	Analyze management strategies for menstrual disorders in adolescence, including medical treatments and hormone therapy for conditions like polycystic ovary syndrome (PCOS).	K	Large Group Teaching	Short answer questions &MCQ
•	cal Disorders in Pregnancy and Breast I	Disease		
in Pregnance OBGY45.	identify different gynecological		Large	Short
1	conditions that may occur during pregnancy, their causes, and their potential impact on maternal and fetal health.	K	Group Teaching	answer questions &MCQ
OBGY45.	Recognize and Manage Breast Diseases in Gynecology, Differentiate between benign and malignant breast conditions, their clinical presentations, and appropriate diagnostic and treatment approaches.	K	Large Group Teaching	Short answer questions &MCQ
OBGY45.	Plan an evidence-based approach to diagnose and treat common gynecological and breast disorders to ensure optimal patient outcomes.	K	Large Group Teaching	Short answer questions &MCQ
OBGY45.	Apply health promotion strategies to educate pregnant women about the prevention and early detection of gynecological and breast disorders, with a focus on maintaining reproductive health, ensuring a safe pregnancy, and seeking timely medical care for early intervention.	A	Large Group Teaching	Short answer questions &MCQ
Drugs In Gy			+	Q1
OBGY46.	Understand the mechanisms of gynecological drugs and their role in managing conditions.	K	Large Group Small	Short answer question,

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods	
			group, Bedside & Clinical skills lab	MCQ, OSCE & CIVA	
OBGY46.	Identify the side effects and contraindications of gynecological medications to ensure patient safety.	K	Large Group Small group, Bedside & Clinical skills lab	Short answer question, MCQ, OSCE & CIVA	
OBGY46.	Differentiate clinical presentations and select the most effective pharmacological treatment for gynecological disorders.	K	Large Group Small group, Bedside & Clinical skills lab	Short answer question, MCQ, OSCE & CIVA	
Radiotherap	y And Chemotherapy.				
OBGY47.	Understand the principles and applications of radiotherapy and chemotherapy in gynecological cancers, including their roles in treating cervical, ovarian, endometrial, and vulvar cancers.	K	Large Group Teaching	Short answer question, MCQ, OSCE & CIVA	
OBGY47.	Identify the different types of radiotherapy (external beam and brachytherapy) and chemotherapy used based on cancer type, stage, and patient factors.	K	Large Group Teaching		
OBGY47.	Recognize the potential side effects and management strategies, including nausea, bone marrow suppression, radiation-induced damage, and long-term complications, with emphasis on supportive care and patient monitoring.	K	Large Group Teaching	Short answer question, MCQ, OSCE & CIVA	
Female Sex	Female Sexual Health.				
OBGY48.	Understand the components of female sexual health, including physical, psychological, and	K	Large Group Teaching	Short answer questions	

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
	hormonal factors that influence sexual function, desire, and satisfaction.			&MCQ
OBGY48. 2	Identify common sexual health concerns, such as hypoactive sexual desire disorder, dyspareunia, vaginismus, and the impact of conditions like menopause, hormonal imbalances, and psychological stress.	K	Large Group Teaching	Short answer questions &MCQ
OBGY48.	Recognize management strategies, including counseling, hormonal and non-hormonal treatments, pelvic floor therapy, and lifestyle modifications to improve overall sexual well-being.	A	Large Group Teaching	Short answer questions &MCQ

Practical

Practical Gynecology 5 th Grade:					
Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessme nt Methods	
1st Week			Day 1		
Introduction T	o History.				
OBGY1.1	Identify the key components of a comprehensive medical history.	K/S/C	Small group &	OSCE&	
OBGY1.2	Demonstrate effective communication skills in patient consultations.	S/C/A	Bedside teaching	CIVA	
Gynecological	History.				
OBGY2.1 OBGY2.2	Recognize common gynecological symptoms and their clinical significance. Obtain a detailed and structured	K/S/C	Small group & Bedside	OSCE& CIVA	
	gynecological history. teaching History of menarche menstrual history and Assessment of				
pubertal signs	01				
OBGY3.1 OBGY3.2	Obtain a detailed history of menarche and menstrual patterns and identify irregularities. Assess pubertal signs and their correlation with normal developmental stages.	K/S/C	Small group & Bedside teaching	OSCE& CIVA	
Gynecological	Bimanual Examination				
OBGY4.1	Perform to assess the size, shape, and mobility of the uterus and adnexa and differentiate them from pathological conditions. Develop the ability to correlate	K/S/C	Small group & Bedside	OSCE& CIVA	
ODO 14.2	findings from the bimanual examination with clinical symptoms to guide further diagnostic steps.		teaching	CIVA	
1 st Week Day 2					
Abnormal mer	astruation and clinical assessment.				
OBGY5.1	Correlate abnormal menstrual patterns with potential	S	Small group &	OSCE& CIVA	

	underlying gynecological and systemic conditions.		Bedside teaching	
OBGY5.2	Interpret clinical findings and diagnostic tests to guide management decisions.	C/S	Small group & Bedside teaching	OSCE& CIVA
Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessme nt Methods
Types of Contr	raceptives.			
OBGY6.1	Assess patient-specific factors to determine the most appropriate contraceptive method.	S	Small group, Bedside	OSCE %
OBGY6.2	Evaluate the benefits, risks, and contraindications of different contraceptive options in clinical practice.	S/A	teaching& Clinical skills lab	OSCE& CIVA
History taking	related to fertility disorders and clir	nical assess	sment & inves	stigations.
OBGY7.1	Conduct a detailed clinical evaluation and analyze diagnostic findings to identify underlying causes of infertility.	S	Small group & Bedside	OSCE&
OBGY7.2	Develop an appropriate investigative plan for fertility assessment.	S/A	teaching	CIVA
Clinical presen	ntation of ectopic pregnancy and man	nagement	of acute abdo	men.
OBGY8.1	Identify the clinical signs and symptoms of ectopic pregnancy and assess risk factors for timely diagnosis.	S	Small group &	OSCE&
OBGY8.2	Develop a management strategy for acute abdomen, prioritizing urgent interventions and surgical referrals when necessary.	S/A	Bedside teaching	CIVA
1st Week			Day 3	
Clinical presentation of miscarriage and management of woman with bleeding.				
OBGY9.1	Identify the clinical signs and symptoms of miscarriage and assess the severity of bleeding.	K/S/C	Small	
OBGY9.2	Formulate an appropriate management plan for a woman with bleeding, including both conservative and surgical options when necessary.	S/C/A	group & Bedside teaching	OSCE& CIVA

Clinical presen	ntation of molar pregnancy			
OBGY10.1	Recognize the clinical presentation including characteristic symptoms like abnormal bleeding and elevated hCG levels.	K/S/C	Small group & Bedside teaching	OSCE& CIVA
OBGY10.2	Develop an approach for the management of molar pregnancy, including appropriate diagnostic steps and treatment options.	K/S/C	Small group & Bedside teaching	OSCE& CIVA
Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessme nt Methods
Skills of dilata	tion and curettage.			
OBGY11.1 OBGY11.2	Perform and demonstrate the correct technique for dilation and curettage (D&C) under supervision, ensuring sterile procedures and patient safety. Recognize the indications for D&C, including incomplete miscarriage, diagnostic purposes, and managing uterine abnormalities, and understand the potential complications involved.	K/S/C	Small group, Bedside teaching& Clinical skills lab	OSCE& CIVA
Uterine fibroid	(clinical assessment and presentati	on)		
OBGY12.1	a) Elicit a focused history from a patient presenting with abnormal uterine bleeding or pelvic pain b) Perform abdominal and bimanual pelvic examination to assess uterine size, contour, mobility, and tenderness.	K/S/C	Small group, Bedside teaching& Clinical skills lab	OSCE& CIVA
OBGY12.2	Differentiate uterine fibroids from other pelvic masses through clinical assessment and imaging interpretation.			
1st Week Day 4				
How to suspec	t malignant adnexal mass and invest	tigations		
OBGY13.1	Recognize clinical signs that may indicate a malignant	K/S	Small group,	OSCE& CIVA

OBGY13.2	adnexal mass, such as pain, bloating, and irregularities in the mass characteristics. Select and interpret key diagnostic investigations, including ultrasound, CA-125, and further imaging for definitive assessment.	S/C	Bedside teaching& Clinical skills lab		
Clinical exami	nation of woman with vulval diseas	e.			
OBGY14.1	Perform a systematic clinical examination of women presenting with vulval disease, including inspection for lesions, redness, and swelling.	S/C	Small group, Bedside	OSCE&	
OBGY14.2	Identify and differentiate common vulval conditions and initiate appropriate investigations for diagnosis and management.	K/S/A	teaching& Clinical skills lab	CIVA	
Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessme nt Methods	
Clinical exami	nation of woman with vaginal disea	se			
OBGY15.1	Conduct a detailed clinical examination of women with vaginal disease, focusing on inspection, palpation, and vaginal speculum examination.	S/C	Small group, Bedside	OSCE&	
OBGY15.2	Identify common vaginal conditions and determine appropriate diagnostic steps for further evaluation.	K/S	teaching& Clinical skills lab	CIVA	
Ultrasound, x-	ray, MRI & CT scan demonstration	•			
OBGY16.1	Demonstrate the ability to interpret ultrasound, X-ray, MRI, and CT scans in diagnosing gynecological conditions.	S	Small group, Bedside	OSCE&	
OBGY16.2	Understand the clinical indications and limitations of each imaging modality for effective patient management.	K/S	teaching& Clinical skills lab	CIVA	
1st Week Day 5					
Clinical diagnosis of endometriosis & laparoscopy role					
OBGY17.1	Identify the clinical features of endometriosis, such as chronic	K/S/C	Small group,	OSCE& CIVA	

OBGY17.2	pelvic pain and painful menstruation, and differentiate it from other pelvic disorders. Understand the indications for laparoscopy in the diagnosis and treatment of endometriosis, including staging, removal of lesions, and fertility preservation.		Bedside teaching& Clinical skills lab		
	agnosis of adnexal mass and workup)	1		
OBGY18.1	Formulate a differential diagnosis for adnexal masses, considering common conditions like functional cysts, fibromas, and malignancies.	K/S	Small group,	OSCE& CIVA	
OBGY18.2	Develop an appropriate workup strategy, including imaging studies, laboratory tests, and clinical evaluation to determine the nature of the mass.	S	Bedside teaching& Clinical skills lab	OSCE& CIVA	
Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessme nt Methods	
Skill: Pap smea	ar, colposcopy and biopsy.				
OBGY19.1	Perform and interpret Pap smear and colposcopy to identify cervical abnormalities and demonstrate proficiency in guiding biopsy when needed.	S/C	Small group, Bedside teaching& Clinical skills lab	OSCE& CIVA	
OBGY19.2	Understand the indications, techniques, and interpretation of results for Pap smear, colposcopy, and cervical biopsy in the diagnosis and management of cervical pathology.	K/S	Small group, Bedside teaching& Clinical skills lab	OSCE& CIVA	
Skill: hysteroscopy and endometrial biopsy.					
OBGY20.1	Demonstrate the technique of performing hysteroscopy to visually assess the uterine cavity for abnormalities and guide biopsy when necessary.	S/C	Small group, teaching Practical learning & Clinical skills lab	OSCE& CIVA	

OBGY20.2	Understand the indications, procedures, and interpretation of endometrial biopsy for diagnosing uterine conditions malignancy Or hyperplasia.	S/A	Small group, teaching Practical learning & Clinical skills lab	OSCE& CIVA	
2nd week			Day 1		
Vaginal Discha	arge.				
OBGY21.1	Diagnose and differentiate causes of vaginal discharge by categorizing it as physiological or pathological (infective and non-infective) and identifying key clinical and diagnostic criteria.	K/S	Small group, teaching Practical learning & Clinical skills lab	OSCE& CIVA	
OBGY21.2	Formulate an evidence-based management plan for vaginal discharge by conducting a thorough history and examination, interpreting diagnostic tests, selecting appropriate treatment, and determining the need for further investigations.	S/C/A	Small group, teaching Practical learning & Clinical skills lab	OSCE& CIVA	
Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessme nt Methods	
2nd week		-	Day 2		
High Vaginal S	Swab.				
OBGY22.1	Perform and interpret HVS to diagnose common vaginal infections.	S/C	Small group, teaching Practical learning & Clinical skills lab	OSCE& CIVA	
OBGY22.2	Correlate microbiological findings with clinical symptoms to guide appropriate treatment.	S/C	Small group, teaching Practical learning & Clinical skills lab	OSCE& CIVA	
3	Slideshow and images being presented and discussed in Small Group It features a variety of clinical images and medical instruments related specifically to gynecology. The presentation aims to				

	familiarize students with real-life cases, including visual examples of common gynecological conditions, anatomical variations, and diagnostic findings. Additionally, it showcases essential tools used in gynecological exams and procedures, helping students build their clinical observation skills and prepare for practical assessments."
4	Examination
5	Examination

Pediatric



Fifth grade

This academic program provides a summary of the most important characteristics of the program and the learning outcomes expected of the student to achieve, proving whether he has made the most of the available opportunities. It is accompanied by a description of each course within the program.

40.71	
10.Educational Establishment:	University of Al-Ameed
11.Scientific Department:	College of Medicine
12.Name of the Professional Academic Program:	Modified Traditional Curriculum
13.Final Graduation Certificate:	M.B.Ch.B
14.Educational system: Annual/courses/other	Annual System
15.Approved accreditation program:	Iraqi National Guideline on Standards for Established and Accrediting Medical School
16.Other external factors:	 Availability of relevant scientific research in the field of specialization. Access to global electronic networks. Access to traditional and digital libraries Teaching aids such as data show and PowerPoint presentations Availability of equipped classrooms. Use of free online communication platforms (e.g., Free Conference Call).
17.Date the description was written:	15/9/2024

18. Academic Program Objectives:

- Provide students with foundational knowledge of gynecological physiology, pathology, and common disorders.
- Develop clinical skills for diagnosing and managing gynecological conditions through history-taking, physical examination, and diagnostic procedures.
- Train students to recognize and manage gynecological emergencies, such as ectopic pregnancy and ovarian torsion.
- Enhance students' ability to perform and interpret essential gynecological investigations, including ultrasound, Pap smears, and hormone tests.
- Strengthen communication skills to ensure effective patient counseling and shared decision-making in gynecological care.
- Promote adherence to ethical and legal principles in gynecological practice, including patient confidentiality, informed consent, and reproductive rights.
- Encourage research and evidence-based practice in gynecology to improve patient outcomes and advance medical knowledge in women's health.
- Prepare students to actively apply health promotion principles in gynecological practice by recognizing risk factors, implementing preventive strategies, and educating women about reproductive and sexual health, with the aim of reducing disease burden and improving quality of life.
- 10) The Most reliable resources for program Information:
 - Ten Teacher Textbook.

Pediatrics Grade 5

Credit:5 code: PAED504

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods			
Newborn ex	Newborn examination						
Paed1.1	Understanding key neonatal terminology and mortality rates, The lecture aims to define important	K	Large group	Short Answer Questions			
	terms related to the perinatal and neonatal periods, as well as different mortality rates.						
	This includes terms like germinal stage, embryonic period, fetal period, neonatal period, perinatal period, preterm, term, post-term, low birth weight, stillbirth, and live birth.						
Paed1.2	Performing a general examination of a healthy newborn The lecture outlines the components of a general examination of a healthy newborn. This includes assessing physical activity, skin, skull, face, eyes, nose, ears, mouth, neck, chest, lungs, heart, abdomen, genitalia, anus, and extremities.	K	Large group	Short Answer Questions			
Pre term an	d post term infant						
Paed2.1	Understanding the characteristics and common problems of preterm and post-term infants The lecture also covers the common problems associated with preterm infants, such as respiratory distress syndrome, patent ductus arteriosus, hyperbilirubinemia, and infections. Additionally, the lecture includes the common complications of postmaturity, including meconium aspiration, hypoglycemia, and polycythemia.	K	Large group	Short Answer Questions			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Paed2.2	Learning the management strategies for preterm infants The lecture provides information on the management of preterm infants, including indications for transfer to the hospital. The lecture details the importance of maintaining body temperature using incubators, feeding techniques, and prevention of infection.	K	Large group	Short Answer Questions
	HDN and NEC			
Paed3.1	a-Understanding the definitions, etiologies, and management of low birth weight (LBW), small for gestational age (SGA), and large for gestational age (LGA) newborns. b-The lecture aims to define LBW, SGA, and LGA. c-The lecture also covers the causes of LBW and the etiologies, clinical features, complications, and management of SGA and LGA newborns.	K	Large group	Short Answer Questions
Paed3.2	a-Learning about hemorrhagic disease of the newborn and necrotizing enterocolitis (NEC). b-The lecture provides information on the etiology, types, investigation, and treatment of hemorrhagic disease of the newborn. c-The lecture also details the definition, etiology, clinical features, diagnosis, treatment, prevention, and indications for surgery in cases of NEC.	K	Large group	Short Answer Questions
Birth injury				
Paed4.1	Identify the predisposing factors for mechanical trauma during birth and recognize common birth injuries.	K	Large group	Short Answer Questions
Paed4.2	Learn about specific cranial injuries (caput succedaneum, cephalhematoma, subaponeurotic hemorrhages), facial swelling/discoloration, skin issues, hemorrhages, petechiae, fractures, brachial palsy, facial nerve damage, phrenic nerve palsy, sternomastoid tumor, and spinal/spinal cord injuries.	k	Large group	Short Answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
Perinatal as	phyxia (hypoxia- ischemia)					
Paed5.1	Define Hypoxic Ischemic Encephalopathy (HIE), its systemic effects, etiology, and neuropathology.	k	Large group	Standardized short answer question		
Paed5.2	Describe the clinical features, stages, complications, diagnosis, management, and prognosis of HIE.	k	Large group	Short Answer Questions		
Neonatal re	suscitation					
Paed6.1	Understanding the definition, goals, and steps of neonatal resuscitation. The lecture aims to define neonatal resuscitation and its goals in assisting newborns with the physiological transition to extrauterine life. The lecture also covers the steps of neonatal resuscitation.	k	Large group	Short Answer Questions		
Paed6.2	Describing and interpreting the Apgar score, signs of successful ventilation, indications for endotracheal intubation, and causes of failure of initial resuscitation.	k	Large group	Short Answer Questions		
Neonatal hy	poglycaemia	1	1	'		
Paed7.1	Identify risk factors and clinical features of hypoglycemia in neonates.	K	Large group	Short Answer Questions		
Paed7.2	Describe the treatment and prevention strategies for neonatal hypoglycemia and discuss the management of infants of diabetic mothers.	K	Large group	Short Answer Questions		
Neonatal hy	vpocalcemia					
Paed8.1	Differentiate between early and late neonatal hypocalcemia, including their risk factors, clinical features, and treatment strategies.	K	Large group	Short Answer Questions		
Paed8.2	Describe the clinical signs, prevention methods, and management of hypothermia in newborn infants.	K	Large group	Short Answer Questions		
Diabetes me	Diabetes mellitus of childhood					
Paed9.1	Describe the classification, etiology, and pathophysiology of Type 1 Diabetes Mellitus (T1DM) in childhood, including the role of autoimmunity, genetic	k	Large group	Short Answer Questions		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
	susceptibility, and environmental factors in the development of the disease.					
Paed9.2	Explain the clinical presentation, diagnosis, and management of diabetic ketoacidosis (DKA), including fluid and electrolyte management, insulin therapy, and the recognition and treatment of potential complications such as cerebral edema.			Short Answer Questions		
Short statur	e					
Paed10.1	Identify the key factors influencing normal growth, differentiate between the phases of human growth, and accurately assess growth parameters in children, including height, weight, and relevant anthropometric measurements.	k	Large group	Short Answer Questions		
Paed10.2	Distinguish between short stature and growth failure, classify the causes of short stature, and describe the clinical characteristics and diagnostic approaches for various conditions presenting with short stature, including familial short stature, constitutional growth delay, idiopathic short stature, and skeletal dysplasias.	k	Large group	Short Answer Questions		
Hypothyroid						
Paed11.1	Describe the etiology, laboratory diagnosis, and clinical manifestations of congenital hypothyroidism in neonates.	k	Large group	Short Answer Questions		
Paed11.2	Discuss the importance of newborn screening for congenital hypothyroidism and explain the treatment and prognosis of the condition.	k	Large group	Short Answer Questions		
Pattern of in	Pattern of inheritance					
Paed12.1	Explain the rules of autosomal recessive inheritance and X-linked recessive inheritance.	k	Large group	Short Answer Questions		
Paed12.2	Describe the characteristics of autosomal dominant inheritance and X-linked dominant inheritance.	k	Large group	Short Answer Questions		
Genetics						

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Paed13.1	Describe the nomenclature used in karyotyping and the major types of structural chromosome abnormalities.	k	Large group	Short Answer Questions
Paed13.2	Discuss the etiology, clinical features, and diagnosis of Down syndrome and Klinefelter syndrome.	k	Large group	Short Answer Questions
Congenital	heart disease			
Paed14.1	Define congenital heart diseases (CHD), recognize their incidence and etiology, and describe their classification	k	Large group	Short Answer Questions
Paed14.2	Discuss the classification, anatomical variations, and hemodynamic features of Ventricular Septal Defects (VSD).	k	Large group	Short Answer Questions
Cyanotic Cl	HD and heart failure			
Paed15.1	Describe the common cyanotic congenital heart defects, including Tetralogy of Fallot, Transposition of the Great Arteries, and Tricuspid Atresia, with emphasis on their anatomical and physiological characteristics.	K	Large group	Short Answer Questions
Paed15.2	Discuss the causes of heart failure in children across different age groups, and outline the treatment strategies for heart failure, including general measures, medical treatment, and addressing the underlying cause.	k	Large group	Short Answer Questions
Anemia in c	children			
Paed16.1	Define anemia and describe the normal ranges of hemoglobin, hematocrit, reticulocytes, leukocytes, and differential counts at various ages	K	Large group	Short Answer Questions
Paed16.2	Discuss the etiology, clinical manifestations, and laboratory findings of megaloblastic anemia due to vitamin B12 deficiency.	K	Large group	Short Answer Questions
Aplastic and	emia			
Paed17.1	Describe the pathophysiology, clinical features, and management of aplastic anemia, including both congenital and acquired forms.	K	Large group	Short Answer Questions
Paed17.2	Discuss the classification, laboratory features, and etiology of hemolytic anemias.	K	Large group	Short Answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning	Assessment Methods				
			Methods					
	Thalassemia							
Paed18.1	Describe the different types of thalassemia syndromes, including their pathophysiology, clinical features, and laboratory diagnosis.	K	Large group	Short Answer Questions				
Paed18.2	Explain the pathophysiology, clinical manifestations, and management of sickle cell disease, including common complications and treatment strategies.	K	Large group	Short Answer Questions				
Haemolytic	anaemia							
Paed19.1	Describe the etiology, pathogenesis, and clinical features of hereditary spherocytosis and G6PD deficiency.	K	Large group	Short Answer Questions				
Paed19.2	Discuss the causes, clinical manifestations, laboratory findings, and treatment strategies for autoimmune hemolytic anemia.	k	Large group	Short Answer Questions				
Disorders of	f platelets							
Paed20.1	Describe the pathophysiology, clinical manifestations, and treatment of immune thrombocytopenic purpura (ITP), including the differences between acute and chronic ITP.	k	Large group	Short Answer Questions				
Paed20.2	Discuss the characteristic features, etiology, and management of inherited thrombocytopenias, such as Bernard-Soulier Syndrome, Wiskott-Aldrich Syndrome, and Thrombocytopenia with Absent Radii (TAR) Syndrome.	k	Large group	Short Answer Questions				
Haemostatio	c disorders							
Paed21.1	Describe the pathophysiology, clinical manifestations, and management of hemophilia A and B, including the genetic basis, diagnostic testing, and treatment options such as factor replacement and prophylaxis.	K	Large group	Short Answer Questions				
Paed21.2	Explain the etiology, clinical features, and laboratory diagnosis of von Willebrand disease (VWD), and discuss the treatment strategies for VWD, including the use of DDAVP and other therapies.	k	Large group	Short Answer Questions				
Approach	anemia in children							

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Paed22.1	Identify the main causes of anemia in children, differentiating between acute and chronic presentations, and recognize the significance of age, sex, race, and ethnicity in the diagnosis of anemia.	k	Large group	Short Answer Questions
Paed22.2	Describe the key laboratory tests used in the evaluation of anemia, including blood smear analysis, red blood cell indices, reticulocyte count, and other specialized tests like free erythrocyte protoporphyrin (FEP), and explain how these tests aid in the differential diagnosis of various anemias such as iron deficiency anemia, thalassemia, and hemolytic anemias.	k	Large group	Short Answer Questions
Approach to tendency	a child with bleeding			
Paed23.1	Identify the distinctive features of various bleeding disorders in children, including vascular causes, platelet disorders (both quantitative and qualitative), and coagulation factor deficiencies.	k	Large group	Short Answer Questions
Paed23.2	Describe the diagnostic approach to a child with a bleeding tendency, emphasizing the importance of detailed history taking, physical examination findings, and appropriate laboratory workup to differentiate between different types of bleeding disorders.	K	Large group	Short Answer Questions
leukaemia a	and lymphomas			
Paed24.1	Describe the etiology, clinical features, and diagnostic evaluation of acute leukemias, including the differentiation between acute lymphoblastic leukemia (ALL) and acute myeloblastic leukemia (AML).	k	Large group	Short Answer Questions
Paed24.2	Discuss the clinical manifestations, staging, and treatment approaches for Hodgkin lymphoma and non-Hodgkin lymphoma in children, including the prognosis and long-term outcomes	k	Large group	Short Answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
Juvenile idie	opathic arthritis				
Paed25.1	Discuss the epidemiology, etiology, and clinical manifestations of Juvenile Idiopathic Arthritis (JIA), including its different onset types and systemic involvement.	k	Large group	Short Answer Questions	
Paed25.2	Outline the diagnostic criteria, treatment strategies, and prognosis for JIA, and describe the clinical features and management of Kawasaki Disease.	k	Large group	Short Answer Questions	
Acute Post s	streptococcal GN				
Paed26.1	Describe the etiology, pathogenesis, clinical manifestations, and management of acute poststreptococcal glomerulonephritis (APSGN), including the characteristic features of the disease and its potential complications.	K	Large group	Short Answer Questions	
Paed26.2	Explain the normal kidney function, focusing on the role ofthe, glomerulus and tubules in the formation of urine and the maintenance of fluid, electrolyte, and acid-base balance.	k	Large group	Short Answer Questions	
Neonatal jai	undice				
Paed27.1	Explain bilirubin metabolism from hemoglobin breakdown to excretion, linking physiological processes to common neonatal hyperbilirubinemia causes.	k	Large group	Short Answer Questions	
Paed27.2	Given a case, differentiate jaundice types (physiological, pathological, etc.) by onset and characteristics to guide evaluation and diagnosis	k	Large group	Short Answer Questions	
Ambiguous genitalia					
Paed28.1	Differentiate between the various causes of ambiguous genitalia, including male pseudohermaphroditism (46, XY with undervirilized external genitalia), female pseudohermaphroditism (46, XX with virilized external genitalia due	k	Large group	Short Answer Questions	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
	to excess androgen exposure or congenital adrenal hyperplasia), true hermaphroditism (presence of both ovarian and testicular tissue), and intersex conditions (e.g., mosaic karyotypes like XO/XX), detailing the underlying genetic and hormonal etiologies for each.				
Paed28.2 STRUCTUE	Describe the key steps in the evaluation and initial management of a newborn with ambiguous genitalia, including the importance of determining the karyotype, assessing for potential underlying disorders of sex development (DSD), and differentiating between life threatening conditions (such as congenital adrenal hyperplasia causing salt-wasting crisis)	k	Large group	Short Answer Questions	
DISORDER		ı	ı		
Paed29.1	Understand the fundamentals of karyotyping and chromosomal nomenclature, including how to describe a normal karyotype and identify common numerical and structural chromosomal abnormalities such as trisomies, monosomies, deletions, and translocations.	k	Large group	Short Answer Questions	
Paed29.2	Describe the etiology, clinical features, and inheritance patterns of selected structural chromosomal disorders, specifically focusing on Down syndrome (including the role of trisomy 21 and translocation Down syndrome), Turner syndrome (including karyotype variations and associated clinical manifestations in females), and Klinefelter syndrome (including the common 47, XXY karyotype and its impact on male development and fertility).	k	Large group	Short Answer Questions	
NEPHROTIC SYNDROME					
Paed30.1	Explain the pathophysiology of nephrotic syndrome, detailing the mechanisms leading to proteinuria (including transient, orthostatic, and persistent types), hypoalbuminemia,	k	Large group	Short Answer Questions	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	edema formation, and hyperlipidemia, and discuss the clinical consequences of these key features.			
Paed30.2	Interpret the investigations and diagnostic studies used in the evaluation of nephrotic syndrome, including the definition of proteinuria, and differentiate between the various causes of nephrotic syndrome, including primary glomerular diseases (such as Minimal Change Nephrotic Syndrome) and secondary causes like congenital nephrotic syndrome.	k	Large group	Short Answer Questions
Hemolytic u	remic syndrome			
Paed31.1	Describe the etiology, pathogenesis, clinical manifestations, and complications of hemolytic uremic syndrome (HUS), with a focus on differentiating between diarrhea-associated (typical) HUS and non-diarrhea-associated (atypical) HUS.	K	Large group	Short Answer Questions
Paed31.2	Outline the management strategies for HUS, including supportive care, addressing fluid and electrolyte imbalances, and discussing the role of dialysis, blood transfusions, and other therapies while emphasizing the importance of avoiding antibiotic use in STEC-HUS.	k	Large group	Short Answer Questions
VUR				
Paed32.1	Describe the different grades of vesicoureteral reflux (VUR) and explain how VUR contributes to the pathogenesis of urinary tract infections (UTIs) and potential renal damage in children.	K	Large group	Short Answer Questions
Paed32.2	Outline the diagnostic approach for VUR, including the role of renal ultrasonography and voiding cystourethrography (VCUG), and discuss the treatment strategies for VUR, differentiating between medical management with prophylactic antibiotics and surgical interventions.	k	Large group	Short Answer Questions
Heart failure				

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Paed33.1	Understand the causes of heart failure in different pediatric age groups, including congenital heart defects, acquired heart diseases like myocarditis and Kawasaki disease, and other conditions leading to heart failure in children.	k	Large group	Short Answer Questions
Paed33.2	Describe the treatment strategies for heart failure in children, encompassing general management, medical therapies including diuretics, afterload-reducing agents, inotropic agents, and addressing the underlying causes of heart failure.	k	Large group	Short Answer Questions
Pedigree				
Paed34.1	Interpret pedigree symbols and patterns to determine family relationships and recognize the proband, affected individuals, carriers, and homozygous/heterozygous status within a pedigree chart.	k	Large group	Short Answer Questions
Paed34.2	Differentiate between the characteristics and inheritance patterns of autosomal recessive, autosomal dominant, and X-linked dominant disorders, including predicting the likelihood of disease transmission to offspring based on these inheritance patterns.	k	Large group	Short Answer Questions
Metabolic d	lisorder			
Paed35.1	Describe the clinical features and laboratory findings associated with galactosemia and phenylketonuria. The lecture includes details on the clinical presentation of infants with galactosemia, such as jaundice, vomiting, hepatomegaly, and failure to thrive. It also details the typical presentation of phenylketonuria, along with the complications of the disease. In addition, the text lists laboratory findings for both conditions, such as increased plasma galactose and reduced enzyme activity in galactosemia, and elevated phenylalanine concentrations in phenylketonuria	k	Large group	Short Answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
Paed35.2	Outline the treatment and management strategies for galactosemia and phenylketonuria, including dietary modifications and monitoring. The lecture notes specify treatment options for both conditions, such as the elimination of dietary galactose for galactosemia and phenylalanine-restricted diets for phenylketonuria. It also mentions the importance of monitoring for and managing later problems that develop in patients with galactosemia, such as neurodevelopmental impairment, cataracts, growth delay, and premature ovarian failure.	k	Large group	Short Answer Questions		
Urinary trac	Urinary tract infections					
Paed36.1	Discuss the etiology, pathophysiology, and risk factors associated with urinary tract infections (UTIs) in children.	K	Large group	Short Answer Questions		
Paed36.2	Explain the classification, diagnosis, and treatment of vesicoureteral reflux (VUR) in pediatric patients	K	Large group	Short Answer Questions		

5th year practical

	Date	Time	Topics	Objectives
	Saturday	8:00-11:00 am	Pediatric History (H)	Short note about History taking
1 ^{st week}	Sunday	8:00-11:00 am	Pediatric Examination (EX)	General examination, Vital signs & Growth charts
	Monday	8:00 –11:00 am	Respiratory system (H&EX)	Approach to Pneumonia and Asthma
	Tuesday	8:00 –11:00 am	Respiratory system (H&EX)	Approach to Stridor and Bronchiolitis
	Wednesday	8:00-11:00 am	CVS (H&EX)	Approach to CHD & H.F
	Date	Time	Topics	Objectives
	Saturday	8:00-11:00 am	Pediatric History (H)	Short note about History taking
2 st week	Sunday	8:00-11:00 am	Pediatric Examination (EX)	General examination, Vital signs & Growth charts
	Monday	8:00-11:00 am	Respiratory system (H&EX)	Approach to Pneumonia and Asthma
	Tuesday	8:00-11:00 am	Respiratory system (H&EX)	Approach to Stridor and Bronchiolitis
	Wednesday	8:00-11:00 am	CVS (H&EX)	Approach to CHD & H.F

Psychiatry



Fifth grade

Academic program discretion

This academic program description provides a brief overview of the key features of the program and the expected learning outcomes for the student, demonstrating whether the student has made the most of the available opportunities. It is accompanied by a description of each course within the program.

1-Educational Establishment	University of al-ameed		
2-Scientific Department	College of medicine		
3-Name of the Professional Academic Program.	Modified traditional curriculum		
4-Final Graduation Certificate	M.B.Ch.B		
5- Educational system: Annual/courses/other	Annual		
6-Approved accreditation program	Applied for Iraqi National Guideline on Standards for Established and Accrediting Medical School		
7-Other external factors	 Availability of relevant scientific research in the field of specialization Access to global electronic networks Access to traditional and digital libraries Teaching aids such as data show and PowerPoint presentations Availability of equipped classrooms Use of free online communication platforms (e.g., Free Conference Call) 		
	2024/9/15		

8-Date the description was written

9- objectives of academic program

- 1.To provide students with essential knowledge, clinical skills, and professional attitudes in the field of Psychiatry.
- 2. To prepare students to identify, diagnose, and manage common psychiatric disorders within ethical and professional frameworks.
- 3. To enhance students' ability to integrate psychiatric care into general medical practice and contribute to public mental health awareness.

Key Information Sources About the Program

KAPLAN & SADOCKS SYNOPSIS Of

PSYCHIATRY, 2021, 12th edition

Psychiatry \ Grade 5

Code: PSYC 505 4 Credits

Number	Learning Objective	Domain	Teaching Learning Methods	Assessment Methods	
1. Introduction aetiology of psychiatry					
	I	1	T .		
PSYC1.1	Define psychiatry and explain its scope and role in modern medical practice	K	Large group lecture, outpatient clinic, bedside teaching	MCQ, short answer question, Long case	
PSYC 1.2	Describe the main etiological factors of mental illness (biological, psychological, and social)	K	Large group lecture, bedside teaching	MCQ, short answer question, Long case	
PSYC1.3	Recognize the major psychiatric classification systems (DSM-5, ICD-10) and their clinical application	K	Large group Lecture, outpatient clinic	MCQ, short answer question	
PSYC 1.4	Appreciate the ethical principles and historical development of psychiatric care Health promotion: promoting mental health literacy by educating the public on common causes of mental illness and reducing stigma through community workshops	A	Bedside teaching,,outpatient exposure	short answer question, Long case	
Generalized	Anxiety Disorder (GAD)				
PSYC2.1	Define Generalized Anxiety Disorder (GAD) and its diagnostic criteria	K	Large group Lecture, outpatient clinic, bedside teaching	MCQ, short answer question	
PSYC 2.2	Describe the clinical features and course of GAD	K/S	Bedside teaching,	Long case, short answer question	
PSYC2.3	Develop a basic management plan for patients with GAD (pharmacologic and psychologic)	S/C	outpatient clinic	Long case, short answer question	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
PSYC 2.4	Distinguish GAD from other anxiety and mood disorders Health promotion: teaching stress management techniques and early coping strategies to reduce the risk of chronic	K/S	bedside teaching	MCQ, short answer question
Anxiety Disc	orders - Panic and Phobic Disorders			
PSYC3.1	Define panic disorder and specific phobias, and recognize their diagnostic criteria	K	Large group Lecture, outpatient clinic, bedside teaching	MCQ, short answer question
PSYC 3.2	Identify typical symptoms of panic attacks and common phobic triggers	K/S	bedside teaching	short answer question
PSYC3.3	Outline acute and long-term management strategies for panic and phobic disorders	S/C	outpatient clinic	Long case, short answer question
PSYC 3.4	Differentiate between panic disorder, GAD, and agoraphobia Health promotion: p romoting awareness campaigns to help individuals recognize panic symptoms and seek timely professional help professional help	K/S	bedside teaching	MCQ, short answer question
Mood Disord	ders – Major Depressive Disorder & Dys	sthymia		
PSYC4.1	Define major depressive disorder and dysthymia, including DSM-5 criteria	K	Large group Lecture, outpatient clinic	MCQ, short answer question
PSYC 4.2	Recognize symptoms and signs of depression, including atypical and masked depression	K/S	Bedside teaching	Long case, short answer question
PSYC4.3	Describe risk factors, prognosis, and complications of untreated depression	K	outpatient clinic	MCQ, short answer question

		Domain	Teaching Learning	Assessment
Number	Learning Objective	K/S/A/C	Methods	Methods
PSYC 4.4	Formulate a treatment plan for major depression and dysthymia (medications + therapy) Health promotion: mplementing school and workplace programs that encourage early identification of depressive symptoms and seeking therapy.	S/C	Outpatient clinic	Long case, short answer question
Mood Disord	lers – Cyclothymic Disorder, Bipolar Di	isorder Type	e 1 & Type 2	
PSYC5.1	Define bipolar I, II, and cyclothymic disorder and understand their diagnostic criteria	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 5.2	Differentiate bipolar disorders from unipolar depression and other mood disorders	K/S	Bedside teaching	MCQ, Long case
PSYC5.3	Identify manic and hypomanic symptoms, and phases of bipolar illness	K/S	Outpatient Clinic	Long case, short answer question
PSYC 5.4	Outline pharmacologic and non- pharmacologic treatment plans for mood stabilization Health promotion: Educating families and patients about mood monitoring and the importance of medication adherence to prevent relapses	S/C	Large group lecture, outpatient clinic	Long case, MCQ
Obsessive-Co	ompulsive Disorder (OCD) and Related	Disorders		
PSYC6.1	Define OCD and related disorders (body dysmorphic, hoarding, trichotillomania, etc.)	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 6.2	Recognize obsessions and compulsions in clinical scenarios	K/S	Bedside teaching	short answer question, Long case
PSYC6.3	Discuss the etiology, course, and prognosis of OCD	K	Large group lecture	MCQ, short answer question

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
PSYC 6.4	Design treatment strategies including CBT and pharmacotherapy for OCD Health promotion: Promoting early intervention and cognitive-behavioral therapy education to manage compulsive behaviors effectively	S/C	Large group lecture, outpatient clinic	Long case, short answer question
Trauma and	Stress-Related Disorders (Acute Stress I	Disorder and	d PTSD)	
PSYC7.1	Define acute stress disorder and post-traumatic stress disorder (PTSD) and understand diagnostic criteria	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 7.2	Recognize clinical features, symptoms, and course of acute stress disorder and PTSD	K/S	Bedside teaching	Long case, short answer question
PSYC7.3	Explain risk factors and psychological impact of trauma	K	Large group lecture	MCQ, short answer question
PSYC 7.4	Outline evidence-based treatment approaches including psychotherapy and pharmacotherapy	S/C	outpatient clinic	Long case, short answer question
Somatic Sym	nptom & Related Disorders			
PSYC8.1	Define somatic symptom disorders and understand diagnostic criteria	K	Large group lecture, outpatient clinic	MCQ short answer question
PSYC 8.2	Recognize clinical features and differentiate from other psychiatric and medical disorders	K/S	Bedside teaching	Long case, short answer question
PSYC8.3	Discuss etiology, course, and impact on patient's life	K	Lecture, group discussion	MCQ, short answer question
PSYC 8.4	Describe treatment approaches including psychotherapy and medication	S/C	outpatient clinic	Long case, short answer question
Schizophreni	ia			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
PSYC9.1	Define schizophrenia and understand its diagnostic criteria	K/S/A/C K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 9.2	Recognize positive, negative, and cognitive symptoms	K/S	Bedside teaching	Long case, short answer question
PSYC9.3	Explain pathophysiology, epidemiology, and course of schizophrenia	K	Large group lecture	MCQ, short answer question
PSYC 9.4	Discuss pharmacologic and psychosocial treatment strategies	S/C	outpatient clinic	Long case, SAQ
Schizophreni	a Related Disorders			
PSYC10.1	Identify schizoaffective disorder, schizophreniform disorder, and brief psychotic disorder	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 10.2	Differentiate these disorders from schizophrenia and mood disorders	K/S	Bedside teaching	Long case, short answer question
PSYC10.3	Understand clinical features and prognosis	K	Large group lecture	MCQ, short answer question
PSYC 10.4	Outline treatment approaches specific to these disorders	S/C	Large group lecture, outpatient clinic	Long case, short answer question
Suicide and	Deliberate Self-Harm			
PSYC11.1	Understand epidemiology, risk factors, and warning signs of suicide and deliberate self-harm	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 11.2	Recognize clinical presentations and assessment tools	K/S	Bedside teaching	Long case, short answer question
PSYC11.3	Discuss prevention strategies and management plans	K/S/C	Large group lecture, outpatient clinic	Long case, short answer question
PSYC 11.4	Understand medico-legal and ethical considerations	K	Large group lecture, outpatient clinic	MCQ, short answer question

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Personality I	Disorders			
PSYC12.1	Define personality disorders and diagnostic criteria	К	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 12.2	Identify major types of personality disorders and clinical features	K/S	Bedside teaching	Long case, short answer question
PSYC12.3	Discuss etiology and pathophysiology	K	Large group lecture	MCQ, short answer question
PSYC 12.4	Explain treatment options including psychotherapy and pharmacotherapy	S/C	outpatient clinic	Long case, short answer question
Women Psyc	hiatry			
PSYC13.1	Understand psychiatric disorders specific to women	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 13.2	Discuss reproductive mental health, perinatal psychiatry, and menopause-related issues	K/S	Bedside teaching	Long case, short answer question
PSYC13.3	Explain psychosocial and cultural factors influencing women's mental health	K	Large group lecture	MCQ, short answer question
PSYC 13.4	Outline management strategies and multidisciplinary approaches	S/C	outpatient clinic	Long case, short answer question
Children Psychiatry 2 (Intellectual Disorder)				
PSYC14.1	Define intellectual disability and diagnostic criteria	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 14.2	Identify levels of severity and clinical presentation	K/S	Bedside teaching	Long case, short answer question

N 1	T. COLL II	Domain	Teaching Learning	Assessment
Number	Learning Objective	K/S/A/C	Methods	Methods
PSYC14.3	Understand etiological factors and developmental impact	K	Large group lecture	MCQ, short answer question
PSYC 14.4	Describe management and educational interventions Health promotion: Advocating for inclusive education and public support programs for children with cognitive delays	S/C	outpatient clinic	Long case, short answer question
Substance U	se Disorder			
PSYC15.1	Define substance use disorders and diagnostic criteria	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 15.2	Recognize clinical features and complications	K/S	Bedside teaching	Long case, short answer question
PSYC15.3	Explain pathophysiology and social impact	K	Large group lectur	MCQ, short answer question
PSYC 15.4	Discuss treatment approaches including detoxification, rehabilitation, and relapse prevention Health promotion: running youth-targeted campaigns on the risks of substance use and availability of rehabilitation programs	S/C	outpatient clinic	Long case, short answer question
Dissociative	Disorder			
PSYC16.1	Define dissociative disorders and diagnostic criteria	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 16.2	Recognize clinical presentations and differentiate from other psychiatric disorders	K/S	Bedside teaching,	Long case, short answer question
PSYC16.3	Understand etiological theories and psychological mechanisms	K	Large group lecture	MCQ, short answer question

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
PSYC 16.4	Outline treatment options including psychotherapy	S/C	outpatient clinic	Long case, short answer question
Eating Disor	der			
PSYC17.1	Define anorexia nervosa, bulimia nervosa, and other eating disorders	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 17.2	Recognize clinical features and complications	K/S	Bedside teaching	Long case, short answer question
PSYC17.3	Discuss etiology and psychosocial factors	K	Large group lectur	MCQ, short answer question
PSYC 17.4	Explain treatment strategies including nutritional rehabilitation and psychotherapy	S/C	outpatient clinic	Long case, short answer question
Organic Psyc	chiatry (Delirium, Dementia)			
PSYC 18.1	Define delirium and dementia and their diagnostic criteria	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 18.2	Recognize clinical features and differentiate from psychiatric disorders	K/S	Bedside teaching	Long case, short answer question
PSYC 18.3	Explain pathophysiology and common causes	K	Large group lectur	MCQ, short answer question
PSYC 18.4	Discuss management approaches including pharmacologic and supportive care	S/C	outpatient clinic	Long case, short answer question
Sleep Disorders				
PSYC 19.1	Define common sleep disorders and diagnostic criteria	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 19.2	Recognize clinical features and impact on health	K/S	Bedside teaching	Long case, short

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				answer question
PSYC 19.3	Understand pathophysiology and contributing factors	K	Large group lectur	MCQ, short answer question
PSYC 19.4	Describe treatment options including behavioral therapy and medications	S/C	Large group lectur	Long case, short answer question
Treatment in	Psychiatry			
PSYC 20.1	Understand principles of psychiatric treatment	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 20.2	Discuss pharmacologic and non- pharmacologic therapies	K/S	Bedside teaching	Long case, short answer question
PSYC 20.3	Explain patient monitoring and side effect management	K/S	Bedside teaching	MCQ, short answer question
PSYC 20.4	Describe multidisciplinary team roles in psychiatric care	S/C	Bedside teaching	Long case, short answer question
Psychiatric E	Emergencies			
PSYC 21.1	Identify common psychiatric emergencies and presentation	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 21.2	Learn immediate management and stabilization techniques	K/S	Bedside teaching	Long case, short answer question
PSYC 21.3	Understand legal and ethical issues in emergencies	K	Large group lecture	MCQ, short answer question
PSYC 21.4	Develop skills in crisis intervention and patient communication	S/C	Large group lecture	Long case, short answer question
Legal Issues	in Psychiatry			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
PSYC 22.1	Understand mental health laws and patient rights	K	Large group lecture	MCQ, short answer question
PSYC 22.2	Learn legal responsibilities of psychiatrists	K	Large group lecture	MCQ, short answer question
PSYC 22.3	Discuss confidentiality, consent, and involuntary admission	K/S	Large group lecture	Long case, short answer question
PSYC 22.4	Apply legal knowledge in clinical psychiatric practice	S/C	outpatient clinic	Long case, short answer question
Disruptive, I	mpulse Control and Conduct Disorders			
PSYC 23.1	Define disruptive, impulse control and conduct disorders	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 23.2	Recognize clinical features and differential diagnoses	K/S	Bedside teaching	Long case, short answer question
PSYC 23.3	Understand etiological factors and course	K	Large group lecture	MCQ, short answer question
PSYC 23.4	Discuss management and treatment options	S/C	Large group lecture outpatient clinic	Long case, short answer question
Sexual Disor	ders			
PSYC 24.1	Define common sexual disorders and diagnostic criteria	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 24.2	Recognize clinical features and differentiate types of sexual dysfunction	K/S	Bedside teaching	Long case, SAQ
PSYC 24.3	Discuss psychological, biological, and social etiologies	K	Large group lecture	MCQ, short answer question
PSYC 24.4	Explain management approaches including counseling, pharmacotherapy, and behavioral therapy	S/C	Outpatient clinic	MCQ, short answer question

Number	Learning Objective	Domain	Teaching Learning	Assessment		
		K/S/A/C	Methods	Methods		
Social Treatm	Social Treatment and Prevention					
PSYC 25.1	Understand the role of social factors	K	Large group lecture, outpatient	MCQ, short		
	in mental health	K	clinic	question		
PSYC 25.2	Discuss community-based mental			MCQ, short		
	health programs and preventive	K	Large group lecture	answer		
PSYC 25.3	strategies			question MCQ, short		
1510 23.3	Explain stigma, mental health advocacy, and public education	K	Large group lecture	answer question		
PSYC 25.4	Describe multidisciplinary		Large group	Long case,		
	approaches to social treatment and	S/C		short		
	prevention		clinic	answer		
	-			question		
Children Psy	chiatry 1 (Autism, ADHD)					
PSYC 26.1	Define autism spectrum disorder and		Large group	MCQ, short		
	ADHD	K	lecture, outpatient	answer		
DOVO 26 2			clinic	question		
PSYC 26.2	December eliminal factures and		Dadaida taaahina	Long case,		
	Recognize clinical features and diagnostic criteria	K/S	Bedside teaching, Large group lecture	answer		
	diagnostic criteria		Large group recture	question		
PSYC 26.3	Discuss etiology and developmental			MCQ, short		
	impact	K	Large group lecture	answer		
DCVC 2C 4	r		т	question		
PSYC 26.4	Explain treatment and behavioral interventions	S/C	Large group lecture, outpatient clinic	Long case, SAQ		

Practical

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Psychiatric I	listory Taking			
PSYC1.1	 a) Learn how to collect sociodemographic data. b) Take history of present illness (chief complaint, symptoms). c) Cover anxiety symptoms, mood symptoms, psychotic symptoms, PTSD, OCD. d) Observe patients and practice history taking under supervision. 	K/S	outpatient clinic, bedside teaching	Long case
Mental Statu	s Examination (MSE			
PSYC2.1	 a) Learn components of MSE: Appearance, Behavior, Speech, Mood, Thought process, Perception, Cognition, Insight, and Judgment. b) Observe real patients and practice applying MSE. 	K/S	outpatient clinic, bedside teaching	Long case
Anxiety Disc	orders			
PSYC3.1	 a) Discuss Generalized Anxiety Disorder, Panic Disorder, Phobias, OCD. b) Observe clinical cases with anxiety symptoms. c) Learn about management and treatment options. 	K/S	outpatient clinic, bedside teaching	Long case
Mood Disorders				
PSYC3.1	a) Discuss Depression, Bipolar Disorder.b) Observe clinical features of mood disorders.	K/S	outpatient clinic, bedside teaching	Long case

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	c) Practice differentiating between depressive and manic episodes.			
Psychotic Di	sorders			
PSYC5.1	 A. Discuss Schizophrenia, Schizoaffective Disorder, Delusional Disorder. B. Observe cases in the clinic. C. Learn about antipsychotic medications and side effects 	K/S	outpatient clinic, bedside teaching	Long case
Substance U	se Disorders			
PSYC6.1	 A. Discuss Alcohol Use Disorder, Drug Addiction. B. Observe and practice history taking regarding substance use. C. Learn about withdrawal symptoms and management. 	K/S	outpatient clinic, bedside teaching	Long case
Personality I	Disorders			
PSYC7.1	 A. Discuss Cluster A, B, and C Personality Disorders. B. Identify clinical characteristics of each type. C. Case discussions and observation. 	K/S	outpatient clinic, bedside teaching	Long case
Childhood P	sychiatric Disorders			
PSYC8.1	 A. Discuss ADHD, Autism Spectrum Disorder, Conduct Disorder. B. Observe pediatric psychiatric cases. C. 3. Learn about behavioral therapy approaches 	K/S	outpatient clinic, bedside teaching	Long case
Risk Assessment + Suicide Prevention				
PSYC9.1	 A. Learn risk assessment skills for suicide and violence. B. Practice assessing suicidal ideation and risk factors. C. Observe patient interviews related to risk assessment. 	K/S	outpatient clinic, bedside teaching	Long case

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Final Clinica	l Exam (Long Case)			
PSYC10.1	A. Perform a full psychiatric assessment on a patient.B. Present history taking, mental status examination, diagnosis, and management plan.	K/S	outpatient clinic , bedside teaching	Long case

DERMATOLOGY



Fifth grade

demonstrating whether the student has made the most of the available opportunities. It is accompanied by a description of each course within the program.

1-Educational Establishment	University of al-ameed
2-Scientific Department	College of medicine
3-Name of the Professional Academic Program.	Modified traditional curriculum
4-Final Graduation Certificate	M.B.Ch.B
5- Educational system: Annual/courses/other	Annual
6-Approved accreditation program	Applied for Iraqi National Guideline on Standards for Established and Accrediting Medical School
7-Other external factors	 Availability of relevant scientific research in the field of specialization Access to global electronic networks Access to traditional and digital libraries Teaching aids such as data show and PowerPoint presentations Availability of equipped classrooms Use of free online communication platforms (e.g., Free Conference Call)
8-Date the description was written	2024/9/15
9- objectives of academic program	n

- 1.To provide students with essential knowledge, skills, and professional attitudes required for the diagnosis, management, and prevention of skin diseases.
- 2.To prepare students to identify dermatological conditions and their systemic associations within a holistic and ethical medical practice.
- 3.To enable students to integrate dermatological knowledge into clinical decision-making and patient care in Iraq's healthcare context and beyond.

10- The most reliable resources for program information are:

Clinical dermatology by John Hunter, third addition

Davidson essential

Bolonia text book of dermatology

DERMATOLOGY \ Grade 5

Code: DERM 206 3 Credits

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Histology & S	Skin Lesions			
DERM1.1	Describe the normal histological layers of the skin	K	Large group lecture	MCQ, Short answer question
DERM1.2	Explain the physiological functions of the skin (barrier, thermoregulation, sensation)	K	Large group lecture	MCQ
DERM1.3	Identify different types of skin lesions clinically and histologically	S	Large group lecture, Outpatient clinic	CIVA, Short answer question
DERM1.4	Differentiate between primary and secondary skin lesions Health Promotion: Promote understanding of skin structure and function to empower individuals in recognizing abnormal lesions early and seeking timely medical care	K	Large group lecture	MCQ, Short answer question
Bacterial Skir	Infections			
DERM2.1	List common bacterial pathogens causing skin infections	K	Lecture	MCQ
DERM2.2	Describe clinical features of impetigo, cellulitis, and erysipelas	K	Lecture, Outpatient clinic	MCQ, CIVA
DERM2.3	Outline basic management strategies for bacterial skin infections	K	Lecture	Short answer question
DERM2.4	Identify bacterial infections on clinical exam or images Health Promotion: Improve public hygiene practices and awareness of bacterial skin infection signs to reduce infection rates and prevent antibiotic misuse.	S	Outpatient clinic	CIVA
Mycobacteria	l Skin Diseases			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
DERM3.1	Recognize cutaneous manifestations of tuberculosis and leprosy	K	Lecture	MCQ
DERM3.2	Differentiate between tuberculoid and lepromatous leprosy	K	Lecture	MCQ
DERM3.3	Describe diagnostic methods used for skin TB and leprosy Health Promotion: Raise awareness of rare mycobacterial infections through targeted education, especially in endemic or immunocompromised populations, to encourage early diagnosis and reduce spread.	K	Lecture	Short answer question
Viral Skin Inf	ections			
DERM4.1	Identify clinical features of common viral skin infections (HSV, VZV, HPV, molluscum)	K	Lecture, Outpatient clinic	MCQ, CIVA
DERM4.2	Discuss diagnostic and treatment options	K	Lecture	Short answer question
DERM4.3	Interpret viral skin lesion images	S	Outpatient clinic	CIVA
DERM4.4	Identify clinical features of common viral skin infections (HSV, VZV, HPV, molluscum) Health Promotion: Promote vaccination, hygiene, and informed recognition of viral skin conditions to reduce transmission and improve community health outcomes.	K	Lecture, Outpatient clinic	MCQ, CIVA
Viral Skin Inf	ections			
DERM5.1	Identify clinical features of common viral skin infections (HSV, VZV, HPV, molluscum)	K	Lecture, Outpatient clinic	MCQ, CIVA
DERM5.2	Discuss diagnostic and treatment options	K	Lecture	Short answer question
DERM5.3	Interpret viral skin lesion images	S	Outpatient clinic	CIVA
Parasitic Skin	Infections			
DERM6.1	List common parasitic skin infections (scabies, cutaneous leishmaniasis)	K	Lecture	MCQ
DERM6.2	Recognize typical clinical findings	S	Outpatient clinic	CIVA
DERM6.3	Describe basic management strategies Health Promotion: Encourage early	K	Lecture	Short answer

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	recognition and treatment of parasitic skin diseases to prevent community outbreaks and reduce stigma associated with infestations.			question
Dermatitis				
DERM7.1	Define and classify types of dermatitis (atopic, contact, seborrheic)	K	Large group lecture	MCQ
DERM7.2	Recognize clinical signs and distribution of dermatitis	S	Outpatient clinic	CIVA
DERM7.3	Explain treatment principles and prevention strategies	K	Large group lecture	Short answer question
DERM7.4	Differentiate between types of dermatitis based on clinical exam	S	Outpatient clinic	CIVA
	Health Promotion: Support awareness of dermatitis triggers and skin barrier care through lifestyle guidance and allergen avoidance education.			
Papulosquan	nous Skin Disorders			
DERM8.1	List papulosquamous diseases (psoriasis, lichen planus, pityriasis)	K	Large group lecture	MCQ
DERM8.2	Differentiate clinically between these disorders	S	Outpatient clinic	CIVA
DERM8.3	Explain treatment options and patient follow-up	K	Large group lecture	Short answer question
DERM8.4	Identify diagnostic clinical signs Health Promotion: Improve patient understanding of chronic conditions like psoriasis through education to reduce stigma and promote long-term management.	S	Outpatient clinic	CIVA
Pilosebaceou	s Disorders			
DERM9.1	Explain the physiology of pilosebaceous disorders such as acne	K	Large group lecture	MCQ
DERM9.2	Recognize types and severity of acne	S	Outpatient clinic	CIVA
DERM9.3	Describe treatment plans for acne	K	Large group lecture	Short answer question
DERM9.4	Differentiate acne from other similar conditions	S	Outpatient clinic	CIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	Health Promotion: Promote accurate knowledge and skin-care practices to reduce acne complications and combat misinformation, especially among adolescents.			
Bullous Disea	ases			
DERM10.1	List autoimmune bullous diseases (pemphigus, bullous pemphigoid)	K	Large group lecture	MCQ
DERM10.2	Recognize clinical signs like Nikolsky's sign	S	Outpatient clinic	CIVA
DERM10.3	Explain diagnostic tools (biopsy, immunofluorescence)	K	Large group lecture	Short answer question
DERM10.4	Interpret diagnostic test results Health Promotion: Educate on the severity of autoimmune blistering diseases to promote early healthcare- seeking behavior and prevent life- threatening complications.	K	Large group lecture	Short answer question
Urticaria and	Drug Eruptions			
DERM11.1	Explain immunological basis of urticaria and drug reactions	K	Large group lecture	MCQ
DERM11.2	Recognize clinical patterns of urticaria and fixed drug eruptions	S	Outpatient clinic	CIVA
DERM11.3	Describe acute and chronic treatment approaches	K	Large group lecture	Short answer question
DERM11.4	Differentiate drug eruptions from other skin rashes Health Promotion: Increase awareness about triggers of urticaria and the importance of documenting drug allergies to prevent recurrence and improve safety.	S	Outpatient clinic	CIVA
Sexually Tran	asmitted Diseases (STDs			
DERM12.1	List common sexually transmitted infections affecting the skin	K	Large group lecture	MCQ
DERM12.2	Describe clinical manifestations of common STDs (syphilis, herpes, HPV)	S	Outpatient clinic	CIVA
DERM12.3	Explain diagnostic approaches and laboratory tests for STDs	K	Large group lecture	Short answer question
DERM12.4	Outline treatment protocols and prevention strategies	K	Large group lecture	Short answer

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	Health Promotion: Promote safe sex practices and STI screening to reduce transmission of sexually-associated skin conditions and lower community risk.			question
Pruritis and D	Diseases due to Physical Agents			
DERM13.1	Define pruritis and identify its causes	K	Large group lecture	MCQ
DERM13.2	Recognize skin diseases caused by physical agents (heat, cold, radiation)	S	Outpatient clinic	CIVA
DERM13.3	Describe mechanisms of pruritis and related skin responses	K	Large group lecture	Short answer question
DERM13.4	Explain management of pruritis and physical agent-related skin diseases Health Promotion: Enhance public understanding of chronic itch causes and environmental factors to reduce unnecessary suffering and promote medical consultation.	K	Large group lecture	Short answer question
Dermatologic	al Emergencies			
DERM14.1	List common dermatological emergencies (Stevens-Johnson syndrome, toxic epidermal necrolysis)	K	Large group lecture	MCQ
DERM14.2	Identify clinical signs and symptoms requiring urgent care	S	Outpatient clinic	CIVA
DERM14.3	Explain immediate management principles	K	Large group lecture	Short answer question
DERM14.4	Discuss complications and prognosis Health Promotion: Raise awareness about signs of skin emergencies to encourage urgent medical care and prevent severe health outcomes.	K	Large group lecture	Short answer question
Hair Disorder	S			
DERM15.1	Describe common hair disorders (alopecia, hirsutism)	K	Large group lecture	MCQ
DERM15.2	Recognize clinical patterns of hair loss and growth abnormalities	S	Outpatient clinic	CIVA
DERM15.3	Explain diagnostic evaluation and tests for hair disorders	K	Large group lecture	Short answer question
DERM15.4	Outline treatment options for hair disorders	K	Large group lecture	Short answer question

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
Nail Disorders					
DERM16.1	List common nail disorders and their causes	K	Large group lecture	MCQ	
DERM16.2	Identify clinical features of nail diseases (onychomycosis, psoriasis)	S	Outpatient clinic	CIVA	
DERM16.3	Describe diagnostic methods for nail disorders	K	Large group lecture	Short answer question	
DERM16.4	Explain treatment strategies for nail diseases	K	Large group lecture	Short answer question	
17. Vasculitis					
DERM17.1	Define vasculitis and classify types affecting the skin	K	Large group lecture	MCQ	
DERM17.2	Recognize clinical presentations of cutaneous vasculitis	S	Outpatient clinic	CIVA	
DERM17.3	Explain diagnostic investigations (biopsy, lab tests)	K	Large group lecture	Short answer question	
DERM17.4	Describe treatment options and prognosis	K	Large group lecture	Short answer question	
Skin and Syst	emic Diseases				
DERM18.1	List systemic diseases with skin manifestations (lupus, diabetes)	K	Large group lecture	MCQ	
DERM18.2	Identify skin signs that suggest systemic disease	S	Outpatient clinic	CIVA	
DERM18.3	Explain pathophysiology linking skin and systemic disorders	K	Large group lecture	Short answer question	
DERM18.4	Outline management strategies for skin symptoms in systemic diseases	K	Large group lecture	Short answer question	
Tumors of the	e Skin				
DERM19.1	Differentiate benign and malignant skin tumors	K	Large group lecture	MCQ	
DERM19.2	Recognize clinical features of common skin tumors (BCC, SCC, melanoma)	S	Outpatient clinic	CIVA	
DERM19.3	Describe diagnostic workup including biopsy and imaging	K	Large group lecture	Short answer question	
DERM19.4	Explain treatment modalities and	K	Large group	Short	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	prognosis		lecture	answer question
Pigmentary D	isorders			
DERM20.1	List common pigmentary disorders (vitiligo, melasma, albinism)	K	Large group lecture	MCQ
DERM20.2	Recognize clinical features and differential diagnosis	S	Outpatient clinic	CIVA
DERM20.3	Explain pathogenesis and contributing factors	K	Large group lecture	Short answer question
DERM20.4	Describe treatment options and patient counseling	K	Large group lecture	Short answer question
Connective T	issue Diseases			
DERM21.1	Define major connective tissue diseases affecting skin (SLE, scleroderma)	K	Large group lecture	MCQ
DERM21.2	Identify skin manifestations of connective tissue diseases	S	Outpatient clinic	CIVA
DERM21.3	Explain diagnostic criteria and investigations	K	Large group lecture	Short answer question
DERM21.4	Outline management principles and complications	K	Large group lecture	Short answer question

Practical

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Types of Skin	Lesions			
DERM1.1	 A. Observe various patient presentations with skin lesions. B. Practice describing primary and secondary lesions using correct terminology. C. Discuss the morphology and classification of skin lesions. 	K/S	Outpatient clinic	Short answer question, CIVA
Bacterial Infe	ctions			
DERM2.1	 A. Identify clinical signs of common bacterial infections (e.g. impetigo, folliculitis). B. Understand diagnostic approaches and differential diagnosis. C. Discuss appropriate antibiotic treatments and resistance issues. 	K/S	Outpatient clinic	Short answer question, CIVA
Viral Infection	ns			
DERM3.1	 A. Recognize viral skin infections such as herpes simplex, herpes zoster, HPV, and molluscum contagiosum. B. Discuss lesion progression and contagious stages. C. Review antiviral treatment options and preventive strategies 	K/S	Outpatient clinic	Short answer question, CIVA
Fungal Infecti	ons			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
DERM4.1	 A. 1-Examine patients with suspected fungal infections (tinea corporis, capitis, etc.). B. 2-Observe Wood's lamp and KOH preparation (if available). C. 3-Learn the clinical features that distinguish fungal from other skin conditions 	K/S	Outpatient clinic	Short answer question, CIVA
Fungal Infec	tions			
DERM5.1	 A. 1-Discuss complex fungal cases and less common presentations. B. 2-Focus on diagnosis and treatment of recurrent or resistant fungal infections. C. 3-Review systemic antifungal therapy indications 	K/S	Outpatient clinic	Short answer question, CIVA
Papulosquan	nous Diseases			
DERM6.1	 A. Examine classic presentations of psoriasis, lichen planus, and pityriasis rosea. B. Discuss chronic disease patterns and management strategies. C. 3. Emphasize the importance of clinical patterns and histopathology 	K/S	Outpatient clinic	Short answer question, CIVA
Dermatitis				
DERM7.1	 A. Learn to differentiate between atopic, contact, and seborrheic dermatitis. B. Discuss triggers and pathophysiology of eczema. C. Observe patients with acute vs. chronic dermatitis and treatment approaches 	K/S	Outpatient clinic	Short answer question, CIVA
Pilosebaceous	Disorders			
DERM8.1	A. Identify common pilosebaceous disorders: acne vulgaris, rosacea, folliculitis.	K/S	Outpatient clinic	Short answer question, CIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	B. Review treatment modalities including topical and systemic options.C. 3. Understand acne grading and complication prevention.			
Drug Reaction	18			
DERM9.1	 A. Observe cutaneous drug eruptions (e.g., urticaria, SJS/TEN). B. Learn how to take detailed drug histories and recognize patterns. C. Discuss emergency management of severe reactions 	K/S	Outpatient clinic	Short answer question, CIVA
CTD and Vaso	culitis			
DERM10.1	 A. Identify skin findings in connective tissue diseases (SLE, dermatomyositis). B. Recognize clinical patterns of vasculitis. C. Discuss systemic involvement and importance of early referral. 	K/S	Outpatient clinic	Short answer question, CIVA

OPHTHALMOLOGY



Fifth grade

Academic program discretion

This academic program description provides a brief overview of the key features of the program and the expected learning outcomes for the student, demonstrating whether the student has made the most of the available opportunities. It is accompanied by a description of each course within the program.

2 Educational Establishment	University of al-ameed		
2-Scientific Department	College of medicine		
3-Name of the Professional Academic Program.	Modified traditional curriculum		
4-Final Graduation Certificate	M.B.Ch.B		
5- Educational system: Annual/courses/other	Annual		
6-Approved accreditation program	Applied for Iraqi National Guideline on Standards for Established and Accrediting Medical School		
7-Other external factors	 Availability of relevant scientific research in the field of specialization Access to global electronic networks Access to traditional and digital libraries Teaching aids such as data show and PowerPoint presentations Availability of equipped classrooms Use of free online communication platforms (e.g., Free Conference Call) 		
	2024/9/15		

8-Date the description was written

9- objectives of academic program

- 1. Graduate doctors with a strong foundation in ophthalmology, enabling them to understand, diagnose, and manage eye diseases in emergency departments, ophthalmology wards, and outpatient clinics. Strengthen students' clinical skills through theoretical and practical discussions, direct patient examinations in hospitals, and hands-on training in skills laboratories. Additionally, conduct ophthalmology workshops at the college to discuss clinical cases and explore their management.
- 2. Provide training and skills to practice ophthalmology safely, focusing on diagnosing and treating common and urgent ophthalmic conditions, managing ocular trauma, and handling ophthalmic emergencies.
- 3. Integrate modern educational techniques and advanced technology into teaching methods and ophthalmology training programs. Utilize digital imaging, artificial intelligence, and telemedicine to enhance learning, improve diagnostic accuracy, and facilitate knowledge sharing.
- 4. **Promote cultural exchange and establish bilateral partnerships** with medical schools and professional ophthalmology organizations at the regional and international levels to expand academic and scientific collaboration in the field of ophthalmology.
- 5. Strengthen collaboration between the college and the community by organizing seminars, conferences, and awareness campaigns on national ophthalmic health issues, including preventable blindness, diabetic retinopathy, and pediatric eye care.
- 6. Support the preparation of future leaders in ophthalmology, empowering them to achieve excellence in their medical specialties through research, innovation, and leadership development in the field of ophthalmology.

OPHTHALMOLOGY \ Grade 5

Code: OPTH 507 3 Credits

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
Anatomy a part 1	nd physiology of the eye				
OPTH1.1	Understand the gross anatomy of the eyeball and its layers: Learn about the sclera, uvea, and retina, and their specific functions, which are vital for vision and ocular health. Clinical Benefit: Knowledge of the eyeball's structure is essential in diagnosing conditions such as glaucoma, diabetic retinopathy, and retinal detachments, allowing for better management and prevention of vision loss.	K	Large group lecture	MCQ & short answer Questions	
OPTH 1.2	Understand the physiological mechanisms of aqueous humor production and its regulation: The production, circulation, and drainage of aqueous humor are crucial for maintaining intraocular pressure, affecting conditions like glaucoma. Clinical Benefit: Understanding aqueous humor dynamics helps in the diagnosis and treatment of glaucoma, preventing further optic nerve damage and vision impairment due to high intraocular pressure	K	Large group lecture	MCQ & short answer Questions	
Anatomy a part 2	Anatomy and physiology of the eye				

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OPTH 2.1	Understand the detailed anatomy of the cornea and its clinical relevance: Recognizing the five layers of the cornea and their role in maintaining transparency is crucial for diagnosing and managing corneal diseases like keratoconus and corneal dystrophies. Clinical Benefit: A solid understanding of corneal anatomy helps in the diagnosis and treatment of conditions that affect vision, such as corneal abrasions and keratoconus, ensuring better management and preventing vision loss.	K	Large group lecture	MCQ & short answer Questions
OPTH 2.2	Recognize the neural pathway of vision and its integration with neurological lesions: Understanding how visual information is transmitted from the retina to the brain helps in diagnosing neurological conditions that affect vision, such as optic neuritis and glaucoma. Clinical Benefit: This knowledge is vital for identifying visual field defects and neurological disorders, allowing early detection and appropriate management of conditions like glaucoma, optic neuropathies, and brain lesions that impact vision.	K	Large group lecture	MCQ & short answer Questions
Diseases of eyelids part 1				
OPTH 3.1	Understand the anatomy and pathology of the eyelids: Knowledge of the eyelid structure, including the tarsal plates, meibomian glands, and orbicularis oculi muscle, aids in diagnosing and managing common eyelid conditions such as blepharitis and eyelid malpositions. Clinical Benefit: This understanding helps	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	in treating eyelid disorders, improving patient outcomes in conditions like blepharitis, hordeolum, and ptosis, and preventing complications like corneal damage.			
OPTH 3.2	Identify and manage eyelid infections and inflammations: Recognizing the causes, diagnosis, and treatment options for conditions such as herpes simplex, herpes zoster, and xanthelasma ensures effective management and prevention of complications. Clinical Benefit: Early diagnosis and treatment of eyelid infections and inflammatory conditions reduce the risk of serious complications, such as vision loss, chronic inflammation, or systemic effects, and improve cosmetic outcomes.	K	Large group lecture	MCQ & short answer Questions
Diseases of	f eyelids part 2			
OPTH 4.1	A. Understand the clinical features and management of benign and malignant eyelid tumors B. learn to differentiate between benign tumors like papillomas and seborrheic keratosis and malignant ones like basal cell carcinoma and sebaceous gland carcinoma, along with appropriate management strategies. Clinical Benefit: Early detection and correct management of eyelid tumors can prevent malignancy spread, preserve ocular function, and improve cosmetic outcomes through surgical excision and reconstructive procedures.	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OPTH 4.2	A. Recognize and manage eyelid conditions related to functional and traumatic issues B. Understand the clinical presentation and treatment of conditions such as floppy eyelid syndrome, blepharospasm, hemifacial spasm, and traumatic eyelid injuries, and the surgical management of congenital ptosis. Clinical Benefit: Proper diagnosis and treatment of functional and traumatic eyelid disorders improve patient comfort, restore eyelid function, and prevent longterm visual or cosmetic complications, such as corneal exposure or eyelid malposition.	K	Large group lecture	MCQ & short answer Questions
Disorders of	of lacrimal system			
OPTH 5.1	A. Understand the anatomy and physiology of the lacrimal system B. Learn how tear production, drainage, and the role of the nasolacrimal duct contribute to maintaining ocular surface health and comfort. Clinical Benefit: A solid understanding of lacrimal system function aids in diagnosing and treating conditions	K	Large group lecture	MCQ & short answer Questions
OPTH 5.2	A. Recognize and manage lacrimal system disorders B. Understand the etiology, clinical presentation, and management of conditions like dacryocystitis, congenital nasolacrimal duct obstruction, and epiphora, and the surgical techniques used for treatment. Clinical Benefit: Timely intervention in conditions	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	affecting the lacrimal system, including surgery for dacryocystorhinostomy (DCR) and lacrimal probing, improves tear drainage and alleviates symptoms like chronic tearing and infection, enhancing patient comfort and preventing complications			
Diseases of	f conjunctiva part 1			
OPTH 6.1	A. Understand the normal anatomy and function of the conjunctiva B. Learn about the conjunctiva's role in ocular surface immunity and its importance in maintaining eye health and preventing infections. Clinical Benefit: Knowledge of conjunctival anatomy and function helps in diagnosing and treating conjunctival conditions such as infections and inflammation, leading to better management of diseases like conjunctivitis and pterygium.	K	Large group lecture	MCQ & short answer Questions
OPTH 6.2	 A. Differentiate and manage types of conjunctivitis and other conjunctival disorders B. Recognize the clinical features of bacterial, viral, and allergic conjunctivitis and understand the management strategies, including the use of antibiotics, antihistamines, and surgical interventions for pterygium and subconjunctival hemorrhage. 	K	Large group lecture	MCQ & short answer Questions
Diseases of conjunctiva part 2				
OPTH 7.1	A. Understand the presentation and management of conjunctival disorders	K	group sl	ACQ & hort answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	B. Recognize the clinical features of conditions such as superior limbic keratoconjunctivitis, conjunctival xerosis, and conjunctival tumors, along with their respective treatments. Clinical Benefit: Early identification and proper management of conjunctival disorders, such as conjunctival tumors and superior limbic keratoconjunctivitis, help prevent vision-threatening complications and ensure appropriate therapeutic interventions.			
OPTH 7.2	A. Recognize the systemic impact and management of conjunctival conditions B. Learn how systemic issues like vitamin A deficiency, autoimmune diseases, and trachoma manifest in the conjunctiva and understand their management, including conjunctival biopsy and the WHO SAFE strategy. Clinical Benefit: Understanding the relationship between systemic diseases and conjunctival health aids in diagnosing underlying conditions like vitamin A deficiency and trachoma, enabling targeted treatment and improving public health outcomes, especially in endemic areas	K	Large group lecture	MCQ & short answer Questions
Diseases of cornea part 1				
OPTH 8.1	A. Understand the structure and function of the corneaB. Learn about the cornea's role in vision, ocular protection, and its importance in	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Accecement
	maintaining optical clarity and integrity. Clinical Benefit: Knowledge of corneal structure aids in the diagnosis and treatment of conditions like keratitis, corneal ulcers, and keratoconus.			
OPTH 8.2	Recognize and manage corneal infections and disorders: Understand the clinical presentation, diagnosis, and management of bacterial, viral, fungal, and Acanthamoeba keratitis, as well as conditions requiring corneal transplantation and cross-linking.	K	Large group lecture	MCQ & short answer Questions
Diseases of	f cornea part 2			
OPTH 9.1	A. understand the clinical features and management of corneal dystrophies and degenerations: B. Learn about conditions like Fuchs' endothelial dystrophy, band keratopathy, and lipid keratopathy, including their clinical presentations and treatment options. Clinical Benefit: Accurate diagnosis and effective management of corneal dystrophies and degenerations help preserve vision and prevent the need for corneal transplantation by addressing symptoms early.	K	Large group lecture	MCQ & short answer Questions
OPTH 9.2	A. Recognize and manage corneal disorders requiring surgical intervention B. Understand the clinical presentation and treatment options for conditions like keratoconus, recurrent corneal erosion, and peripheral ulcerative keratitis, including	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	the role of surgery and artificial corneas. Clinical Benefit: Proper management of advanced corneal conditions such as keratoconus and autoimmune-related keratitis improves visual outcomes and reduces the risk of blindness through timely surgical intervention and appropriate use of keratoprosthesis.			
Disease of	sclera and episclera			
OPTH 10.1	 A. Understand the anatomy and pathology of the sclera and episclera B. Learn about the structure, function, and vascular supply of the sclera and episclera, and how these tissues relate to other ocular structures, including the differentiation between episcleritis and scleritis. 	K	Large group lecture	MCQ & short answer Questions
OPTH 10.2	A. Recognize and manage scleritis and its systemic associations B. Understand the causes, clinical features, and management of scleritis, including its classification, complications, and systemic connections to diseases like rheumatoid arthritis and granulomatosis with polyangiitis. Clinical Benefit: Knowledge of scleritis' systemic associations and complications ensures timely diagnosis, accurate management (including immunosuppressive therapy), and prevention of severe outcomes such as scleral thinning and secondary glaucoma.	K	Large group lecture	MCQ & short answer Questions

Number Refractive	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OPTH 11.1	A. Understand the physiological basis and classification of refractive errors B. Learn about the optical principles of refraction and the types of refractive errors (myopia, hyperopia, astigmatism, and presbyopia), including their clinical presentation. Clinical Benefit: Accurate diagnosis and understanding of	K	Large group lecture	MCQ & short answer Questions
OPTH 11.2	refractive errors enable appropriate correction methods. A. Learn about the treatment options and management of refractive errors B. Explore various treatment methods for refractive errors, including optical aids like glasses and contact lenses, as well as surgical interventions like LASIK, PRK, and intraocular lenses. Clinical Benefit: Knowledge of refractive error treatments, including surgical options, ensures optimal vision correction and helps manage complications.	K	Large group lecture	MCQ & short answer Questions
Cornea and	l refractive surgery			
OPTH 12.1	A. Understand the indications, techniques, and complications of refractive surgery B. Learn about LASIK, PRK, and SMILE, including patient selection criteria, benefits, and potential risks such as ectasia and dry eye syndrome. Clinical Benefit: Proper preoperative assessment and surgical planning reduce complications and improve patient outcomes in refractive surgery.	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OPTH 12.2	A. Recognize the role of corneal cross-linking and transplantation in managing corneal disorders B. Understand the indications and techniques for corneal cross-linking in keratoconus and post-refractive surgery ectasia, as well as the different types of corneal transplants. Clinical Benefit: Early intervention with cross-linking can prevent keratoconus progression, while appropriate transplant selection helps restore vision in severe corneal pathology.	K	Large group lecture	MCQ & short answer Questions
OPTH 13.1	A. Understand the pathophysiology, classification, and systemic associations of cataracts B. Learn about the risk factors, types of cataracts, and how systemic diseases like diabetes influence their progression. Clinical Benefit: Early identification of cataracts and associated systemic conditions allows for timely intervention and better visual prognosis.	K	Large group lecture	MCQ & short answer Questions
OPTH 13.2	A. Recognize the principles of cataract surgery and intraocular lens (IOL) implantation B. Understand surgical techniques such as phacoemulsification and extracapsular cataract extraction, along with IOL selection criteria. Clinical Benefit: Proper surgical planning and IOL selection	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
	optimize visual rehabilitation and minimize postoperative complications.			•	
Disorders of	of lens part 2				
OPTH 14.1	A. Understand the causes and management of ectopia lentis and traumatic lens dislocation B. Learn the genetic associations (e.g., Marfan syndrome, homocystinuria) and surgical interventions for displaced lenses. Clinical Benefit: Early diagnosis and appropriate management prevent visual impairment and complications like secondary glaucoma.	K	Large group lecture	MCQ & short answer Questions	
OPTH 14.2	A. Recognize advances in cataract surgery and postoperative rehabilitation B. Understand techniques like femtosecond laser-assisted cataract surgery and the role of multifocal/accommodating IOLs in presbyopia. Clinical Benefit: Improved surgical precision, faster recovery, and enhanced patient satisfaction through personalized lens implantation.	K	Large group lecture	MCQ & short answer Questions	
Diseases of uveal tract I					
OPTH 15.1	A. Differentiate infectious and non-infectious causes of uveitis and their diagnostic approach	K	Large group lecture	MCQ & short answer Questions	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	B. Learn to identify systemic associations using slit-lamp examination, imaging, and laboratory tests. Clinical Benefit: Accurate classification of uveitis ensures targeted treatment, preventing complications like vision loss.			
OPTH 15.2	A. Understand the management and complications of anterior uveitis B. Explore corticosteroid use, immunosuppressive therapy, and the role of biologic agents in refractory cases. Clinical Benefit: Timely treatment reduces inflammation, preventing secondary issues like glaucoma, cataracts, and macular edema.	K	Large group lecture	MCQ & short answer Questions
	f uveal tract II			
OPTH 16.1	A. Differentiate posterior and intermediate uveitis, including their systemic associations B. Understand the clinical presentation, imaging findings, and treatment approaches for conditions like toxoplasmosis, viral retinitis, and pars planitis. Clinical Benefit: Accurate diagnosis helps prevent vision-threatening complications such as retinal detachment and macular edema.	K	Large group lecture	MCQ & short answer Questions
OPTH 16.2	 A. Recognize the role of immunomodulatory therapy and surgical interventions in chronic uveitis B. Learn indications for corticosteroids, biologic agents, and surgeries like vitrectomy and cataract extraction. 	K	Large group lecture	MCQ & short answer Questions
Ocular inju	ıry			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OPTH 17.1	Differentiate between types of ocular trauma (blunt, penetrating, perforating) and their clinical implications. Clinical Benefit: Enables early identification of high-risk injuries (e.g., globe rupture, intraocular foreign body), ensuring timely surgical intervention and reducing vision-threatening complications.	K	Large group lecture	MCQ & short answer Questions
OPTH 17.2	Develop a systematic approach for assessing and managing ocular trauma, including imaging and surgical decision-making.	K	Large group lecture	MCQ & short answer Questions
Glaucoma	part 1			
OPTH 18.1	understand the pathophysiology and classification of glaucoma, including its various forms Clinical Benefit: Enhances the ability to correctly diagnose the type of glaucoma and select the appropriate treatment, ultimately preventing vision loss due to optic nerve damage. Develop proficiency in the clinical	K K	Large group lecture	MCQ & short answer Questions MCQ &
18.2	diagnosis and management of primary open-angle glaucoma (POAG), including diagnostic tests and medical therapies. Clinical Benefit: Improves early detection and effective management of POAG, reducing the risk of progression to blindness through personalized treatment plans that optimize IOP control.		group lecture	short answer Questions
Glaucoma	part 2			
OPTH 19.1	Understand the pathophysiology, clinical presentation, and risk factors of primary angle-closure glaucoma (PACG), and its acute management. Clinical Benefit: Enables timely recognition and intervention of	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	PACG, reducing the risk of irreversible vision loss through acute medical management and emergency laser treatment.			
OPTH 19.2	Familiarize with the diagnosis and management of secondary glaucomas and congenital glaucoma, including surgical options. Clinical Benefit: Ensures comprehensive care for secondary and congenital glaucomas, enhancing the ability to manage complex glaucoma cases and prevent further complications, particularly in pediatric patients.	K	Large group lecture	MCQ & short answer Questions
Ocular tum	or			
OPTH 20.1	Classify ocular tumors into benign and malignant types, identifying primary and metastatic tumors. Clinical Benefit: Provides a foundational understanding to differentiate between benign and malignant ocular tumors, enabling timely and accurate diagnosis, critical for initiating the appropriate treatment.	K	Large group lecture	MCQ & short answer Questions
OPTH 20.2	Describe the clinical presentation and management of retinoblastoma, uveal melanoma, and orbital tumors, with an emphasis on surgical and radiotherapy interventions.	K	Large group lecture	MCQ & short answer Questions
Retinal dis	ease part 1			
OPTH 21.1	Describe the anatomy and function of the retina, including its blood supply and role in vision. Clinical Benefit: Understanding retinal anatomy and blood supply is critical for diagnosing and managing retinal diseases effectively, ensuring appropriate treatment decisions for conditions like diabetic	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	I Accecement
	retinopathy and retinal vascular occlusions.			
OPTH 21.2	Explain the pathophysiology, risk factors, and treatment options for diabetic retinopathy and diabetic macular edema, including the use of laser photocoagulation, anti-VEGF therapy, and vitrectomy.	K	Large group lecture	MCQ & short answer Questions
Retinal dis	ease part 2			
OPTH 22.1	Describe the classification, clinical features, and genetic basis of age-related macular degeneration (AMD). Clinical Benefit: Understanding AMD classification and genetics helps in diagnosing the condition early, providing personalized management plans to slow disease progression and optimize visual outcomes in elderly patients.	K	Large group lecture	MCQ & short answer Questions
OPTH 22.2	Explain the role of anti-VEGF therapy in the management of wet AMD and its long-term outcomes. Clinical Benefit: Knowledge of anti-VEGF therapy is essential for effectively managing wet AMD, preventing vision loss, and ensuring patients receive the most appropriate and evidence-based treatment for long-term visual preservation.	K	Large group lecture	MCQ & short answer Questions
Uses of las	er in ophthalmology			
23.1 OPTH	Explain the principles of laser physics and its application in ophthalmology. Clinical Benefit: Understanding laser principles enhances the effectiveness of treatment and ensures appropriate laser use in various ocular conditions, improving patient outcomes and minimizing complications.	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
OPTH 23.2	Describe the indications, techniques, and complications of laser photocoagulation in diabetic retinopathy and retinal vein occlusions. Clinical Benefit: Mastery of laser photocoagulation techniques is critical in preventing vision loss in patients with diabetic retinopathy or retinal vein occlusions, helping manage these conditions with minimal risk.	K	Large group lecture	MCQ & short answer Questions		
Neuro-oph	thalmology part 1					
OPTH 24.1	Describe the visual pathway and common sites of lesions leading to visual field defects. Clinical Benefit: Understanding the visual pathway and lesion locations helps in accurately diagnosing visual field defects, enabling targeted interventions to preserve vision and prevent further visual loss. Discuss the clinical presentation, diagnosis, and management of optic neuritis, including its association with multiple sclerosis. Clinical Benefit: Early recognition and treatment of optic neuritis, especially in patients with multiple sclerosis, can reduce vision loss and improve patient prognosis through appropriate	K	Large group lecture Large group lecture	MCQ & short answer Questions MCQ & short answer Questions		
Neuro-oph	immunomodulatory therapies Neuro-ophthalmology part 2					
OPTH 25.1	Describe the common causes and clinical presentation of compressive optic neuropathies, including tumors and vascular lesions. Clinical Benefit: Early identification of compressive optic neuropathies allows for timely	K	Large group lecture	MCQ & short answer Questions		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	intervention, such as surgical resection or radiation, to prevent permanent vision loss.			
OPTH 25.2	Discuss the diagnosis and management of cranial nerve palsies affecting eye movements (III, IV, VI). Clinical Benefit: Accurate diagnosis and prompt treatment of cranial nerve palsies, whether from ischemic, traumatic, or neoplastic causes.	K	Large group lecture	MCQ & short answer Questions
Strabismus	part 1			
OPTH 26.1	Define strabismus and explain the classification into concomitant and incomitant types. Clinical Benefit: Understanding the types of strabismus helps guide appropriate treatment plans, such as surgical intervention or vision therapy.	K	Large group lecture	MCQ & short answer Questions
OPTH 26.2	Discuss the clinical assessment of strabismus, including Hirschberg test, cover tests, and extraocular motility examination. Clinical Benefit: Proper assessment is essential for diagnosing the type and severity of strabismus, ensuring accurate treatment, including occlusion therapy, prism glasses, or surgery, to improve visual function and alignment.	K	Large group lecture	MCQ & short answer Questions
Strabismus	part 2			
OPTH 27.1	Describe the clinical features and management of paralytic strabismus due to cranial nerve palsies (III, IV, VI). Clinical Benefit: Understanding the causes of paralytic strabismus, such as cranial nerve palsies, enables timely diagnosis and targeted treatments (e.g., prisms, surgery, or botulinum toxin),	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Accecement
	improving eye alignment and function.			
OPTH 27.2	Explain the pathophysiology and clinical assessment of restrictive strabismus, including thyroid eye disease and orbital fractures. Clinical Benefit: Identifying restrictive strabismus helps to distinguish between mechanical causes (such as orbital fractures) and neurologic ones, guiding the appropriate surgical or medical management to restore ocular motility and prevent permanent visual impairment.	K	Large group lecture	MCQ & short answer Questions
The eye an	d systemic diseases part 1			
OPTH 28.1	Explain the ocular manifestations of diabetes mellitus, including diabetic retinopathy and diabetic macular edema, and their management. Clinical Benefit: Recognizing diabetic retinopathy and diabetic macular edema in a timely manner allows for early intervention (e.g., laser photocoagulation, anti-VEGF treatment) to prevent vision loss and improve the patient's quality of life.	K	Large group lecture	MCQ & short answer Questions
OPTH 28.2	Discuss hypertensive retinopathy, its grading, and its significance as a marker of systemic vascular disease. Clinical Benefit: Understanding hypertensive retinopathy and its grading helps detect systemic hypertension early and manage it appropriately to prevent further ocular and cardiovascular complications.	K	Large group lecture	MCQ & short answer Questions
The eye an	d systemic diseases part2			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OPTH 29.1	Describe the ophthalmic manifestations of metabolic disorders such as Wilson's disease (Kayser-Fleischer rings) and Fabry disease (corneal verticillata). Clinical Benefit: Identifying Kayser-Fleischer rings and corneal verticillata allows for early diagnosis of systemic metabolic conditions like Wilson's and Fabry diseases, leading to appropriate systemic management and preventing irreversible ocular and systemic damage.	K	Large group lecture	MCQ & short answer Questions
OPTH 29.2	Discuss the ocular effects of vitamin deficiencies, including vitamin A deficiency (xerophthalmia, night blindness). Clinical Benefit: Recognizing signs of vitamin A deficiency in the eye (xerophthalmia, night blindness)	K	Large group lecture	MCQ & short answer Questions
Advances i	n ophthalmology			
OPTH 30.1	Discuss recent developments in the diagnosis and treatment of age-related macular degeneration, including gene therapy and artificial retinas. Clinical Benefit: Understanding emerging treatments like gene therapy and artificial retinas allows ophthalmologists to offer new treatment options for patients with age-related macular degeneration, potentially preserving vision and improving quality of life.	K	Large group lecture	MCQ & short answer Questions
OPTH 30.2	Explain the role of minimally invasive glaucoma surgery (MIGS) in glaucoma management. Clinical Benefit: Familiarity with MIGS techniques enables clinicians to provide safer and less invasive treatment alternatives for	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	glaucoma patients, reducing recovery times and minimizing surgical risks.			

Practical

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessment Methods
Glaucoma				
OPTH 1.1	Explain the pathophysiology, risk factors, and types of glaucoma (e.g., open-angle vs. angle-closure). Clinical Benefit: Enhances early identification of at-risk patients, leading to timely screening and prevention of vision loss.	K/S/C	Small group Out patients clinic	SIVA exam
OPTH 1.2	Demonstrate the correct technique for measuring intraocular pressure (IOP) using tonometry. Clinical Benefit: Facilitates early diagnosis and monitoring of glaucoma progression, improving treatment outcomes and preserving vision.	K/S/C	Small group Out patients clinic	SIVA exam
Eye trauma				
OPTH 2.1	Identify and classify common types of ocular injuries (e.g., corneal abrasions, foreign bodies, retinal detachment). Clinical Benefit: Improves the ability to recognize and prioritize treatment for different types of eye trauma, minimizing the risk of permanent damage and loss of vision	K/S/C	Small group Out patients clinic	SIVA exam
OPTH 2.2	Demonstrate the appropriate management of a penetrating eye injury, including the use of protective coverings and the	K/S/C	Small group	SIVA exam

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessment Methods
	referral process. Clinical Benefit: Ensures timely and proper intervention to prevent complications such as infection, bleeding, or further damage, preserving vision and reducing the risk of long-term disability.		Out patients clinic	
Red eye				
OPTH 3.1	Differentiate between common causes of red eye, including conjunctivitis, dry eye, and uveitis. Clinical Benefit: Enhances diagnostic accuracy, ensuring appropriate treatment for the underlying cause of red eye, which can prevent complications such as vision loss or chronic discomfort.	K/S/C	Small group Out patients clinic	SIVA exam
OPTH 3.2	Identify red flags that indicate more serious conditions, such as acute angle-closure glaucoma or orbital cellulitis, in patients presenting with red eye. Clinical Benefit: Promotes timely referral and management of potentially sight-threatening or life-threatening conditions, improving patient outcomes and reducing the risk of permanent damage.	K/S/C	Small group Out patients clinic	SIVA exam
Eye squint				
OPTH 4.1	Recognize and differentiate between types of strabismus, such as esotropia (inward turning) and exotropia (outward turning), and understand their potential causes. Clinical Benefit: Early recognition of strabismus can help guide timely treatment to prevent amblyopia (lazy eye) and ensure proper visual development, especially in children.	K/S/C	Small group Out patients clinic	SIVA exam
OPTH 4.2	Understand and demonstrate the steps for a comprehensive ocular examination to assess eye	K/S/C	Small group	SIVA exam

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessment Methods
	alignment, including the cover- uncover test and the Hirschberg test. Clinical Benefit: Accurate assessment and diagnosis of eye misalignment lead to effective management strategies, such as corrective glasses, vision therapy, or surgical interventions, to correct eye alignment and improve visual function.		Out patients clinic	
Vision loss				
OPTH 5.1	Recognize the common causes of vision loss, including diabetic retinopathy, macular degeneration, glaucoma, and cataracts. Clinical Benefit: Enhances early identification of treatable conditions, leading to timely interventions and preserving vision in patients at risk of progressive sight loss.	K/S/C	Small group Out patients clinic	SIVA exam
OPTH 5.2	Understand and demonstrate the steps for conducting a comprehensive visual field test and retinal examination. Clinical Benefit: Improves diagnostic accuracy for detecting conditions like glaucoma or retinal diseases, enabling earlier treatment that can slow or prevent further vision loss and improve patient outcomes.	K/S/C	Small group Out patients clinic	SIVA exam

ENT



Fifth grade

1) Educational Establishment	University of Al-Ameed
2) Scientific Department	College of Medicine –
_,	Surgical department
3) Name of the Professional	Modified Traditional
Academic Program.	Curriculum
4) Final Graduation Certificate	M.B.Ch.B
5) Educational system: Annual/courses/other	Annual
6) Approved accreditation	Iraqi National Guideline on
	Standards for Established and
program	Accrediting Medical School
	 Availability of relevant
	scientific research in the field
	of specialization
	Access to global electronic
	networks
	• Access to traditional and
	digital libraries
7) Other external factors	 Teaching aids such as data show and PowerPoint
	presentationsAvailability of equipped
	classrooms
	• Use of free online
	communication platforms (e.g.,
	Free Conference Call)
8) Date the description was	
written	2024/9/15

9) Objectives of the academic program:

- 1. To provide a comprehensive understanding of the anatomy, physiology, and pathology of the ear, nose, throat, and related head and neck structures, with emphasis on their clinical correlations.
- 2. To enable students to recognize and manage common ENT disorders, including infections, inflammations, tumors, congenital anomalies, and trauma affecting the upper airway and sensory organs.
- 3. **To develop essential diagnostic and therapeutic skills**, including otoscopic examination, nasal endoscopy, and laryngoscopy, as well as interpretation of audiological and radiological findings.
- 4. **To train students to handle emergency situations in ENT practice**, such as airway obstruction, epistaxis, facial trauma, and acute infections.
- 5. **To promote the application of evidence-based medicine** in ENT diagnosis and treatment, and encourage clinical reasoning in selecting appropriate investigations and management plans.
- 6. **To emphasize the importance of interprofessional collaboration** in the management of ENT conditions, particularly those requiring surgical intervention, rehabilitation, or referral to other specialties.
- 7. **To prepare students for ethical and patient-centered care**, respecting patient communication needs, especially in disorders affecting hearing, speech, and airway.

11) The most reliable resources for program information are:

- 1. Alan G. Kerr.Scott-Brown's otolaryngology.
- 2. k J.LEE.Essential Otolaryngology
- 3. Alan G. Kerr.Scott-Brown's Otolaryngology
- 4. K.J.LEE.Essential Otolaryngology
- 5. Alan G. Kerr.Scott-Brown's Otolaryngology
- 6. K.J.LEE.Essential Otolaryngology
- 7. Keith G. Allman and Iain H. Wilsom. Oxford Handbook of Anaesthesia

ENT \ Grade 5

Code OTOR 508

3 Credits

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
Anatomy	Anatomy and physiology of the nose					
OTOR 1.1	Describe the anatomical structure of the nose, including external and internal components, and their clinical relevance.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 1.2	Explain the physiological functions of the nose, including olfaction, air filtration, humidification, and resonance in speech.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 1.3	Discuss the blood supply and venous drainage of the nasal cavity and their implications in epistaxis.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 1.4	Describe the innervation of the nasal mucosa and its role in allergic and non-allergic rhinitis.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions &		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 1.5	Explain the mucociliary clearance mechanism and its	K	Large	Clinical Image And Video Assessment (CIVA) multiple choice questions (MCQ)
	role in preventing infections such as sinusitis.		group lectures	& Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 1.6	Discuss the development of the nasal septum and common congenital anomalies such as choanal atresia.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 1.7	Describe the clinical significance of the paranasal sinuses in infections and their relation to the orbit and brain.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Anatomy	and physiology of the ear			
OTOR 2.1	Describe the anatomical structure of the external, middle, and inner ear and their clinical relevance.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				Assessment (CIVA)
OTOR 2.2	Explain the function of the tympanic membrane and ossicles in sound transmission and the impact of dysfunction on hearing loss	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions &Clinical Image And Video Assessment(CIVA
OTOR 2.3	Discuss the role of the Eustachian tube in middle ear ventilation and its clinical significance in otitis media.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 2.4	Describe the cochlear mechanism of hearing, including the function of hair cells and their damage in noise-induced hearing loss.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 2.5	Explain the vestibular system and its role in balance, including the clinical presentation of vestibular disorders such as vertigo.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 2.6	Discuss the blood supply and innervation of the ear and their importance in facial nerve dysfunction.	K	Large group lectures	multiple choice questions (MCQ) &

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 2.7	Recognize the embryological development of the ear and common congenital anomalies such as microtia and atresia.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Anatomy	and physiology of the mouth, ph	arynx, and l	arynx	
OTOR 3.1	Describe the anatomical structures of the oral cavity, pharynx, and larynx, emphasizing their roles in respiration, swallowing, and speech.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 3.2	Explain the physiology of deglutition and the role of the pharyngeal muscles in preventing aspiration.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 3.3	Discuss the innervation of the larynx, including the role of the recurrent laryngeal nerve in vocal cord function	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 3.4	Explain the physiological mechanisms of voice production and the impact of laryngeal diseases on phonation	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 3.5	Recognize the importance of lymphatic drainage of the pharynx and larynx in the spread of infections and malignancies.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 3.6	Describe the vascular supply of the oral cavity and pharynx and its clinical significance in hemorrhage.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 3.7	Discuss the protective functions of the tonsils and adenoids and their role in recurrent infections.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				& Clinical Image And Video Assessment (CIVA)
OTOR 3.8	Explain the embryology of the larynx and common congenital anomalies such as laryngomalacia.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Diseases	of the external ear			
OTOR 4.1	Identify and describe common external ear pathologies, including acute and chronic otitis externa, fungal infections, trauma, foreign bodies, and impacted cerumen, along with their causes, risk factors, clinical presentations, and diagnostic approach.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 4.2	Apply clinical examination techniques to evaluate external ear disorders, including the use of otoscopy to assess the external auditory canal and tympanic membrane, recognizing signs of inflammation, infection, or injury.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 4.3	Formulate appropriate treatment and management plans for external ear conditions using topical and systemic medications, proper ear hygiene techniques, and identifying cases that require surgical intervention or ENT referral.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 4.4	Recognize potential complications and their clinical implications, such as malignant otitis externa and cellulitis, particularly in high-risk groups like diabetics and immunocompromised patients, and understand the importance of early intervention.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Otitis me	dia with effusion			
OTOR 5.1	Define Otitis Media with Effusion and distinguish it from other forms of otitis media, focusing on its non-suppurative nature and the presence of fluid behind the tympanic membrane without signs of acute infection.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 5.2	Explain the pathophysiology of OME, including Eustachian tube dysfunction, negative middle ear pressure, and the accumulation of sterile fluid, particularly in pediatric populations.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 5.3	Identify the typical clinical features of OME, such as hearing loss, aural fullness, and speech delay in children, and	K/S	Large group lectures	multiple choice questions (MCQ) &

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	learn how to perform an otoscopic examination to observe a dull, retracted tympanic membrane with visible fluid levels or air bubbles.			Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 5.4	Discuss diagnostic tools and criteria, including tympanometry and audiometry, to confirm the presence of middle ear effusion and assess the degree of conductive hearing loss.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 5.5	Review the treatment options and management strategies, from observation and medical therapy to the indications for surgical interventions like myringotomy and grommet (ventilation tube) insertion.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 5.6	Understand the potential complications and long-term consequences of untreated or recurrent OME, such as speech and language delay, chronic otitis media, and impact on academic performance.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Acute oti				
OTOR 6.1	Define Acute Otitis Media and describe its epidemiology, emphasizing its high prevalence in infants and young children and its relationship to upper respiratory tract infections.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions &

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				Clinical Image And Video Assessment (CIVA)
OTOR 6.2	Understand the pathophysiology and clinical presentation of acute otitis media, including the role of Eustachian tube dysfunction, common pathogens (such as <i>Streptococcus pneumoniae</i> , <i>Haemophilus influenzae</i>), and the typical symptoms like otalgia, fever, and hearing loss.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
	Recognize key diagnostic features through otoscopic examination, differentiating AOM from otitis media with effusion, and appreciate the significance of tympanic membrane changes (e.g., bulging, erythema, immobility).	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
	Identify evidence-based treatment strategies, including indications for antibiotic therapy, analgesia, and monitoring, as well as when to consider referral to ENT or surgical intervention (e.g., tympanostomy tubes in recurrent cases).	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Chronic o	otitis media			
OTOR 7.1	Understand the pathophysiology and classification of chronic otitis media, distinguishing between safe (tubotympanic) and unsafe (atticoantral) types, with emphasis on chronic inflammation and persistent tympanic membrane perforation.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 7.2	Identify common clinical presentations and complications, such as conductive hearing loss, otorrhea, and potential development of cholesteatoma, as well as intracranial and extracranial complications.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 7.3	Review diagnostic and therapeutic strategies, including otoscopic examination, hearing evaluation, imaging for complications, and the role of medical versus surgical management, especially tympanoplasty and mastoidectomy.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Complica	ations of otitis media			
OTOR 8.1	Recognize the major extracranial and intracranial complications of otitis media, including mastoiditis, facial nerve palsy, labyrinthitis, brain abscess, meningitis, and lateral sinus thrombosis.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 8.2	Understand the clinical features and diagnostic approach for each complication, including when to suspect complications based on worsening or atypical symptoms.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 8.3	Discuss appropriate management plans, including urgent referral, imaging choices (CT/MRI), intravenous antibiotics, and surgical interventions like mastoidectomy when indicated.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Hearing l	oss			
OTOR 9.1	Classify hearing loss into conductive, sensorineural, and mixed types, understanding the pathophysiological differences and their impact on auditory function.	K	Large group lectures	multiple choice questions (MCQ) &Short Answer Questions &Clinical Image And Video Assessment (CIVA)
OTOR 9.2	Identify the causes of hearing loss across different age groups, including congenital, acquired, genetic, and environmental factors, with particular attention to common clinical scenarios.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 9.3	Interpret audiometric tests, such as pure tone audiometry, speech audiometry, and tympanometry, to diagnose the type and degree of hearing loss.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 9.4	Discuss treatment and management strategies, including medical, surgical, and rehabilitative approaches such as hearing aids, cochlear implants, and speech therapy.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions &

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				Clinical Image And Video Assessment (CIVA)
OTOR 9.5	Recognize the impact of hearing loss on a patient's quality of life and psychological well-being, and understand the importance of early intervention.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Facial ne	rve			
OTOR 10.1	Understand the anatomy of the facial nerve, including its origin, course, branches, and its relationship with surrounding structures such as the brainstem, temporal bone, and facial muscles.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 10.2	Identify the functions of the facial nerve, including motor control of facial muscles, sensory functions related to taste on the anterior two-thirds of the tongue, and parasympathetic innervation to lacrimal and salivary glands.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 10.3	Discuss diagnostic tools used in evaluating facial nerve function, such as electromyography (EMG), facial nerve conduction studies, and imaging techniques (CT/MRI) to assess for structural abnormalities.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 10.4	Understand the management of facial nerve injuries and disorders, including pharmacological treatments, physical therapy, and surgical options for restoring function.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Diseases	of nasal septum			
OTOR 11.1	Understand the anatomy of the nasal septum and its clinical significance in nasal airflow and breathing.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 11.2	Recognize common diseases of the nasal septum, such as deviation and perforation, and how they impact nasal function and airflow.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions &Clinical Image And Video Assessment (CIVA)
OTOR 11.3	Identify clinical symptoms associated with nasal septum disorders, including nasal obstruction, difficulty breathing, and recurrent infections.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 11.4	Learn diagnostic methods to evaluate nasal septum disorders, such as physical examination, nasal endoscopy, and imaging techniques.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				& Clinical Image And Video Assessment (CIVA)
OTOR 11.5	Understand treatment options, including medical management and surgical interventions (e.g., septoplasty), to address nasal septum disorders and enhance patient quality of life.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Allergic r	hinitis and nasal polyposis			
OTOR 12.1	Understand the pathophysiology of allergic rhinitis and nasal polyposis, focusing on the immune system's response to allergens and the resulting inflammation of the nasal mucosa.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 12.2	Recognize clinical symptoms of allergic rhinitis, such as sneezing, nasal congestion, and itching, and nasal polyposis, including persistent nasal obstruction and loss of smell.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 12.3	Identify risk factors for allergic rhinitis and nasal polyposis, including genetic predisposition, environmental allergens, and underlying conditions like asthma or sinusitis.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				Assessment (CIVA)
OTOR 12.4	Learn diagnostic methods, such as skin tests, nasal endoscopy, and imaging, to assess the presence and severity of allergic rhinitis and nasal polyps.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 12.5	Understand management strategies, including pharmacologic treatments (e.g., antihistamines, nasal corticosteroids), immunotherapy (allergy shots), and surgical interventions (e.g., polypectomy) to relieve symptoms and improve quality of life.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Epistaxis				
OTOR 13.1	Understand the causes of epistaxis, including local factors (e.g., trauma, dry air, infections) and systemic conditions (e.g., bleeding disorders, hypertension).	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 13.2	Recognize clinical manifestations, such as the amount of bleeding, its duration, and associated symptoms (e.g., lightheadedness, dizziness).	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 13.3	Identify the types of epistaxis, differentiating between anterior (more common) and posterior epistaxis, based on the location of bleeding.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 13.4	Learn diagnostic approaches, including physical examination (e.g., nasal speculum examination) and investigations (e.g., coagulation profile) to assess underlying causes.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 13.5	Understand the management of epistaxis, focusing on conservative measures (e.g., applying pressure, using nasal decongestants), medical treatments (e.g., cauterization, packing), and surgical options for recurrent case	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
	nd its complications			
OTOR 14.1	Understand the pathophysiology of sinusitis, including the causes (viral, bacterial, allergic) and how they lead to sinus inflammation.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				(CIVA)
OTOR 14.2	Identify common symptoms, such as nasal congestion, facial pressure, and headache, and differentiate between acute and chronic forms of sinusitis.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 14.3	Learn the diagnostic methods, including physical examination and imaging (e.g., CT scans) to confirm sinusitis and identify complications.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 14.4	Recognize complications like orbital cellulitis and brain abscesses, and understand when urgent treatment is required.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 14.5	Understand basic treatment options, including nasal decongestants, antibiotics, and corticosteroids for managing inflammation and infection.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				(CIVA)
Benign and	l malignant conditions of the no	se and parar	nasal sinuses	
OTOR 15.1	Understand the classification of benign and malignant tumors of the nose and sinuses, including examples like nasal polyps (benign) and squamous cell carcinoma (malignant).	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 15.2	Identify key clinical features of benign conditions, such as nasal obstruction, congestion, and recurrent infections, and distinguish them from malignant conditions that may present with more serious symptoms like nasal bleeding or a persistent mass.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 15.3	Learn the diagnostic techniques used for these conditions, including physical examination, imaging (CT, MRI), and biopsy for histopathological evaluation.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 15.4	Recognize the treatment options for benign conditions like surgery or medications (e.g., corticosteroids) and the aggressive treatments required for malignancies, such as	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	surgery, radiation, or chemotherapy.			And Video Assessment (CIVA)
OTOR 15.5	Understand the importance of early detection, particularly in malignant conditions, to improve prognosis and prevent the spread of cancer to surrounding structures	K/A	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Trauma to	the face and CSF rhinorrhea			
OTOR 16.1	Understand the types of facial trauma: Recognize various forms of facial trauma, including fractures of the nasal bone, maxilla, zygoma, and mandible, and their potential effects on airway and function.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 16.2	Identify the clinical features of facial trauma, such as swelling, pain, deformities, and difficulties in breathing or speaking, and the importance of early assessment and stabilization.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 16.3	Learn the diagnostic methods for facial trauma and CSF rhinorrhea, including physical examination, imaging (CT, MRI), and the use of	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions &

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	beta-2 transferrin testing to			Clinical Image
	confirm CSF leakage.			And Video
				Assessment
				(CIVA)
OTOR	Understand the management	K	Large	multiple choice
16.4	strategies: For facial trauma,		group	questions (MCQ)
	treatment ranges from		lectures	& Short Answer
	conservative care for minor			Questions
	fractures to surgical			&
	intervention for severe cases.			Clinical Image
	CSF rhinorrhea may require surgical repair, often via			And Video
	endoscopic or open			Assessment
	techniques, and prophylactic			(CIVA)
	antibiotics to prevent			
	infections like meningitis.			
OTOR	Recognize the complications:	K	Large	multiple choice
16.5	Complications of facial		group	questions (MCQ)
	trauma include infections,		lectures	& Short Answer
	airway compromise, and long-			Questions
	term functional impairments,			&
	while CSF rhinorrhea can lead			Clinical Image
	to meningitis if not properly managed.			And Video
	manageu.			Assessment
				(CIVA)
Diseases of	the tonsils and adenoids			
OTOR	Identify the normal anatomy	K	Large	multiple choice
17.1	and physiological roles of the tonsils and adenoids, and		group	questions (MCQ)
	explain how their location and		lectures	& Short Answer
	function contribute to local			Questions
	immune defense, especially in			&
	pediatric patients.			Clinical Image
				And Video
				Assessment
				(CIVA)
OTOR	Distinguish between acute and	K	Large	(MCQ)
	chronic tonsillitis through		group	& Short Answer

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
17.2	interpretation of clinical symptoms such as sore throat, fever, lymphadenopathy, and by correlating laboratory results with patient history.		lectures	Questions & Clinical Image And Video Assessment (CIVA)
OTOR 17.3	Detect the clinical manifestations of adenoidal hypertrophy, including nasal obstruction, mouth breathing, snoring, and its complications like otitis media with effusion and sleep-disordered breathing.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 17.4	Assess patients presenting with recurrent tonsillitis using established clinical criteria (e.g., Paradise criteria) to determine whether surgical intervention, such as tonsillectomy or adenoidectomy, is indicated.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 17.5	Formulate individualized treatment strategies for managing tonsillar and adenoidal conditions, incorporating both medical therapies (e.g., antibiotics, anti-inflammatories) and surgical options when appropriate.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 17.6	Defend clinical decisions regarding surgery by integrating patient symptoms, frequency of infections, quality of life, and existing clinical guidelines to ensure evidence-based practice.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Tumours of	f the pharynx			
OTOR 18.1	Identify and describe the anatomical regions of the pharynx, including the nasopharynx, oropharynx, and hypopharynx, and explain how the location of tumours can affect symptoms and treatment options.	K	Large group lectures	(MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 18.2	Recognize the clinical manifestations of pharyngeal tumours, such as dysphagia, hoarseness, and a lump in the throat, and differentiate them from other causes based on patient history and physical examination.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 18.3	Analyze the risk factors for pharyngeal cancers, including smoking, alcohol use, and HPV infection, and explain how they contribute to tumour development.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 18.4	Assess the role of imaging techniques like CT scans, MRIs, and biopsies in diagnosing pharyngeal tumours and determining their stage and spread.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 18.5	Evaluate the appropriate treatment options for pharyngeal tumours, including surgery, radiation therapy, and chemotherapy, and justify the treatment approach based on tumour size, location, and stage.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				(CIVA)
OTOR 18.6	Design a follow-up plan for patients post-treatment, addressing potential complications such as dysphagia, speech difficulties, and recurrence of the tumour.	K	Large group lectures	multiple choice questions (MCQ) &Short Answer Questions& Clinical Image And Video Assessment (CIVA)
Congenital	diseases of the larynx			
OTOR 19.1	 a) Identify and describe the anatomical regions of the pharynx, including the nasopharynx, oropharynx, and hypopharynx, and explain how the location of tumours can affect symptoms and treatment options. b) Recognize the clinical manifestations of pharyngeal tumours, such as dysphagia, hoarseness, and a lump in the throat, and differentiate them from other causes based on patient history and physical examination. 	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 19.2	 a) Analyze the risk factors for pharyngeal cancers, including smoking, alcohol use, and HPV infection, and explain how they contribute to tumour development. b) Assess the role of imaging techniques like CT scans, MRIs, and biopsies in diagnosing pharyngeal tumours and determining their stage and spread. 	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 19.3	 a) Evaluate the appropriate treatment options for pharyngeal tumours,, and justify the treatment approach based on tumour size, location, and stage. b) Design a follow-up plan for patients post-treatment, addressing potential complications 	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Inflammat	ory conditions of the larynx			
OTOR 20.1 OTOR 20.2	a) Identify Common Laryngeal Inflammatory Conditions b) Recognize and differentiate between acute laryngitis, chronic laryngitis, and laryngeal tuberculosis Describe the inflammation processes in the larynx and identify symptoms like	K	Large group lectures Large group lectures	multiple choice questions (MCQ) &Short Answer Questions& Clinical Image And Video Assessment (CIVA) multiple choice questions (MCQ) &
	hoarseness, throat pain, and stridor, linked to different inflammatory conditions.			Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 20.3	 a) Learn the diagnostic methods, including clinical examination, laryngoscopy, and imaging. b) Understand treatment options such as antibiotics for infections, corticosteroids for 	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	inflammation, and vocal rest for functional causes.			(CIVA)
OTOR 20.4	Recognize potential complications, including airway obstruction or chronic voice disorders, and understand preventive measures, including proper vocal hygiene and avoiding irritants.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Tumours of	f the larynx			
OTOR 21.1	a) Identify Types of Laryngeal Tumours b) Understand the classification of laryngeal tumors, distinguishing between benign and malignant types, such as squamous cell carcinoma, papillomas, and laryngeal polyps.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 21.2	Learn the risk factors for laryngeal cancer, including smoking, alcohol use, and HPV infection. Recognize common symptoms such as persistent hoarseness, dysphagia, pain, and stridor.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 21.3	Understand the diagnostic process, including physical examination, laryngoscopy, biopsy, and imaging studies	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	(CT, MRI) to assess tumour size and spread.			& Clinical Image And Video Assessment (CIVA)
OTOR 21.4	 a) Learn the treatment modalities for laryngeal tumors, including surgical resection, radiation therapy, and chemotherapy. b) Understand the criteria for deciding between organ preservation versus laryngectomy. 	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 21.5	Be aware of complications such as airway obstruction, metastasis, and voice changes. Learn about the prognosis based on tumour type, stage, and treatment outcomes.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Stridor, vo	cal cord paralysis			
OTOR 22.1	 a) Identify and describe the common congenital abnormalities of the larynx, such as laryngomalacia, vocal cord paralysis, and congenital stridor, and explain their impact on normal breathing and voice production. b) Recognize the clinical signs and symptoms associated with congenital laryngeal diseases, including stridor, 	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	hoarseness, and difficulty feeding, and differentiate these from other respiratory conditions through clinical evaluation.			
OTOR 22.2	 a) Discuss the embryological development of the larynx and how disruptions in this process can lead to congenital laryngeal conditions, providing a foundation for understanding their pathophysiology. b) Analyze the diagnostic approach for congenital laryngeal diseases, 	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 22.3	 a) Evaluate the management and treatment options for congenital laryngeal diseases, including conservative management, surgery, and speech therapy, and justify the treatment plan based on the severity of symptoms and the specific diagnosis. b) Develop a follow-up strategy for infants with congenital laryngeal diseases to monitor their respiratory function, vocal development, and potential long-term effects. 	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Tracheosto				
OTOR 23.1	a) Define tracheostomy and explain the indications for performing this procedure, such as airway obstruction, long-term ventilation needs, and respiratory	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions &

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	failure, emphasizing clinical decision-making. b) Identify the different types of tracheostomy tubes and their components, including cuffed and uncuffed tubes, and discuss when each type is used based on the patient's clinical condition.			Clinical Image And Video Assessment (CIVA)
OTOR 23.2	 a) Demonstrate an understanding of the step-by-step process of performing a tracheostomy, b) Evaluate the potential complications associated with tracheostomy, and apply appropriate interventions to manage these complications. 	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 23.3	a) Assess the nursing care required for a patient with a tracheostomy, including airway management, suctioning, and the prevention of respiratory infections, based on evidence-based clinical guidelines. b) Develop a management plan for long-term tracheostomy care, including patient and family education on the use of the tracheostomy tube, emergency procedures, and regular follow-ups to monitor respiratory function.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Sleep apne	a syndrome			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 24.1	a) Describe the pathophysiological mechanisms underlying obstructive and central sleep apnea, emphasizing how airway obstruction or neurological dysfunction leads to disrupted sleep and systemic complications. b) Identify key clinical features of sleep apnea syndrome—such as loud snoring, witnessed apneas, daytime sleepiness—and correlate them with diagnostic criteria used in sleep studies like polysomnography.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 24.2	a) Differentiate between obstructive and central sleep apnea based on patient history, physical examination, and diagnostic results to aid in accurate diagnosis and management planning. b) Analyze the complications of untreated sleep apnea, including cardiovascular risks (e.g., hypertension, arrhythmia), metabolic dysfunction, and impaired cognitive function.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 24.3	a) Develop an individualized treatment plan for patients with sleep apnea, integrating behavioral modifications, CPAP	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	therapy, and potential surgical interventions such as uvulopalatopharyngoplasty (UPPP), based on severity and patient compliance. b) Evaluate patient response to treatment using follow-up sleep studies and clinical feedback, and adjust management plans accordingly to improve quality of life and reduce comorbid risks.			& Clinical Image And Video Assessment (CIVA)
Hoarseness				
OTOR 25.1	 a) Define hoarseness as an abnormal change in voice quality, pitch, or volume due to pathology affecting the vocal cords or laryngeal structures. b) List the common causes of hoarseness, including laryngitis, vocal cord nodules or paralysis, laryngeal tumors, and gastroesophageal reflux disease (GERD). c) Explain the clinical significance of persistent hoarseness lasting more than two weeks and its potential link to laryngeal malignancies, especially in 	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
	high-risk individuals such as smokers.				
OTOR 25.2	 a) Conduct a focused history and physical examination to evaluate hoarseness, emphasizing voice use patterns, associated symptoms (e.g., dysphagia, hemoptysis), and risk factors. b) Interpret findings from diagnostic tools like indirect laryngoscopy, flexible nasolaryngoscopy, and imaging (CT/MRI) to identify the underlying pathology. 	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)	
OTOR 25.3	a) Formulate an evidence-based management plan based on etiology, ranging from voice rest and medical therapy to referral for phonosurgery or oncology when indicated. b) Monitor voice improvement or progression and counsel patients on voice hygiene and preventive strategies, particularly for those with occupational voice demands.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)	
Trauma of	Trauma of the larynx and cervical masses				
OTOR 26.1	a) Describe the anatomical structures of the larynx and neck relevant to traumatic injuries and the	K	Large group lectures	multiple choice questions (MCQ) & Short Answer	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
	potential impact on airway function and phonation. b) Identify the clinical features and mechanisms of laryngeal trauma (e.g., blunt trauma, penetrating injuries) and recognize red flag signs requiring urgent intervention.			Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 26.2	 a) Differentiate between benign and malignant cervical masses based on history, physical examination, and initial diagnostic workup such as ultrasound or fine-needle aspiration (FNA). b) Develop an initial clinical approach to the management of laryngeal trauma, 	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 26.3	a) Formulate a differential diagnosis for cervical swellings in different age groups, incorporating knowledge of congenital, inflammatory, and neoplastic causes. b) Collaborate effectively with surgical, radiological, and oncology teams in the evaluation and treatment planning for patients presenting with cervical masses or laryngeal trauma.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
Trauma of	Trauma of the larynx and cervical masses					
OTOR 27.1	a) Describe the anatomical structures of the larynx and neck relevant to traumatic injuries and the	K	Large group lectures	multiple choice questions (MCQ) & Short Answer		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	potential impact on airway function and phonation. b) Identify the clinical features and mechanisms of laryngeal trauma (e.g., blunt trauma, penetrating injuries) and recognize red flag signs requiring urgent intervention.			Questions & Clinical Image And Video Assessment (CIVA)
OTOR 27.2	Differentiate between benign and malignant cervical masses based on history, physical examination, and initial diagnostic workup such as ultrasound or fine-needle aspiration (FNA).	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 27.3	Develop an initial clinical approach to the management of laryngeal trauma, including airway protection, imaging modalities, and indications for surgical intervention.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 27.4	Formulate a differential diagnosis for cervical swellings in different age groups, incorporating knowledge of congenital, inflammatory, and neoplastic causes.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				(CIVA)
OTOR 27.5	Collaborate effectively with surgical, radiological, and oncology teams in the evaluation and treatment planning for patients presenting with cervical masses or laryngeal trauma.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
ENT emer	gencies		l	
OTOR 28.1	Recognize the signs and symptoms of common ENT emergencies such as epistaxis, airway obstruction, peritonsillar abscess, foreign body aspiration, and sudden sensorineural hearing loss.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 28.2	Distinguish between life- threatening and non-life- threatening ENT conditions using clinical assessment and diagnostic tools to prioritize management.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 28.3	Apply appropriate first-line emergency interventions, including airway stabilization, nasal packing, or abscess drainage, based on current clinical guidelines.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				And Video Assessment (CIVA)
OTOR 28.4	Integrate decision-making skills in emergency scenarios to determine when to escalate care or refer to specialized ENT or surgical services.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 28.5	Demonstrate confidence and accuracy in initiating basic life support (BLS) and managing airway compromise in ENT-related trauma or obstruction cases.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Infection in	ENT			
OTOR 29.1	Identify common bacterial, viral, and fungal infections affecting the ear, nose, and throat, including otitis media, rhinosinusitis, and pharyngitis.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 29.2	Differentiate between acute and chronic infections, understanding their pathophysiology and clinical manifestations, to inform	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	diagnosis and treatment.			& Clinical Image And Video Assessment (CIVA)
OTOR 29.3	Apply appropriate diagnostic tests, such as culture, PCR, or imaging, to confirm the presence of infection and determine the causative agent.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 29.4	Evaluate the treatment options for ENT infections, including antibiotic selection, supportive care, and non-pharmacological interventions, considering patient-specific factors.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 29.5	Demonstrate the ability to recognize complications of ENT infections, such as abscess formation or sepsis, and escalate care when necessary.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Trauma in I	ENT	N	umber of learn	ning Objectives: (8)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 30.1	Identify the common causes of trauma in ENT, including blunt force, penetrating injuries, and thermal or chemical burns, and their effects on the ear, nose, and throat.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 30.2	Differentiate between types of trauma, such as nasal fractures, tympanic membrane perforation, and laryngeal injury, based on clinical examination and imaging findings.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 30.3	Assess the severity of ENT trauma, recognizing when immediate intervention is required, and applying appropriate first-aid measures (e.g., airway management, bleeding control).	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 30.4	Implement diagnostic tools, such as nasal endoscopy, CT scans, and hearing tests, to assess the extent of injury and formulate a treatment plan.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 30.5	Evaluate treatment options for ENT trauma, including surgical and conservative interventions, and understand the potential complications, such as infection, scarring, and airway obstruction.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Practical

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Larynx E	xamination + Laryngeal Instrume	ents + Laryı	ngeal Case	
OTOR 1.1	Identify the anatomical structures of the larynx, including vocal cords, epiglottis, and surrounding tissues, during a clinical examination of the larynx.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image and Video Assessment (CIVA)
OTOR 1.2	Perform a detailed laryngeal examination using essential laryngeal instruments (e.g., laryngoscope, rigid endoscope) to assess for abnormalities such as inflammation, lesions, and asymmetry.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 1.3	Demonstrate proficiency in the correct handling and use of laryngeal instruments during clinical assessments, ensuring safety and accuracy during the procedure.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 1.4	Analyze common clinical cases of laryngeal conditions such as hoarseness, dysphagia, or airway obstruction, and correlate examination findings with possible diagnoses, including conditions like laryngitis, vocal cord paralysis, or laryngeal carcinoma.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
	Evaluate the need for further diagnostic procedures based on findings during the laryngeal examination, recommending appropriate follow-up tests or treatments, including imaging or biopsy when necessary.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Ear Exan	nination + Ear Instruments + Ear	Cases		
OTOR 2.1	 a) Identify the anatomical landmarks of the ear, including the outer ear, middle ear, and inner ear, during a comprehensive ear examination. b) Perform a thorough ear examination using otoscopic instruments to inspect for abnormalities such as ear infections, perforations, or foreign bodies, demonstrating correct technique and patient comfort. 	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 2.2	Demonstrate proficiency in using specialized ear instruments, such as the otoscope, tuning fork, and tympanometer, to assess hearing function and detect signs of	K/S	Small group learning, Clinical session, Outpatient clinic &	multiple choice questions (MCQ) & Short Answer Questions &

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	conductive or sensorineural hearing loss.		Skill lab	Clinical Image And Video Assessment
OTOR 2.3	Analyze common clinical cases of ear conditions such as otitis media, ear trauma, or cerumen impaction, correlating physical examination findings with potential diagnoses.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 2.4	Develop a treatment and management plan based on ear examination findings, recommending appropriate interventions, such as ear cleaning, antibiotics, or referral for audiological testing.	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Nose Exa	mination + Nasal Instruments + N	asal Cases		
OTOR 3.1	Perform a systematic anterior rhinoscopy using a nasal speculum and headlight to identify common nasal pathologies (e.g., septal deviation, polyps) in a clinical skills lab by the end of the session.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 3.2	a) Identify and correctly name at least five nasal examination instruments	K/S	Small group learning,	multiple choice questions (MCQ)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
	 (e.g., Thudicum nasal speculum, nasal dressing forceps) during a practical demonstration with 100% accuracy. b) Demonstrate proper handling and sterilization techniques for nasal instruments during a practical lab within a 10-minute time limit. 		Clinical session, Outpatient clinic & Skill lab	& Short Answer Questions & Clinical Image And Video Assessment (CIVA)	
OTOR 3.3	Interpret clinical findings from at least three nasal cases (e.g., allergic rhinitis, epistaxis, nasal trauma) and present differential diagnoses and management plans during a case-based discussion.	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)	
OTOR 3.4	Assess patient history and perform a complete ENT examination including nasal inspection and palpation in a simulated patient encounter, scoring ≥85% on the departmental checklist.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)	
	Audiology				
OTOR 4.1	By the end of the session, students will be able to describe the basic principles of audiology, including hearing tests, audiogram interpretation, and common auditory disorders, and demonstrate their understanding	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions &	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
	by interpreting an audiogram case study		111011045	Clinical Image And Video Assessment (CIVA)		
OTOR 4.2	Identify the different types of hearing loss (conductive, sensorineural, and mixed) and their clinical presentations.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 4.3	Successfully differentiate between the types of hearing loss by analyzing case scenarios provided during the session.	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 4.4	a) The content is aligned with students' current level of knowledge and can be achieved through interactive case-based learning.	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions &Clinical Image And Video Assessment (CIVA)		
ENT Emo	ENT Emergencies					
OTOR 5.1	a) Recognize and manage the most common ENT emergencies, such as foreign body aspiration, epistaxis (nosebleeds), and acute airway obstruction.	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions &		

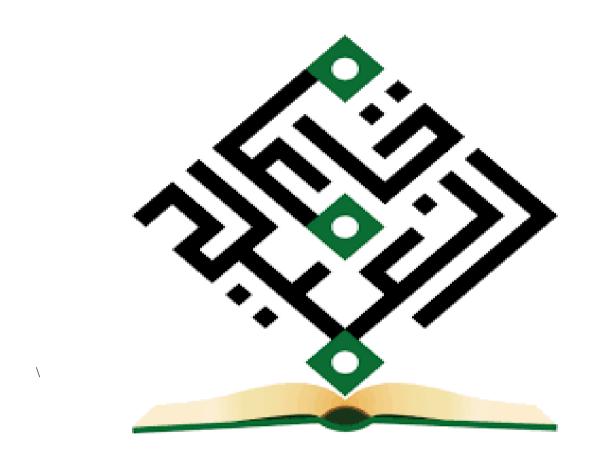
Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	b) By the end of the session, students will be able to list and describe the steps involved in the management of each emergency scenario and demonstrate their knowledge through case discussions.			Clinical Image And Video Assessment (CIVA)
OTOR 5.2	a) This objective is achievable with the use of case studies, demonstrations, and structured guidelines that will be provided throughout the lecture. b) Understanding ENT emergencies is critical in clinical practice to ensure timely intervention and prevent complications.	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 5.3	Students should be able to accurately identify and describe the management of these emergencies by the conclusion of the class, within the 2-hour session.	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Case Disc	cussion			
OTOR 6.1	 a) Develop clinical reasoning by analyzing ENT cases involving common conditions b) students should be able to take a focused ENT history, suggest appropriate differential diagnoses, and outline an initial management plan for at least two case scenarios. 	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 6.2	Through interactive discussion, supervision, and guided clinical scenarios, students will practice applying theoretical knowledge in real-life clinical contexts.	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 6.3	Strengthening diagnostic and management skills in ENT is crucial for future clinical rotations and patient care responsibilities.	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
X-RAY				
OTOR 7.1	By the end of the session, students will be able to identify key radiological features of common ENT conditions such as sinusitis, nasal bone fractures, mastoiditis, and deviated nasal septum, and correlate them with clinical presentations to aid diagnosis and management.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 7.2	By the end of this session, students will be able to analyze ENT-related X-ray images, distinguish between normal and pathological findings, and apply this knowledge in forming accurate clinical impressions for cases involving trauma, infections, or structural abnormalities.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				Assessment (CIVA)
Slide show	v			
OTOR 8.1	students will be able to identify and summarize key clinical features, diagnostic approaches, and management plans for the most prevalent ENT diseases (such as otitis media, allergic rhinitis, sinusitis, tonsillitis, and nasal polyps) through analysis of visual slide presentations, and demonstrate their understanding by participating in a case-based discussion.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 8.2	a) Differentiate between similar ENT conditions shown in slide images (e.g., allergic vs. infectious rhinitis) using clinical reasoning within 5 minutes per case in a timed activity. b) Summarize key learning points from each ENT case slide including likely diagnosis, investigation, and basic management steps in a written report submitted by the end of the session.	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

code	Subject	Theory	Practice	Units
code	Subject	Theory	Tractice	Onits
(SURG 503)	Surgery	105	135	11.5
(MEDI 501)	Internal medicine	75	75	7.5
(OBST 502)	Gynecology	60	30	5
(PAED 505)	Pediatrics	60	30	5
(PSYC 510)	Psychiatry	30	30	4
(DERM 506)	Dermatology	30	30	3
(OPTH 507)	Ophthalmology	30	30	3
(OTOR 508)	E.N. T	30	30	3
	Extracurricular Activity	30		
		450	290	42

Fifth grade



Surgery

Academic Program Description

This academic program description summarizes the course's most essential qualities and the learning objectives that the student is expected to attain, indicating whether he or she made advantage of all of the resources that are accessible.

Educational Establishmet	University of Al-Ameed
Scientific Department	Surgical department
Name of the Professional Academic Program.	Modified traditional curriculum
Final Graduation Certificate	M.B.Ch.B بكالوريوس طب وجراحة عامة .
Educational system. Annual/courses/other	Annual
Approved accreditation program	Approved accreditation program Iraqi National Guideline on Standards for Established and Accrediting Medical School
Other external factors	1-Availability of relevant scientific research in the field of specialization 2-Access to global electronic networks 3-Access to traditional and digital libraries 4-Teaching aids such as data show and PowerPoint presentations 5-Availability of equipped classrooms 6-Use of free online communication platforms (e.g., Free Conference Call
Date the description was written	1/4/2025

Academic program objective

- 1-Graduate doctors with a strong foundation in surgery, enabling them to understand, diagnose, and treat surgical cases in emergency departments, surgical wards, and outpatient clinics. Strengthen students' clinical skills through theoretical and practical discussions, clinical patient examinations in hospitals, and hands-on training in skills laboratories. Additionally, conduct surgical workshops at the college to discuss surgical cases and explore their management.
- 2-Provide training and skills to practice surgery safely by diagnosing and treating common and urgent surgical cases, as well as managing trauma and emergency situations.
- 3-Integrate modern educational techniques and advanced technology into teaching methods and surgical programs, while utilizing information and communication technologies to share knowledge, conduct research, and develop surgical curricula.
- 4-Promote cultural exchange and establish bilateral partnerships with medical schools and professional surgical organizations at the Arab and international levels to expand academic and scientific collaboration in the field of surgery.
- 5-Strengthen collaboration between the college and the community by organizing seminars, conferences, and workshops that address national surgical and health issues.

- 6-Support the preparation of future leaders in the field of surgery, empowering them to achieve excellence and leadership in their medical specialties.
- 7-Understand global health and public health strategies related to surgical care access, safe surgery initiatives, and trauma system development.
- -88- Discussing the importance of patient education Explain the importance of early screening programs and understand the role of lifestyle modification, Identify risk factors Promote trauma prevention

The most reliable resources for program information are

- 1- Morgan & Mikhail's clinical anesthesiology 6th edition 2018 (Anesthesia).
- 2- General Ophthalmology.
- 3- Kansaki, Clinical Ophthalmology (Ophthalmology).
- 4- Adam's, Outline of orthopedics (Orthopedics).
- 5- Adam's, Outline of fractures (Fracture).
- 6- Apley's System of Orthopaedics and Fractures 10TH Edition (Orthopaedics)
- 7- Diseases of Ear, Nose & Throat (ENT).
 - 8- Peter Armstrong diagnostic radiology 7th edition 2013 (Radiology).
 - 9- Essential neurosurgery 3rd edition (Neurosurgery).
- 10- Bailey & Love's Short Practice of Surgery (Plastic Surgery).
- 11. Sabiston and spencer surgery of the chest 9th edition

Number Principles in 1	Learning Objective nanagement of	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
fractures	management of			
SURG1.1	Explain the biomechanics of bone healing, including primary and secondary fracture healing, and the factors that influence this process. Classify fractures based on location, pattern, and mechanism of injury, utilizing common classification systems (e.g., AO classification). Health promotion Promote fall prevention in the elderly: home safety checks, proper footwear, and balance exercises. Encourage calcium and vitamin D intake through diet or supplements. Promote weight-bearing exercises to maintain bone density. Screen for osteoporosis in at-risk populations Differentiate between open and closed fractures and outline the principles of initial management, including wound.	K/S	LARGE GROUP TEACHING LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ SHORT ANSWER
	initial management, including wound care, splinting, and antibiotic prophylaxis Discuss the indications for conservative versus surgical management of fractures, including casting, external fixation, and internal fixation techniques Explain the principles of post-fracture rehabilitation, including weight-bearing restrictions and physiotherapy protocols		TEACHING	QUESTION /MCQ
Complication	s of fractures			
SURG2.1	Describe the pathophysiology of fracture nonunion and malunion and discuss treatment options such as bone grafting and revision surgery. Explain the mechanism and clinical presentation of compartment	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	syndrome, including indications for fasciotomy . Describe the management of infection in open fractures, including surgical debridement, antibiotic therapy, and staged reconstruction technique			
SURG2.2	Describe post-traumatic osteoarthritis as a long-term complication of intraarticular fractures and its management strategies. Explain the principles of management of fat embolism syndrome and its differentiation from other causes of acute respiratory distress in trauma patients	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Injuries of th	e upper limb			
SURG3.1	Describe the mechanisms, clinical presentation, and management of common shoulder dislocations, including anterior and posterior dislocations	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG3.2	Differentiate between rotator cuff tears and adhesive capsulitis based on clinical features and imaging findings	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Injuries of th	e upper limb			
SURG4.1	Explain the pathophysiology and treatment of supracondylar fractures of the humerus in children, including indications for closed reduction and percutaneous pinning.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG4.2	Discuss the management of radial head fractures and Monteggia and Galeazzi fractures based on stability and displacement.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Injuries of th	e upper limb			
SURG5.1	Interpret imaging findings in carpal fractures, particularly scaphoid fractures, and discuss the risk of avascular necrosi	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG5.2	Discuss the surgical and non-surgical management of distal radius fractures, including Colles and Smith fractures.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
Injuries of the	Injuries of the lower limb					
SURG6.1	Describe the classification and management of femoral neck fractures, including indications for fixation versus arthroplasty.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		
SURG6.2	Describe the principles of open reduction and internal fixation (ORIF) in lower limb fractures	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		
Injuries of the	lower limb					
SURG7.1	Discuss the management of patellar fractures and extensor mechanism injuries.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		
SURG7.2	Explain the clinical presentation and management of tibial plateau fractures and their impact on knee joint function	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		
Injuries of the	elower limb					
SURG8.1	Discuss the indications for total hip and knee replacement following post-traumatic arthritis	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		
SURG8.2	Formulate a rehabilitation protocol for patients recovering from lower limb fractures and joint surgeries.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		
Injuries of the	pelvis					
SURG8.1	Discuss the indications for total hip and knee replacement following post-traumatic arthritis	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		
SURG8.2	Formulate a rehabilitation protocol for patients recovering from lower limb fractures and joint surgeries.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		
Principles and	l diagnosis in orthopaedics					
SURG9.1	Explain the role of history-taking and physical examination in diagnosing musculoskeletal conditions.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG9.2	. Describe the indications and limitations of common orthopedic imaging techniques, including X-ray, CT, MRI, and ultrasound. Health promotion Educate on proper lifting techniques and ergonomic workstation setup. Promote physical activity and core strengthening to prevent low back pain. Counsel overweight individuals on weight loss to reduce joint stress. Encourage early management of joint injuries to prevent chronic problems. Differentiate between inflammatory	K/S	LARGE	/MCQ SHORT
	and mechanical musculoskeletal pain based on clinical features and laboratory tests. Discuss the role of bone biopsy in diagnosing orthopedic infections and tumors. Differentiate between inflammatory and mechanical musculoskeletal pain based on clinical features and laboratory tests. Explain the importance of gait analysis in diagnosing lower limb pathologies		GROUP TEACHING	ANSWER QUESTION /MCQ
Treatment of	orthopedic disorders, Amputations, Diabet	tic foot		
SURG9.1	Discuss the indications for limb amputation, including trauma, malignancy, and chronic infection. Explain the principles of diabetic foot ulcer management, including wound debridement, offloading, and vascular assessment	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG9.2	Describe the classification of diabetic foot infections and their implications for limb salvage. .Interpret Doppler ultrasound findings in peripheral vascular disease related to diabetic foot complications.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Osteomyelitis				
SURG10.1	Describe the pathophysiology of osteomyelitis, including the mechanisms of hematogenous spread, contiguous infection, and direct inoculation. Classify osteomyelitis into	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	acute, subacute, and chronic types, and differentiate between pyogenic and tuberculous osteomyelitis.			
SURG10.2	Discuss the microbiology of osteomyelitis, including the role of Staphylococcus aureus and the importance of culture-guided antibiotic therapy. Explain the principles of surgical debridement in chronic osteomyelitis and indications for sequestrectomy and bone grafting Describe the role of antibiotic therapy in osteomyelitis, including the use of biofilm-active agents and duration of treatment.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Septic arthriti	s and TB			
SURG11.1	Describe the pathophysiology of septic arthritis, including hematogenous spread and direct inoculation mechanisms. . Explain the clinical presentation of septic arthritis and differentiate it from other causes of acute monoarthritis.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG11.2	Describe the management of septic arthritis, including emergent joint aspiration, intravenous antibiotics, and indications for arthroscopic lavage. Explain the pathophysiology and clinical presentation of tuberculous arthritis, including Pott's disease and its musculoskeletal complications.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Osteochondri	tis, Osteoarthritis and Rheumatoid arthritis	s		
SURG12.1	Describe the pathophysiology of osteochondritis dissecans and its impact on joint integrity. Differentiate between primary and secondary osteoarthritis based on etiology, risk factors, and clinical features. Interpret radiographic findings of osteoarthritis, including joint space narrowing, osteophyte formation, and subchondral sclerosis	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG12.2	Compare non-surgical management options for osteoarthritis, including NSAIDs, intra-articular injections, and	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	physiotherapy. Explain the indications and surgical techniques for total joint replacement in end-stage arthritis. Describe the complications of rheumatoid arthritis affecting the musculoskeletal system, including atlantoaxial subluxation.			/MCQ
Bone Tumors				
SURG13.1	Classify bone tumors into benign and malignant types, and differentiate between primary and metastatic bone tumors. Describe the clinical presentation of osteosarcoma, Ewing's sarcoma, and chondrosarcoma, and their typical age distributions. Interpret radiographic features of benign and malignant bone tumors, including periosteal reactions (sunburst, Codman's triangle)	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG13.2	Discuss the role of biopsy (needle vs. open) in diagnosing bone tumors and the importance of staging. Explain the principles of limb-salvage surgery and the indications for amputation in bone tumor management.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Genetic bone	disorders and dysplasia			
SURG14.1	Describe the genetic basis and clinical features of common skeletal dysplasias, including achondroplasia and osteogenesis imperfecta Discuss the role of growth factor mutations in disorders such as fibrous dysplasia and multiple hereditary exostoses. Interpret radiographic and genetic testing findings in skeletal dysplasias. Explain the pathophysiology and orthopedic complications of osteogenesis imperfecta, including fracture susceptibility and scoliosis.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG14.2	Describe the indications for limb-lengthening procedures in short stature syndromes. Explain the role of bisphosphonates in managing brittle bone diseases	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Metabolic bo	ne diseases			
SURG15.1	Discuss the diagnosis and treatment of osteomalacia and rickets. Describe the clinical features and management of Paget's disease of bone	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG15.2	Discuss the role of calcium, vitamin D, and bisphosphonates in metabolic bone disease. Explain the management of hyperparathyroidism and its skeletal effects	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Poliomyelitis	and neuropathic disorders			
SURG16.1	Discuss the clinical presentation, diagnosis, and management of post- polio syndrome, emphasizing its late- onset progressive muscle weakness, fatigue, and functional impairment	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG16.2	Describe the pathophysiology of poliomyelitis, including its viral etiology, effects on the anterior horn cells of the spinal cord, and the resulting flaccid paralysis and muscle atrophy	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Peripheral ne	erve injuries			
SURG17.1	Classify peripheral nerve injuries using Seddon's and Sunderland's classifications. Describe the clinical presentation of common upper limb nerve injuries, including median, ulnar, and radial nerve palsies. Discuss the pathophysiology of nerve regeneration and factors affecting recovery	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG17.2	Describe the indications for surgical nerve repair, including neurorrhaphy, nerve grafting, and tendon transfers. Explain the management of nerve compression syndromes, such as carpal tunnel syndrome and cubital tunnel syndrome. Discuss the role of physiotherapy and rehabilitation in recovering nerve function	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Disorders of t	he shoulder & elbow			
SURG18.1	Discuss the diagnosis and treatment of shoulder impingement syndrome and adhesive capsulitis (frozen shoulder)	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG18.2	Describe the mechanisms, clinical presentation, and treatment options for elbow epicondylitis (tennis elbow and golfer's elbow).	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	he shoulder &			
SURG19.1	Differentiate between primary and secondary osteoarthritis of the shoulder and elbow and discuss treatment options.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG19.2	Explain the pathophysiology between primary and secondary osteoarthritis of the shoulder and elbow.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Disorders of t	he wrist and hand			•
SURG20.1	Explain the pathophysiology, clinical features, and management of carpal tunnel syndrome and trigger finger	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG20.1	Discuss the pathophysiology and management of De Quervain's tenosynovitis.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Disorders of t	he wrist and hand			
SURG21.1	Formulate a treatment plan for Dupuytren's contracture, including indications for surgical intervention	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG21.1	Describe the approach to diagnosing and managing wrist arthritis, including inflammatory and degenerative cause	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Disorders of t	he hip			1

		Domain	Teaching	Assessment
Number	Learning Objective	K/S/A/C	Learning Methods	Methods
SURG22.1	Differentiate between developmental dysplasia of the hip (DDH) and slipped capital femoral epiphysis (SCFE).	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG22.2	interpret gait abnormalities related to hip disorders, such as Trendelenburg gait	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Disorders of the	he hip			
SURG23.1	Discuss the etiology, clinical features, and diagnostic workup of Transient Synovitis of the hip, emphasizing its differentiation from septic arthritis through laboratory markers and imaging (Kocher criteria).	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG23.2	Explain the clinical presentation, risk factors, and diagnostic approach to Slipped Capital Femoral Epiphysis (SCFE), including the role of Klein's line on radiographs and indications for urgent surgical fixation.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Disorders of t	he knee			
SURG24.1	Discuss the diagnosis and treatment of ACL and PCL injuries, including surgical reconstruction techniques.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG24.2	Describe the clinical features and management of prepatellar and infrapatellar bursitis.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Disorders of t	he knee			
SURG25.1	Discuss complications following knee surgery, such as deep vein thrombosis and implant loosening	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG25.2	Discuss the pathophysiology and treatment of chondromalacia patella	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Disorders of t	he ankle and foot			
SURG26.1	Describe the surgical and non-surgical management of hallux valgus (bunion) Describe the biomechanics of the ankle and foot, including the role of the	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

		Dami	Teaching	A	
Number	Learning Objective	Domain K/S/A/C	Learning Methods	Assessment Methods	
	plantar fascia				
SURG26.2	Discuss the diagnosis and treatment of Achilles tendon rupture	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
Radiodiagnos	Radiodiagnosis: introduction to radiology				
SURG27.1	Explain the basic principles of radiographic imaging, including X-ray, ultrasound, CT, MRI, and nuclear medicine, and their respective indications. Describe the advantages and limitations of different imaging modalities in the diagnosis of common diseases such as pneumonia, fractures, and abdominal pathologies. Interpret normal radiographic anatomy and identify key landmarks in different imaging techniques.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
SURG27.2	Differentiate between normal and pathological findings on various imaging modalities, such as air-space opacities in pneumonia or masses in cancer. Explain the indications and contraindications for different imaging modalities in emergency settings	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
Radiodiagnos	is: Imaging of chest I				
SURG28.1	Explain the radiographic features of common lung pathologies, including pneumonia, tuberculosis, pulmonary edema, and lung cancer. Differentiate between obstructive and restrictive lung diseases on imaging, including COPD and interstitial lung diseases.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
SURG28.2	Interpret common chest radiographic patterns, such as alveolar versus interstitial opacities, air bronchograms, and cavitary lesions. Discuss the imaging findings of pleural diseases, including pleural effusion, pneumothorax, and pleural thickening. Discuss the indications and limitations of different imaging techniques in	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	

Number	Learning Objective evaluating chest pathologies	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	is: Imaging of			
chest 2 SURG29.1	Differentiate between benign and malignant pulmonary nodules based on radiological characteristics. Interpret the radiologic features of infectious lung diseases such as tuberculosis, fungal infections, and viral pneumonias	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG29.2	Identify radiographic signs of chest trauma, such as rib fractures, hemothorax, and lung contusions. Discuss the imaging approach to airway diseases, including bronchiectasis and tracheomalacia. Interpret the radiologic findings of aspiration pneumonia and differentiate it from other infectious processes	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Radiodiagnos	is: Mediastinum			
SURG30.1	Explain the differential diagnosis of an anterior mediastinal mass, including thymoma, teratoma, thyroid goiter, and lymphoma. Interpret imaging findings in middle mediastinal pathologies, such as bronchogenic cysts and lymphadenopathy.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG30.2	Describe the radiologic features of posterior mediastinal lesions, including neurogenic tumors. Differentiate between benign and malignant mediastinal masses using imaging characteristics on CT and MRI. Discuss the role of imaging in diagnosing mediastinitis and its complications.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Radiodiagnosis: Breast imaging and screening for malignancy				
SURG31.1	. Describe the principles of mammography, breast ultrasound, and breast MRI in the detection of breast pathology. Differentiate between benign and	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
	malignant breast lesions based on imaging characteristics. Explain the indications and limitations of breast screening programs, including the role of BI-RADS classification.				
	Interpret mammographic findings of common breast conditions, including fibroadenomas, cysts, and invasive carcinoma.				
SURG31.2	Describe the imaging features of inflammatory breast disorders, such as mastitis and abscesses. Explain the indications and technique of image-guided breast biopsies, including stereotactic, ultrasound-guided, and MRI-guided biopsies.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
Radiodiagnos imaging	is: hepatobiliary				
SURG32.1	Describe the imaging modalities used for evaluating liver diseases, including ultrasound, CT, MRI, and nuclear medicine. Interpret imaging findings of hepatic tumors, including hepatocellular carcinoma (HCC), metastases, and hemangiomas. Explain the role of MRCP in evaluating biliary obstructions, including choledocholithiasis and biliary strictures. Discuss the role of contrast-enhanced ultrasound in liver lesion characterization. Interpret imaging findings in acute and	K/S	LARGE GROUP TEACHING LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ SHORT ANSWER QUESTION /MCQ	
	chronic liver infections, including hepatic abscesses and viral hepatitis. Explain the imaging approach to liver trauma and parenchymal injuries.			/WeQ	
Radiodiagnos	Radiodiagnosis: Imaging of Pancreas and spleen				
SURG33.1	Describe the normal radiologic anatomy of the pancreas and spleen. Interpret imaging findings of acute and chronic pancreatitis on ultrasound, CT, and MRI. Discuss the role of MRI in characterizing pancreatic cystic lesions, including mucinous and serous	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	cystadenomas.			
SURG33.2	Describe the imaging findings in splenic trauma, including lacerations and hematomas. Discuss the radiologic approach to diagnosing splenomegaly and infiltrative splenic disorders. Interpret the role of nuclear medicine in assessing splenic function.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Radiodiagnosi	is: urinary tract imaging			
SURG34.1	explain the imaging findings and diagnostic approach to urinary tract infections (UTIs), including pyelonephritis and emphysematous pyelonephritis. Differentiate nephrolithiasis from other causes of flank pain using KUB X-ray, ultrasound, and CT KUB. Discuss the role of imaging in the evaluation of obstructive uropathy, including hydronephrosis and ureteric strictures.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG34.2	Interpret the radiologic features of renal masses, distinguishing between benign (angiomyolipoma) and malignant (renal cell carcinoma) lesions. Describe the role of nuclear medicine studies such as DMSA and MAG3 scans in assessing renal function and obstruction. Discuss the imaging approach to congenital anomalies of the urinary tract, including horseshoe kidney and vesicoureteral reflux.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Radiodiagnosis: Imaging in Female genital tract				
SURG35.1	Describe the imaging modalities used in gynecologic imaging, including ultrasound (transabdominal and transvaginal), MRI, and hysterosalpingography.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain	Teaching Learning	Assessment	
Nullibel	Learning Objective	K/S/A/C	Methods	Methods	
SURG35.2	Interpret ultrasound findings of common uterine pathologies, such as fibroids, adenomyosis, and endometrial hyperplasia.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
Radiodiagnosis: Imaging in Female genital tract					
SURG36.1	Differentiate between benign and malignant ovarian masses using imaging criteria, including the O-RADS classification.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
SURG36.2	Discuss the role of imaging in the diagnosis of polycystic ovary syndrome (PCOS), including ovarian volume and follicle count. Explain the imaging approach to pelvic inflammatory disease (PID) and tuboovarian abscess.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
Radiodiagnos	is: plain abdomen				
SURG37.1	Describe the normal radiographic anatomy of the abdomen on plain X-ray, including bowel gas patterns, soft tissue shadows, and calcifications. Interpret the radiologic features of common acute abdominal conditions, including pneumoperitoneum, bowel perforation, and volvulus. Differentiate between small bowel and large bowel obstruction based on plain abdominal radiographs.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
SURG37.2	Discuss the role of plain X-rays in the evaluation of renal and gallbladder calculi, including their limitations and the need for further imaging. Explain the radiologic findings associated with paralytic ileus and its differentiation from mechanical obstruction. Describe the imaging approach to gastrointestinal bleeding, including the role of contrast studies and alternative modalities like CT angiography.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	
Peritoneal Ca	Peritoneal Cavity and Retroperitoneum				
SURG38.1	Describe the normal anatomy of the peritoneal and retroperitoneal spaces using ultrasound, CT, and MRI. . Discuss the imaging features of peritoneal carcinomatosis and its	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	differentiation from peritoneal tuberculosis. Interpret radiologic findings of ascites, including differentiation between transudative and exudative ascites using ultrasound and CT.		Wethous	
SURG38.2	. Explain the role of imaging in diagnosing retroperitoneal hematomas, including their causes (trauma, anticoagulation, ruptured aneurysm). Recognize the radiologic features of retroperitoneal fibrosis and its impact on ureters and surrounding structures. Discuss the imaging approach to adrenal gland pathology, including incidental adrenal masses, pheochromocytomas, and adrenal metastases			
Radiodiagnos	is: GIT-I imaging			
SURG39.1	Describe the gross and microscopic anatomy of the large intestine and its functional role in water absorption and stool formation.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG39.2	Differentiate between diverticulosis and diverticulitis, including risk factors, clinical presentation, and complications (perforation, abscess, fistula) Health promotion Advocate for colorectal cancer screening (e.g., colonoscopy) starting at age 45 or earlier if family history exists. Educate on warning signs like rectal bleeding, change in bowel habits, and unexplained weight loss.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Radiodiagnos	is: GIT-II imaging			
SURG40.1	interpret the radiologic features of inflammatory bowel disease (Crohn's disease and ulcerative colitis) using fluoroscopy, CT enterography, and MRI enterography. Differentiate between infectious and inflammatory colitis using radiologic criteria. Describe the imaging findings in colorectal cancer and the role of CT colonography in screening. Discuss the role of contrast	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number SURG40.2	fluoroscopy and cross-sectional imaging in diagnosing diverticular disease and its complications. Explain the imaging approach to small bowel obstruction and large bowel obstruction, including closed-loop obstruction. Recognize the radiologic signs of mesenteric ischemia and bowel infarction on CT angiography. Interpret the imaging findings of appendicitis and its complications, including perforation and abscess formation.	Domain K/S/A/C	Teaching Learning Methods LARGE GROUP TEACHING	Assessment Methods SHORT ANSWER QUESTION /MCQ
Radiodiagnos	is: Bone-I imaging			
SURG41.1	Describe the normal radiographic anatomy of bones, including the cortical and trabecular structures. Explain the radiologic approach to evaluating bone trauma, including common fracture patterns. Differentiate between benign and malignant bone tumors based on radiographic features such as periosteal reaction and matrix mineralization	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG41.2	Interpret the imaging findings of metabolic bone diseases, including osteoporosis and rickets. Discuss the role of MRI in detecting bone marrow abnormalities, including osteomyelitis and metastatic disease. Recognize the radiographic features of bone infections, including Brodie's abscess in subacute osteomyelitis. Explain the use of nuclear medicine bone scans in detecting metastatic bone disease	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Radiodiagnosis: Bone-II imaging				
SURG42.1	Explain the role of imaging in bone infections, including septic arthritis and tuberculous osteomyelitis. Discuss the radiologic features of Paget's disease and its complications, including secondary osteosarcoma	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG42.2	Differentiate between inflammatory and degenerative joint diseases based on radiographic and Explain the role of dual-energy X-ray absorptiometry (DEXA) in assessing bone mineral density and diagnosing osteoporosis MRI findings.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Radiodiagnos	is: Imaging of Joints			
SURG43.1	Describe the normal radiographic and MRI anatomy of major joints, including the shoulder, knee, and hip. Interpret the imaging findings of osteoarthritis, including joint space narrowing, osteophytes, and subchondral sclerosis. Differentiate between inflammatory and infectious arthritis using radiologic criteria.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG43.2	Explain the role of ultrasound in assessing joint effusions, synovitis, and guided aspirations. Discuss the imaging approach to ligamentous and meniscal injuries of the knee using MRI. Recognize the radiologic features of crystal arthropathies, including gout and pseudogout Interpret the imaging findings of rotator cuff tears and labral injuries on MRI	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Radiodiagnos	is: Spine Imaging			
SURG44.1	Interpret the imaging features of degenerative spine diseases, including spondylosis, disc herniation, and spinal stenosis. Differentiate between traumatic spinal fractures, including stable vs. unstable fractures and their classification systems (Denis and AO).	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG44.2	Discuss the role of MRI in diagnosing spinal cord injuries, myelopathy, and nerve root compression. Interpret imaging findings in spinal infections, including pyogenic spondylodiscitis and tuberculous Pott's disease.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	Describe the radiologic approach to spinal tumors, including primary bone tumors, metastases, and spinal cord neoplasms.			
Radiodiagnos	sis: Skeletal trauma imaging			
SURG45.1	Describe the basic principles of fracture imaging, including proper positioning and selection of X-ray views. Interpret MRI findings in occult fractures and stress fractures, particularly in weight-bearing bones.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG45.2	Interpret radiologic findings of common long bone fractures, including femoral shaft, tibial plateau, and humeral fractures. Differentiate between open and closed fractures and discuss the radiologic criteria for assessing fracture healing	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Vascular and	Interventional Radiology			
SURG46.1	Describe the principles and techniques of vascular imaging, including ultrasound Doppler, CT angiography (CTA), and MR angiography (MRA). Discuss the role of interventional radiology in managing peripheral arterial disease, including angioplasty and stenting. Interpret imaging findings of acute arterial occlusions, including embolism, thrombosis, and traumatic vascular injuries.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG46.2	Explain the role of catheter-directed thrombolysis in deep vein thrombosis (DVT) and pulmonary embolism (PE). Discuss the imaging approach and interventional management of aortic aneurysms and dissections. Describe the role of embolization in managing gastrointestinal and genitourinary bleeding.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Skull and bra	in imaging			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG47.1	Describe the normal anatomy of the brain and skull as seen on CT and MRI. Interpret imaging findings of acute stroke, including ischemic and hemorrhagic subtypes, and the role of CT perfusion. Discuss the role of CT in evaluating traumatic brain injury, including skull fractures, intracranial hemorrhage, and diffuse axonal injury.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG47.2	Differentiate between primary and secondary brain tumors using MRI features, including contrast enhancement patterns. Explain the imaging approach to hydrocephalus and intracranial pressure abnormalities. Describe the role of MR spectroscopy and functional MRI in neuroimaging.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Skull and brai	n imaging			
SURG48.1	Describe the normal radiologic anatomy of the paranasal sinuses, orbits, and neck using CT and MRI. Interpret the imaging features of common sinus pathologies, including acute and chronic sinusitis, mucoceles, and fungal infections. . Discuss the role of imaging in orbital trauma, including blowout fractures and retrobulbar hematomas.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG48.2	Explain the radiologic findings of thyroid and parathyroid disorders, including goiter, nodules, and hyperparathyroidism. Differentiate between benign and malignant salivary gland tumors using ultrasound and MRI criteria. Recognize the imaging features of deep neck infections, including	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Thoracic and	vascular trauma			
SURG49.1	Describe the mechanisms of thoracic trauma, including blunt and penetrating injuries, and their effects on respiratory and hemodynamic stability. Explain the pathophysiology, clinical presentation, and surgical management	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	of pneumothorax, hemothorax, and tension pneumothorax. Interpret the imaging findings (X-ray, CT, FAST) for thoracic trauma, including rib fractures, flail chest, pulmonary contusions, and aortic injury			
SURG49.2	Describe the classification and management of vascular trauma, including penetrating injuries, blunt aortic injury, and iatrogenic vascular injuries. Explain the principles of damage control surgery in major vascular and thoracic trauma. Recognize the complications of thoracic trauma, including ARDS, cardiac tamponade, and post-traumatic empyema.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Esophagoscop Bronchoscopy				
SURG50.1	Describe the indications, contraindications, and techniques of rigid and flexible esophagoscopy and bronchoscopy. Interpret normal and abnormal findings in endoscopic evaluation of the esophagus and tracheobronchial tree, including strictures, ulcers, and tumors. Discuss the role of esophagoscopy in the diagnosis and management of esophageal foreign bodies, caustic injuries, and Barrett's esophagus	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG50.2	Describe the indications and techniques for endoscopic biopsy, dilation, and stent placement in esophageal disease. Explain the role of bronchoscopy in diagnosing and managing airway obstruction, hemoptysis, and lung infections. Recognize the endoscopic features of lung cancer and its role in tissue diagnosis through biopsy and bronchoalveolar lavage.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Pleural diseas	Recognize the endoscopic features of lung cancer and its role in tissue diagnosis through biopsy and			

Number SURG51.1 SURG51.1	Learning Objective Neck: Cysts, Tumors & Lymphadenopathy . Differentiate between congenital, inflammatory, and neoplastic neck masses based on clinical and imaging findings Explain the role of fine-needle aspiration cytology (FNAC), ultrasound, and CT/MRI in the	Domain K/S/A/C K/S	Teaching Learning Methods LARGE GROUP TEACHING LARGE GROUP TEACHING	Assessment Methods SHORT ANSWER QUESTION /MCQ SHORT ANSWER QUESTION
	diagnosis of neck masses			/MCQ
Neoplasms of	the lung			
SURG52.1	Classify lung neoplasms, including small cell and non-small cell lung carcinoma, mesothelioma, and benign lung tumors. Explain the risk factors, genetic mutations, and pathogenesis of lung cancer.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	Interpret radiologic findings (X-ray, CT, PET-CT) in lung cancer, including primary lesions, nodal involvement, and metastases.			
SURG52.1	Discuss the principles of lung cancer staging and its impact on treatment decisions. Describe the role of biopsy techniques, including bronchoscopy, transthoracic needle aspiration, and mediastinoscopy, in lung cancer diagnosis.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Mediastinal tu	nmors			
SURG53.1	Classify mediastinal tumors based on anatomic compartments (anterior, middle, and posterior) and their common differentials. Describe the imaging characteristics of mediastinal masses using X-ray, CT, MRI, and PET-CT	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG53.2	Describe the indications and principles of surgical resection for mediastinal tumors. Recognize the role of chemotherapy and radiation therapy in non-surgical management of mediastinal malignancies.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Vascular tum	ors			
SURG54.1	Discuss the surgical approach to oral cavity cancers, including resection, reconstruction, and postoperative rehabilitation.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG54.2	Explain the pathophysiology, clinical presentation, and management of salivary gland infections (sialadenitis) and sialolithiasis. Differentiate between benign and malignant salivary gland tumors.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Surgical aspe	cts of congenital heart diseases			
SURG55.1	Describe the embryological development of the heart and the pathophysiology of congenital heart defects (CHDs). Classify CHDs into cyanotic and acyanotic conditions and their clinical manifestations. Interpret echocardiographic and cardiac catheterization findings in common CHDs such as Tetralogy of Fallot, ASD, VSD, and TGA. Discuss the indications and timing of surgical intervention for CHDs. Explain the principles of corrective surgeries, including arterial switch operation, Fontan procedure, and Blalock-Taussig shunt. Describe the perioperative care and potential complications in pediatric	K/S	LARGE GROUP TEACHING LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ SHORT ANSWER QUESTION /MCQ
Surgical aspe	cardiac surgery. cts of valvular heart diseases			
SURG56.1	Classify valvular heart diseases based on etiology, including rheumatic, degenerative, and infective causes. Explain the pathophysiology and hemodynamic consequences of aortic and mitral valve diseases. Interpret echocardiographic findings in valvular heart disease, including stenosis and regurgitation severity. Discuss indications for valve repair versus valve replacement surgery.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Teaching Learning Methods	Assessment Methods
LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG58.1	Describe the principles and components of cardiopulmonary bypass (CPB), including the oxygenator, heat exchanger, and pump system. Explain the physiological effects of CPB on the cardiovascular, pulmonary, renal, and hematologic systems. Discuss the indications for CPB and extracorporeal membrane oxygenation (ECMO) in cardiac surgery and critical care settings.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG58.2	Describe the technique of myocardial protection during CPB, including cardioplegia solutions and hypothermia. Recognize the complications of CPB, including systemic inflammatory response syndrome (SIRS), coagulopathy, and neurological dysfunction. Discuss the role of mechanical circulatory support devices, including intra-aortic balloon pumps (IABP) and ventricular assist devices (VADs).	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Introduction	and basic principles of plastic surgery			
SURG59.1	Explain the principles of wound healing, tissue repair, and scar formation relevant to plastic surgery. Describe the fundamental surgical techniques used in plastic surgery, including debridement, skin closure, and tension-free suturing.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG59.2	Recognize the importance of preoperative planning and patient counseling in reconstructive and aesthetic procedures. . Discuss the role of plastic surgery in trauma, cancer reconstruction, and congenital anomalies. Identify common complications in plastic surgery, including wound dehiscence, infection, and hematoma formation.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Introduction a	and basic principles of plastic surgery			

Number SURG60.1	Learning Objective Describe the concept of reconstructive	Domain K/S/A/C	Teaching Learning Methods LARGE	Assessment Methods SHORT
	surgery using the reconstructive ladder, from primary closure to free tissue transfer. Discuss the principles of tissue expansion and its applications in burn reconstruction and congenital anomalies. Health promotion Promote the use of sunscreen (SPF 30+), protective clothing, and avoidance of peak sun hours (10 AM – 4 PM). Discourage use of tanning beds. Encourage regular skin self-exams and dermatology visits for suspicious lesions.		GROUP TEACHING	ANSWER QUESTION /MCQ
SURG60.2	Recognize the psychological impact of plastic surgery and strategies for managing patient expectations. Discuss advances in minimally invasive and robotic-assisted plastic surgical techniques. Explain the role of plastic surgery in gender-affirming procedures and their ethical considerations	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Skin graft				
SURG61.1	Define the types of skin grafts (split-thickness, full-thickness, and composite grafts) and their indications. Explain the physiology of skin graft take, including plasmatic imbibition, inosculation, and revascularization. Discuss the indications and contraindications for skin grafting in burns, chronic wounds, and traumatic injuries.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG62.2	Describe the steps of skin graft harvesting, preparation, and application, including donor site care. Recognize complications of skin grafting, such as graft failure, contractures, and pigmentation changes. Interpret the role of dermal substitutes and bioengineered skin in reconstructive surgery.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Flaps				
SURG63.1	Define different types of flaps (local, regional, free flaps) and their indications in reconstructive surgery. Explain the classification of flaps based on blood supply, including random-pattern and axial-pattern flaps. Describe the surgical techniques for commonly used local flaps, including Z-plasty, rotation flaps, and advancement flaps.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG63.2	Recognize the factors influencing flap survival, including ischemia-reperfusion injury and venous congestion. Describe the role of perforator flaps in modern reconstructive surgery and their advantages over traditional flaps. Explain the management of flap complications, including flap loss, partial necrosis, and infection.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Cleft lip and p	palate			
SURG64.1	Explain the embryological basis and pathophysiology of cleft lip and palate formation. Describe the classification systems for cleft lip and palate, including unilateral, bilateral, and complete/incomplete clefts.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG64.2	Explain the multidisciplinary approach to cleft care, involving plastic surgeons, speech therapists, and orthodontists. Describe the role of pre-surgical orthopedics (e.g., NAM – nasoalveolar molding) in cleft lip and palate management.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Burns				
SURG65.1	Describe the classification of burns based on depth (superficial, partial-thickness, full-thickness) and total body surface area (TBSA). Explain the pathophysiology of burn injury, including the systemic inflammatory response and fluid shifts. Discuss the principles of burn	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number SURG65.2	resuscitation, including the Parkland formula and appropriate fluid management. Recognize the early signs of airway injury in inhalational burns and the indications for early intubation. Describe the role of escharotomy in circumferential burns and its indications.	Domain K/S/A/C	Teaching Learning Methods LARGE GROUP TEACHING	Assessment Methods SHORT ANSWER QUESTION /MCQ
	. Explain the principles of wound care in acute burns, including topical antimicrobial agents and dressing selection.			
Burns				
SURG66.1	Describe the indications and timing for early excision and grafting in burn patients. Discuss the different types of skin grafts and their role in burn reconstruction. Explain the use of dermal substitutes and artificial skin in severe burn cases. Health promotion educate families on safe cooking practices, especially around children. Promote safe handling of chemicals, hot liquids, and electrical devices. Install smoke detectors and promote fire safety	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG66.2	Describe the role of flaps in burn reconstruction, including pedicled and free flaps. . Discuss contracture prevention and management using splints and physiotherapy. Recognize the psychological impact of burns and the role of rehabilitation.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Burns				
SURG67.1	Explain the long-term complications of burn injuries, including hypertrophic scarring and keloids. Discuss the pathophysiology and treatment of burn contractures and their impact on function. Describe the role of pressure garments and silicone therapy in burn scar management.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG67.2	Explain the surgical techniques for contracture release, including Z-plasty and tissue expansion. Discuss the risk factors and prevention of burn wound infections and chronic ulcers. Recognize the psychosocial challenges faced by burn survivors and the role of support groups. Explain the principles of secondary burn	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Electrical inju	nries			
SURG68.1	Describe the mechanisms of electrical injuries and their effects on skin, muscles, and internal organs. Recognize the different types of electrical burns, including high-voltage, low-voltage, and flash burns. Discuss the principles of acute management, including fluid resuscitation and cardiac monitoring.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG68.2	Explain the role of early surgical debridement and fasciotomy in electrical burns with compartment syndrome. Describe the pathophysiology and management of deep tissue necrosis and delayed burn injury progression. Recognize the systemic complications of electrical injuries, including arrhythmias, rhabdomyolysis, and renal failure. Discuss long-term functional rehabilitation strategies for patients with electrical burns.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
CNS congeni	tal disorders (spina bifida and congenital h	ydrocephal	us)	
SURG69.1	Describe the embryological development of the central nervous system and the pathophysiology of neural tube defects, including spina bifida. Classify spina bifida into occulta, meningocele, and myelomeningocele, and explain their clinical presentations. Discuss the role of prenatal screening, including maternal serum alphafetoprotein (AFP) and fetal ultrasound, in detecting spina bifida.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG69.2	Explain the surgical management of spina bifida and associated complications, including tethered cord syndrome and Chiari malformation. Define congenital hydrocephalus, its etiologies (e.g., aqueductal stenosis, Arnold-Chiari malformation), and clinical manifestations. Describe the imaging modalities used to diagnose hydrocephalus, including cranial ultrasound, CT, and MRI.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
CNS space of	ecupying lesions (CNS tumor and infection	1)		
SURG70.1	Classify CNS tumors based on their origin (primary vs. secondary) and histological types (gliomas, meningiomas, pituitary adenomas, etc.). Describe the clinical presentation of CNS tumors, including signs of increased intracranial pressure, focal neurological deficits, and seizures.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	Explain the role of neuroimaging (MRI with contrast, CT, PET scans) in the diagnosis and localization of CNS tumors.			
SURG70.2	Explain the surgical approaches to CNS tumors, including craniotomy, stereotactic biopsy, and endoscopic tumor removal. Discuss adjuvant treatment options for CNS tumors, including radiotherapy (stereotactic radiosurgery, whole-brain radiation) and chemotherapy. Describe complications of CNS tumors, such as herniation syndromes, hydrocephalus, and peritumoral edema, and their management.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
_	ccupying lesions (CNS tumor and infection		T	
SURG71.1	Differentiate between bacterial, viral, fungal, and parasitic CNS infections that can present as space-occupying lesions. Explain the pathophysiology of brain abscess formation, including common pathogens and risk factors. Describe the clinical presentation of CNS infections, including fever,	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	headache, altered mental status, and focal neurological deficits.			
SURG71.2	Discuss the imaging findings of CNS infections, including ring-enhancing lesions in brain abscesses on MRI/CT scans. Explain the medical management of CNS infections, including empirical antibiotic therapy, antifungal/antiviral treatments, Describe the indications and techniques for surgical drainage of brain abscesses and decompressive procedures.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Traumatic bra	ain injuries			
SURG72.1	Classify traumatic brain injuries (mild, moderate, severe) based on the Glasgow Coma Scale (GCS) and clinical presentation. Describe the pathophysiology of primary (coup-contrecoup, shear injury) and secondary brain injury (ischemia, swelling, inflammation). Explain the role of imaging (CT, MRI) in evaluating TBI, including detecting contusions, hematomas, and diffuse axonal injury. Health promotion Promote helmet use during motorcycling, biking, skateboarding, and contact sports. Advocate for seatbelt use in all vehicles and child car seat safety. Encourage fall prevention strategies for the elderly: handrails, non-slip mats, proper lighting, and regular vision checks.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG72.2	Discuss initial resuscitation of TBI patients, including airway protection, intracranial pressure (ICP) control, and hemodynamic stabilization. Describe indications for surgical intervention in TBI, including craniotomy for hematoma evacuation and decompressive craniectomy.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning	Assessment Methods
SURG73.1	Differentiate between types of intracranial hemorrhages (epidural, subdural, subarachnoid, intracerebral) based on etiology and imaging findings. Describe the clinical presentation of intracranial hemorrhages, including the classic "lucid interval" in epidural hematomas. Explain the indications for conservative versus surgical management of intracranial	K/S	Methods LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG73.2	hemorrhages Discuss the role of ICP monitoring and medical management (osmotic therapy, blood pressure control) in hemorrhagic brain injury. Describe types of skull fractures (linear, depressed, basilar) and their clinical significance. recognize signs of basilar skull fractures, including Battle's sign, raccoon eyes, and cerebrospinal fluid (CSF) leaks.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Spine and Spi	nal Cord injuries			
SURG74.1	Classify spinal cord injuries (complete vs. incomplete) and their associated syndromes (Brown-Séquard, central cord, anterior cord syndromes). Describe the principles of spinal stabilization in trauma, including the use of cervical collars and log-roll techniques. Discuss the role of imaging (X-ray, CT, MRI) in diagnosing spinal fractures and spinal cord injury. Explain the acute management of spinal cord injury, including methylprednisolone use and neurogenic shock treatment. Recognize complications of spinal	K/S	LARGE GROUP TEACHING LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ SHORT ANSWER QUESTION /MCQ
	cord injury, including pressure ulcers, deep vein thrombosis (DVT), and autonomic dysreflexia.			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Spine and Spi	nal Cord injuries – Management			
SURG75.1	Explain the indications for conservative versus surgical management of spinal injuries. Describe the role of spinal decompression surgery in cases of acute spinal cord compression. Discuss the use of spinal fusion techniques in cases of unstable fractures. Explain post-operative care in spinal surgery, including infection prevention and pain management.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG75.2	Explain complications of spinal injury management, including failed back syndrome. Describe the indications and outcomes of spinal cord stimulation therapy.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Non traumati	c disorders of the spine - I			
SURG76.1	Describe the pathophysiology and natural history of degenerative spine diseases, including spondylosis, spinal stenosis, and disc herniation. Explain the clinical presentation of degenerative spine disorders, including radiculopathy, myelopathy, and neurogenic claudication. Discuss the role of imaging (X-ray, MRI, CT) in diagnosing degenerative spinal conditions and differentiating them from other causes of back pain	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG76.2	Describe conservative management options, including physical therapy, analgesia, and spinal injections for degenerative spine conditions. Explain indications for surgical interventions such as laminectomy, discectomy, and spinal fusion. Recognize complications of untreated spinal degeneration, including chronic pain syndromes and progressive neurological deficits	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
Non traumatic spine- II						
SURG77.1	Describe the pathophysiology of spinal infections, including vertebral osteomyelitis, discitis, and spinal epidural abscess. List common causative organisms (e.g., Staphylococcus aureus, Mycobacterium tuberculosis) and their routes of spread. Explain the clinical presentation of spinal infections, including fever, back pain, neurological deficits, and systemic symptoms. Discuss the role of laboratory markers (CRP, ESR, blood cultures) and imaging (MRI with contrast) in diagnosing spinal infections.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		
SURG77.2	Describe the indications for surgical intervention, including decompression, drainage of abscesses, and spinal stabilization procedures. Recognize complications of spinal infections, including deformity, paralysis, and systemic sepsis. Discuss preventive strategies, including early recognition of infections in high-risk patients (e.g., diabetics, IV drug users).	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		
Non traumati	c disorders of the					
SURG78.1	Classify spinal tumors into primary (benign vs. malignant) and secondary (metastatic) lesions. Describe the clinical presentation of spinal tumors, including axial pain, radiculopathy, myelopathy, and systemic symptoms. Explain the diagnostic approach to spinal tumors, including MRI with contrast, CT, and biopsy techniques. Discuss the principles of surgical management, including en bloc resection, decompression, and spinal stabilization.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ		

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Number	Learning Objective	Domain K/S/A/C	Learning	Assessment Methods
SURG78.2	Evaloin thousand of adjuvent	K/S	Methods LARGE	CHODT
SUKG/8.2	. Explain the role of adjuvant therapies, including radiotherapy and	K/S	GROUP	SHORT ANSWER
	chemotherapy, in managing spinal		TEACHING	QUESTION
	tumors.		ILACIIINO	/MCQ
	Recognize complications of spinal			/MCQ
	tumors, including pathological			
	fractures, spinal cord compression, and			
	paraplegia.			
	Discuss the prognosis and quality-of-			
	life considerations for patients with			
	spinal tumors			
Anaesthesia:	definition, history			
& types				
SURG79.1	Define anaesthesia and classify its	K/S	LARGE	SHORT
	types (general, regional, and local),		GROUP	ANSWER
	explaining their mechanisms of action.		TEACHING	QUESTION
	Describe the historical evolution of			/MCQ
	anaesthesia, including major			
	discoveries like ether, chloroform, and			
	modern inhalational agents.			
	Compare and contrast the indications, advantages, and limitations of general,			
	regional, and local anaesthesia.			
SURG79.2	Identify common diseases that impact	K/S	LARGE	SHORT
Serie / 5.2	anaesthetic management, such as	11.5	GROUP	ANSWER
	chronic obstructive pulmonary disease		TEACHING	QUESTION
	(COPD), heart failure, and obstructive			/MCQ
	sleep apnea.			
	Describe the ethical and medico-legal			
	aspects of anaesthesia, including			
	patient consent and safety protocols.			
	preoperative evaluation			
	. General anaesthesia		I	Larronm
SURG80.1	Conduct a comprehensive preoperative	K/S	LARGE	SHORT
	assessment, including airway		GROUP	ANSWER
	evaluation, cardiovascular status, and comorbidities like diabetes and		TEACHING	QUESTION /MCQ
	hypertension.			INICQ
	Recognize the importance of ASA			
	(American Society of			
	Anesthesiologists) classification in risk			
	stratification for surgical patients.			
	. Identify laboratory tests and imaging			
	studies required before anaesthesia,			
	particularly in patients with conditions			
	like chronic kidney disease and anemia			
CLIDCOUG	Discuss the principles of faction	V/C	LADCE	CHODT
SURG80.2	Discuss the principles of fasting guidelines, including their importance	K/S	LARGE GROUP	SHORT ANSWER
	in preventing aspiration pneumonia		TEACHING	QUESTION
	in preventing aspiration pheumonia	<u> </u>	1 L/ ICIIII VO	ZOED LION

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Decouvery from	and Mendelson's syndrome. Explain the impact of common systemic diseases (e.g., coronary artery disease, asthma, chronic liver disease) on anaesthetic choice and perioperative management. Describe premedication protocols, including anxiolytics, anticholinergics, and prophylactic antibiotics. Outline the management of patients on chronic medications (e.g., anticoagulants, insulin, beta-blockers) before surgery.			/MCQ
complications	n anaesthesia. And			
SURG81.1	Describe the physiological process of emergence from anaesthesia and the role of the post-anaesthesia care unit (PACU). Identify criteria for safe discharge from PACU, including airway patency, hemodynamic stability, and return of protective reflexes. Discuss common postoperative complications such as nausea and vomiting, respiratory depression, and hypothermia. Explain the pathophysiology, recognition, and management of postoperative delirium, especially in elderly patients.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG81.2	Recognize the causes and treatment of post-operative respiratory failure, including at electasis and pulmonary embolism. Discuss cardiovascular complications such as hypotension, arrhythmias, and myocardial infarction in high-risk surgical patients. Outline strategies for managing post-operative pain using multimodal analgesia, including opioids, NSAIDs, and regional technique.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Regional & sp	pinal anaesthesia.			
SURG82.1	Differentiate between spinal, epidural, and peripheral nerve blocks, explaining their indications and contraindications. Describe the physiological effects of spinal anaesthesia, including sympathetic blockade, vasodilation, and hypotension. Explain the technique of spinal anaesthesia, including patient positioning, landmark identification, and complications like post-dural puncture headache.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG82.2	Recognize the advantages of regional anaesthesia in high-risk patients, such as those with respiratory diseases (e.g., COPD) or cardiovascular compromise. Discuss common complications of regional anaesthesia, including hypotension, high spinal block, and nerve injury. Explain the use of ultrasound-guided regional anaesthesia and its role in improving precision and safety. Describe the use of regional anaesthesia in orthopedic procedures, such as knee and hip replacements	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Ų.	y of anaesthetic			
drugs.	Classify commonly used an aethetic	K/S	LARGE	SHORT
SURG83.1	Classify commonly used anaesthetic drugs, including inhalational agents, intravenous induction agents, and adjuvants. Explain the pharmacokinetics and pharmacodynamics of volatile anaesthetics (e.g., sevoflurane, desflurane) and their impact on organ function. Describe the mechanisms of intravenous anaesthetics, including propofol, etomidate, ketamine, and barbiturates. Recognize the clinical applications and side effects of neuromuscular blocking agents and their reversal drugs.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Learning Objective	Domain	Teaching Learning	Assessment
	K/S/A/C	Methods	Methods
Discuss opioid analgesics used in	K/S	LARGE	SHORT
			ANSWER
•		TEACHING	QUESTION
			/MCQ
<u> </u>			
anaesthetic systemic toxicity (LAST).			
Describe the pharmacological			
• •			
n pregnancy, ne old			
Discuss the physiological changes in	K/S	LARGE	SHORT
pregnancy and their impact on		GROUP	ANSWER
		TEACHING	QUESTION
			/MCQ
Identify the risks of general			
anaesthesia in pregnancy, including			
aspiration and difficult airway			
• •			
-			
	K/S	LARGE	SHORT
complications in neonates and infants,		GROUP	ANSWER
including apnea and hypoglycemia.		TEACHING	QUESTION
			/MCQ
* -			
_			
fractures to minimize systemic			
complications.			
	K/S	LARGE	SHORT
perioperative and critical care		GROUP	ANSWER
management.		TEACHING	QUESTION
Describe the principles of mechanical			/MCQ
ventilation and its indications in post-			
•			
	anaesthesia, including fentanyl, morphine, and their role in multimodal pain management. Identify common local anaesthetics (e.g., lidocaine, bupivacaine), their toxicity profiles, and treatment of local anaesthetic systemic toxicity (LAST). Describe the pharmacological considerations in patients with hepatic or renal impairment. pregnancy, me old Discuss the physiological changes in pregnancy and their impact on anaesthetic management. Explain the principles of anaesthesia for cesarean sections, including spinal and epidural anaesthesia. Identify the risks of general anaesthesia in pregnancy, including aspiration and difficult airway management. Describe the physiological differences in pediatric patients and how they affect anaesthetic drug metabolism and dosing. Recognize common anaesthetic complications in neonates and infants, including apnea and hypoglycemia. Explain the considerations for anaesthesia in elderly patients, focusing on reduced organ function and increased sensitivity to drugs. Discuss the role of regional anaesthesia in elderly patients with hip fractures to minimize systemic complications. of intensive care practice Define the role of the ICU in perioperative and critical care management. Describe the principles of mechanical	Discuss opioid analgesics used in anaesthesia, including fentanyl, morphine, and their role in multimodal pain management. Identify common local anaesthetics (e.g., lidocaine, bupivacaine), their toxicity profiles, and treatment of local anaesthetic systemic toxicity (LAST). Describe the pharmacological considerations in patients with hepatic or renal impairment. Describe the pharmacological considerations in patients with hepatic or renal impairment. Describe the physiological changes in pregnancy, and their impact on anaesthetic management. Explain the principles of anaesthesia for cesarean sections, including spinal and epidural anaesthesia. Identify the risks of general anaesthesia in pregnancy, including aspiration and difficult airway management. Describe the physiological differences in pediatric patients and how they affect anaesthetic drug metabolism and dosing. Recognize common anaesthetic complications in neonates and infants, including apnea and hypoglycemia. Explain the considerations for anaesthesia in elderly patients, focusing on reduced organ function and increased sensitivity to drugs. Discuss the role of regional anaesthesia in elderly patients with hip fractures to minimize systemic complications. of intensive care practice Define the role of the ICU in perioperative and critical care management. Describe the principles of mechanical ventilation and its indications in post-operative patients. Recognize common post-operative ICU complications such as sepsis, acute respiratory distress syndrome	Discuss opioid analgesics used in anaesthesia, including fentanyl, morphine, and their role in multimodal pain management. Identify common local anaesthetics (e.g., lidocaine, bupivacaine), their toxicity profiles, and treatment of local anaesthetic systemic toxicity (LAST). Describe the pharmacological considerations in patients with hepatic or renal impairment. Pregnancy, ee old Discuss the physiological changes in pregnancy and their impact on anaesthetic management. Explain the principles of anaesthesia for cesarean sections, including spinal and epidural anaesthesia. Identify the risks of general anaesthesia in pregnancy, including aspiration and difficult airway management. Describe the physiological differences in pediatric patients and how they affect anaesthetic drug metabolism and dosing. Recognize common anaesthetic complications in neonates and infants, including apnea and hypoglycemia. Explain the considerations for anaesthesia in elderly patients, focusing on reduced organ function and increased sensitivity to drugs. Discuss the role of regional anaesthesia in elderly patients, focusing on reduced organ function and increased sensitivity to drugs. Discuss the role of regional anaesthesia in elderly patients, focusing on reduced organ function and increased sensitivity to drugs. Discuss the role of regional anaesthesia in elderly patients, focusing on reduced organ function and increased sensitivity to drugs. Discuss the role of the ICU in perioperative and critical care management. Describe the principles of mechanical ventilation and its indications in post-operative patients. Recognize common post-operative ICU complications such as sepsis, acute respiratory distress syndrome

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	Discuss fluid resuscitation and hemodynamic monitoring in critically ill surgical patients			
SURG85.2	Identify the management of electrolyte imbalances, particularly in patients with renal failure and major trauma. Explain the principles of sedation and analgesia in ventilated patients. Describe the criteria for ICU admission and discharge in surgical patients.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	nition, Anatomical			
	cal considerations.			_
SURG86.1	Define pediatric surgery and describe its scope, including congenital anomalies, neonatal emergencies, and acquired surgical conditions in children. Explain the anatomical and physiological differences between pediatric and adult patients, focusing on the respiratory, cardiovascular, and gastrointestinal systems. Describe the impact of immature organ	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	function (e.g., liver metabolism, renal clearance) on perioperative care and anesthesia in pediatric surgery			
SURG86.2	Identify the principles of fluid and electrolyte management in neonates and children, considering conditions like dehydration and sepsis. Discuss common neonatal surgical emergencies, including Hirschsprung's disease, anorectal malformations, and abdominal wall defects. Explain the importance of early diagnosis and timely surgical intervention in pediatric surgical conditions to prevent long-term complications.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Hirschsprung Anorectal Ma				
SURG87.1	Explain the embryological basis, pathophysiology, and clinical presentation of Hirschsprung's disease, including the absence of ganglion cells in the enteric nervous system. Describe the diagnostic approach to	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG87.2	Hirschsprung's disease, including barium enema, anorectal manometry, and rectal biopsy. Outline the surgical management of Hirschsprung's disease, including pull-through procedures and management of complications like enterocolitis. Classify anorectal malformations (high, intermediate, low), explaining their embryology, clinical features, and associated congenital anomalies. Discuss the diagnostic workup for anorectal malformations, including perineal examination, abdominal ultrasound, and contrast studies. Describe the principles of surgical management for anorectal malformations, including posterior sagittal anorectoplasty (PSARP) and staged procedures. Identify postoperative complications and long-term outcomes, including fecal incontinence and constipation.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	ntestinal atresia,			
Malrotation, r SURG88.1	Explain the embryology and pathophysiology of duodenal atresia, jejunoileal atresia, and colonic atresia, including vascular insult theories. Describe the clinical presentation of neonatal intestinal obstruction, including bilious vomiting, abdominal distension, and failure to pass meconium. Discuss the diagnostic approach, including plain abdominal X-rays, contrast studies (upper GI series for malrotation), and ultrasound. Explain the principles of surgical management, including	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ SHORT ANSWER
	management, including duodenoduodenostomy, resection with primary anastomosis, and Ladd's procedure for malrotation. Recognize the association between meconium ileus and cystic fibrosis, including diagnostic tests (sweat chloride test, genetic testing). Describe the non-operative (N- acetylcysteine enema) and operative		GROUP TEACHING	ANSWER QUESTION /MCQ

Number	Learning Objective management (resection, ileostomy) of	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	meconium ileus			
Esophageal a Tracheoesoph				
& Eventration				
SURG89.1	Explain the embryology and classification (Gross and Vogt) of esophageal atresia and tracheoesophageal fistula. Describe the clinical features of esophageal atresia, including excessive salivation, choking with feeds, and respiratory distress. Discuss the diagnostic and preoperative management of esophageal atresia, including the "inability to pass an NG tube" test and contrast studies.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG89.2	Outline the surgical options for esophageal atresia, including primary anastomosis and staged repair. Describe the pathophysiology of congenital diaphragmatic hernia (CDH) and its impact on pulmonary development. Recognize the clinical presentation of CDH, including respiratory distress, scaphoid abdomen, and mediastinal shift. Explain the principles of preoperative stabilization (gentle ventilation, nitric oxide, ECMO) and surgical repair of CDH.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
	lasia, Hypertrophic			
	sis. GIT foreign body &			
caustic ingest SURG90.1	Explain the pathophysiology of GERD	K/S	LARGE	SHORT
SUKU9U.I	in infants and children, including transient lower esophageal sphincter relaxation. Discuss the indications for medical management (proton pump inhibitors, lifestyle changes) and surgical intervention (Nissen fundoplication) in GERD. Describe the pathophysiology of	N/S	GROUP TEACHING	ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	achalasia and its diagnosis using esophageal manometry and barium swallow. Outline the treatment options for achalasia, including pneumatic dilation, botulinum toxin, and Heller myotomy.hormonal profile.			
SURG90.2	. Recognize the clinical presentation of hypertrophic pyloric stenosis and its characteristic "olive-shaped" mass. Discuss the diagnostic role of ultrasound and the principles of surgical management (Ramstedt pyloromyotomy). Describe the management of GIT foreign body ingestion and caustic ingestion, including indications for endoscopy and surgical removal.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
hygroma, Thy	· ·			
SURG91.1	Discuss the surgical management of congenital neck masses, including the Sistrunk procedure for thyroglossal cysts. Explain the pathophysiology of biliary atresia and its progressive nature leading to liver failure. Recognize the clinical features of neonatal obstructive jaundice and the role of liver function tests and ultrasound in diagnosis.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG91.2	Outline the Kasai portoenterostomy and its role in biliary atresia management. Describe the classification and management of choledochal cysts, including cyst excision with hepaticojejunostomy. Recognize complications such as cholangitis and biliary cirrhosis in untreated biliary anomalies. Discuss the role of liver transplantation in end-stage biliary atresia.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Congenital ab	dominal wall			
SURG92.1	Differentiate between omphalocele and gastroschisis, including their embryology, clinical features, and management. Discuss emergency management of neonates with abdominal wall defects, including temperature regulation and fluid resuscitation. Explain the pathophysiology and management of inguinal hernia and hydrocele in infants	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG92.2	Describe the presentation and management of acute scrotum, including testicular torsion and epididymo-orchitis. Discuss the causes, diagnosis, and treatment of undescended testis, including the role of orchidopexy. Recognize the complications of untreated testicular torsion, including testicular infarction and infertility	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Umbilical her Inguinoscrota acute scrotum	al conditions & a, Inguinal hernia & ndescended testis,			
SURG93.1	. Explain the surgical principles in the repair of abdominal wall defects and their long-term outcomes	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SURG93.2	Discuss the importance of early intervention in congenital inguinoscrotal conditions to prevent complications.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Acute abdomi Appendicitis, Meckel's dive	Intussusception,			
SURG94.1	Differentiate the causes of acute abdominal pain in children based on age, location, and associated symptoms. Describe the pathophysiology, clinical presentation, and complications of acute appendicitis, including perforation and abscess formation. Discuss the diagnostic approach to appendicitis, including clinical scoring	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	systems (Alvarado score), ultrasound, and CT scan indications			
SURG94.2	Explain the surgical management of appendicitis, including laparoscopic versus open appendectomy and post-operative care. Describe the pathophysiology of intussusception, including the role of lead points and the classic "currant jelly stool" presentation. Outline the diagnostic and treatment options for intussusception, including air enema reduction and surgical intervention for failed cases.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
Infantile and on Nephroblaston	childhood tumors,			
tumor), Neuro	oblastoma,			
Sacrococcyge		T	1	
SURG95.1	A. Classify pediatric tumors based on their origin (renal, neural, soft tissue) and differentiate between benign and malignant lesions. B. Explain the pathophysiology, genetic associations (WT1 gene mutations), and clinical presentation of Wilms' tumor. C. Discuss the diagnostic approach to Wilms' tumor, including abdominal ultrasound, CT scan, and histopathology.	K/S	LARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ
SUKG93.2	Outline the treatment protocol for Wilms' tumor, including nephrectomy, chemotherapy, and radiotherapy. Describe the embryology and pathophysiology of neuroblastoma, including its association with adrenal glands and paraneoplastic syndromes. Explain the clinical presentation and staging of neuroblastoma, including bone marrow metastasis and elevated catecholamine metabolites.	N/S	CARGE GROUP TEACHING	SHORT ANSWER QUESTION /MCQ

Practical NEUROSURGERY

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
_	nital Disorders (Spina Bifida al Hydrocephalus)			
SURG1.1	1-Diagnose spina bifida and congenital hydrocephalus using clinical presentation and imaging findings. 2-Outline the surgical management of spina bifida, including early closure and long-term complications.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA
SURG1.2	1 Describe the indications and techniques for ventriculoperitoneal shunting in hydrocephalus 2-Identify and manage common postoperative complications, including infection and shunt malfunction.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA
CNS Space- & Infection	Occupying Lesions (Tumors			
SURG2.1	1 Differentiate between benign and malignant brain tumors based on clinical and imaging findings. 2- Explain the principles of surgical resection, radiotherapy, and chemotherapy for brain tumors.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA
SURG2.2	.1- Recognize the signs of brain abscess and meningitis and outline the surgical and medical management 2- Discuss the role of corticosteroids and intracranial pressure (ICP)	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	management in CNS mass lesions.			
Traumatic E	Brain Injuries			
SURG3.1	1-Perform initial assessment and triage using the Glasgow Coma Scale (GCS) and trauma protocols.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA
	2- Describe indications for emergency craniotomy and decompressive craniectomy in severe head trauma			
SURG3.2	1-Manage increased intracranial pressure (ICP) using medical and surgical interventions.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA
	2-Outline the rehabilitation process and long-term complications of traumatic brain injuries.			
Intracranial Fractures	Hemorrhage & Skull			
SURG4.1	1-Differentiate between epidural, subdural, and intracerebral hemorrhages using clinical and imaging features.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA
	2-Explain the surgical indications for hematoma evacuation and craniotomy			
SURG4.2	1-Manage skull fractures conservatively or surgically, depending on severity and complications. 2-Recognize signs of cerebrospinal fluid (CSF) leak and discuss management strategies.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
Spine & Spinal Cord Injuries					
SURG5.1	1- Perform a thorough neurological assessment using the ASIA impairment scale for spinal cord injuries. 2-Describe indications for spinal stabilization surgery and decompression in trauma cases.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA	
SURG5.2	1-Manage acute spinal cord injury using steroids, immobilization, and surgical interventions. 2-Outline rehabilitation strategies for patients with paraplegia and quadriplegia	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA	

Practical Anesthesia

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Complication Anesthesia	Contraindications, & ons of General & Local			
SURG6.1	1- Identify indications and contraindications for general, spinal, and epidural anesthesia. 2- Recognize and manage anesthesia-related complications such as hypotension, malignant hyperthermia, and local anesthetic toxicity.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION VIVA
SURG6.2	1 Differentiate between regional and general anesthesia in terms of risks, benefits, and indications. 2- Discuss the preoperative assessment required to select an appropriate anesthetic plan.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION VIVA
•	ve, Intraoperative, & ve Anesthesia Management		I	
SURG7.1	1 Conduct a preoperative anesthesia risk assessment, including ASA classification. 2- Implement intraoperative monitoring techniques for oxygenation, ventilation, and hemodynamic stability.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION VIVA
SURG7.2	.1- Recognize and manage postoperative complications such as pain, nausea, and delayed emergence. 2-Describe the principles of postoperative pain management, including multimodal analgesia.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION VIVA

Number	Learning Objective	Domain	Teaching Learning	Assessment
Number	Learning Objective	K/S/A/C	Methods	Methods
1	Contraindications, & ons of General & Local			
Scoring Sys	tems Used in Anesthesia			
SURG8.1	1-Apply the ASA (American Society of Anesthesiologists) classification in preoperative evaluation.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION VIVA
	2- Utilize the Mallampati score for airway assessment and difficult intubation prediction.			
SURG8.2	1- Explain the Glasgow Coma Scale (GCS) in anesthesia for neurological monitoring 2-Use the BIS (Bispectral Index) score to monitor depth of anesthesia during surgery.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION VIVA
Instruments	& Devices in Anesthesia			
SURG9.1	1- Demonstrate the proper use of anesthesia machines and ventilators.2-Identify and manage airway devices such as endotracheal tubes, laryngeal mask airways (LMAs), and fiberoptic scopes	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION VIVA
SURG9.2	1 -Recognize and troubleshoot common issues with anesthesia monitoring equipment. 2- Understand the principles of patient-controlled analgesia (PCA) and regional anesthesia devices.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION VIVA

Practical orthopedics

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Most comm SURG10.1	on upper limb fracture 1- Assess and manage	K/S/A/C	SMALL	VIVA
	common upper limb fractures, including non-surgical and surgical approaches. 2-Perform closed reduction		GROUP TEACHING OUTPATIENT CLININC	CIVA
	and splinting for Colles' and Smith's fractures			
SURG10.2	1 Recognize complications such as nonunion, malunion, and neurovascular injury 2- Describe indications for open reduction and internal fixation (ORIF) in upper limb fractures	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	VIVA CIVA
Most comm	on lower limb fracture			
SURG11.1	1 Differentiate between stable and unstable lower limb fractures using clinical and radiological findings. 2-Explain the principles of weight-bearing restrictions and rehabilitation in lower limb fractures.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	VIVA CIVA
SURG11.2	.1 Manage hip fractures surgically with hemiarthroplasty, total hip replacement, or internal fixation. 2- Recognize and treat complications such as deep vein thrombosis (DVT) and fat embolism.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	VIVA CIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Additional	orthopedics important			
SURG12.1	1-Recognize open fractures and describe the principles of emergency management, including debridement, irrigation, and fixation. 2- Explain the role of traction in managing femoral shaft fractures and its indications	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	VIVA CIVA
SURG12.2	3-Identify and manage complications of fractures, including compartment syndrome and avascular necrosis. 4Describe the principles of post-fracture rehabilitation, including weight-bearing status and physical therapy	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	VIVA CIVA
Additional	orthopedics important			
SURG13.1	1-Differentiate between pathologic fractures and traumatic fractures based on clinical and imaging findings. 2- Explain the use of external fixation in complex fractures and open injuries.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	VIVA CIVA
SURG13.2	1 - Recognize and manage pediatric fractures, including growth plate injuries and remodeling potential.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	VIVA CIVA

Practical Radiology

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Chest Ra	diology			
SURG14.1	1- Interpret chest X-rays to diagnose pneumonia, pneumothorax, pleural effusion, and heart failure. 2-Differentiate between obstructive and restrictive lung diseases on imaging.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION
SURG14.2	 Recognize mediastinal widening and its differential diagnoses. Describe indications for CT thorax in chest pathology. 	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION
Abdomin	al Radiology			
SURG15.1	1 Identify radiological signs of bowel obstruction and perforation.2- Recognize hepatosplenomegaly and its causes using ultrasound and CT.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION
SURG15.2	.1- Interpret contrast studies for gastrointestinal diseases.2- Describe the indications for MRI abdomen in hepatic and pancreatic disorders.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION
Radiology – Objectives	Additional Learning			
SURG16.1	1- Interpret spinal X-rays to identify fractures, spondylolisthesis, and degenerative changes. 2- Recognize the imaging	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION CIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG 16.2	findings of deep vein thrombosis (DVT) using Doppler ultrasound. 3-Interpret musculoskeletal X-rays for common fractures, dislocations, and bone tumors. 4-Recognize the radiologic signs of abdominal aortic aneurysm (AAA) and its complications. 1-Explain the role of nuclear medicine imaging (bone scan, PET scan) in oncological and infection-related diagnoses. 2-Explain the role of nuclear medicine imaging (bone scan, PET scan) in oncological and infection-related diagnoses. 3-Understand the role of contrast-enhanced imaging in diagnosing renal, hepatic, and pancreatic diseases.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION CIVA

Practical Plastic surgery

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Burns mana	gement			
SURG17.1	1- Classify burns based on depth and total body surface area (TBSA). 2-Apply the Parkland formula for fluid resuscitation in severe burns.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION
SURG17.2	1 Recognize indications for early excision and grafting.2- Manage inhalation injury and associated complications.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION

Skin Grafts	Skin Grafts & Flaps						
SURG18.1	1 Differentiate between split-thickness and full-thickness skin grafts. 2- Explain the principles of flap surgery, including local, regional, and free flaps.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION			
SURG18.2	.1 Recognize complications such as graft failure and necrosis. 2-Discuss the use of skin substitutes in wound management.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	SHORT ANSWER QUESTION			

Practical Thoracic surgery

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Chest X-ra	y			
SURG19.1	1- Interpret common chest X-ray findings related to trauma, including pneumothorax, hemothorax, and rib fractures	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA
SURG19.2	1 Differentiate between normal and abnormal anatomical structures on a chest X-ray to aid in rapid trauma assessment	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA

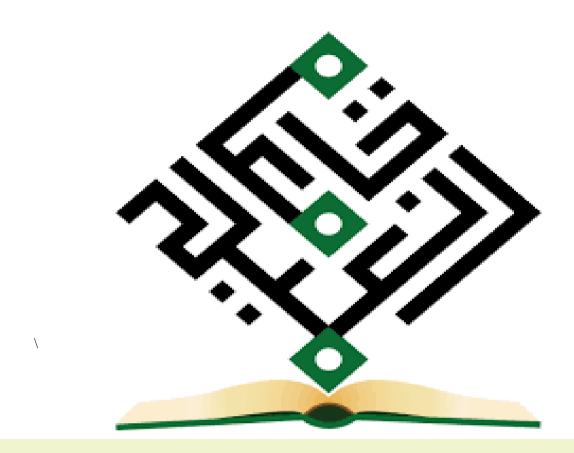
Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Chest Traun	na			
SURG20.1	1- Identify and classify different types of chest trauma, including blunt and penetrating injuries.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA
SURG20.2	.1- Outline the initial management and stabilization of patients with chest trauma following Advanced Trauma Life Support (ATLS) guidelines.	on GROUP TEACHING		CIVA
Chest Drain				
SURG21.1	1- Describe the indications, contraindications, and complications of chest drain insertion.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA
SURG21.2	1- Demonstrate the correct technique for insertion and securement of an intercostal chest drain in a simulated or clinical setting.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA
Vascular Tra	auma			
SURG22.1	1 Recognize signs and symptoms of major vascular injuries and understand their implications in trauma patients.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA
SURG22.2	1- Discuss the principles of emergency management and surgical intervention in vascular trauma, including hemorrhage control and limb salvage.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA

Practical Thoracic surgery

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Kidney Sto	ones			
SURG23.1	1- Diagnose kidney stones using clinical presentation and imaging techniques (US, CT KUB). 2-Outline medical management options, including hydration and alkalinization therapy	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION
SURG23.2	1 Describe indications for extracorporeal shock wave lithotripsy (ESWL) and ureteroscopy 2-Recognize and manage complications such as obstruction and infection.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION
Kidney & E	Bladder Trauma			
SURG24.1	1 Classify renal and bladder injuries based on severity and imaging findings. 2-Outline conservative vs. surgical management approaches in renal trauma.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION
SURG24.2	.1-Describe the role of cystography in diagnosing bladder rupture 2- Manage associated complications, such as urinary extravasation and hemorrhage	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION
urinary Tra	ct Infections (UTIs)			
SURG25.1	 Differentiate between uncomplicated and complicated UTIs. Describe the role of urine culture and antibiotic selection in treatment. 	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
SURG25.2	1- Recognize indications for hospitalization and IV antibiotics in pyelonephritis. 2- Explain preventive strategies for recurrent UTIs. Recognize open fractures and describe the principles of emergency management, including debridement, irrigation, and fixation.	K/S/A/C	SMALL GROUP TEACHING OUTPATIENT CLININC	CIVA SHORT ANSWER QUESTION

Internal medicine



Fifth grade

Academic program discretion

This academic program description provides a brief overview of the key features of the program and the expected learning outcomes for the student, demonstrating whether the student has made the most of the available opportunities. It is accompanied by a description of each course within the program.

Educational Establishment	University of al-ameed
2-Scientific Department	College of medicine
3-Name of the Professional Academic	
Program.	Modified traditional curriculum
4-Final Graduation Certificate	M.B.Ch.B
5- Educational system: Annual/courses/other	Annual
6-Approved accreditation program	Applied for Iraqi National Guideline on Standards for Established and Accrediting Medical School
7-Other external factors	Availability of relevant scientific research in the field of specialization Access to global electronic networks Access to traditional and digital libraries Teaching aids such as data show and PowerPoint presentations Availability of equipped classrooms Use of free online communication platforms (e.g., Free Conference Call)
8-Date the description was written	2024/9/15
9- objectives of academic program	

Graduate doctors with a comprehensive understanding of internal medicine, enabling them to diagnose, manage, and treat a wide range of medical conditions encountered in hospital wards, outpatient clinics, and emergency settings. Enhance students' clinical reasoning and problemsolving skills through integrated theoretical teaching, bedside clinical rounds, and practical hands-on training.

Provide students with the necessary skills and knowledge to perform thorough patient history taking, physical examination, and interpretation of diagnostic tests specific to internal medicine. Equip them to formulate evidence-based management plans for common and complex medical cases.

Incorporate modern educational technologies and active learning methods such as simulation, case-based discussions, and e-learning platforms to improve student engagement and clinical competence in internal medicine.

Foster professional and ethical attitudes by promoting patient-centered care, teamwork, confidentiality, and lifelong learning. Encourage participation in research, community health activities, and interdisciplinary collaboration to prepare future leaders in internal medicine.

10) The most reliable resources for program information are :

REFERENCES:

Hutchison's clinical methods
Macleod's clinical examination
Systematic guide to physical diagnosis
Moby's guide to physical examination
The common symptom guide
Skills for communicating with patient
Davidson's principles and practice of medicine
Kumar and Clark's clinical medicine
Harrison's principles of internal medicine
Oxford textbook of medicine

Internal medic	cine\ Grade 5	
Code: MEDI 501	7.5 Credits	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Toxicology				
MEDI.1.1	Describe general principles of toxicology, including types of toxins and doseresponse relationships.	K	Large Group Teaching	MCQ, Short answer question
MEDI.1.2	Identify clinical features and lab findings in common toxicities (e.g., paracetamol, organophosphates, opioids).	K/S	Large Group Teaching	MCQ, Short answer question
MEDI.1.3	Explain the initial management steps and antidote use in common poisonings.	A	Large Group Teaching	MCQ, Short answer question
MEDI.1.4	Discuss public health and ethical considerations related to toxic exposures and overdose prevention.	С	Large Group Teaching	MCQ, Short answer question
Principles of	antibiotic therapy			
MEDI.2.1	Explain mechanisms of action, spectrum, and classification of major antibiotic groups.	K	Large Group Teaching	MCQ, Short answer question
MEDI.2.2	Identify appropriate empirical antibiotics for common infections (e.g., pneumonia, UTI).	A	Large Group Teaching	MCQ, Short answer question
MEDI.2.3	Describe how to adjust antibiotic therapy based on lab data and renal function.	A	Large Group Teaching	MCQ, Short answer question
MEDI.2.4	Discuss principles of antibiotic stewardship and resistance.	С	Large Group Teaching	MCQ, Short answer question
Steroids: Ind	lications, precautions, and side effects			
MEDI.3.1	Describe pharmacological properties of glucocorticoids and mineralocorticoids.	K	Large Group Teaching	MCQ, Short answer question
MEDI.3.2	List major indications for steroid therapy in clinical practice.	K	Large Group Teaching	MCQ, Short answer question
MEDI.3.3	Explain common adverse effects and monitoring strategies for steroid use.	A	Large Group Teaching	MCQ, Short answer question
MEDI.3.4	Discuss tapering protocols and patient education regarding steroid safety.	С	Large Group Teaching	MCQ, Short answer question
Functional A	anatomy and Physiology of Bone Remodeling			
MEDI.4.1	Describe the anatomy of bones and joints relevant to rheumatologic conditions.	K	Large Group	MCQ, SAQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods Teaching	Assessment Methods
MEDI.4.2	Explain the hormonal and cellular control of bone remodeling.	K	Large Group Teaching	MCQ, SAQ
MEDI.4.3	Discuss the roles of osteoblasts, osteoclasts, and RANK/RANKL pathway.	K	Large Group Teaching	MCQ, SAQ
MEDI.4.5	Apply knowledge of remodeling to clinical conditions like osteoporosis.	A	Outpatient Clinic	CIVA, OSCE
Investigation	of MSK Diseases			
MEDI.5.1	Identify imaging techniques (X-ray, MRI, US) used in MSK diagnostics.	K	Large Group Teaching	MCQ, SAQ
MEDI.5.2	Interpret typical findings in arthritis and soft tissue disorders.	S	Outpatient Clinic	OSCE, SAQ
MEDI.5.3	List key laboratory markers used in rheumatology (RF, anti-CCP, ANA).	K	Large Group Teaching	MCQ, SAQ
MEDI.5.4	Integrate clinical, imaging, and lab findings in diagnosis.	A	Outpatient Clinic	CIVA, OSCE
Presenting Pr	roblems in MSK (Arthritis, Back Pain)			
MEDI.6.1	Differentiate mechanical vs inflammatory joint pain based on history.	K	Large Group Teaching	MCQ, SAQ
MEDI.6.2	Identify red flag symptoms in low back pain (e.g., cauda equina).	A	Outpatient Clinic	OSCE, SAQ
MEDI.6.3	Classify patterns of joint involvement in arthritis.	K	Large Group Teaching	MCQ, SAQ
MEDI.6.4	Use patient presentations to develop differential diagnoses.	A	Outpatient Clinic	CIVA, OSCE
Regional MS	K Pain			
MEDI.7.1	List causes of common regional pain syndromes (shoulder, hip, knee).	K	Large Group Teaching	MCQ, SAQ
MEDI.7.2	Elicit focused history and physical findings to localize pain.	S	Outpatient Clinic	OSCE, CIVA
MEDI.7.3	Discuss diagnostic approaches for regional MSK pain.	A	Large Group Teaching	MCQ, SAQ
MEDI.7.4	Correlate anatomical structures with localized symptoms.	A	Outpatient Clinic	CIVA, OSCE

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Principles of	Management of MSK Diseases (Analgesics, N	SAIDs, DM	IARDs, Biolog	rics)
MEDI.8.1	Explain indications, mechanisms, and side effects of NSAIDs and analgesics.	K	Large Group Teaching	MCQ, SAQ
MEDI.8.2	Describe uses and mechanisms of DMARDs and biologics in autoimmune diseases.	K	Large Group Teaching	MCQ, SAQ
MEDI.8.3	Formulate treatment plans based on disease severity and comorbidities.	A	Outpatient Clinic	CIVA, OSCE
MEDI.8.4	Identify monitoring strategies for safety and efficacy of MSK drugs.	A	Outpatient Clinic	OSCE, SAQ
Osteoarthriti	s (OA)			
MEDI.9.1	Describe the pathophysiology and risk factors of OA.	K	Large Group Teaching	MCQ, SAQ
MEDI.9.2	Recognize clinical presentation and diagnostic criteria of OA.	K/S	Outpatient Clinic	OSCE, SAQ
MEDI.9.3	Interpret radiological findings specific to OA.	S	Large Group Teaching	MCQ, SAQ
MEDI.9.4	Outline non-pharmacological and pharmacological management strategies.	A	Outpatient Clinic	CIVA, OSCE
Crystal Arth	ritis (Gout and Pseudogout)			
MEDI.10.1	Explain the biochemical and pathophysiological basis of crystal deposition.	K	Large Group Teaching	MCQ, SAQ
MEDI.10.2	Identify clinical features and joint aspiration findings of gout and pseudogout.	K/S	Outpatient Clinic	OSCE, SAQ
MEDI.10.3	Describe acute and chronic management of gout including urate-lowering therapy.	A	Large Group Teaching	MCQ, SAQ
MEDI.10.4	Differentiate gout from other monoarthritis conditions clinically and diagnostically.	A	Outpatient Clinic	CIVA, OSCE
Rheumatoid	Arthritis (RA)			
MEDI.11.1	Describe the immunopathogenesis and risk factors of RA.	K	Large Group Teaching	MCQ, SAQ
MEDI.11.2	Identify clinical features, deformities, and extra-articular manifestations of RA.	K/S	Outpatient Clinic	OSCE, SAQ
MEDI.11.3	Interpret lab markers (e.g., RF, anti-CCP) and imaging in RA diagnosis.	S	Large Group Teaching	MCQ, SAQ
MEDI.11.4	Discuss stepwise treatment approach including DMARDs and biologics.	A	Outpatient Clinic	CIVA, OSCE

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Septic Arthri	tis and Fibromyalgia			
MEDI.12.1	Explain the etiology, risk factors, and microbiology of septic arthritis.	K	Large Group Teaching	MCQ, SAQ
MEDI.12.2	Recognize red flags and urgent features of septic arthritis.	A	Outpatient Clinic	OSCE, CIVA
MEDI.12.3	Identify clinical criteria for diagnosis of fibromyalgia.	K	Large Group Teaching	MCQ, SAQ
MEDI.12.4	Outline treatment principles for both infectious and non-inflammatory causes of arthritis.	A	Outpatient Clinic	OSCE, SAQ
Spondyloarth Arthritis)	ropathies (Ankylosing Spondylitis, Psoriatic A	arthritis, Rea	active Arthritis	, Enteropathic
MEDI.13.1	Describe the shared features and HLA-B27 association in spondyloarthropathies.	K	Large Group Teaching	MCQ, SAQ
MEDI.13.2	Identify distinct clinical patterns in ankylosing spondylitis, psoriatic and reactive arthritis.	K/S	Outpatient Clinic	OSCE, SAQ
MEDI.13.3	Interpret imaging findings (e.g., sacroiliitis, bamboo spine) in axial SpA.	S	Large Group Teaching	MCQ, SAQ
MEDI.13.4	Discuss management including NSAIDs, biologics, and physical therapy.	A	Outpatient Clinic	CIVA, OSC
Systemic Lu _I	ous Erythematosus (SLE) and Sjögren Syndron	ne		
MEDI.14.1	Describe the immunopathology, clinical features, and diagnostic criteria of SLE.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.14.2	Recognize glandular and extraglandular manifestations of Sjögren syndrome.	K	Outpatient Clinic	OSCE, Short Answer Question
MEDI.14.3	Identify laboratory markers (ANA, anti-dsDNA, SSA/SSB antibodies) for diagnosis.	S	Large Group Teaching	MCQ, Short Answer Question
MEDI.14.4	Discuss treatment approaches including immunosuppressants and symptom management.	A	Outpatient Clinic	CIVA, OSCE
Dermatomyo	sitis and Polymyositis			
MEDI.15.1	Describe muscle and skin manifestations of dermatomyositis.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.15.2	Recognize diagnostic features including EMG, muscle enzymes, and biopsy findings.	S	Outpatient Clinic	OSCE, Short Answer

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
			1,10thous	Question
MEDI.15.3	Differentiate polymyositis from dermatomyositis and inclusion body myositis.	K/A	Large Group Teaching	MCQ, Short Answer Question
MEDI.15.4	Outline treatment including corticosteroids and immunosuppressants.	A	Outpatient Clinic	CIVA, OSCE
Vasculitis (G	iant Cell Arteritis, Polyarteritis Nodosa, ANCA	A-Associate	d Vasculitis)	
MEDI.16.1	Classify vasculitides based on vessel size and associated antibodies (e.g., ANCA).	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.16.2	Identify clinical presentations and systemic complications of common vasculitis syndromes.	K/S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.16.3	Interpret relevant investigations (biopsy, ANCA, ESR, imaging).	S	Large Group Teaching	MCQ, Short Answer Question
MEDI.16.4	Discuss immunosuppressive treatment strategies and indications for urgent referral.	A	Outpatient Clinic	CIVA, OSCE
Osteoporosis				
MEDI.17.1	Describe the pathophysiology, risk factors, and complications of osteoporosis.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.17.2	Recognize diagnostic criteria and interpretation of DEXA scans.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.17.3	Identify lifestyle, nutritional, and pharmacologic treatment options.	A	Large Group Teaching	MCQ, Short Answer Question
MEDI.17.4	Apply knowledge to prevent fractures in high-risk populations.	A	Outpatient Clinic	CIVA, OSCE
Osteomalacia				
MEDI.18.1	Explain the role of vitamin D, calcium, and phosphate in bone metabolism.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.18.2	Identify clinical and radiologic features of osteomalacia and rickets.	K/S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.18.3	Interpret lab findings (e.g., ALP, calcium, phosphate) in metabolic bone disease.	S	Large Group Teaching	MCQ, Short Answer Question
MEDI.18.4	Outline treatment approaches including supplementation and diet.	A	Outpatient Clinic	CIVA, OSCE

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Systemic Scl	erosis and Rheumatologic Manifestations of			
MEDI.19.1	Describe cutaneous and visceral manifestations of systemic sclerosis.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.19.2	Recognize rheumatologic signs in systemic diseases (e.g., SLE, diabetes, thyroid disease).	K	Outpatient Clinic	OSCE, Short Answer Question
MEDI.19.3	Interpret relevant antibodies (e.g., anticentromere, anti-Scl-70).	S	Large Group Teaching	MCQ, Short Answer Question
MEDI.19.4	Discuss multidisciplinary approach in management of systemic disease with MSK involvement.	A	Outpatient Clinic	CIVA, OSCE
Miscellaneou	s Rheumatologic Conditions			
MEDI.20.1	Recognize patterns of non-inflammatory MSK conditions (e.g., hypermobility, EDS).	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.20.2	Identify overlapping syndromes and diagnostic challenges.	K/A	Outpatient Clinic	OSCE, Short Answer Question
MEDI.20.3	Describe management options tailored to patient needs and rare diseases.	A	Large Group Teaching	CIVA, Short Answer Question
MEDI.20.4	Appreciate the importance of individualized care in rare rheumatologic presentations.	С	Outpatient Clinic	OSCE, CIVA
Juvenile Idio	pathic Arthritis (JIA)			
MEDI.21.1	Classify the subtypes of JIA based on ILAR criteria.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.21.2	Identify clinical features of oligoarticular, systemic, and polyarticular JIA.	K/S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.21.3	Describe treatment principles including NSAIDs, DMARDs, and biologics.	A	Large Group Teaching	MCQ, Short Answer Question
MEDI.21.4	Recognize the long-term complications and importance of early diagnosis.	С	Outpatient Clinic	OSCE, CIVA
Medical Reh	abilitation: Physical Modalities			
MEDI.22.1	Describe the types of physical modalities used in musculoskeletal rehabilitation.	K	Large Group Teaching	MCQ, Short Answer Question

		D	Teaching	A
Number	Learning Objective	Domain K/S/A/C	Learning Methods	Assessment Methods
MEDI.22.2	Explain the physiological effects and	K	Large	MCQ, Short
	indications for modalities like TENS,		Group	Answer
	ultrasound, and cryotherapy.		Teaching	Question
MEDI.22.3	Identify contraindications and precautions	A	Outpatient	OSCE,
	for physical modality use.		Clinic	Short
				Answer
				Question
MEDI.22.4	Evaluate the role of modalities in reducing	A	Outpatient	CIVA,
	pain and improving function.		Clinic	OSCE
MEDI.22.5	Health promotion Promote awareness of	C	Large	MCQ, Short
	non-pharmacological pain management		Group	Answer
	options to reduce reliance on opioids.		Teaching	Questio
Medical Reha	abilitation: Therapeutic Exercises			
MEDI.23.1	Classify therapeutic exercises into types	K	Large	MCQ, Short
112212011	(e.g., strengthening, ROM, endurance,		Group	Answer
	aerobic).		Teaching	Question
MEDI.23.2	Discuss the principles of exercise	K	Large	MCQ, Short
	prescription in MSK and rheumatologic		Group	Answer
	conditions.		Teaching	Question
MEDI.23.3	Demonstrate appropriate exercise	S/A	Outpatient	OSCE,
	recommendations for osteoarthritis and		Clinic	Short
	fibromyalgia.			Answer
				Question
MEDI.23.4	Assess a patient's functional capacity and	A	Outpatient	CIVA,
	tailor exercise plans accordingly.		Clinic	OSCE
MEDI.23.5	Educate patients and the public on the	C	Outpatient	OSCE,
	long-term health benefits of regular		Clinic	CIVA
	therapeutic exercise in preventing			
	musculoskeletal deterioration.			
Medical Reha	abilitation: Orthoses and Prostheses			
MEDI.24.1	Define the types and roles of orthoses (e.g.,	K	Large	MCQ, Short
	splints, braces) in joint support.		Group	Answer
	, , , , , , , , , , , , , , , , , , ,		Teaching	Question
MEDI.24.2	Explain indications and functional goals of	K	Large	MCQ, Short
	limb prostheses in amputees.		Group	Answer
			Teaching	Question
MEDI.24.3	Recognize how orthoses and prostheses	A	Outpatient	OSCE,
	improve mobility and prevent deformities.		Clinic	Short
				Answer
				Question

Number	Learning Objective	Domain K/S/A/C	Teaching Learning	Assessment Methods	
			Methods		
MEDI.24.4	Counsel patients on fitting, training, and adaptation with assistive devices.	С	Outpatient Clinic	CIVA, OSC	
MEDI.24.5	Advocate for early referral to rehabilitation services to improve mobility and prevent complications in disabled individuals.	С	Large Group Teaching	Short Answer Question, CIVA	
Medical Reha	abilitation: Adaptation for Activities of Daily I	Living (ADL	LS)		
MEDI.25.1	Identify key limitations in ADLs in patients with rheumatologic or MSK disease.	K	Large Group Teaching	MCQ, Short Answer Question	
MEDI.25.2	Discuss environmental and behavioral adaptations to support independence.	K/A	Large Group Teaching	MCQ, Short Answer Question	
MEDI.25.3	Evaluate assistive technologies and tools that enhance functional status.	A	Outpatient Clinic	OSCE, Short Answer Question	
MEDI.25.4	Educate patients on practical strategies to optimize daily living with chronic conditions.	С	Outpatient Clinic	OSCE, CIV	
MEDI.25.5	Promote the use of adaptive equipment and environmental modifications to preserve independence and prevent caregiver burden.	С	Outpatient Clinic	OSCE, CIVA	
Medical Reha	Medical Rehabilitation: Gait Aids and Gait Patterns				
MEDI.26.1	List types of gait aids (e.g., canes, walkers, crutches) and their indications.	K	Large Group Teaching	MCQ, Short Answer Question	
MEDI.26.2	Describe different gait patterns (e.g., 2-point, 3-point, swing-through) and their biomechanical basis.	K	Large Group Teaching	MCQ, Short Answer Question	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.26.3	Demonstrate appropriate gait aid prescription based on balance, strength, and condition.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.26.4	Evaluate the effect of assistive devices on gait safety and patient independence.	A	Outpatient Clinic	CIVA, OSC
MEDI.26.5	Health promotion: Support fall-prevention programs through appropriate education on gait aid use in elderly and high-risk patients.	С	Outpatient Clinic	MCQ, OSC
Introduction	to Neurology			
MEDI.27.1	Define key neurological terms and classify neurological disorders.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.27.2	Outline the components of a structured neurological history and examination.	K/S	Large Group Teaching	OSCE, Short Answer Question
MEDI.27.3	Describe basic neuroanatomy relevant to clinical neurology.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.27.4	Explain the role of neurology in multidisciplinary care.	С	Outpatient Clinic	CIVA, Short Answer Question
Coma				
MEDI.28.1	Classify causes of coma using structural and metabolic frameworks.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.28.2	Assess a comatose patient using the Glasgow Coma Scale and neurological exam.	S	Outpatient Clinic	OSCE, CIVA
MEDI.28.3	Interpret neuroimaging and lab results relevant to comatose states.	S	Large Group Teaching	MCQ, Short Answer Question
MEDI.28.4	Discuss emergency management and prognosis in coma.	A	Outpatient Clinic	OSCE, Short Answer Question
Diseases of the	he Spinal Cord			
MEDI.29.1	Recognize clinical syndromes of spinal cord injury (e.g., Brown-Séquard, anterior cord).	K/S	Large Group Teaching	MCQ, Short Answer Question
MEDI.29.2	Identify common causes of non-traumatic myelopathy.	K	Outpatient Clinic	MCQ, Short Answer Question
MEDI.29.3	Interpret spinal MRI findings in	S	Large	Short

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	compressive and inflammatory cord diseases.		Group Teaching	Answer Question, CIVA
MEDI.29.4	Plan appropriate acute and rehabilitative management.	A	Outpatient Clinic	OSCE, CIVA
Diseases of the	ne Peripheral Nerves			
MEDI.30.1	Classify peripheral neuropathies (mononeuropathy, polyneuropathy, plexopathy).	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.30.2	Identify clinical signs of sensory, motor, and autonomic neuropathies.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.30.3	Discuss common etiologies including diabetes, infections, and toxins.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.30.4	Evaluate patients for early diagnosis and prevention of disability.	A/C	Outpatient Clinic	OSCE, CIV
Diseases of the	ne Muscles (Myopathies)			
MEDI.31.1	Describe patterns of muscle weakness in common myopathies.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.31.2	Differentiate between myopathic and neurogenic weakness.	A	Outpatient Clinic	OSCE, CIVA
MEDI.31.3	Interpret CPK, EMG, and biopsy results in muscle disease.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.31.4	Promote early recognition and lifestyle adaptation for chronic muscle disorders.	С	Outpatient Clinic	Short Answer Question, OSCE
Epilepsy				
MEDI.32.1	Classify seizure types according to ILAE criteria.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.32.2	Describe the diagnostic approach using EEG and imaging.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.32.3	Outline pharmacological and surgical treatment options.	A	Outpatient Clinic	OSCE, Short Answer Question
MEDI.32.4	Identify social and driving restrictions, and psychosocial impact.	С	Outpatient Clinic	CIVA, OSCE
MEDI.32.5	Health Promotion: Educate patients and	С	Outpatient	Short

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
	families about medication adherence and seizure precautions to prevent injury and stigma.		Clinic	Answer Question, CIVA	
Infections of	the Nervous System (e.g., Meningitis, Enceph	alitis)			
MEDI.33.1	Recognize clinical features of meningitis and encephalitis.	K	Large Group Teaching	MCQ, Short Answer Question	
MEDI.33.2	Interpret CSF findings and imaging in CNS infections.	S	Large Group Teaching	Short Answer Question, CIVA	
MEDI.33.3	Differentiate bacterial, viral, fungal, and TB infections of the CNS.	K	Outpatient Clinic	MCQ, Short Answer Question	
MEDI.33.4	Plan emergency treatment and isolation precautions.	A	Outpatient Clinic	OSCE, Short Answer Question	
MEDI.33.5	Health Promotion: Promote vaccination (e.g., meningococcal, Hib) and early recognition of red flag symptoms to reduce neurological sequelae.	С	Large Group Teaching	MCQ, Short Answer Question	
Brain Space-	Occupying Lesions (Brain SOL)				
MEDI.34.1	List causes of intracranial SOLs (tumors, abscess, hematoma).	K	Large Group Teaching	MCQ, Short Answer Question	
MEDI.34.2	Identify signs of raised intracranial pressure and focal deficits.	K/S	Outpatient Clinic	OSCE, Short Answer Question	
MEDI.34.3	Interpret imaging (CT/MRI) findings in common SOLs.	S	Large Group Teaching	Short Answer Question, CIVA	
MEDI.34.4	Discuss treatment options including surgery, chemotherapy, and palliative care.	A	Outpatient Clinic	OSCE, Short Answer Question	
MEDI.34.5	Health Promotion: Encourage early medical consultation for persistent headaches, seizures, or personality changes to enable timely intervention.	С	Outpatient Clinic	Short Answer Question, CIVA	
Vertigo vs At	Vertigo vs Ataxia				
MEDI.35.1	Differentiate vertigo from ataxia based on clinical features.	K	Large Group Teaching	MCQ, Short Answer Question	
MEDI.35.2	Identify peripheral and central causes of	K	Outpatient	MCQ, Short	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	vertigo and gait disturbances.		Clinic	Answer Ouestion
MEDI.35.3	Perform bedside tests (Romberg, Dix- Hallpike, heel-to-shin) to localize pathology.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.35.4	Describe treatment strategies for BPPV, vestibular neuritis, and cerebellar lesions.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.35.5	Health Promotion: Educate elderly patients about fall prevention strategies and balance training to reduce injury risk.	С	Outpatient Clinic	OSCE, Short Answer Question
Abnormal Me	ovements (e.g., tremor, dystonia, chorea)			
MEDI.36.1	Classify abnormal movements and recognize key clinical patterns.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.36.2	Distinguish between Parkinsonism, essential tremor, and choreiform movements	K/A	Outpatient Clinic	OSCE, Short Answer Question
MEDI.36.3	Interpret neurological findings and assess functional impact.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.36.4	Outline medical and surgical management (e.g., levodopa, DBS).	A	Outpatient Clinic	OSCE, Short Answer Question
MEDI.36.5	Health Promotion: Promote early diagnosis and multidisciplinary care to improve function and reduce social disability in movement disorders.	С	Outpatient Clinic	Short Answer Question, CIVA
Headache (e.	g., Migraine, Tension-type, Cluster)			
MEDI.37.1	Classify primary and secondary headaches based on ICHD criteria.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.37.2	Recognize red flag signs requiring urgent investigation (e.g., sudden onset, neurological deficits).	K/A	Outpatient Clinic	OSCE, Short Answer Question
MEDI.37.3	Outline acute and preventive management for common headache types.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.37.4	Interpret patient history to differentiate between headache subtypes.	S	Outpatient Clinic	OSCE, CIVA

Number	Learning Objective	Domain	Teaching Learning	Assessment		
1 (0/1110 01		K/S/A/C	Methods	Methods		
MEDI.37.5	Health Promotion: Educate patients about headache triggers, lifestyle modifications, and medication overuse prevention.	С	Outpatient Clinic	Short Answer Question, CIVA		
Stroke (Ische	Stroke (Ischemic Stroke)					
MEDI.38.1	Describe the pathophysiology and risk factors of ischemic stroke.	K	Large Group Teaching	MCQ, Short Answer Question		
MEDI.38.2	Identify clinical features based on vascular territory affected.	S	Outpatient Clinic	OSCE, Short Answer Question		
MEDI.38.3	Outline acute management including thrombolysis and stroke unit care.	A	Large Group Teaching	Short Answer Question, CIVA		
MEDI.38.4	Interpret brain imaging (CT/MRI) and vascular studies.	S	Outpatient Clinic	CIVA, Short Answer Question		
MEDI.38.5	Health Promotion: Promote public awareness of FAST signs and early hospital presentation to improve stroke outcomes.	С	Large Group Teaching	Short Answer Question, CIVA		
Intracerebral	Hemorrhage (ICH)					
MEDI.39.1	Recognize clinical presentation and imaging findings of ICH.	K/S	Large Group Teaching	MCQ, Short Answer Question		
MEDI.39.2	Differentiate between ischemic and hemorrhagic stroke.	K	Outpatient Clinic	MCQ, Short Answer Question		
MEDI.39.3	Outline emergency management including BP control and neurosurgical indications.	A	Outpatient Clinic	OSCE, Short Answer Question		
MEDI.39.4	Monitor for complications such as raised ICP and herniation.	A	Large Group Teaching	Short Answer Question, CIVA		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning	Assessment Methods		
MEDI.39.5	Health Promotion: Promote hypertension control and anticoagulation safety to reduce the risk of ICH.	С	Methods Outpatient Clinic	Short Answer Question, CIVA		
Neurodegene	Neurodegenerative Diseases (e.g., Parkinson's, Alzheimer's, ALS)					
MEDI.40.1	Describe the clinical features and diagnostic criteria of major neurodegenerative disorders.	K	Large Group Teaching	MCQ, Short Answer Question		
MEDI.40.2	Compare the progression patterns and management of Alzheimer's vs Parkinson's disease.	K/A	Outpatient Clinic	OSCE, Short Answer Question		
MEDI.40.3	Interpret cognitive testing tools and motor assessments.	S	Large Group Teaching	Short Answer Question, CIVA		
MEDI.40.4	Outline multidisciplinary approaches to long-term care and support.	A	Outpatient Clinic	OSCE, CIVA		
MEDI.40.5	Health Promotion: Encourage early screening, caregiver education, and support resources to improve quality of life.	С	Outpatient Clinic	Short Answer Question, CIVA		
Multiple Scle	rosis (MS)					
MEDI.41.1	Describe the immunopathology and clinical variants of MS.	K	Large Group Teaching	MCQ, Short Answer Question		
MEDI.41.2	Recognize common symptoms (e.g., optic neuritis, sensory loss, fatigue).	K/S	Outpatient Clinic	OSCE, Short Answer Question		
MEDI.41.3	Interpret MRI and CSF findings for MS diagnosis.	S	Large Group Teaching	Short Answer Question, CIVA		
MEDI.41.4	Discuss disease-modifying treatments and symptom management.	A	Outpatient Clinic	OSCE, Short Answer Question		
MEDI.41.5	Health Promotion: Raise awareness of early MS symptoms to reduce diagnostic delay and disability progression.	С	Outpatient Clinic	Short Answer Question,		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				CIVA
Hematopoies	is & Aplastic Anemia			
MEDI.42.1	Describe normal hematopoiesis and blood cell lineages.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.42.2	Identify clinical and laboratory features of aplastic anemia.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.42.3	Interpret CBC, bone marrow biopsy, and reticulocyte count in marrow failure.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.42.4	Outline management strategies including immunosuppressive therapy and transplant.	A	Outpatient Clinic	OSCE, CIVA
MEDI.42.5	Health Promotion: Encourage early evaluation of persistent fatigue and pancytopenia to reduce diagnostic delays.	С	Outpatient Clinic	Short Answer Question, CIVA
Megaloblasti	c Anemia			
MEDI.43.1	Explain the roles of vitamin B12 and folate in DNA synthesis and erythropoiesis.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.43.2	Identify signs and lab features of megaloblastic anemia.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.43.3	Differentiate between folate and B12 deficiency clinically and biochemically.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.43.4	Plan dietary and pharmacologic treatment.	A	Outpatient Clinic	OSCE, CIVA
MEDI.43.5	Health Promotion: Educate the community about nutritional sources of B12 and folate, especially in pregnancy and vegan diets.	С	Large Group Teaching	Short Answer Question, CIVA
Iron Deficien	cy Anemia			
MEDI.44.1	Describe iron metabolism and causes of iron deficiency.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.44.2	Recognize symptoms and signs of iron deficiency anemia.	S	Outpatient Clinic	OSCE, Short Answer

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.44.3	Interpret iron studies (ferritin, TIBC, serum iron).	S	Large Group Teaching	Question Short Answer Question, CIVA
MEDI.44.4	Discuss oral and parenteral iron therapy and underlying cause management.	A	Outpatient Clinic	OSCE, CIVA
MEDI.44.5	Health Promotion: Promote iron-rich nutrition and screen for occult bleeding, especially in menstruating women and children.	С	Outpatient Clinic	Short Answer Question, CIVA
Hemolytic Ar	nemia			
MEDI.45.1	Define hemolysis and classify hemolytic anemias (inherited vs acquired).	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.45.2	Identify signs and lab markers of hemolysis (LDH, bilirubin, haptoglobin, Coombs test).	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.45.3	Discuss management of autoimmune and hereditary hemolytic anemias.	A	Large Group Teaching	OSCE, Short Answer Question
MEDI.45.4	Monitor complications such as gallstones and iron overload.	A	Outpatient Clinic	CIVA, Short Answer Question
MEDI.45.5	Health Promotion: Raise awareness of hereditary hemolytic conditions in highrisk populations and emphasize genetic counseling.	С	Large Group Teaching	Short Answer Question, CIVA
Thalassemia				
MEDI.46.1	Describe the genetic basis and pathophysiology of alpha and beta thalassemia.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.46.2	Identify clinical severity types (minor, intermedia, major) and features.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.46.3	Interpret Hb electrophoresis and peripheral smear findings.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.46.4	Outline management including transfusion, chelation, and potential curative options.	A	Outpatient Clinic	OSCE, CIVA
MEDI.46.5	Health Promotion: Support carrier screening and premarital counseling in endemic regions to reduce disease burden.	С	Outpatient Clinic	Short Answer Question,

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				CIVA
Sickle Cell Anemia				
MEDI.47.1	Explain the genetic mutation and pathophysiology of sickle cell disease.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.47.2	Recognize acute and chronic complications (e.g., pain crisis, stroke, splenic sequestration).	K/S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.47.3	Outline management strategies including hydroxyurea, transfusion, and pain control.	A	Large Group Teaching	OSCE, CIVA
MEDI.47.4	Monitor for and prevent long-term organ damage.	A	Outpatient Clinic	CIVA, Short Answer Question
MEDI.47.5	Health Promotion: Raise awareness about newborn screening, hydration, and crisis prevention in sickle cell patients.	С	Outpatient Clinic	Short Answer Question, CIVA
Immune Thrombocytopenic Purpura (ITP)				
MEDI.48.1	Describe the autoimmune pathogenesis of ITP.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.48.2	Identify clinical signs of bleeding and diagnostic criteria.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.48.3	Outline treatment options including corticosteroids, IVIG, and splenectomy.	A	Large Group Teaching	OSCE, CIVA
MEDI.48.4	Monitor response to therapy and relapse.	A	Outpatient Clinic	Short Answer Question, CIVA
MEDI.48.5	Health Promotion: Educate patients about avoiding trauma and self-monitoring for bleeding symptoms.	С	Outpatient Clinic	Short Answer Question, CIVA
Hemophilia				
MEDI.49.1	Explain the genetic and coagulation defect in hemophilia A and B.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.49.2	Identify bleeding patterns and severity classification.	S	Outpatient Clinic	OSCE, Short Answer Question

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.49.3	Discuss treatment with factor replacement, DDAVP, and prophylaxis.	A	Outpatient Clinic	OSCE, CIVA
MEDI.49.4	Prevent complications such as hemarthrosis and inhibitors.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.49.5	Health Promotion: Promote early diagnosis in male infants and emphasize adherence to prophylaxis.	С	Outpatient Clinic	Short Answer Question, CIVA
Thrombotic	Thrombocytopenic Purpura (TTP)			
MEDI.50.1	Describe the pathophysiology of TTP involving ADAMTS13 deficiency.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.50.2	Recognize the pentad of symptoms and lab features.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.50.3	Outline emergency treatment (plasma exchange, steroids, rituximab).	A	Outpatient Clinic	OSCE, CIVA
MEDI.50.4	Monitor complications and response to therapy.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.50.5	Health Promotion: Emphasize importance of early recognition to prevent fatal outcomes.	С	Outpatient Clinic	Short Answer Question, CIVA
Disseminated	d Intravascular Coagulation (DIC)			
MEDI.51.1	Describe the triggers and pathogenesis of DIC.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.51.2	Recognize signs of bleeding, thrombosis, and lab findings (PT, aPTT, D-dimer, fibrinogen).	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.51.3	Discuss management including treating the underlying cause, supportive care, and transfusions.	A	Outpatient Clinic	OSCE, CIVA
MEDI.51.4	Monitor coagulation profile and organ function during therapy.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.51.5	Health Promotion: Raise awareness of DIC in obstetric emergencies, sepsis, and trauma settings.	С	Large Group Teaching	Short Answer Question, CIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Henoch-Schö	onlein Purpura (HSP) & von Willebrand Diseas	se		
MEDI.52.1	Describe the pathophysiology and clinical features of HSP as a small vessel vasculitis.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.52.2	Identify the types, genetics, and bleeding patterns of von Willebrand disease.	K	Outpatient Clinic	OSCE, Short Answer Question
MEDI.52.3	Interpret diagnostic tests such as IgA levels (for HSP) and vWF antigen/activity (for vWD).	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.52.4	Outline the management of both conditions, including supportive care and desmopressin use.	A	Outpatient Clinic	OSCE, CIVA
MEDI.52.5	Health Promotion: Encourage early evaluation of unexplained bruising, hematuria, or mucosal bleeding in children and adolescents.	С	Outpatient Clinic	Short Answer Question, CIVA
Thrombophil	ia (Inherited and Acquired)			
MEDI.53.1	Classify inherited (e.g., Factor V Leiden, Protein C/S deficiency) and acquired (e.g., APS) thrombophilias.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.53.2	Recognize clinical scenarios that warrant thrombophilia work-up.	A	Outpatient Clinic	OSCE, Short Answer Question
MEDI.53.3	Interpret thrombophilia lab profiles including lupus anticoagulant, anticardiolipin, and homocysteine.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.53.4	Discuss long-term anticoagulation indications and risk stratification.	A	Outpatient Clinic	OSCE, CIVA
MEDI.53.1	Health Promotion: Educate patients and families with genetic predisposition about avoiding triggering factors (e.g., OCPs, immobility, smoking).	С	Outpatient Clinic	Short Answer Question, CIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Acute Leuke	mias (ALL & AML)			
MEDI.54.1	Differentiate between the clinical features and pathophysiology of ALL and AML.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.54.2	Identify key diagnostic findings: peripheral smear, blasts, bone marrow biopsy, cytogenetics.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.54.3	Outline phases of treatment (induction, consolidation, maintenance) and supportive care.	A	Outpatient Clinic	OSCE, CIVA
MEDI.54.4	Monitor for complications such as tumor lysis syndrome and neutropenic fever.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.54.5	Health Promotion: Promote awareness of early signs (fatigue, bleeding, infection) to ensure timely diagnosis and improve prognosis.	С	Large Group Teaching	Short Answer Question, CIVA
Acute Manag	gement in Hematology (Emergencies)			
MEDI.55.1	Recognize acute hematologic emergencies such as neutropenic sepsis, hyperleukocytosis, TLS, and hemorrhagic shock.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.55.2	Describe initial emergency management principles and stabilization steps.	A	Outpatient Clinic	OSCE, Short Answer Question
MEDI.55.3	Prioritize intervention for life-threatening complications in patients with hematologic malignancies.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.55.4	Communicate effectively in urgent hematology situations including escalation and multidisciplinary coordination.	С	Outpatient Clinic	OSCE, CIVA
MEDI.55.5	Health Promotion: Advocate for early patient education about warning signs to reduce delays in emergency presentation.	С	Outpatient Clinic	Short Answer Question, CIVA
Chronic Mye	eloid Leukemia (CML)			
MEDI.56.1	Describe the pathophysiology of CML including the BCR-ABL fusion gene.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.56.2	Identify clinical phases (chronic, accelerated, blast crisis) and presenting symptoms.	K/S	Outpatient Clinic	OSCE, Short Answer Question

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.56.3	Interpret CBC, bone marrow findings, and PCR for BCR-ABL.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.56.4	Outline the role of tyrosine kinase inhibitors (e.g., imatinib) in management.	A	Outpatient Clinic	OSCE, CIVA
MEDI.56.5	Health Promotion: Encourage medication adherence and routine monitoring to maintain remission and prevent progression.	С	Outpatient Clinic	Short Answer Question, CIVA
Hodgkin's Ly	mphoma			
MEDI.57.1	Describe the epidemiology and Reed- Sternberg cell pathology of Hodgkin's lymphoma.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.57.2	Recognize the typical presentation: painless lymphadenopathy, B-symptoms.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.57.3	Discuss staging (Ann Arbor) and treatment options (ABVD chemotherapy, radiotherapy).	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.57.4	Monitor treatment response and late toxicities.	A	Outpatient Clinic	OSCE, CIVA
MEDI.57.5	Health Promotion: Promote early evaluation of persistent lymph node swelling and night sweats for early-stage diagnosis.	С	Outpatient Clinic	Short Answer Question, CIVA
Non-Hodgkin	a's Lymphoma (NHL)			
MEDI.58.1	Classify NHL by cell origin and grade (indolent vs aggressive).	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.58.2	Identify clinical features and extranodal presentations.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.58.3	Interpret biopsy, immunophenotyping, and imaging findings.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.58.4	Outline treatment options (R-CHOP, targeted therapies) and prognosis.	A	Outpatient Clinic	OSCE, CIVA
MEDI.58.5	Health Promotion: Increase public awareness about lymphoma warning signs and the importance of biopsy over empirical treatment.	С	Outpatient Clinic	Short Answer Question, CIVA
Myelodysplas	stic Syndrome (MDS)			

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Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.59.1	Describe the clonal stem cell abnormalities and ineffective hematopoiesis in MDS.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.59.2	Identify clinical features (cytopenias, fatigue, infections, bleeding).	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.59.3	Interpret blood smear, marrow biopsy, and cytogenetics in MDS.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.59.4	Outline treatment options including supportive care, growth factors, and transplant.	A	Outpatient Clinic	OSCE, CIVA
MEDI.59.5	Health Promotion: Promote early evaluation of unexplained anemia or leukopenia, especially in elderly patients.	С	Outpatient Clinic	Short Answer Question, CIVA
Multiple Mye	eloma (MM)			
MEDI.60.1	Describe plasma cell dyscrasia and CRAB features (hyperCalcemia, Renal failure, Anemia, Bone lesions).	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.60.2	Identify clinical presentation including bone pain, anemia, renal dysfunction.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.60.3	Interpret SPEP, UPEP, serum free light chains, and bone marrow findings.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.60.4	Outline treatment with proteasome inhibitors, immunomodulators, steroids, and transplant.	A	Outpatient Clinic	OSCE, CIVA
MEDI.60.4	Health Promotion: Educate at-risk populations (elderly, African descent) about early signs and importance of bone health monitoring.	С	Outpatient Clinic	Short Answer Question, CIVA
MEDI.61.1	Describe the pathogenesis of bone marrow fibrosis and extramedullary hematopoiesis.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.61.2	Identify clinical features such as massive splenomegaly and anemia.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.61.3	Interpret peripheral smear (tear drop cells), marrow biopsy, and JAK2 mutation testing.	S	Large Group Teaching	Short Answer Question,

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				CIVA
MEDI.61.4	Outline treatment options including JAK inhibitors and supportive care.	A	Outpatient Clinic	OSCE, CIVA
MEDI.61.5	Health Promotion: Encourage early referral for unexplained anemia and splenomegaly to allow timely diagnosis.	С	Outpatient Clinic	Short Answer Question, CIVA
Polycythemia	a Rubra Vera (PRV)			
MEDI.62.1	Explain the myeloproliferative nature of	K	Large	MCQ, Short
	PRV and its association with JAK2 mutation.		Group Teaching	Answer Question
MEDI.62.2	Recognize symptoms such as pruritus, headache, thrombosis.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.62.3	Interpret lab findings: elevated hematocrit, low EPO, JAK2 positive.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.62.4	Describe therapeutic phlebotomy, cytoreduction, and antiplatelet therapy.	A	Outpatient Clinic	OSCE, CIVA
MEDI.62.5	Health Promotion: Educate patients on hydration, smoking cessation, and recognizing thrombotic symptoms.	С	Outpatient Clinic	Short Answer Question, CIVA
Blood Transf	usion and Component Therapy			
MEDI.63.1	List indications for transfusion of whole blood and components (RBCs, platelets, plasma, cryoprecipitate).	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.63.2	Explain compatibility testing, crossmatching, and transfusion protocols.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.63.3	Identify and manage transfusion reactions.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.63.4	Monitor response and complications of repeated transfusions (e.g., iron overload).	A	Outpatient Clinic	OSCE, CIVA
MEDI.63.5	Health Promotion: Promote safe donation practices and community awareness about blood donation needs.	С	Large Group Teaching	Short Answer Question, CIVA
Oncologic Er	mergencies			
MEDI.64 .1	Recognize life-threatening complications: tumor lysis syndrome, spinal cord compression, hypercalcemia.	K	Large Group Teaching	MCQ, Short Answer Question

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.64 .2	Describe emergency management protocols for each condition.	A	Outpatient Clinic	OSCE, Short Answer Question
MEDI.64 .3	Prioritize triage and stabilization of acutely ill hematology patients.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.64 .4	Coordinate care with oncology, ICU, and nephrology teams.	С	Outpatient Clinic	OSCE, CIVA
MEDI.64 .5	Health Promotion: Educate patients with hematologic malignancies on early warning signs and when to seek urgent care.	С	Outpatient Clinic	Short Answer Question, CIVA
Bone Marrow	Transplantation (BMT)			
MEDI.65.1	Explain types of BMT (autologous, allogeneic) and their indications.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.65.2	Outline steps in donor matching, conditioning, and engraftment.	K/S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.65.3	Identify complications such as GVHD, infections, and graft failure.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.65.4	Provide patient counseling regarding preand post-transplant care.	С	Outpatient Clinic	OSCE, CIVA
MEDI.65.5	Health Promotion: Raise public awareness on stem cell donation and the impact on hematologic cancer survival.	С	Large Group Teaching	Short Answer Question, CIVA
Porphyria				
MEDI.66.1	Describe the biochemical basis of porphyrias and heme synthesis.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.66.2	Recognize clinical features of acute intermittent porphyria and cutaneous forms.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.66.3	Interpret urine porphyrin testing and triggers for acute attacks.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.66.4	Outline acute attack management and lifestyle modification.	A	Outpatient Clinic	OSCE, CIVA
MEDI.66.5	Health Promotion: Educate patients about avoiding triggers (e.g., certain drugs,	С	Outpatient Clinic	Short Answer

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	fasting, alcohol) to prevent attacks.			Question, CIVA
Hypereosino	philic Syndrome (HES)			
MEDI.67.1	Define hypereosinophilia and its classifications (primary, secondary, idiopathic).	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.67.2	Identify signs of eosinophil-mediated organ damage.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.67.3	Interpret CBC, bone marrow, and molecular tests (e.g., FIP1L1-PDGFRA).	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.67.4	Discuss corticosteroids, cytoreduction, and targeted therapies.	A	Outpatient Clinic	OSCE, CIVA
MEDI.67.5	Health Promotion: Encourage early medical consultation for persistent eosinophilia to prevent irreversible complications.	С	Outpatient Clinic	Short Answer Question, CIVA
Geriatrics :D	isease Presentation in the Elderly			
MEDI.68.1	Explain how aging alters the presentation of common diseases (e.g., MI without chest pain, infections without fever).	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.68.2	Recognize atypical signs and symptoms in elderly patients, especially in cognitive, cardiovascular, and infectious diseases.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.68.3	Discuss how multimorbidity and polypharmacy influence clinical decision-making.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.68.4	Apply a holistic and functional approach in evaluating elderly patients with vague or nonspecific complaints.	A	Outpatient Clinic	OSCE, CIVA
MEDI.68.5	Health Promotion: Educate healthcare workers on early identification of "silent" disease presentations in elderly to reduce diagnostic delays.	С	Outpatient Clinic	Short Answer Question, CIVA
Geriatrics: Co	ommon Problems in Geriatric Medicine			
MEDI.69.1	List the most common geriatric syndromes: falls, incontinence, delirium, frailty, immobility, and cognitive decline.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.69.2	Assess fall risk, cognitive function, nutritional status, and functional ability in elderly patients.	S	Outpatient Clinic	OSCE, Short Answer Question

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.69.3	Discuss management principles tailored to frail elderly patients including non-pharmacological strategies.	A	Large Group Teaching	Short Answer Question, CIVA
MEDI.69.4	Coordinate interdisciplinary care for patients with complex geriatric issues.	С	Outpatient Clinic	OSCE, CIVA
MEDI.69.5	Health Promotion: Promote regular screening for cognitive decline, fall risk, and malnutrition to enhance independent living and quality of life.	С	Outpatient Clinic	Short Answer Question, CIVA
Principles of	Oncology and Cancer Cell Biology			
MEDI.70.1	Describe the hallmarks of cancer and basic mechanisms of carcinogenesis.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.70.2	Identify genetic and environmental risk factors involved in tumor development.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.70.3	Discuss tumor progression, invasion, angiogenesis, and metastasis.	K	Large Group Teaching	Short Answer Question, CIVA
MEDI.70.4	Correlate molecular changes with therapeutic targets.	A	Outpatient Clinic	CIVA, OSCE
MEDI.70.5	Health Promotion: Promote public awareness of modifiable cancer risk factors (e.g., smoking, diet, infections).	С	Large Group Teaching	Short Answer Question, CIVA
Approach to	Patients with Malignant Diseases			
MEDI.71.1	Take a comprehensive history and physical exam focused on suspected malignancy.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.71.2	Interpret key diagnostic tests: imaging, tumor markers, biopsy.	S	Large Group Teaching	Short Answer Question, CIVA
MEDI.71.3	Stage cancers using TNM and other systems.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.71.4	Communicate diagnosis and plan compassionately to patients and families.	С	Outpatient Clinic	OSCE, CIVA
MEDI.71.5	Health Promotion: Encourage early cancer screening and medical evaluation for suspicious symptoms.	С	Outpatient Clinic	Short Answer Question, CIVA
Chemotherap	у			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.72.1	Classify chemotherapy agents by mechanism and cancer type.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.72.2	Describe pharmacokinetics, dosing, and resistance mechanisms.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.72.3	Manage common side effects (nausea, neutropenia, mucositis).	A	Outpatient Clinic	OSCE, CIVA
MEDI.72.4	Monitor toxicity and adjust therapy accordingly.	A	Outpatient Clinic	OSCE, Short Answer Question
MEDI.72.5	Health Promotion: Educate patients and caregivers on managing side effects and the importance of adherence to treatment.	С	Outpatient Clinic	Short Answer Question, CIVA
Radiotherapy	,			
MEDI.73.1	Explain the principles of radiotherapy and its biological effects.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.73.2	Identify indications for curative vs palliative radiotherapy.	K	Large Group Teaching	Short Answer Question, CIVA
MEDI.73.3	Recognize acute and chronic side effects and their management.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.73.4	Discuss advances such as IMRT, stereotactic therapy, and brachytherapy.	A	Large Group Teaching	OSCE, CIVA
MEDI.73.5	Health Promotion: Inform patients about the safety and benefits of radiotherapy as part of multimodal cancer treatment.	С	Outpatient Clinic	Short Answer Question, CIVA
Palliative Car	re			
MEDI.74.1	Define palliative care and its role in cancer management.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.74.2	Address physical symptoms (pain, dyspnea, fatigue, anorexia) in terminally ill patients.	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.75.3	Provide psychological, spiritual, and social support for patients and families.	С	Outpatient Clinic	OSCE, CIVA
MEDI.75.4	Discuss end-of-life decision-making and advance directives.	С	Large Group Teaching	Short Answer Question,

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
		~		CIVA	
MEDI.74.5	Health Promotion: Normalize conversations around palliative care and empower families to seek early supportive services.	С	Outpatient Clinic	Short Answer Question, CIVA	
Nuclear Medi	icine				
MEDI.74.1	Describe the principles of nuclear imaging and radiotracers (e.g., PET, bone scan).	K	Large Group Teaching	MCQ, Short Answer Question	
MEDI.74.2	Identify clinical indications for nuclear medicine in oncology.	K	Outpatient Clinic	MCQ, Short Answer Question	
MEDI.75.3	Interpret basic nuclear imaging findings in common malignancies.	S	Large Group Teaching	Short Answer Question, CIVA	
MEDI.75.4	Discuss the use of radioisotopes in both diagnosis and treatment.	A	Outpatient Clinic	OSCE, CIVA	
MEDI.74.5	Health Promotion: Address public misconceptions about radiation risk and reinforce the benefits of accurate imaging.	С	Large Group Teaching	Short Answer Question, CIVA	
Oncologic En	nergencies (e.g., TLS, neutropenic fever, hype	rcalcemia, s	pinal cord com	pression)	
MEDI.76.1	Recognize the signs and symptoms of major oncologic emergencies.	K	Large Group Teaching	MCQ, Short Answer Question	
MEDI.76.2	Initiate appropriate emergency management protocols.	A	Outpatient Clinic	OSCE, Short Answer Question	
MEDI.76.3	Coordinate multidisciplinary intervention for rapid stabilization.	A	Large Group Teaching	Short Answer Question, CIVA	
MEDI.76.4	Monitor and follow up for complications or recurrence.	S	Outpatient Clinic	OSCE, CIVA	
MEDI.76.5	Health Promotion: Educate cancer patients on red flag symptoms and the importance of prompt emergency care.	С	Outpatient Clinic	Short Answer Question, CIVA	
Emergency O	Emergency Oncology				
MEDI.77.1	Identify common oncologic emergencies: tumor lysis syndrome (TLS), spinal cord compression, hypercalcemia of malignancy, neutropenic fever, and SIADH.	K	Large Group Teaching	MCQ, Short Answer Question	

		Domain	Teaching	Assessment
Number	Learning Objective	K/S/A/C	Learning Methods	Methods
MEDI.77.2	Recognize early clinical signs and lab	S	Outpatient	OSCE,
	findings of oncologic emergencies and		Clinic	Short
	differentiate between them.			Answer
				Question
MEDI.77.3	Initiate appropriate emergency	A	Outpatient	OSCE,
	interventions: IV hydration,		Clinic	CIVA
	allopurinol/rasburicase (TLS), broad- spectrum antibiotics (neutropenia), steroids			
	and urgent imaging (spinal compression).			
	and digent imaging (spinar compression).			
MEDI.77.4	Coordinate timely referral to oncology,	A/C	Outpatient	OSCE,
	critical care, and supportive services to		Clinic	CIVA
	prevent irreversible outcomes.			
MEDI.77.5	Health Promotion: Educate cancer patients	С	Outpatient	Short
	and caregivers about early warning signs		Clinic	Answer
	(e.g., new back pain, fever, confusion) and			Question,
	when to seek emergency care to prevent			CIVA
	complications.			
Introduction	to Disaster Medicine			
MEDI.78.1	Define disaster, emergency, and	K	Large	MCQ, Short
	differentiate between natural and man-		Group	Answer
	made disasters.		Teaching	Question
MEDI.78.2	Describe the principles and phases of	K	Large	MCQ, Short
	disaster management (mitigation,		Group	Answer
	preparedness, response, recovery).		Teaching	Question
MEDI.78.3	Understand the role of emergency	K	Large	Short
	medicine in disaster response.		Group	Answer
			Teaching	Question,
MEDI 79 4	Apply disset on medicine and sinks in	Α	Field	CIVA
MEDI.78.4	Apply disaster medicine principles in theoretical disaster scenarios.	A	Simulation	OSCE, CIVA
	theoretical disaster scenarios.		/ Clinic	CIVA
MEDI.78.5	Health Promotion: Raise public awareness	С	Large	Short
1,1221,70,0	about disaster preparedness and personal		Group	Answer
	emergency planning.		Teaching	Question,
			_	CIVA
Geriatrics				
MEDI.79.1	Describe the structure of command,	K	Large	MCQ, Short
	control, and coordination systems in		Group	Answer
	disasters (e.g., ICS).	<u> </u>	Teaching	Question
MEDI.79.2	Perform risk assessment and develop risk-	A	Outpatient	OSCE,
	reduction strategies.		Clinic /	Short
			Simulation	Answer
MEDI.79.3	Understand triage systems (STADT	S	Simulation	Question OSCE,
MIEDI./9.3	Understand triage systems (START, SALT) and apply them in scenarios.	٥	/ Field	CIVA
	SALT) and apply them in scenarios.		/ Field	CIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
			Practice	
MEDI.79.4	Outline roles of hospitals, EMS, and volunteers in disaster zones.	K	Large Group Teaching	Short Answer Question, CIVA
MEDI.79.5	Health Promotion: Advocate for community drills and volunteer training programs to improve disaster response.	С	Large Group Teaching	Short Answer Question, CIVA
Specific Med	ical Disaster Management			
MEDI.80.1	Classify and describe the clinical effects of chemical agents (e.g., nerve, blistering agents).	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.80.2	Recognize signs and initial management of biological threats (e.g., anthrax, smallpox).	S	Outpatient Clinic	OSCE, Short Answer Question
MEDI.80.3	Understand health effects of radiation exposure and appropriate decontamination procedures.	K	Large Group Teaching	Short Answer Question, CIVA
MEDI.80.4	Apply protective protocols and resource planning in CBRN scenarios.	A	Simulation / Field Drill	OSCE, CIVA
MEDI.80.5	Health Promotion: Educate the public on basic protective actions during chemical or radiological incidents.	С	Large Group Teaching	Short Answer Question, CIVA
Mass Gatheri	ing Medicine			
MEDI.81.2	Define mass gathering and identify associated public health risks.	K	Large Group Teaching	MCQ, Short Answer Question
MEDI.81.2	Plan medical services for large-scale events (e.g., Hajj, sports events).	A	Simulation / Planning Session	Short Answer Question, CIVA
MEDI.81.3	Coordinate crowd control, surveillance, and health infrastructure.	A	Outpatient Clinic	OSCE, CIVA
MEDI.81.4	Discuss case studies of past mass gathering responses.	С	Large Group Teaching	Short Answer Question, CIVA
MEDI.81.2	Health Promotion: Promote awareness of personal health preparedness among attendees of mass events.	С	Large Group Teaching	Short Answer Question, CIVA
Complex Hu	manitarian Emergencies			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.82.1	Define complex emergencies and	K	Large	MCQ, Short
	understand their causes (e.g., conflict, displacement, famine).		Group Teaching	Answer Question
MEDI.82.2	Identify the health priorities and minimum	K	Outpatient	Short
	standards in refugee and IDP camps.		Clinic	Answer
				Question,
				CIVA
MEDI.82.3	Manage outbreaks and malnutrition in	A	Field	OSCE,
	resource-limited emergency settings.		Simulation	CIVA
MEDI.82.4	Coordinate multidisciplinary humanitarian	C	Large	Short
	response with NGOs and international		Group	Answer
	agencies.		Teaching	Question,
				CIVA
MEDI.82.1	Health Promotion: Advocate for protection	С	Large	Short
	of vulnerable populations and access to		Group	Answer
	essential health services in emergencies.		Teaching	Question,
				CIVA

Practical Rheumatology

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods			
Introduction	Introduction & General MSK Exam						
MEDI.1.1	Identify major anatomical structures of the MSK system	K	Bedside & Outpatient clinic teaching	CIVA			
MEDI.1.2	Perform general MSK examination (inspection, palpation, ROM)	S	Bedside demonstration, clinical practice	OSCE			
MEDI.1.3	Differentiate inflammatory vs non-inflammatory MSK conditions	K	Case discussion in clinic	CIVA			
MEDI.1.4	Communicate findings professionally and respectfully during patient exam	C/A	Outpatient interaction, feedback	OSCE			
Examination	of Small Joints						
MEDI.2.1	Identify small joints of hands and feet and related surface anatomy	K	Bedside teaching	CIVA			
MEDI.2.2	Perform inspection, palpation, and functional assessment of small joints	S	outpatient clinic	OSCE			
MEDI.2.3	Recognize signs of inflammation or deformity in small joints	K	outpatient clinic	CIVA			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.2.4	Present findings clearly during small joint examination	С	Bedside teaching	OSCE
Examination	of Large Joints			
MEDI.4.1	Identify major large joints (shoulder, elbow, hip, knee, ankle) and landmarks	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.4.2	Perform inspection, palpation, range of motion, and functional tests on large joints	S	outpatient clinic	OSCE
MEDI.4.3	Recognize pathological signs (swelling, deformity, tenderness) in large joints	K	Bedside teaching	CIVA
MEDI.4.4	Communicate clinical findings clearly during large joint examination	С	Bedside teaching	OSCE
Spine & Bac	k Examination			
MEDI.5.1	Identify key anatomical landmarks of the spine and back	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.5.2	Perform inspection, palpation, and range of motion of the spine and back	S	Bedside teaching, Outpatient clinic	OSCE
MEDI.5.3	Recognize signs of spinal deformities, tenderness, and neurological deficits	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.5.4	Effectively communicate examination findings related to spine and back	С	Bedside teaching, Outpatient clinic	OSCE
Monoarthriti	ic & Polyarthritis Cases			
MEDI.6.1	Differentiate between monoarthritis and polyarthritis clinically	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.6.2	Identify common causes of monoarthritis and polyarthritis	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.6.3	Conduct focused joint examination relevant to monoarthritis and polyarthritis cases	S	Bedside teaching, Outpatient clinic	OSCE

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.6.4	Communicate diagnosis and management plans clearly	С	Bedside teaching, Outpatient clinic	OSCE
Lab & Imag	ing Interpretation			
MEDI.7.1	Identify common laboratory tests relevant to MSK disorders	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.7.2	Interpret basic lab results (e.g., ESR, CRP, Rheumatoid factor)	S/K	Bedside teaching, Outpatient clinic	CIVA
MEDI.7.3	Recognize common imaging modalities and their findings in MSK diseases	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.7.4	Integrate lab and imaging findings to assist clinical diagnosis	С	Bedside teaching, Outpatient clinic	OSCE
Pediatric &	Seronegative Arthritis			
MEDI.8.1	Describe key clinical features of pediatric arthritis and seronegative types	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.8.2	Identify differences between seronegative arthritis and other arthritides	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.8.3	Perform relevant joint examination tailored to pediatric and seronegative cases	S	Bedside teaching, Outpatient clinic	OSCE
MEDI.8.4	Communicate diagnosis and management plans effectively	С	Bedside teaching, Outpatient clinic	OSCE
Rheumatolo	gy Emergencies			
MEDI.9.1	Recognize common rheumatologic emergencies and their clinical presentations	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.9.2	Understand initial management steps for urgent rheumatology cases	K	Bedside teaching, Outpatient clinic	CIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
MEDI.9.3	Perform rapid clinical assessment relevant to rheumatology emergencies	S	Bedside teaching, Outpatient clinic	OSCE	
MEDI.9.4	Communicate emergency findings and management plans effectively	С	Bedside teaching, Outpatient clinic	OSCE	
Pharmacolog	Pharmacologic & Non-Pharmacologic Treatment				
MEDI.10.1	Describe common pharmacologic treatments for MSK and rheumatologic disorders	K	Bedside teaching, Outpatient clinic	CIVA	
MEDI.10.2	Explain non-pharmacologic management options (e.g., physical therapy, lifestyle)	K	Bedside teaching, Outpatient clinic	CIVA	
MEDI.10.3	Apply principles of treatment selection based on patient condition	S	Bedside teaching, Outpatient clinic	OSCE	
MEDI.10.4	Communicate treatment plans effectively to patients and healthcare team	С	Bedside teaching, Outpatient clinic	OSCE	

Practical neuro Medicine

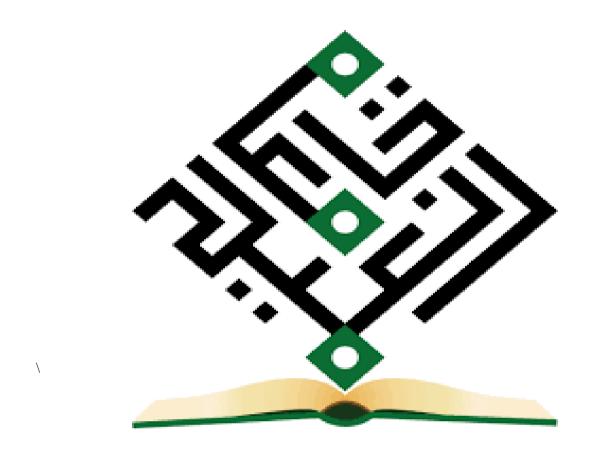
Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
Consciousne	Consciousness					
MEDI.1.1	Define levels and components of consciousness	K	Bedside teaching, Outpatient clinic	CIVA		
MEDI.1.2	Perform clinical assessment of consciousness (e.g., Glasgow Coma Scale)	S	Bedside teaching, Outpatient clinic	OSCE		
MEDI.1.3	Recognize signs of altered consciousness and their causes	K	Bedside teaching, Outpatient clinic	CIVA		
MEDI.1.4	Effectively communicate clinical findings related to consciousness	С	Bedside teaching, Outpatient clinic	OSCE		
Speech & La	nguage					
MEDI.2.1	Describe the main components of speech and language function	K	Bedside teaching, Outpatient clinic	CIVA		
MEDI.2.2	Perform a clinical assessment of speech and language abilities	S	Bedside teaching, Outpatient clinic	OSCE		
MEDI.2.3	Recognize common speech and language disorders and their signs	K	Bedside teaching, Outpatient clinic	CIVA		
MEDI.2.4	Effectively communicate findings related to speech and language exam	С	Bedside teaching, Outpatient clinic	OSCE		
Memory						
MEDI.3.1	Describe types of memory (short-term, long-term, working)	K	Bedside teaching, Outpatient clinic	CIVA		
MEDI.3.2	Perform clinical memory assessment tests	S	Bedside teaching, Outpatient clinic	OSCE		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.3.3	Recognize memory impairment signs and possible causes	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.3.4	Communicate findings of memory evaluation effectively	С	Bedside teaching, Outpatient clinic	OSCE
Cranial Nerv	e Examination			
MEDI.4.1	Identify and describe functions of the 12 cranial nerves	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.4.2	Perform a systematic clinical examination of all cranial nerves	S	Bedside teaching, Outpatient clinic	OSCE
MEDI.4.3	Recognize signs of cranial nerve dysfunction	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.4.4	Communicate clinical findings of cranial nerve exam effectively	С	Bedside teaching, Outpatient clinic	OSCE
Meningeal S	igns			
MEDI.5.1	Define meningeal signs and their clinical significance	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.5.2	Perform tests for meningeal irritation (e.g., Kernig's, Brudzinski's)	S	Bedside teaching, Outpatient clinic	OSCE
MEDI.5.3	Recognize positive meningeal signs and implications	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.5.4	Present meningeal signs findings clearly and accurately	С	Bedside teaching, Outpatient clinic	OSCE
Motor Exam	ination of UL & LL			
MEDI.6.1	Describe the anatomy and function of muscles in upper and lower limbs	K	Bedside teaching, Outpatient clinic	CIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
MEDI.6.2	Perform systematic motor examination including tone, power, and reflexes	S	Bedside teaching, Outpatient clinic	OSCE
MEDI.6.3	Identify signs of motor deficits such as weakness, spasticity, and atrophy	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.6.4	Communicate motor exam findings clearly and effectively	С	Bedside teaching, Outpatient clinic	OSCE
Sensory exam	mination			
MEDI.7.1	Describe different sensory modalities (touch, pain, temperature, proprioception)	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.7.2	Perform clinical sensory testing using appropriate tools	S	Bedside teaching, Outpatient clinic	OSCE
MEDI.7.3	Identify abnormal sensory findings and their clinical significance	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.7.4	Communicate sensory exam results effectively	С	Bedside teaching, Outpatient clinic	OSCE
Gait & Cerel	pellar Examination			
MEDI.8.1	Describe normal gait patterns, cerebellar functions, and common abnormalities	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.8.2	Perform clinical assessment of gait and cerebellar function using relevant tests	S	Bedside teaching, Outpatient clinic	OSCE
MEDI.8.3	Identify pathological gait types and cerebellar dysfunction signs (ataxia, dysmetria)	K	Bedside teaching, Outpatient clinic	CIVA
MEDI.8.4	Communicate gait and cerebellar examination findings clearly and effectively	С	Bedside teaching, Outpatient clinic	OSCE

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
Neurological	Neurological Topics: Headache, Weakness, Seizure & Vertigo					
MEDI.9.1	Describe clinical features, causes, and pathophysiology of headache, weakness, seizure, and vertigo	K	Bedside teaching, Outpatient clinic	CIVA		
MEDI.9.2	Perform focused history taking and clinical examination relevant to headache, weakness, seizure, and vertigo	S	Bedside teaching, Outpatient clinic	OSCE		
MEDI.9.3	Identify red flags, emergencies, and serious conditions within these neurological presentations	K	Bedside teaching, Outpatient clinic	CIVA		
MEDI.9.4	Communicate assessment findings and management plans effectively for all four neurological problems	С	Bedside teaching, Outpatient clinic	OSCE		

Gynecology



Fifth grade

Academic Program Description

This academic program provides a summary of the most important characteristics of the program and the learning outcomes expected of the student to achieve, proving whether he has made the most of the available opportunities. It is accompanied by a description of each course within the program.

Educational Establishment:	University of Al-Ameed
Scientific Department:	College of Medicine
Name of the Professional Academic Program:	Modified Traditional Curriculum
Final Graduation Certificate:	M.B.Ch.B
Educational system: Annual/courses/other	Annual System
Approved accreditation program:	Iraqi National Guideline on Standards for Established and Accrediting Medical School
Other external factors:	Availability of relevant scientific research in the field of specialization. Access to global electronic networks. Access to traditional and digital libraries Teaching aids such as data show and PowerPoint presentations Availability of equipped classrooms. Use of free online communication platforms (e.g., Free Conference Call).
Date the description was written:	15/9/2024

Academic Program Objectives:

Provide students with foundational knowledge of gynecological physiology, pathology, and common disorders.

Develop clinical skills for diagnosing and managing gynecological conditions through history-taking, physical examination, and diagnostic procedures.

Train students to recognize and manage gynecological emergencies, such as ectopic pregnancy and ovarian torsion.

Enhance students' ability to perform and interpret essential gynecological investigations, including ultrasound, Pap smears, and hormone tests.

Strengthen communication skills to ensure effective patient counseling and shared decision-making in gynecological care.

Promote adherence to ethical and legal principles in gynecological practice, including patient confidentiality, informed consent, and reproductive rights.

Encourage research and evidence-based practice in gynecology to improve patient outcomes and advance medical knowledge in women's health.

Prepare students to actively apply health promotion principles in gynecological practice by recognizing risk factors, implementing preventive strategies, and educating women about reproductive and sexual health, with the aim of reducing disease burden and improving quality of life.

¹⁰⁾ The Most reliable resources for program Information:

⁻ Ten Teacher Textbook.

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
Embryolog	y and Anatomy of genital tract			
OBST1.1	Outline the embryological origins of the female genital tract, including Müllerian and Wolffian ducts, to understand the basis of congenital anomalies.	K	Large Group Teaching	Short answer questions &MCQ
OBST1.2	Describe the process of vaginal development from the sinovaginal bulb and outline its timeline of canalization.	K	Large Group Teaching	Short answer questions &MCQ
OBST1.3	Identify the anatomical structures of the uterus, fallopian tubes, and ovaries and understand their significance in clinical practice.	K	Large Group Teaching	Short answer questions &MCQ
OBST1.4	Compare anatomical and histological changes in the genital tract before and after menopause to recognize age-related clinical variations.	K	Large Group Teaching	Short answer questions &MCQ
OBST1.5	Analyze the role of hormonal signals in external genitalia development during embryogenesis, important for understanding intersex conditions.	K	Large Group Teaching	Short answer questions &MCQ
Maldevelop	oments of Female Genital Tract.			
OBST2.1	Describe the embryological development of the female genital tract, with emphasis on the roles of the Müllerian and Wolffian ducts.	K	Large Group Teaching	Short answer questions &MCQ
OBST2.2	Explain how disruptions in Müllerian duct development result in congenital anomalies of the uterus and upper vagina.	K	Large Group Teaching	Short answer questions &MCQ
OBST2.3	Identify the most common congenital malformations of the female genital tract and their clinical presentation.	K	Large Group Teaching	Short answer questions &MCQ

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBST2.4	Differentiate between types of uterine anomalies based on anatomical and reproductive implications.	K	Large Group Teaching	Short answer questions &MCQ
OBST2.5	Recognize the impact of genital tract malformations on menstruation, fertility, and pregnancy outcomes.	K	Large Group Teaching	Short answer questions &MCQ
OBST2.6	Evaluate the diagnostic approaches used to confirm these anomalies, including imaging and clinical criteria.	K	Large Group Teaching	Short answer questions &MCQ
OBST2.7	Understad appropriate management strategies, both surgical and non-surgical, tailored to patient needs.	K	Large Group Teaching	Short answer questions &MCQ
Disorders o	f Sexual Development (Intersex).			
OBST3.1	Understand the concept of DSDs by explaining their definitions, underlying causes, and the role of genetic and hormonal factors in sexual differentiation	K	Large Group Teaching	Short answer questions &MCQ
OBST3.2	Classify the types of DSDs, including 46, XX DSD, 46,XY DSD, and ovotesticular DSD, based on chromosomal, gonadal, and phenotypic characteristics.	K	Large Group Teaching	Short answer questions &MCQ
OBST3.3	Recognize common clinical features of specific DSDs such as congenital adrenal hyperplasia and androgen insensitivity syndrome.	K	Large Group Teaching	Short answer questions &MCQ
OBST3.4	Explain the diagnostic approach to DSDs, including hormonal assays, imaging, genetic testing, and physical examination findings.	K	Large Group Teaching	Short answer questions &MCQ
OBST3.5	Describe the available management options for DSDs, including medical treatment, surgical considerations, and long-term follow-up.	K	Large Group Teaching	Short answer questions &MCQ

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBST3.6	Advocate for health promotion strategies in individuals with DSDs by supporting early detection, access to psychological care, and community-based support to reduce stigma and improve outcomes.	K	Large Group Teaching	Short answer questions &MCQ
Puberty and Developmen	Disorders of Pubertal nt.			
OBST4.1	Understand the normal process of puberty, including the hormonal regulation by the hypothalamic-pituitary-gonadal (HPG) axis, the sequence of physical changes (Tanner stages), and the expected age range for puberty in males and females.	K	Large Group &Bedsid e	Short answer questions &MCQ
OBST4.2	Identify common disorders of pubertal development, such as precocious puberty (early puberty), delayed puberty, and disorders like central vs. peripheral causes of pubertal abnormalities.	K	Large Group &Bedsid e	Short answer questions &MCQ
OBST4.3	Describe the clinical features and diagnostic approach for disorders like precocious puberty, delayed puberty, and pubertal abnormalities.	K	Large Group &Bedsid e	Short answer questions &MCQ
OBST4.4	Recognize the clinical implications of pubertal disorders, such as their impact on growth, fertility, and psychosocial well-being.	K/S	Large Group &Bedsid e	Short answer question, MCQ & OSCE
OBST4.5	Analyze the management strategies for pubertal disorders, including available treatment options.	K	Large Group &Bedsid e	Short answer questions &MCQ
Dysmenorrh	nea and Premenstrual syndrome.			
OBST5.1	Explain the hormonal changes and inflammatory processes that contribute to painful menstruation, including both primary and secondary dysmenorrhea, as well as the underlying mechanisms of PMS symptoms.	K	Large Group Teaching	Short answer question, MCQ & OSCE

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBST5.2	Identify the timing, severity, and nature of symptoms such as cramping, fatigue, mood swings, and bloating, and distinguish between dysmenorrhea and PMS based on symptom presentation.	K	Large group, small group Bedside, Clinical skills	Short answer question, MCQ, logbook & OSCE
OBST5.3	Describe the causes, risk factors, and clinical presentation of primary versus secondary dysmenorrhea, and differentiate them based on underlying conditions or pathophysiology.	K	lab, case- based learning & Practical learning	
OBST5.4	Recognize the range of treatments for dysmenorrhea and PMS, including non-pharmacological options like heat therapy, exercise, and stress management, as well as pharmacological treatments such as NSAIDs and hormonal therapies.	K	Large group, small group Bedside, Clinical skills	Short answer question, MCQ & OSCE
OBST5.5	Evaluate the importance of health promotion by lifestyle modifications, including exercise, dietary adjustments, and stress management, in managing dysmenorrhea and PMS symptoms, and improving overall well-being.	K	lab, case- based learning & Practical learning	
Normal Phy	siology of Menstrual Cycle.			
OBST6.1	Explain the hormonal regulation of the menstrual cycle, focusing on the interactions between the hypothalamus, pituitary gland, and ovaries.	K	Large Group Teaching	Short answer questions &MCQ
OBST6.2	Identify the roles of GnRH, FSH, LH, estrogen, and progesterone in regulating the menstrual cycle.	K	Large Group Teaching	Short answer questions &MCQ
OBST6.3	Describe the physiological events occurring during each phase of the menstrual cycle: follicular phase, ovulation, luteal phase, and menstruation.	K	Large Group Teaching	Short answer questions &MCQ

Number	Learning Objective	Domain K/S/A/	Teaching Learning	Assessmen t Methods
OBST6.4	Recognize the clinical relevance of normal menstrual cycle physiology in maintaining reproductive health and fertility.	C K	Methods Large Group Teaching	Short answer questions &MCQ
OBST6.5	Analyze how hormonal imbalances can affect the menstrual cycle and contribute to common menstrual disorders.	K	Large Group Teaching	Short answer questions &MCQ
Disorders of	f Menstrual cycle (Abnormal Uterine E	Bleeding).		
OBST7.1	Identify the key terms used to describe various patterns of abnormal uterine bleeding.	K	Large group, small group	Short answer questions &MCQ
OBST7.2	Describe the difference between organic and non-organic causes of abnormal uterine bleeding	K	Bedside, Clinical skills lab &case- based learning	Short answer questions &MCQ
OBST7.3	Outline the essential components of a patient's history and physical examination when evaluating abnormal uterine bleeding.	K	Large	
OBST7.4	Summarize the role of different investigations, including imaging and laboratory tests, in diagnosing the causes of AUB.	K	group, small group Bedside, Clinical skills lab& case- based	Short answer question, MCQ, logbook &
OBST7.5	Describe the general treatment approaches for abnormal uterine bleeding, considering potential underlying causes.	K		OSCE, CIVA
OBST7.6	Outline the acute management strategies for heavy uterine bleeding, including both medical and supportive measures.	S	learning	
Amenorrhe	a.			
OBST8.1	Classify the types of amenorrhea into primary and secondary forms, based on age of onset and menstrual history.	K/S	Large group, small group	Short answer question, MCQ,
OBST8.2	Identify the common causes of amenorrhea, including hormonal,	K	Bedside, Clinical	logbook & OSCE,

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
	structural, and lifestyle-related factors.		skills lab, case- based learning & Practical learning	CIVA
OBST8.3	Describe the diagnostic approach for amenorrhea, including history taking, physical examination, laboratory tests, and imaging studies.	K/S	Large group, small group Bedside, Clinical	Short answer question, MCQ & OSCE
OBST8.4	Recognize common conditions associated with amenorrhea, such as polycystic ovary syndrome (PCOS) and thyroid dysfunction.	K	skills lab, case- based learning &	Short answer question, MCQ & OSCE
OBST8.5	Support health promotion by encouraging early evaluation, raising awareness of contributing to lifestyle and psychological factors, and guiding appropriate treatment strategies for amenorrhea.	A	Practical learning	Short answer question &MCQ
Poly Cystic	Ovarian Syndrome.			
OBST9.1	Define Polycystic Ovary Syndrome (PCOS) using the Rotterdam criteria.	K	Large Group Teaching	Short answer questions &MCQ
OBST9.2	Explain the pathophysiology of PCOS, including the roles of hyperandrogenism, LH hypersecretion, and insulin resistance.	K	Large group, small group Bedside,	Short answer question, MCQ, logbook &
OBST9.3	Identify the common clinical features and symptoms associated with PCOS.	K	Clinical skills lab, case-	OSCE, CIVA
OBST9.4	Describe the key investigations used in the diagnosis of PCOS, including ultrasound findings and hormonal assessments.	K	based learning & Practical	Short answer questions MCQ

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBST9.5	Outline the various treatment options available for managing PCOS, considering the different clinical manifestations.	K	learning	OSCE& CIVA
OBST9.6	Summarize the potential long-term health sequelae associated with PCOS.	K		Short answer questions MCQ OSCE& CIVA
Hyperprola	ctinemia.			
OBST10.1	Define hyperprolactinemia with focusing on pathophysiology, including physiological, pathological, and drug-induced factors.	K	Large Group &Bedsid e	Short answer questions &MCQ
OBST10.2	Identify the key presenting symptoms that comes with hyperprolactinemia.	K/S	Large Group &Bedsid e	Short answer questions &MCQ
OBST10.3	Describe the diagnostic approach to hyperprolactinemia, including relevant laboratory tests and imaging studies.	K	Large Group &Bedsid e	Short answer questions &MCQ
OBST10.4	Summarize the treatment options for hyperprolactinemia, considering the etiology and the presence of micro- or macroadenomas.	K	Large Group &Bedsid e	Short answer questions &MCQ
Secondary A	Amenorrhea.			
OBST11.1	Describe the key historical and physical examination findings relevant to the diagnosis of secondary amenorrhea.	S	Bedside & Small group	OSCE
OBST11.2	Explain how to select appropriate initial laboratory investigations for a patient presenting with secondary amenorrhea.	K	Large group, small group	Short answer question, MCQ,
OBST11.3	Differentiate between common causes of secondary amenorrhea based on clinical presentation and	K	Bedside, Clinical skills	OSCE & CIVA

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
	diagnostic test results.		lab, case-	
OBST11.4	Outline general management principles for secondary amenorrhea, recognizing the need for etiology-specific treatment.	K	based learning & Practical learning	
Ultrasound	In Gynecology.			
OBST12.1	List the indications for using ultrasound in gynecology, such as infertility, ectopic pregnancy, and ovarian masses.	K	Large Group &Bedsid e	Short answer question, MCQ & OSCE
OBST12.2	Explain the difference in frequency used between transabdominal and transvaginal ultrasound and its effect on image resolution and tissue penetration.	K	Large Group &Bedsid e	Short answer question, MCQ & OSCE
OBST12.3	Describe the required preparation for a transabdominal ultrasound, including the need for a full bladder.	K	Large Group &Bedsid e	Short answer question, MCQ & OSCE
OBST12.4	Identify the key anatomical structures observed during a gynecological ultrasound, such as the uterus, ovaries, and endometrium.	K/S	Large Group &Bedsid e	Short answer question, MCQ & OSCE
Infertility.			,	
OBST13.1	Define infertility and distinguish between primary and secondary types based on the couple's reproductive history.	K	Large Group &Bedsid e	Short answer question, &MCQ
OBST13.2	Classify ovulation disorders using WHO criteria and relate each category to relevant clinical conditions.	K	Large Group &Bedsid e	
OBST13.3	Describe the essential steps in clinical evaluation of infertility, including history-taking and physical examination for both	S	Large group, small group,	Short answer question, MCQ,

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
	partners.		Bedside, Clinical	OSCE & CIVA
OBST13.4	Identify abnormal findings in investigations related to ovulation, tubal patency, and semen analysis, and link them to possible causes.	K	skills lab, Case Based Learning &	
OBST13.5	Explain the role of different diagnostic tools in assessing uterine and tubal factors affecting fertility.	K	Practical learning	
OBST13.6	Summarize the management strategies for different infertility causes, including ovulation induction, surgery, and ART.	K/S		
OBST13.7	Describe Briefly the classification, risk factors, clinical features, and management of ovarian hyperstimulation syndrome (OHSS).	K/S		
Assisted Re	productive Technologies.			
OBST14.1	List the essential investigations required before any form of assisted conception treatment.	K	Large group,, Bedside, Clinical skills lab, Case Based & Practical Learning	Short answer question, MCQ, OSCE & CIVA
OBST14.2	Describe the intrauterine insemination (IUI) procedure and its common indications.	K	Large group,, Bedside,	Short answer
OBST14.3	Outline the steps involved in the in vitro fertilization (IVF) process, from pituitary down-regulation to embryo transfer.	K	Clinical skills lab, Case Based &	question, MCQ, OSCE & CIVA
OBST14.4	Compare the indications and success rates of IUI and IVF.	K/S	Practical Learning	

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBST14.5	Explain the pathophysiology and risk factors of ovarian hyperstimulation syndrome (OHSS).	K		
OBST14.6	Describe the management strategies for ovarian hyperstimulation syndrome (OHSS).	K		
OBST14.7	Examine the role of health promotion (ART) by educating individuals about available treatment options, addressing factors influencing treatment success and emphasizing the importance of mental and emotional support to enhance outcomes and overall well-being.	A		
Fertility Con	ntrol.			
OBST15.1	Understand the different methods of contraception, including hormonal methods (e.g., oral contraceptives, IUDs, implants, patches), barrier methods (e.g., condoms, diaphragms), permanent methods (e.g., tubal ligation, vasectomy), and natural methods (e.g., fertility awareness).	K	Large group, small group, Bedside, Clinical skills lab, Case Based Learning & Practical learning	Short answer question, MCQ, & OSCE
OBST15.2	Learn how each method works to prevent pregnancy, including their mechanisms of action, such as inhibiting ovulation, thickening cervical mucus, or altering the uterine lining.	K	Large group, small group, Bedside, Clinical	Short answer
OBST15.3	Identify the advantages, disadvantages, and contraindications of various contraceptive methods, focusing on effectiveness, convenience, side effects (e.g., weight gain, mood changes), and risks (e.g., blood clots, hormonal imbalances).	K	skills lab, Case Based Learning & Practical learning	question, MCQ, OSCE & CIVA

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBST15.4	Evaluate how patient age, health conditions, lifestyle, and reproductive plans influence the selection of an appropriate contraceptive method.	K		
OBST15.5	Recognize the role of healthcare providers in contraception counseling, including the importance of health promotion on educating patients about various options, addressing concerns, and supporting informed decisionmaking.	A	Large group	Short answer question, MCQ& OSCE
OBST15.6	Understand the need for follow-up care to monitor side effects, manage complications, and ensure ongoing contraceptive effectiveness.	A		OSCE
Disorder of	Early Pregnancy (Miscarriage).			
OBST16.1	Describe the causes and types of miscarriage, including factors such as chromosomal abnormalities, maternal health conditions, and environmental influences.	K	Large group,	Short
OBST16.2	Identify the clinical signs and diagnostic tools used to evaluate miscarriage, such as vaginal bleeding, cramping, ultrasound findings, and hCG levels.	K	small group, Bedside, Clinical skills	answer question, MCQ, logbook & OSCE, CIVA
OBST16.3	Recognize the available management options for miscarriages, including expectant, medical, and surgical approaches.	K	lab, Case Based &Practic alearning	
OBST16.4	Explain the importance of providing emotional support to patients with miscarriage, including how emotional well-being can impact recovery.	K		
OBST16.5	Understand the key components of follow-up care after miscarriage, such as physical assessment, patient education, and guidance on future pregnancy planning.	A	Large group	Short answer question, &MCQ

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
Recurrent M	liscarriage.			
OBST17.1	Understand the causes of recurrent miscarriage, including genetic factors, uterine abnormalities, hormonal disorders, immune dysfunction, and thrombophilia.	K	Large group, small group, Bedside, Clinical skills lab, Case Based & Practical learning	Short answer question, MCQ, logbook & OSCE, CIVA
OBST17.2	Identify the diagnostic approach, including history-taking, imaging (e.g., ultrasound, hysteroscopy), genetic testing, and blood tests for hormonal and clotting disorders.	K		Short answer question,
OBST17.3	Recognize management strategies for recurrent miscarriage, such as hormonal support, anticoagulants for thrombophilia, and surgical correction of uterine abnormalities.	K	Large group, small group, Bedside &Case Based Learning	MCQ, OSCE
OBST17.4	Understanding the role of health promotion by educating individuals on underlying causes, encouraging early medical evaluation, lifestyle modification and supporting emotional and psychological wellbeing to prevent future losses and enhance reproductive health.	K		Short answer question, MCQ& OSCE
Disorders of	f Early Pregnancy (Ectopic Pregnancy).		
OBST18.1	Explain the causes and risk factors for ectopic pregnancy, including conditions that impair normal implantation such as pelvic inflammatory disease, prior ectopic pregnancy, tubal surgery, or endometriosis.	K	Large group, small group, Bedside, Clinical skills	Short answer question, MCQ, logbook & OSCE, CIVA
OBST18.2	Identify the clinical presentation of ectopic pregnancy, including common symptoms and signs of hemodynamic instability in severe cases.\	K/S	lab, Case Based & Practical learning	

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBST18.3	Describe the diagnostic approach for ectopic pregnancy, including the use of transvaginal ultrasound, serum hCG levels, and physical examination.	K	Large group, small	
OBST18.4	Recognize the available management options for ectopic pregnancy, including medical therapy (e.g., methotrexate) and surgical interventions (e.g., laparoscopic salpingectomy or salpingostomy).	K	group, Bedside &Case Based Learning	Short answer question, MCQ, OSCE & CIVA
OBST18.5	Emphasize the importance of early diagnosis and timely treatment in preventing complications and preserving fertility.	A		
Gestational	Trophoblastic Disease.			
OBST19.1	Describe the types and causes of gestational trophoblastic disease (GTD), including complete and partial hydatidiform mole, invasive mole, choriocarcinoma, and placental site trophoblastic tumor (PSTT), in relation to abnormal trophoblastic proliferation.	K	Large group, small group,	Sh o et
OBST19.2	Identify the clinical features of GTD, such as abnormal vaginal bleeding, excessive nausea and vomiting, and uterine enlargement.	K	Bedside, Clinical skills lab, Case	Short answer question, MCQ, OSCE &
OBST19.3	Outline the diagnostic approach for GTD, including the role of β-hCG measurement, ultrasound imaging (e.g., "snowstorm" appearance), and histopathological examination.	K/S	Based Learning & Practical learning	CIVA
OBST19.4	Recognize the management strategies for GTD, such as suction evacuation in molar pregnancies, serial β-hCG monitoring, and chemotherapy for malignant forms.	K/S		

Number OBST19.5	Learning Objective Understand the role of health	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods Short
	promotion in Gestational Trophoblastic Disease (GTD) by raising awareness about the importance of early detection, encouraging regular follow-ups, and providing emotional and psychological support to enhance treatment outcomes and protect reproductive health.	K		answer question, MCQ, OSCE & CIVA
Termination	n of Pregnancy (Induced Abortion).			
OBST20.1	Describe the types and methods of induced abortion, including medical methods (e.g., mifepristone and misoprostol) and surgical methods (e.g., aspiration, dilation and curettage, or dilation and evacuation).	K	Large Group Teaching	Short answer questions &MCQ
OBST20.2	Identify the factors influencing the choice of abortion method, such as gestational age and the patient's health condition.	K	Large Group Teaching	Short answer questions &MCQ
OBST20.3	Recognize the indications and risks associated with induced abortion, including maternal health issues, fetal abnormalities, psychosocial factors, and potential complications like infection, bleeding, and emotional responses.	K	Large Group Teaching	Short answer questions &MCQ
OBST20.4	Understand the ethical, legal, and psychological considerations related to induced abortion, focusing on informed consent, patient counseling, and support services before and after the procedure, and adherence to legal regulations in different regions.	A	Large Group Teaching	Short answer questions &MCQ
Genitourinary Fistula.				
OBST21.1	Identify the types and causes of genitourinary fistulas, including prolonged labor, surgical complications, radiation therapy,	K	Large Group &Bedsid e	Short answer questions &MCQ

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
	infections, and malignancies.			
OBST21.2	Recognize the clinical features of genitourinary fistulas, such as continuous urinary or fecal leakage, recurrent infections, and irritation.	K	Large Group &Bedsid e	Short answer questions &MCQ
OBST21.3	Describe the diagnostic approach for genitourinary fistulas, including dye tests, cystoscopy, contrast-enhanced CT, and MRI to determine their location and extent.	K	Large Group &Bedsid e	Short answer questions &MCQ
OBST21.4	Outline management strategies for genitourinary fistulas, covering conservative methods (e.g., catheterization) and surgical repair techniques aimed at restoring continence and quality of life.	K/S	Large Group &Bedsid e	Short answer questions &MCQ
Second Trir	mester Miscarriage.			
OBST22.1	Recall the definition and basic facts related to second-trimester miscarriage.	K	Large Group Teaching	
OBST22.2	Understand the causes and management options for second-trimester miscarriage.	K	Large Group Teaching	Short
OBST22.3	Compare and contrast the different management options for second-trimester miscarriage, including expectant, medical, and surgical approaches.	K	Large group,	answer question, MCQ, OSCE & CIVA
OBST22.4	Analyze the risk factors and diagnostic methods for cervical incompetence.	K	Bedside & Case Based Learning	
OBST22.5	Outline the management plan for cervical incompetence	K		
Endometriosis And Adenomyosis.				
OBST23.1	Describe the pathophysiology of endometriosis and adenomyosis, including the location of ectopic	K	Large group, small	Short answer question,

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
	endometrial tissue and its effects on		group, Bedside,	MCQ, logbook &
OBST23.2	pelvic organs. Identify common symptoms of endometriosis and adenomyosis such as pelvic pain, dysmenorrhea, dyspareunia, and abnormal uterine bleeding.	K/S	Clinical skills lab, Case Based Learning	OSCE, CIVA
OBST23.3	Recognize the diagnostic tools used in confirming endometriosis and adenomyosis, including ultrasound, MRI, and laparoscopy.	K	& Practical learning	
OBST23.4	List the main medical treatment options, including hormonal therapy and pain relief measures.	K		Short
OBST23.5	Outline the surgical interventions available, such as excision of lesions and hysterectomy, based on disease severity.	K		answer question, MCQ, OSCE & CIVA
OBST23.6	Explain the importance of early recognition and appropriate management to improve reproductive health and quality of life.	K		CIVA
Benign Disc Uterus.	eases of the Cervix and			
OBST24.1	Classify benign diseases of the uterus and cervix based on tissue of origin.	K	Large Group Teaching	Short answer questions &MCQ
OBST24.2	Describe the causes, symptoms, and signs of common benign cervical conditions.	K	Large Group Teaching	
OBST24.3	Summarize the options treatments of benign cervical conditions.	K	Large Group Teaching	
OBST24.4	Identify the risk factors, symptoms, and treatment options for endometrial polyps.	K	Large group, Bedside & Case Based Learning	Short answer question, MCQ, logbook & OSCE, CIVA
OBST24.5	Explain the FIGO classification,	K	Large	Short

incidence, symptoms, and diagnosis of uterine leiomyomata (fibroids). OBST24.6 Compare medical and surgical management options for uterine fibroids, including their indications and complications. Post Menopausal Bleeding. OBST25.1 Describe the causes of postmenopausal bleeding, including benign (e.g., endometrial atrophy, polyps) and serious conditions (e.g., endometrial hyperplasia, cancer), and explain the role of hormonal changes. OBST25.2 Identify the initial steps in evaluating postmenopausal bleeding, including history-taking and physical examination. OBST25.3 Recognize the main diagnostic tools such as transvaginal ultrasound, hysteroscopy, and endometrial biopsy. OBST25.4 Differentiate between common causes of postmenopausal bleeding based on diagnostic findings. OBST25.5 Explain the treatment options and when medical or surgical interventions are appropriate. CBST26.1 Describe the pathophysiology of endometrial hyperplasia, focusing on the role of prolonged unopposed estrogen in the abnormal thickening of the endometrium and its potential progression to malignancy. Short answer question, MCQ, logbook & OSCE, CIVA	Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods	
management options for uterine fibroids, including their indications and complications.				Bedside	question,	
OBST25.1 Describe the causes of postmenopausal bleeding, including benign (e.g., endometrial atrophy, polyps) and serious conditions (e.g., endometrial hyperplasia, cancer), and explain the role of hormonal changes. OBST25.2 Identify the initial steps in evaluating postmenopausal bleeding, including history-taking and physical examination. OBST25.3 Recognize the main diagnostic tools such as transvaginal ultrasound, hysteroscopy, and endometrial biopsy. OBST25.4 Differentiate between common causes of postmenopausal bleeding based on diagnostic findings. OBST25.5 Explain the treatment options and when medical or surgical interventions are appropriate. CENDENTIAL Hyperplasia. OBST26.1 Describe the pathophysiology of endometrial hyperplasia, focusing on the role of prolonged unopposed estrogen in the abnormal thickening of the endometrium and its potential progression to malignancy. EINDENTIAL HYPERPLASIA. EINDENTIAL HYPERPLASIA. CIVA Large group, small and service in the pathophysiology of endometrial hyperplasia, focusing on the role of prolonged unopposed estrogen in the abnormal thickening of the endometrium and its potential progression to malignancy. EINDENTIAL HYPERPLASIA. EINDENTIAL HY	OBST24.6	management options for uterine fibroids, including their indications	K			
postmenopausal bleeding, including benign (e.g., endometrial atrophy, polyps) and serious conditions (e.g., endometrial hyperplasia, cancer), and explain the role of hormonal changes. OBST25.2 Identify the initial steps in evaluating postmenopausal bleeding, including history-taking and physical examination. OBST25.3 Recognize the main diagnostic tools such as transvaginal ultrasound, hysteroscopy, and endometrial biopsy. OBST25.4 Differentiate between common causes of postmenopausal bleeding based on diagnostic findings. OBST25.5 Explain the treatment options and when medical or surgical interventions are appropriate. Endometrial Hyperplasia. OBST26.1 Describe the pathophysiology of endometrial hyperplasia, focusing on the role of prolonged unopposed estrogen in the abnormal thickening of the endometrium and its potential progression to malignancy. I Large group, Short answer question, MCQ, logbook & OSCE, CIVA Endometrial Hyperplasia. CBST26.1 Describe the pathophysiology of endometrial hyperplasia, focusing on the role of prolonged unopposed estrogen in the abnormal thickening of the endometrium and its potential progression to malignancy. K Large group, Short answer question, MCQ, logbook & OSCE, Clinical skills lab, Case Based & Practical	Post Menop	ausal Bleeding.				
evaluating postmenopausal bleeding, including history-taking and physical examination. OBST25.3 Recognize the main diagnostic tools such as transvaginal ultrasound, hysteroscopy, and endometrial biopsy. OBST25.4 Differentiate between common causes of postmenopausal bleeding based on diagnostic findings. OBST25.5 Explain the treatment options and when medical or surgical interventions are appropriate. Endometrial Hyperplasia. OBST26.1 Describe the pathophysiology of endometrial hyperplasia, focusing on the role of prolonged unopposed estrogen in the abnormal thickening of the endometrium and its potential progression to malignancy. K/S Bedside, Clinical skills lab, Case Based Learning K Practical Endometrial Hyperplasia. K Endometrial Hyperplasia. K Endometrial Hyperplasia. K Endometrial Hyperplasia. OBST26.1 Describe the pathophysiology of endometrial hyperplasia, focusing on the role of prolonged unopposed estrogen in the abnormal thickening of the endometrium and its potential progression to malignancy. K Endometrial Hyperplasia. K Endometrial Hyperplasia. K Endometrial Hyperplasia. Clinical skills lab, Case Based Learning W Practical Earning Short answer question, MCQ, SCE, CIVA Short answer question, MCQ, Clinical skills Schort A Clinical skills Schort A Clinical skills Schort A Clinical skills Schort A CIVA Short A Clinical skills Schort A CIVA	OBST25.1	postmenopausal bleeding, including benign (e.g., endometrial atrophy, polyps) and serious conditions (e.g., endometrial hyperplasia, cancer), and explain the role of	K	group,	answer question, MCQ, logbook & OSCE,	
OBST25.3 Recognize the main diagnostic tools such as transvaginal ultrasound, hysteroscopy, and endometrial biopsy. OBST25.4 Differentiate between common causes of postmenopausal bleeding based on diagnostic findings. OBST25.5 Explain the treatment options and when medical or surgical interventions are appropriate. Endometrial Hyperplasia. OBST26.1 Describe the pathophysiology of endometrial hyperplasia, focusing on the role of prolonged unopposed estrogen in the abnormal thickening of the endometrium and its potential progression to malignancy. K BRIIS lab, Case Based Learning K Practical learning K Brils lab, Case Based Learning K Brils lab, Case Based Learning K Practical learning K CIIVA	OBST25.2	evaluating postmenopausal bleeding, including history-taking	K/S	group, Bedside, Clinical		
OBST25.5 Explain the treatment options and when medical or surgical interventions are appropriate. Endometrial Hyperplasia. OBST26.1 Describe the pathophysiology of endometrial hyperplasia, focusing on the role of prolonged unopposed estrogen in the abnormal thickening of the endometrium and its potential progression to malignancy. Endometrial Hyperplasia. K Practical learning K Large group, small answer question, Bedside, MCQ, Clinical skills OSCE, CIVA Based & Practical	OBST25.3	tools such as transvaginal ultrasound, hysteroscopy, and	K	lab, Case Based Learning		
when medical or surgical interventions are appropriate. Endometrial Hyperplasia. OBST26.1 Describe the pathophysiology of endometrial hyperplasia, focusing on the role of prolonged unopposed estrogen in the abnormal thickening of the endometrium and its potential progression to malignancy. K Large group, Short small answer group, question, Bedside, MCQ, Clinical logbook & skills OSCE, lab, Case Lab, Case CIVA Based & Practical	OBST25.4	causes of postmenopausal bleeding	K	Practical		
OBST26.1 Describe the pathophysiology of endometrial hyperplasia, focusing on the role of prolonged unopposed estrogen in the abnormal thickening of the endometrium and its potential progression to malignancy. Clinical logbook & R ClivA	OBST25.5	when medical or surgical	K			
endometrial hyperplasia, focusing on the role of prolonged unopposed estrogen in the abnormal thickening of the endometrium and its potential progression to malignancy. Endometrial hyperplasia, focusing group, small answer group, question, Bedside, MCQ, Clinical logbook & skills OSCE, lab, Case Based & Practical	Endometria	Endometrial Hyperplasia.				
OBST26.2 Identify common clinical features K Large Short		endometrial hyperplasia, focusing on the role of prolonged unopposed estrogen in the abnormal thickening of the endometrium and its potential progression to malignancy.		group, small group, Bedside, Clinical skills lab, Case Based & Practical learning	answer question, MCQ, logbook & OSCE, CIVA	

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
	and risk factors of endometrial hyperplasia, including abnormal uterine bleeding, obesity, PCOS, and use of estrogen-only therapy.		group, small group, Bedside,	answer question, MCQ, OSCE &
OBST26.3	Explain the diagnostic tools used to evaluate endometrial hyperplasia, such as transvaginal ultrasound and endometrial biopsy.	K	Clinical skills lab, Case Based	CIVA
OBST26.4	Outline the treatment strategies, including hormonal therapy (e.g., progestins), regular monitoring, and surgical options when indicated.	K	Learning & Practical	
OBST26.5	Recognize the role of health promotion in endometrial hyperplasia by emphasizing lifestyle modifications, early detection through regular screenings, and awareness of abnormal bleeding to reduce risks and improve long-term health outcomes.	A		
Malignant I	Disease of the Uterus.			
OBST27.1	Classify the types of uterine malignancies, including endometrial carcinoma and uterine sarcomas.	K	Large Group Teaching	Short answer questions MCQ& CIVA
OBST27.2	Identify the risk factors associated with uterine malignancies, such as obesity, diabetes, prolonged estrogen exposure, and history of endometrial hyperplasia.	K	Large Group Teaching	Short answer questions MCQ& CIVA
OBST27.3	Recognize the clinical features of uterine malignancies, including postmenopausal bleeding and pelvic pain.	K	Large Group Teaching	Short answer questions MCQ& CIVA
OBST27.4	Explain the diagnostic methods used in uterine cancer, including ultrasound, endometrial biopsy, hysteroscopy, and imaging for metastasis.	K	Large Group Teaching	Short answer questions MCQ& CIVA

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBST27.5	Describe the treatment options for uterine malignancies, including surgery, chemotherapy, radiation, and the role of staging.	K	Large Group Teaching	Short answer questions &MCQ
Sexual Tran	smitted Disease.			
OBST28.1	Classify the common types of sexually transmitted diseases (STDs) based on causative agents (bacterial, viral, parasitic) and describe their modes of transmission and associated risk factors.	K	Large Group Teaching & Bedside	Short answer questions &MCQ
OBST28.2	Identify the clinical features of common STDs, including genital ulcers, abnormal discharge, pelvic pain, and systemic symptoms.	K	Large Group Teaching & Bedside	Short answer questions &MCQ
OBST28.3	Explain the diagnostic approaches used for STDs, such as serological tests, NAATs, and microscopic examination.	K	Large Group	Short
OBST28.4	Describe the treatment and prevention strategies for STDs, including pharmacological therapy, vaccination, partner treatment, and education on safe sexual practices.	K	Teaching & Bedside	answer questions &MCQ
OBST28.5	Recognize the role of health promotion in the prevention and control of STDs.by educating individuals on safe sexual practices, the importance of regular screening, early diagnosis, partner notification, and reducing stigma	K	Large Group Teaching & Bedside	Short answer questions &MCQ
Benign Tumors of the Ovary.				
OBST29.1	Understand the types of benign ovarian tumors, including functional cysts, epithelial tumors, and germ cell tumors, based on origin, growth patterns, and clinical presentation.	K	Large Group Teaching	Short answer questions MCQ& CIVA
OBST29.2	Identify the clinical features of benign ovarian tumors, such as pelvic pain, bloating, or incidental findings on imaging.	K	Large Group Teaching	Short answer questions MCQ&

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods CIVA
OBST29.3	Describe the diagnostic approach for benign ovarian tumors using imaging techniques and tumor markers.	K	Large Group Teaching	Short
OBST29.4	Explain the management options for benign ovarian tumors, including observation, medical therapy, and surgical intervention, while considering ovarian preservation and recurrence.	K	Large Group Teaching	answer questions MCQ& CIVA
OBST29.5	Understand the importance of health promotion in benign ovarian tumors by encouraging awareness of early symptoms, promoting routine gynecological check-ups, and educating women about when to seek medical evaluation to prevent complications and support timely management.	K	Large Group Teaching	Short answer questions MCQ& CIVA
Malignant 7	Cumors of Ovary and Fallopian Tube.			
OBST30.1	Understand the types of ovarian cancer, including epithelial ovarian cancers, germ cell tumors, and sex cord-stromal tumors.	K/S	Large Group Teaching	Short answer questions MCQ& CIVA
OBST30.2	Describe the risk factors for ovarian cancer, including family history, age, and genetic mutations (e.g., BRCA1/2).	K	Large Group Teaching	Short answer questions MCQ& CIVA
OBST30.3	Identify the clinical features of ovarian cancer, such as abdominal bloating, pelvic pain, early satiety, and changes in bowel habits.	K	Large Group Teaching	Short answer questions MCQ& CIVA

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBST30.4	Recognize the diagnostic approach for ovarian cancer, including imaging (ultrasound, CT, MRI), blood tests (e.g., CA-125), and biopsy or surgical exploration.	K	Large Group Teaching	Short answer questions MCQ& CIVA
OBST30.5	Outline the management strategies for ovarian cancer, including surgery, chemotherapy, and targeted therapies, emphasizing the importance of early detection, staging, and treatment	K	Large Group Teaching	Short answer questions MCQ& CIVA
Premaligna	nt Diseases of the Cervix.			
OBST31.1	Understand the types of cervical dysplasia, including LSIL and HSIL, and the role of persistent high-risk HPV infection as a primary cause.	K	Large Group Teaching & Bedside	Short answer questions MCQ& CIVA
OBST31.2	Describe the causes of cervical dysplasia, focusing on the mechanism of HPV-induced cellular changes.	K	Large Group Teaching & Bedside	Short answer questions MCQ& CIVA
OBST31.3	Identify the clinical features of cervical dysplasia, noting that it is often asymptomatic.	K	Large Group Teaching & Bedside	Short answer questions MCQ& CIVA
OBST31.4	Explain the diagnostic approach, including Pap smear, HPV testing, colposcopy, and biopsy.	K	Large Group Teaching & Bedside	Short answer questions MCQ& CIVA
OBST31.5	Recognize the management strategies for cervical dysplasia, such as monitoring, cryotherapy, LEEP, and conization.	K	Large Group Teaching & Bedside	Short answer questions MCQ& CIVA
OBST31.6	Recognize the importance of health promotion in premalignant cervical diseases by emphasizing patient education on HPV prevention, the value of regular Pap smears, HPV	A	Large Group Teaching & Bedside	Short answer questions &MCQ

Number	Learning Objective vaccination, and early follow-up to reduce progression to cervical cancer.	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
	cuncer.			
Malignant I	Diseases of the Cervix.			
OBST32.1	Differentiate between types of cervical cancer based on histological features and associated high-risk factors, particularly HPV subtypes.	K	Large Group Teaching & Bedside	Short answer questions MCQ& CIVA
OBST32.2	Analyze how behavioral and clinical risk factors contribute to the pathogenesis and progression of cervical cancer.	K	Large Group Teaching & Bedside	Short answer questions MCQ& CIVA
OBST32.3	Identify the clinical features and diagnostic steps of cervical cancer, including the use of Pap smear, HPV testing, colposcopy, and biopsy.	K	Large Group Teaching & Bedside	Short answer questions MCQ& CIVA
OBST32.4	Recognize the available treatment strategies based on cancer stage, such as surgery, radiotherapy, and chemotherapy, emphasizing the value of early detection.	K/A	Large Group Teaching & Bedside	Short answer questions &MCQ
	Malignant Condition of the Vagina.			
OBST33.1	Classify common benign and malignant vaginal conditions based on their histological types and clinical relevance.	K	Large Group Teaching	Short
OBST33.2	Identify the clinical manifestations and appropriate diagnostic tools used in evaluating vaginal lesions.	K	Large Group Teaching	answer questions MCQ& CIVA
OBST33.3	Describe the treatment options for both benign and malignant vaginal conditions according to severity and diagnosis.	K	Large Group Teaching	

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBST33.4	Recognize the role of health promotion in both benign and malignant vaginal conditions by understanding the importance of patient education, early symptom awareness, regular screening, and encouraging timely medical consultation to support early detection and better outcomes.	A	Large Group Teaching	Short answer questions &MCQ
Benign Con	ditions of The Vulva.			
OBST34.1	Define the common benign conditions of the vulva, such as Bartholin's cyst, lichen sclerosus, vulvar intraepithelial neoplasia (VIN), and benign tumors like fibromas and papillomas.	K	Large Group Teaching & Bedside	Short answer questions MCQ& CIVA
OBST34.2	Analyze the clinical manifestations of vulvar lesions to determine potential causes based on symptom patterns such as itching, pain, swelling, or visible masses.	K		Short answer questions MCQ& CIVA
OBST34.3	Explain the diagnostic approach to vulvar conditions, including physical examination, biopsy, and imaging when necessary.	K	Large Group	Short answer questions
OBST34.4	Outline the management options including medical therapy, drainage procedures, and surgical excision.	K	Teaching & Bedside	MCQ& CIVA
OBST34.5	Recognize the role of health promotion the importance of patient education, personal hygiene, early symptom recognition, and reducing stigma to encourage timely medical consultation and improve women's quality of life.	A		Short answer questions &MCQ
Invasive Diseases of the Vulva.				
OBST35.1	Describe the epidemiology of vulval cancer accurately, including age-related trends, histological types, and key etiological pathways such as HPV infection and lichen sclerosus.	K	Large Group Teaching & Bedside	Short answer question, MCQ & CIVA

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBST35.2	Explain the risk factors and etiology of vulval cancer, focusing on associations with HPV, chronic skin conditions, and age-related differences.	К	Large Group Teaching & Bedside	Short answer question, MCQ & CIVA
OBST35.3	Identify the clinical features of vulval cancer, including symptoms, lesion appearances, and patterns of local and distant spread.	K	Large Group Teaching	Short answer question, MCQ & CIVA
OBST35.4	Summarize the FIGO staging system for vulval cancer, emphasizing the criteria for each stage and its impact on treatment decisions.	K	Large Group Teaching	Short answer questions &MCQ
OBST35.5	Explore the treatment options for vulval cancer, considering surgical techniques, the role of radiotherapy, and prognostic indicators like lymph node involvement.	K	Large Group Teaching	Short answer questions &MCQ
Infection In Infection).	Gynecology (The Lower Genital Trac	t		
OBST36.1	Differentiate between the common causes and types of lower genital tract infections (LGTIs), including bacterial, fungal, viral, and parasitic origins.	K	Large Group Teaching & Bedside	Short answer question, MCQ, logbook &
OBST36.2	Identify the clinical features of LGTIs and outline the diagnostic methods used, such as microscopy, cultures, PCR, and pH testing.	K	Large Group & Bedside	OSCE, CIVA
OBST36.3	Recognize the appropriate treatment strategies for different LGTIs, including the use of antimicrobial, antifungal, and antiviral agents.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE &
OBST36.4	Explain preventive approaches for LGTIs, emphasizing patient education, safe sexual practices, hygiene, and partner treatment.	K	Large Group & Bedside	CIVA

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
Infection In Infection).	Gynecology (The Upper Genital Trace	t		
OBST37.1	Describe the common causes and types of upper genital tract infections (UGTIs), including PID, endometritis, and tubo-ovarian abscess, along with their typical microbial origins.	K	Large Group Teaching & Bedside	Short answer question, MCQ & CIVA
OBST37.2	Identify the clinical features and diagnostic tools used in evaluating UGTIs, including physical findings and investigations like ultrasound or laparoscopy. Recognize appropriate management	K	Large Group Teaching & Bedside Large	Short answer question, MCQ &
OBS137.3	options for UGTIs, including medical and surgical interventions.	K	Group & Bedside	CIVA
OBST37.4	Explain the potential complications of untreated UGTIs and the importance of timely treatment to preserve reproductive health.	K	Large Group Teaching & Bedside	Short answer question, MCQ & CIVA
OBST37.5	Understand the role of health promotion in gynecological infections by understanding methods of prevention, importance of patient education, safe sexual practices, and early diagnosis to reduce complications and protect reproductive health.	A	Large Group Teaching & Bedside	Short answer questions &MCQ
Urogenital I	Prolapse.			
OBST38.1	Understand the types and causes of urogenital prolapse, including cystocele, rectocele, uterine prolapse, and vaginal vault prolapse, and their contributing factors such as childbirth, aging, and obesity.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
OBST38.2	Identify the clinical features and diagnostic approach for urogenital prolapse.	K	Deusiue	CIVA
OBST38.3	Recognize the diagnostic approach to urogenital prolapse, including pelvic examination, POP-Q staging, and imaging studies like MRI or	K	Large Group Teaching &	Short answer question, MCQ,

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
	ultrasound.		Bedside	OSCE & CIVA
OBST38.4	Describe the management strategies including conservative treatments like pelvic floor exercises and pessary use for mild cases, and surgical interventions such as vaginal or abdominal repair for severe cases.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
OBST38.5	Emphasize health promotion by educating women on the risk factors, importance of pelvic floor exercises, and early symptom recognition to prevent and manage urogenital prolapse.	A	Large Group Teaching & Bedside	Short answer questions &MCQ
Urinary Inco	ontinence.			
OBST39.1	Understand the types and causes of urinary incontinence, including stress, urge, overflow, and mixed incontinence, and the associated risk factors such as age, pregnancy, menopause, and obesity.	K	Large Group Teaching & Bedside	Short answer question,
OBST39.2	Identify the clinical features and diagnostic approach, including history taking, bladder diaries, physical examination, and diagnostic tools such as urinalysis, urodynamic studies, and post-void residual assessment.	K	Large Group Teaching & Bedside	MCQ, OSCE & CIVA
OBST39.3	Describe the management strategies for urinary incontinence, including behavioral therapies,	K	Large Group Teaching	Short answer question,
OBST39.4	Recognize the role of health promotion and lifestyle modifications in preventing or minimizing urinary incontinence, such as weight loss, fluid adjustment, bladder training, and pelvic floor exercises.	A	& Bedside	MCQ, OSCE & CIVA

Number	Learning Objective	Domain K/S/A/	Teaching Learning	Assessmen
	5 3	C	Methods	t Methods
Chronic Pel	vic Pain.			
OBST40.1	Understand the definition and common causes of chronic pelvic pain (CPP), including gynecological, urological, gastrointestinal, musculoskeletal, and psychological origins.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
OBST40.2	Identify the clinical features and diagnostic approach, including history taking, pelvic examination, imaging techniques, and diagnostic laparoscopy.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
OBST40.3	Describe the management strategies for CPP, such as medical therapy, physiotherapy, psychological support, and surgical intervention when appropriate.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
OBST40.4	Recognize the importance of a multidisciplinary approach in evaluating and managing chronic pelvic pain to improve patient outcomes.	A	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
Menopause	and Hormone Replacement Therapy.			
OBST41.1	Explain how hormonal changes during menopause lead to physiological and symptomatic changes in the body.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
OBST41.2	Describe the common manifestations of menopause, including vasomotor symptoms and genitourinary changes.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
OBST41.3	Recognize the clinical methods used to evaluate menopause, including hormonal assays and patient history.	К	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBST41.4	Outline the indications and types of hormone replacement therapy used in menopausal women.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
OBST41.5	Compare the advantages and potential complications of HRT based on individual risk factors.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
OBST41.6	Differentiate between hormonal and non-hormonal management strategies for menopausal symptoms.	K	Large Group Teaching & Bedside	Short answer question, MCQ, OSCE & CIVA
Gynecologi	cal Operations.			
OBST42.1	Identify the types of gynecological operations, including diagnostic procedures (hysteroscopy, laparoscopy), minor surgeries (D&C, cervical cerclage), and major surgeries (hysterectomy, myomectomy, ovarian cystectomy). Explain the indications and surgical	K	Large Group Small group, Bedside	Short answer question, MCQ, OSCE & CIVA
OBS142.2	approaches for gynecological surgeries, such as laparoscopic, hysteroscopic, and open surgeries, based on conditions like fibroids, endometriosis, abnormal bleeding, and malignancies.	K	& Clinical skills lab	answer question, MCQ, OSCE & CIVA
OBST41.3	Describe the preoperative and postoperative considerations, including patient evaluation, anesthesia choices, postoperative care, and potential complications like infection, bleeding, and adhesions.	К	Large Group Small group, Bedside & Clinical skills lab	Short answer question, MCQ, OSCE & CIVA
OBST42.4	Understand the potential complications of gynecological surgeries, such as infection, bleeding, and adhesions, and how	K	Large Group Small group,	Short answer question, MCQ,

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
	to minimize them through careful surgical planning and postoperative care.		Bedside & Clinical skills lab	OSCE & CIVA
Gynecologi	cal Endoscopy.			
OBST43.1	Understand the types and applications of gynecological endoscopy, including hysteroscopy, laparoscopy, and colposcopy, used for various gynecological conditions.	K	Large Group Small group,	Short answer questions &MCQ
OBST43.2	Identify the indications for gynecological endoscopy, such as for abnormal uterine bleeding, infertility, pelvic pain, endometriosis, and ovarian cysts.	K	Bedside & Clinical skills lab	Short answer question, MCQ, OSCE & CIVA
OBST43.3	Recognize the potential complications of gynecological endoscopy, such as bleeding, infection, injury to surrounding organs, and anesthesia risks.	K	Large Group Small Group& Bedside	Short answer question, MCQ, OSCE & CIVA
OBST44.4	Evaluate the therapeutic benefits and outcomes of gynecological endoscopy, including faster recovery times, fewer complications, and better surgical results.	К	Large Group Small Group& Bedside	Short answer question, MCQ, OSCE & CIVA
Gynecologi Childhood.	cal Problems in Adolescence and			
OBST44.1	Understand common gynecological problems in adolescence and childhood, including menstruation-related issues such as primary amenorrhea and dysmenorrhea.	K	Large Group Teaching	Short answer questions &MCQ
OBST44.2	Identify congenital gynecological conditions, such as Müllerian duct anomalies and ovarian cysts, and their implications.	K	Large Group Teaching	Short answer questions &MCQ
OBST44.3	Apply diagnostic techniques for gynecological problems in younger patients, including taking a thorough history such as menstrual	K	Large Group Teaching	Short answer questions &MCQ

Number	Learning Objective history and sexual activity.	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
OBST44.4	Utilize physical examination and diagnostic tools, such as ultrasound and laboratory tests, to assess gynecological conditions in adolescence and childhood."	K	Large Group Teaching	Short answer questions &MCQ
OBST44.5	Analyze management strategies for menstrual disorders in adolescence, including medical treatments and hormone therapy for conditions like polycystic ovary syndrome (PCOS).	K	Large Group Teaching	Short answer questions &MCQ
	cal Disorders in Pregnancy and Breast			
Disease in F OBST45.1	identify different gynecological conditions that may occur during pregnancy, their causes, and their potential impact on maternal and fetal health.	K	Large Group Teaching	Short answer questions &MCQ
OBST45.2	Recognize and Manage Breast Diseases in Gynecology, Differentiate between benign and malignant breast conditions, their clinical presentations, and appropriate diagnostic and treatment approaches.	K	Large Group Teaching	Short answer questions &MCQ
OBST45.3	Plan an evidence-based approach to diagnose and treat common gynecological and breast disorders to ensure optimal patient outcomes.	K	Large Group Teaching	Short answer questions &MCQ
OBST45.4	Apply health promotion strategies to educate pregnant women about the prevention and early detection of gynecological and breast disorders, with a focus on maintaining reproductive health, ensuring a safe pregnancy, and seeking timely medical care for early intervention.	A	Large Group Teaching	Short answer questions &MCQ
Drugs In Gy		1		
OBST46.1	Understand the mechanisms of gynecological drugs and their role in managing conditions.	K	Large Group Small group, Bedside	Short answer question, MCQ, OSCE &

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods	
			& Clinical skills lab	CIVA	
OBST46.2	Identify the side effects and contraindications of gynecological medications to ensure patient safety.	K	Large Group Small group, Bedside & Clinical skills lab	Short answer question, MCQ, OSCE & CIVA	
OBST46.3	Differentiate clinical presentations and select the most effective pharmacological treatment for gynecological disorders.	K	Large Group Small group, Bedside & Clinical skills lab	Short answer question, MCQ, OSCE & CIVA	
Radiotherap	by And Chemotherapy.				
OBST47.1	Understand the principles and applications of radiotherapy and chemotherapy in gynecological cancers, including their roles in treating cervical, ovarian, endometrial, and vulvar cancers.	K	Large Group Teaching	Short answer question, MCQ, OSCE & CIVA	
OBST47.2	Identify the different types of radiotherapy (external beam and brachytherapy) and chemotherapy used based on cancer type, stage, and patient factors.	K	Large Group Teaching		
OBST47.3	Recognize the potential side effects and management strategies, including nausea, bone marrow suppression, radiation-induced damage, and long-term complications, with emphasis on supportive care and patient monitoring.	K	Large Group Teaching	Short answer question, MCQ, OSCE & CIVA	
Female Sex	Female Sexual Health.				
OBST48.1	Understand the components of female sexual health, including physical, psychological, and hormonal factors that influence sexual function, desire, and	K	Large Group Teaching	Short answer questions &MCQ	

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessmen t Methods
	satisfaction.			
OBST48.2	Identify common sexual health concerns, such as hypoactive sexual desire disorder, dyspareunia, vaginismus, and the impact of conditions like menopause, hormonal imbalances, and psychological stress.	K	Large Group Teaching	Short answer questions &MCQ
OBST48.3	Recognize management strategies, including counseling, hormonal and non-hormonal treatments, pelvic floor therapy, and lifestyle modifications to improve overall sexual well-being.	A	Large Group Teaching	Short answer questions &MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
1st Week	Day 1			
Introduction To	History.			
OBST1.1	Identify the key components of a comprehensive medical history.	K/S/C	Small group &	OSCE&
OBST1.2	Demonstrate effective communication skills in patient consultations.	S/C/A	Bedside teaching	CIVA
Gynecological l	History.			
OBST2.1	Recognize common gynecological symptoms and their clinical significance. Obtain a detailed and structured	K/S/C	Small group & Bedside	OSCE& CIVA
OBS12.2	gynecological history.		teaching	
History of mena pubertal signs	arche menstrual history and Assessme	nt of		
OBST3.1 OBST3.2	Obtain a detailed history of menarche and menstrual patterns and identify irregularities. Assess pubertal signs and their correlation with normal	K/S/C	Small group & Bedside teaching	OSCE& CIVA
	developmental stages.			
•	Bimanual Examination	1	1	
OBST4.1	Perform to assess the size, shape, and mobility of the uterus and adnexa and differentiate them from pathological conditions. Develop the ability to correlate findings from the bimanual examination with clinical	K/S/C	Small group & Bedside teaching	OSCE& CIVA
	symptoms to guide further diagnostic steps.			
1st Week		Day 2		
Abnormal mens	Abnormal menstruation and clinical assessment.			
OBST5.1	Correlate abnormal menstrual patterns with potential underlying gynecological and systemic conditions.	S	Small group & Bedside teaching	OSCE& CIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OBST5.2	Interpret clinical findings and diagnostic tests to guide management decisions.	C/S	Small group & Bedside teaching	OSCE& CIVA
Types of Contra	aceptives.			
OBST6.1	Assess patient-specific factors to determine the most appropriate contraceptive method.	S	Small group, Bedside	OSCE&
OBST6.2	Evaluate the benefits, risks, and contraindications of different contraceptive options in clinical practice.	S/A	teaching& Clinical skills lab	CIVA
History taking r	elated to fertility disorders and clinica	al assessme	nt & investiga	tions.
OBST7.1	Conduct a detailed clinical evaluation and analyze diagnostic findings to identify underlying causes of infertility.	S	Small group & Bedside teaching	OSCE& CIVA
OBST7.2	Develop an appropriate investigative plan for fertility assessment.	S/A		
Clinical present	ation of ectopic pregnancy and manag	gement of ac	cute abdomen	
OBST8.1	Identify the clinical signs and symptoms of ectopic pregnancy and assess risk factors for timely diagnosis.	S	Small group &	OSCE& CIVA
OBST8.2	Develop a management strategy for acute abdomen, prioritizing urgent interventions and surgical referrals when necessary.	S/A	Bedside teaching	
1st Week		Day 3		
Clinical present	ation of miscarriage and management	of woman	with bleeding	•
OBST9.1	Identify the clinical signs and symptoms of miscarriage and assess the severity of bleeding.	K/S/C	Can all	
OBST9.2	Formulate an appropriate management plan for a woman with bleeding, including both conservative and surgical options when necessary.	S/C/A	Small group & Bedside teaching	OSCE& CIVA
Clinical present	ation of molar pregnancy			
OBST10.1	Recognize the clinical presentation including characteristic symptoms like abnormal bleeding and	K/S/C	Small group & Bedside	OSCE& CIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	elevated hCG levels.		teaching	
OBST10.2	Develop an approach for the management of molar pregnancy, including appropriate diagnostic steps and treatment options.	K/S/C	Small group & Bedside teaching	OSCE& CIVA
Skills of dilatat	ion and curettage.			
OBST11.1	Perform and demonstrate the correct technique for dilation and curettage (D&C) under supervision, ensuring sterile procedures and patient safety.	W/S/C	Small group, Bedside	OSCE&
OBST11.2	Recognize the indications for D&C, including incomplete miscarriage, diagnostic purposes, and managing uterine abnormalities, and understand the potential complications involved.	K/S/C	teaching& Clinical skills lab	CIVA
Uterine fibroid	(clinical assessment and presentation)			
OBST12.1	Elicit a focused history from a patient presenting with abnormal uterine bleeding or pelvic pain Perform abdominal and bimanual pelvic examination to assess uterine size, contour, mobility, and tenderness.	K/S/C	Small group, Bedside teaching& Clinical skills lab	OSCE& CIVA
OBST12.2	Differentiate uterine fibroids from other pelvic masses through clinical assessment and imaging interpretation.			
1st Week		Day 4		
How to suspect	malignant adnexal mass and investiga	ations		
OBST13.1	Recognize clinical signs that may indicate a malignant adnexal mass, such as pain, bloating, and irregularities in the mass characteristics.	K/S	Small group, Bedside teaching& Clinical skills lab	OSCE& CIVA
OBST13.2	Select and interpret key diagnostic investigations, including ultrasound, CA-125, and further imaging for definitive assessment.	S/C		

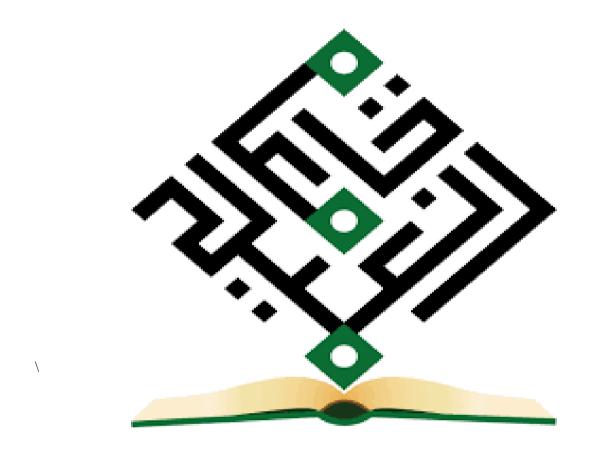
Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Clinical examin	ation of woman with vulval disease.			
OBST14.1	Perform a systematic clinical examination of women presenting with vulval disease, including inspection for lesions, redness, and swelling.	S/C	Small group, Bedside teaching& Clinical skills lab	OSCE&
OBST14.2	Identify and differentiate common vulval conditions and initiate appropriate investigations for diagnosis and management.	K/S/A		CIVA
Clinical examin	ation of woman with vaginal disease			
OBST15.1	Conduct a detailed clinical examination of women with vaginal disease, focusing on inspection, palpation, and vaginal speculum examination.	S/C	Small group, Bedside	OSCE&
OBST15.2	Identify common vaginal conditions and determine appropriate diagnostic steps for further evaluation.	K/S	teaching& Clinical skills lab	CIVA
Ultrasound, x-ra	ay, MRI & CT scan demonstration.			
OBST16.1	Demonstrate the ability to interpret ultrasound, X-ray, MRI, and CT scans in diagnosing gynecological conditions.	S	Small group, Bedside	OSCE& CIVA
OBST16.2	Understand the clinical indications and limitations of each imaging modality for effective patient management.	K/S	teaching& Clinical skills lab	
1st Week		Day 5		
Clinical diagnos	sis of endometriosis & laparoscopy ro	le		
OBST17.1 OBST17.2	Identify the clinical features of endometriosis, such as chronic pelvic pain and painful menstruation, and differentiate it from other pelvic disorders. Understand the indications for	K/S/C	Small group, Bedside teaching&	OSCE& CIVA
Differential dia	laparoscopy in the diagnosis and treatment of endometriosis, including staging, removal of lesions, and fertility preservation. gnosis of adnexal mass and workup		Clinical skills lab	
-				

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OBST18.1	Formulate a differential diagnosis for adnexal masses, considering common conditions like functional cysts, fibromas, and malignancies.	K/S	Small group,	OSCE& CIVA
OBST18.2	Develop an appropriate workup strategy, including imaging studies, laboratory tests, and clinical evaluation to determine the nature of the mass.	S	Bedside teaching& Clinical skills lab	OSCE& CIVA
•	r, colposcopy and biopsy.			
OBST19.1	Perform and interpret Pap smear and colposcopy to identify cervical abnormalities and demonstrate proficiency in guiding biopsy when needed.	S/C	Small group, Bedside teaching& Clinical skills lab	OSCE& CIVA
OBST19.2	Understand the indications, techniques, and interpretation of results for Pap smear, colposcopy, and cervical biopsy in the diagnosis and management of cervical pathology.	K/S	Small group, Bedside teaching& Clinical skills lab	OSCE& CIVA
Skill: hysterosc	opy and endometrial biopsy.			
OBST20.1	Demonstrate the technique of performing hysteroscopy to visually assess the uterine cavity for abnormalities and guide biopsy when necessary.	S/C	Small group, teaching Practical learning & Clinical skills lab	OSCE& CIVA
OBST20.2	Understand the indications, procedures, and interpretation of endometrial biopsy for diagnosing uterine conditions malignancy Or hyperplasia.	S/A	Small group, teaching Practical learning & Clinical skills lab	OSCE& CIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
2nd week		Day 1		
Vaginal Dischar	rge.			
OBST21.1	Diagnose and differentiate causes of vaginal discharge by categorizing it as physiological or pathological (infective and noninfective) and identifying key clinical and diagnostic criteria.	K/S	Small group, teaching Practical learning & Clinical skills lab	OSCE& CIVA
OBST21.2	Formulate an evidence-based management plan for vaginal discharge by conducting a thorough history and examination, interpreting diagnostic tests, selecting appropriate treatment, and determining the need for further investigations.	S/C/A	Small group, teaching Practical learning & Clinical skills lab	OSCE& CIVA
Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
2nd week		Day 2		
High Vaginal S	wab.			
OBST22.1	Perform and interpret HVS to diagnose common vaginal infections.	S/C	Small group, teaching Practical learning & Clinical skills lab	OSCE& CIVA
OBST22.2	Correlate microbiological findings with clinical symptoms to guide appropriate treatment.	S/C	Small group, teaching Practical learning & Clinical skills lab	OSCE& CIVA
3	Slideshow and images being presented and discussed in Small Group It features a variety of clinical images and medical instruments related specifically to gynecology. The presentation aims to familiarize students with real-life cases, including visual examples of common gynecological conditions, anatomical variations, and diagnostic findings. Additionally, it showcases essential tools used in gynecological exams and procedures, helping students build their clinical observation skills and prepare for practical assessments."			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
4	Examination			
5	Examination			

Psychiatry



Fifth grade

Academic program discretion

This academic program description provides a brief overview of the key features of the program and the expected learning outcomes for the student, demonstrating whether the student has made the most of the available opportunities. It is accompanied by a description of each course within the program.

1-Educational Establishment	University of al-ameed
2-Scientific Department	College of medicine
3-Name of the Professional Academic Program.	Modified traditional curriculum
4-Final Graduation Certificate	M.B.Ch.B
5- Educational system: Annual/courses/other	Annual
6-Approved accreditation program	Applied for Iraqi National Guideline on Standards for Established and Accrediting Medical School
7-Other external factors	Availability of relevant scientific research in the field of specialization Access to global electronic networks Access to traditional and digital libraries Teaching aids such as data show and PowerPoint presentations Availability of equipped classrooms Use of free online communication platforms (e.g., Free Conference Call)
8-Date the description was written	2024/9/15

9- objectives of academic program

- 1.To provide students with essential knowledge, clinical skills, and professional attitudes in the field of Psychiatry.
- 2. To prepare students to identify, diagnose, and manage common psychiatric disorders within ethical and professional frameworks.
- 3. To enhance students' ability to integrate psychiatric care into general medical practice and contribute to public mental health awareness.

Key Information Sources About the Program KAPLAN & SADOCKS SYNOPSIS Of PSYCHIATRY, 2021, 12th edition

Psychiatry \ Grade 5	
Code: PSYC 510	4 Credits

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
1. Introducti	on aetiology of psychiatry			
PSYC1.1	Define psychiatry and explain its scope and role in modern medical practice	K	Large group lecture, outpatient clinic, bedside teaching	MCQ, short answer question, Long case
PSYC 1.2	Describe the main etiological factors of mental illness (biological, psychological, and social)	K	Large group lecture, bedside teaching	MCQ, short answer question, Long case
PSYC1.3	Recognize the major psychiatric classification systems (DSM-5, ICD-10) and their clinical application	K	Large group Lecture, outpatient clinic	MCQ, short answer question
PSYC 1.4	Appreciate the ethical principles and historical development of psychiatric care Health promotion: promoting mental health literacy by educating the public on common causes of mental illness and reducing stigma through community workshops	A	Bedside teaching,,outpatient exposure	short answer question, Long case
Generalized	Anxiety Disorder (GAD)			
PSYC2.1	Define Generalized Anxiety Disorder (GAD) and its diagnostic criteria	K	Large group Lecture, outpatient clinic, bedside teaching	MCQ, short answer question
PSYC 2.2	Describe the clinical features and course of GAD	K/S	Bedside teaching,	Long case, short answer question
PSYC2.3	Develop a basic management plan for patients with GAD (pharmacologic and psychologic)	S/C	outpatient clinic	Long case, short answer question
PSYC 2.4	Distinguish GAD from other anxiety and mood disorders	K/S	bedside teaching	MCQ, short answer

Number	Learning Objective	Domain	Teaching Learning	Assessment	
	Health promotion: teaching stress management techniques and early coping strategies to reduce the risk of chronic	K/S/A/C	Methods	Methods question	
Anxiety Disc	orders – Panic and Phobic Disorders				
PSYC3.1	Define panic disorder and specific phobias, and recognize their diagnostic criteria	K	Large group Lecture, outpatient clinic, bedside teaching	MCQ, short answer question	
PSYC 3.2	Identify typical symptoms of panic attacks and common phobic triggers	K/S	bedside teaching	short answer question	
PSYC3.3	Outline acute and long-term management strategies for panic and phobic disorders	S/C	outpatient clinic	Long case, short answer question	
PSYC 3.4	Differentiate between panic disorder, GAD, and agoraphobia Health promotion: p romoting awareness campaigns to help individuals recognize panic symptoms and seek timely professional help	K/S	bedside teaching	MCQ, short answer question	
Mood Disord	ders – Major Depressive Disorder & Dy	sthymia			
PSYC4.1	Define major depressive disorder and dysthymia, including DSM-5 criteria	K	Large group Lecture, outpatient clinic	MCQ, short answer question	
PSYC 4.2	Recognize symptoms and signs of depression, including atypical and masked depression	K/S	Bedside teaching	Long case, short answer question	
PSYC4.3	Describe risk factors, prognosis, and complications of untreated depression	K	outpatient clinic	MCQ, short answer question	
PSYC 4.4	Formulate a treatment plan for major depression and dysthymia (medications + therapy) Health promotion: mplementing school and workplace programs that encourage early identification of depressive symptoms and seeking therapy.	S/C	Outpatient clinic	Long case, short answer question	
Mood Disord	Mood Disorders – Cyclothymic Disorder, Bipolar Disorder Type 1 & Type 2				
PSYC5.1	Define bipolar I, II, and cyclothymic disorder and understand their diagnostic criteria	K	Large group lecture, outpatient clinic	MCQ, short answer question	
PSYC 5.2	Differentiate bipolar disorders from unipolar depression and other mood	K/S	Bedside teaching	MCQ, Long case	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	disorders			
PSYC5.3	Identify manic and hypomanic symptoms, and phases of bipolar illness	K/S	Outpatient Clinic	Long case, short answer question
PSYC 5.4	Outline pharmacologic and non- pharmacologic treatment plans for mood stabilization Health promotion: Educating families and patients about mood monitoring and the importance of medication adherence to prevent relapses	S/C	Large group lecture, outpatient clinic	Long case, MCQ
Obsessive-C	ompulsive Disorder (OCD) and Related	Disorders		
PSYC6.1	Define OCD and related disorders (body dysmorphic, hoarding, trichotillomania, etc.)	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 6.2	Recognize obsessions and compulsions in clinical scenarios	K/S	Bedside teaching	short answer question, Long case
PSYC6.3	Discuss the etiology, course, and prognosis of OCD	K	Large group lecture	MCQ, short answer question
PSYC 6.4	Design treatment strategies including CBT and pharmacotherapy for OCD Health promotion: Promoting early intervention and cognitive-behavioral therapy education to manage compulsive behaviors effectively	S/C	Large group lecture, outpatient clinic	Long case, short answer question
Trauma and	Stress-Related Disorders (Acute Stress l	Disorder an	d PTSD)	
PSYC7.1	Define acute stress disorder and post-traumatic stress disorder (PTSD) and understand diagnostic criteria	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 7.2	Recognize clinical features, symptoms, and course of acute stress disorder and PTSD	K/S	Bedside teaching	Long case, short answer question
PSYC7.3	Explain risk factors and psychological impact of trauma	K	Large group lecture	MCQ, short answer question
PSYC 7.4	Outline evidence-based treatment approaches including psychotherapy and pharmacotherapy	S/C	outpatient clinic	Long case, short answer question
Somatic Syn	nptom & Related Disorders			

Number	Learning Objective	Domain	Teaching Learning	Assessment		
DOMGO 1	G V	K/S/A/C	Methods	Methods		
PSYC8.1	Define somatic symptom disorders	K	Large group	MCQ short		
	and understand diagnostic criteria		lecture, outpatient clinic	answer		
PSYC 8.2	Recognize clinical features and	K/S	Bedside teaching	question		
PS 1 C 8.2	differentiate from other psychiatric	N/S	bedside teaching	Long case, short		
	and medical disorders			answer		
	and medical disorders			question		
PSYC8.3	Discuss etiology, course, and impact	K	Lecture, group	MCQ, short		
15100.0	on patient's life		discussion	answer		
	F			question		
PSYC 8.4	Describe treatment approaches	S/C	outpatient clinic	Long case,		
	including psychotherapy and			short		
	medication			answer		
				question		
Cahizanhran	10					
Schizophren	ia .					
PSYC9.1	Define schizophrenia and understand	K	Large group	MCQ, short		
	its diagnostic criteria		lecture, outpatient	answer		
			clinic	question		
PSYC 9.2	Recognize positive, negative, and	K/S	Bedside teaching	Long case,		
	cognitive symptoms			short		
				answer		
7077000				question		
PSYC9.3	Explain pathophysiology,	K	Large group lecture	MCQ, short		
	epidemiology, and course of			answer		
PSYC 9.4	schizophrenia Discuss pharmacologic and	S/C	outnotiont olinia	question		
PS 1C 9.4	psychosocial treatment strategies	S/C	outpatient clinic	Long case, SAQ		
				brig		
Schizophren	ia Related Disorders					
PSYC10.1	Identify schizoaffective disorder,		Large group	MCQ, short		
	schizophreniform disorder, and brief	K	lecture, outpatient	answer		
	psychotic disorder		clinic	question		
PSYC 10.2				Long case,		
	Differentiate these disorders from	K/S	Bedside teaching	short		
	schizophrenia and mood disorders			answer		
DOMO10 0				question		
PSYC10.3	Understand clinical features and	17	T 1	MCQ, short		
	prognosis	K	Large group lecture	answer		
PSYC 10.4	-			question		
FS1C 10.4	Outling treatment approaches		Large group	Long case, short		
	Outline treatment approaches specific to these disorders	S/C	lecture, outpatient	answer		
	specific to these disorders		clinic	question		
Suicide and l	Suicide and Deliberate Self-Harm					
PSYC11.1	Understand epidemiology, risk		Large group	MCQ, short		
-	factors, and warning signs of suicide	K	lecture, outpatient	answer		
	and deliberate self-harm		clinic	question		
PSYC 11.2	Recognize clinical presentations and	V/C	Padeida taashina	Long case,		
	assessment tools	K/S	Bedside teaching	short		

Numban	Lagraina Objective	Domain	Teaching Learning	Assessment		
Number	Learning Objective	K/S/A/C	Methods	Methods		
				answer question		
PSYC11.3	Discuss prevention strategies and management plans	K/S/C	Large group lecture, outpatient clinic	Long case, short answer question		
PSYC 11.4	Understand medico-legal and ethical considerations	K	Large group lecture, outpatient clinic	MCQ, short answer question		
Personality I	Disorders					
PSYC12.1	Define personality disorders and diagnostic criteria	K	Large group lecture, outpatient clinic	MCQ, short answer question		
PSYC 12.2	Identify major types of personality disorders and clinical features	K/S	Bedside teaching	Long case, short answer question		
PSYC12.3	Discuss etiology and pathophysiology	K	Large group lecture	MCQ, short answer question		
PSYC 12.4	Explain treatment options including psychotherapy and pharmacotherapy	S/C	outpatient clinic	Long case, short answer question		
Women Psyc	chiatry		,			
PSYC13.1	Understand psychiatric disorders specific to women	K	Large group lecture, outpatient clinic	MCQ, short answer question		
PSYC 13.2	Discuss reproductive mental health, perinatal psychiatry, and menopause-related issues	K/S	Bedside teaching	Long case, short answer question		
PSYC13.3	Explain psychosocial and cultural factors influencing women's mental health	K	Large group lecture	MCQ, short answer question		
PSYC 13.4	Outline management strategies and multidisciplinary approaches	S/C	outpatient clinic	Long case, short answer question		
Children Psy	Children Psychiatry 2 (Intellectual Disorder)					
PSYC14.1	Define intellectual disability and diagnostic criteria	K	Large group lecture, outpatient clinic	MCQ, short answer question		

NT1	I comit of Object	Domain	Teaching Learning	Assessment
Number	Learning Objective	K/S/A/C	Methods	Methods
PSYC 14.2	Identify levels of severity and clinical presentation	K/S	Bedside teaching	Long case, short answer question
PSYC14.3	Understand etiological factors and developmental impact	K	Large group lecture	MCQ, short answer question
PSYC 14.4	Describe management and educational interventions Health promotion: Advocating for inclusive education and public support programs for children with cognitive delays	S/C	outpatient clinic	Long case, short answer question
Substance U	se Disorder			
PSYC15.1	Define substance use disorders and diagnostic criteria	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 15.2	Recognize clinical features and complications	K/S	Bedside teaching	Long case, short answer question
PSYC15.3	Explain pathophysiology and social impact	K	Large group lectur	MCQ, short answer question
PSYC 15.4	Discuss treatment approaches including detoxification, rehabilitation, and relapse prevention Health promotion: running youth-targeted campaigns on the risks of substance use and availability of rehabilitation programs	S/C	outpatient clinic	Long case, short answer question
Dissociative	Disorder			
PSYC16.1	Define dissociative disorders and diagnostic criteria	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 16.2	Recognize clinical presentations and differentiate from other psychiatric disorders	K/S	Bedside teaching,	Long case, short answer question
PSYC16.3	Understand etiological theories and psychological mechanisms	K	Large group lecture	MCQ, short answer question
PSYC 16.4	Outline treatment options including psychotherapy	S/C	outpatient clinic	Long case, short answer question

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
Eating Disorder						
PSYC17.1	Define anorexia nervosa, bulimia nervosa, and other eating disorders	K	Large group lecture, outpatient clinic	MCQ, short answer question		
PSYC 17.2	Recognize clinical features and complications	K/S	Bedside teaching	Long case, short answer question		
PSYC17.3	Discuss etiology and psychosocial factors	K	Large group lectur	MCQ, short answer question		
PSYC 17.4	Explain treatment strategies including nutritional rehabilitation and psychotherapy	S/C	outpatient clinic	Long case, short answer question		
Organic Psyc	chiatry (Delirium, Dementia)					
PSYC 18.1	Define delirium and dementia and their diagnostic criteria	K	Large group lecture, outpatient clinic	MCQ, short answer question		
PSYC 18.2	Recognize clinical features and differentiate from psychiatric disorders	K/S	Bedside teaching	Long case, short answer question		
PSYC 18.3	Explain pathophysiology and common causes	K	Large group lectur	MCQ, short answer question		
PSYC 18.4	Discuss management approaches including pharmacologic and supportive care	S/C	outpatient clinic	Long case, short answer question		
Sleep Disord	lers					
PSYC 19.1	Define common sleep disorders and diagnostic criteria	K	Large group lecture, outpatient clinic	MCQ, short answer question		
PSYC 19.2	Recognize clinical features and impact on health	K/S	Bedside teaching	Long case, short answer question		
PSYC 19.3	Understand pathophysiology and contributing factors	K	Large group lectur	MCQ, short answer question		
PSYC 19.4	Describe treatment options including behavioral therapy and medications	S/C	Large group lectur	Long case, short answer question		
Treatment in	Psychiatry					

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
PSYC 20.1	Understand principles of psychiatric treatment	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 20.2	Discuss pharmacologic and non- pharmacologic therapies	K/S	Bedside teaching	Long case, short answer question
PSYC 20.3	Explain patient monitoring and side effect management	K/S	Bedside teaching	MCQ, short answer question
PSYC 20.4	Describe multidisciplinary team roles in psychiatric care	S/C	Bedside teaching	Long case, short answer question
Psychiatric E	Emergencies			
PSYC 21.1	Identify common psychiatric emergencies and presentation	K	Large group lecture, outpatient clinic	MCQ, short answer question
PSYC 21.2	Learn immediate management and stabilization techniques	K/S	Bedside teaching	Long case, short answer question
PSYC 21.3	Understand legal and ethical issues in emergencies	K	Large group lecture	MCQ, short answer question
PSYC 21.4	Develop skills in crisis intervention and patient communication	S/C	Large group lecture	Long case, short answer question
Legal Issues	in Psychiatry			
PSYC 22.1	Understand mental health laws and patient rights	K	Large group lecture	MCQ, short answer question
PSYC 22.2	Learn legal responsibilities of psychiatrists	K	Large group lecture	MCQ, short answer question
PSYC 22.3	Discuss confidentiality, consent, and involuntary admission	K/S	Large group lecture	Long case, short answer question
PSYC 22.4	Apply legal knowledge in clinical psychiatric practice	S/C	outpatient clinic	Long case, short answer question
Disruptive, I	mpulse Control and Conduct Disorders			

Number	Learning Objective	Domain	Teaching Learning	Assessment
	8 - J	K/S/A/C	Methods	Methods
PSYC 23.1	Define disruptive, impulse control		Large group	MCQ, short
	and conduct disorders	K	lecture, outpatient	answer
			clinic	question
PSYC 23.2				Long case,
	Recognize clinical features and	K/S	Bedside teaching	short
	differential diagnoses	IX/S	Deusiue teaching	answer
				question
PSYC 23.3	Understand atiological feature and			MCQ, short
	Understand etiological factors and	K	Large group lecture	answer
	course			question
PSYC 23.4				Long case,
	Discuss management and treatment	G / G	Large group lecture	short
	options	S/C	outpatient clinic	answer
			1	question
				1
Sexual Disor	rders			
PSYC 24.1	Define common sexual disorders and	K	Large group	MCQ, short
	diagnostic criteria		lecture, outpatient	answer
			clinic	question
PSYC 24.2	Recognize clinical features and	K/S	Bedside teaching	Long case,
121022	differentiate types of sexual			SAQ
	dysfunction			5114
PSYC 24.3	Discuss psychological, biological,	K	Large group lecture	MCQ, short
151021.3	and social etiologies	11	Large group rectare	answer
	and social ethologies			question
PSYC 24.4	Explain management approaches	S/C	Outpatient clinic	MCQ, short
1510 24.4	including counseling,	5/C	Outpatientennie	answer
	pharmacotherapy, and behavioral			
	therapy			question
	1,0			
Social Treati	ment and Prevention			
PSYC 25.1	Understand the role of social factors		Large group	MCQ, short
		K	lecture, outpatient	answer
	in mental health		clinic	question
PSYC 25.2	Discuss community-based mental			MCQ, short
	health programs and preventive	K	Large group lecture	answer
	strategies			question
PSYC 25.3	9			MCQ, short
	Explain stigma, mental health	K	Large group lecture	answer
	advocacy, and public education			question
PSYC 25.4				Long case,
151025.7	Describe multidisciplinary		Large group	short
	approaches to social treatment and	S/C	lecture, outpatient	answer
	prevention		clinic	question
				question
Children Psy	chiatry 1 (Autism, ADHD)			
PSYC 26.1	Define autism spectrum disorder and		Large group	MCQ, short
	ADHD	K	lecture, outpatient	answer
			clinic	question
PSYC 26.2	Recognize clinical features and	K/S	Bedside teaching,	Long case,
	diagnostic criteria	V/S	Large group lecture	short
1		1		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				answer question
PSYC 26.3	Discuss etiology and developmental impact	K	Large group lecture	MCQ, short answer question
PSYC 26.4	Explain treatment and behavioral interventions	S/C	Large group lecture, outpatient clinic	Long case, SAQ

Practical

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
Psychiatric I	Psychiatric History Taking					
PSYC1.1	Learn how to collect sociodemographic data. Take history of present illness (chief complaint, symptoms). Cover anxiety symptoms, mood symptoms, psychotic symptoms, PTSD, OCD. Observe patients and practice history taking under supervision.	K/S	outpatient clinic, bedside teaching	Long case		
Mental Statu	s Examination (MSE					
PSYC2.1	Learn components of MSE: Appearance, Behavior, Speech, Mood, Thought process, Perception, Cognition, Insight, and Judgment. Observe real patients and practice applying MSE.	K/S	outpatient clinic, bedside teaching	Long case		
Anxiety Disc	orders					
PSYC3.1	Discuss Generalized Anxiety Disorder, Panic Disorder, Phobias, OCD. Observe clinical cases with anxiety symptoms. Learn about management and treatment options.	K/S	outpatient clinic, bedside teaching	Long case		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
Mood Disord	lers					
PSYC3.1	Discuss Depression, Bipolar Disorder. Observe clinical features of mood disorders. Practice differentiating between depressive and manic episodes.	K/S	outpatient clinic, bedside teaching	Long case		
Psychotic Di	sorders					
PSYC5.1	Discuss Schizophrenia, Schizoaffective Disorder, Delusional Disorder. Observe cases in the clinic. Learn about antipsychotic medications and side effects	K/S	outpatient clinic, bedside teaching	Long case		
Substance U	se Disorders					
PSYC6.1	Discuss Alcohol Use Disorder, Drug Addiction. Observe and practice history taking regarding substance use. Learn about withdrawal symptoms and management.	K/S	outpatient clinic, bedside teaching	Long case		
Personality I						
PSYC7.1	Discuss Cluster A, B, and C Personality Disorders. Identify clinical characteristics of each type. Case discussions and observation.	K/S	outpatient clinic, bedside teaching	Long case		
Childhood P	sychiatric Disorders					
PSYC8.1	Discuss ADHD, Autism Spectrum Disorder, Conduct Disorder. Observe pediatric psychiatric cases. 3. Learn about behavioral therapy approaches	K/S	outpatient clinic, bedside teaching	Long case		
Risk Assessr	Risk Assessment + Suicide Prevention					
PSYC9.1	Learn risk assessment skills for suicide and violence. Practice assessing suicidal ideation and risk factors. Observe patient interviews related to risk assessment.	K/S	outpatient clinic, bedside teaching	Long case		
Final Clinica	al Exam (Long Case)					

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
PSYC10.1	Perform a full psychiatric assessment on a patient. Present history taking, mental status examination, diagnosis, and management plan.	K/S	outpatient clinic, bedside teaching	Long case

DERMATOLOGY



Fifth grade

Academic program discretion

This academic program description provides a brief overview of the key features of the program and the expected learning outcomes for the student, demonstrating whether the student has made the most of the available opportunities. It is accompanied by a description of each course within the program.

or the available opportunities. It is accompanied	by a description of each course within the program.
1-Educational Establishment	University of al-ameed
2-Scientific Department	College of medicine
3-Name of the Professional Academic Program.	Modified traditional curriculum
4-Final Graduation Certificate	M.B.Ch.B
5- Educational system: Annual/courses/other	Annual
6-Approved accreditation program	Applied for Iraqi National Guideline on Standards for Established and Accrediting Medical School
7-Other external factors	Availability of relevant scientific research in the field of specialization Access to global electronic networks Access to traditional and digital libraries Teaching aids such as data show and PowerPoint presentations Availability of equipped classrooms Use of free online communication platforms (e.g., Free Conference Call)
8-Date the description was written	2024/9/15

⁹⁻ objectives of academic program

- 1.To provide students with essential knowledge, skills, and professional attitudes required for the diagnosis, management, and prevention of skin diseases.
- 2. To prepare students to identify dermatological conditions and their systemic associations within a holistic and ethical medical practice.
- 3. To enable students to integrate dermatological knowledge into clinical decision-making and patient care in Iraq's healthcare context and beyond.

10- The most reliable resources for program information are:	Clinical dermatology by
John Hunter, third addition	
Davidson essential	
Bolonia text book of dermatology	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Histology &	Skin Lesions			
DERM1.1	Describe the normal histological layers of the skin	K	Large group lecture	MCQ, Short answer question
DERM1.2	Explain the physiological functions of the skin (barrier, thermoregulation, sensation)	K	Large group lecture	MCQ
DERM1.3	Identify different types of skin lesions clinically and histologically	S	Large group lecture, Outpatient clinic	CIVA, Short answer question
DERM1.4	Differentiate between primary and secondary skin lesions Health Promotion: Promote understanding of skin structure and function to empower individuals in recognizing abnormal lesions early and seeking timely medical care	K	Large group lecture	MCQ, Short answer question
Bacterial Ski	n Infections			
DERM2.1	List common bacterial pathogens causing skin infections	K	Lecture	MCQ
DERM2.2	Describe clinical features of impetigo, cellulitis, and erysipelas	K	Lecture, Outpatient clinic	MCQ, CIVA
DERM2.3	Outline basic management strategies for bacterial skin infections	K	Lecture	Short answer question
DERM2.4	Identify bacterial infections on clinical exam or images Health Promotion: Improve public hygiene practices and awareness of bacterial skin infection signs to reduce infection rates and prevent antibiotic misuse.	S	Outpatient clinic	CIVA
Mycobacteria	al Skin Diseases			
DERM3.1	Recognize cutaneous manifestations of tuberculosis and leprosy	K	Lecture	MCQ
DERM3.2	Differentiate between tuberculoid and lepromatous leprosy	K	Lecture	MCQ
DERM3.3	Describe diagnostic methods used for skin TB and leprosy Health Promotion: Raise awareness of rare mycobacterial infections through	K	Lecture	Short answer question

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	targeted education, especially in endemic or immunocompromised populations, to encourage early diagnosis and reduce spread.			
Viral Skin In	fections			
DERM4.1	Identify clinical features of common viral skin infections (HSV, VZV, HPV, molluscum)	K	Lecture, Outpatient clinic	MCQ, CIVA
DERM4.2	Discuss diagnostic and treatment options	K	Lecture	Short answer question
DERM4.3	Interpret viral skin lesion images	S	Outpatient clinic	CIVA
DERM4.4	Identify clinical features of common viral skin infections (HSV, VZV, HPV, molluscum) Health Promotion: Promote vaccination, hygiene, and informed recognition of viral skin conditions to reduce transmission and improve community health outcomes.	K	Lecture, Outpatient clinic	MCQ, CIVA
Viral Skin In	fections			
DERM5.1	Identify clinical features of common viral skin infections (HSV, VZV, HPV, molluscum)	K	Lecture, Outpatient	MCQ, CIVA
DERM5.2	Discuss diagnostic and treatment options	K	Lecture	Short answer question
DERM5.3	Interpret viral skin lesion images	S	Outpatient clinic	CIVA
Parasitic Ski	n Infections			<u> </u>
DERM6.1	List common parasitic skin infections (scabies, cutaneous leishmaniasis)	K	Lecture	MCQ
DERM6.2	Recognize typical clinical findings	S	Outpatient clinic	CIVA
DERM6.3	Describe basic management strategies Health Promotion: Encourage early recognition and treatment of parasitic skin diseases to prevent community outbreaks and reduce stigma associated with infestations.	K	Lecture	Short answer question
Dermatitis				
DERM7.1	Define and classify types of dermatitis (atopic, contact, seborrheic)	K	Large group lecture	MCQ

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
DERM7.2	Recognize clinical signs and distribution of dermatitis	S	Outpatient clinic	CIVA
DERM7.3	Explain treatment principles and prevention strategies	K	Large group lecture	Short answer question
DERM7.4	Differentiate between types of dermatitis based on clinical exam Health Promotion: Support awareness of dermatitis triggers and skin barrier care through lifestyle guidance and allergen	S	Outpatient clinic	CIVA
	avoidance education.			
Papulosquam	ous Skin Disorders			
DERM8.1	List papulosquamous diseases (psoriasis, lichen planus, pityriasis)	K	Large group lecture	MCQ
DERM8.2	Differentiate clinically between these disorders	S	Outpatient clinic	CIVA
DERM8.3	Explain treatment options and patient follow-up	K	Large group lecture	Short answer question
DERM8.4	Identify diagnostic clinical signs Health Promotion: Improve patient understanding of chronic conditions like psoriasis through education to reduce stigma and promote long-term management.	S	Outpatient clinic	CIVA
Pilosebaceous				
DERM9.1	Explain the physiology of pilosebaceous disorders such as acne	K	Large group lecture	MCQ
DERM9.2	Recognize types and severity of acne	S	Outpatient clinic	CIVA
DERM9.3	Describe treatment plans for acne	K	Large group lecture	Short answer question
DERM9.4	Differentiate acne from other similar conditions Health Promotion: Promote accurate knowledge and skin-care practices to reduce acne complications and combat misinformation, especially among adolescents.	S	Outpatient clinic	ČIVA

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Bullous Disea	ases			
DERM10.1	List autoimmune bullous diseases (pemphigus, bullous pemphigoid)	K	Large group lecture	MCQ
DERM10.2	Recognize clinical signs like Nikolsky's sign	S	Outpatient clinic	CIVA
DERM10.3	Explain diagnostic tools (biopsy, immunofluorescence)	K	Large group lecture	Short answer question
DERM10.4	Interpret diagnostic test results Health Promotion: Educate on the severity of autoimmune blistering diseases to promote early healthcare- seeking behavior and prevent life- threatening complications.	K	Large group lecture	Short answer question
Urticaria and	Drug Eruptions			
DERM11.1	Explain immunological basis of urticaria and drug reactions	K	Large group lecture	MCQ
DERM11.2	Recognize clinical patterns of urticaria and fixed drug eruptions	S	Outpatient clinic	CIVA
DERM11.3	Describe acute and chronic treatment approaches	K	Large group lecture	Short answer question
DERM11.4	Differentiate drug eruptions from other skin rashes Health Promotion: Increase awareness about triggers of urticaria and the importance of documenting drug allergies to prevent recurrence and improve safety.	S	Outpatient clinic	CIVA
Sexually Tran	nsmitted Diseases (STDs			
DERM12.1	List common sexually transmitted infections affecting the skin	K	Large group lecture	MCQ
DERM12.2	Describe clinical manifestations of common STDs (syphilis, herpes, HPV)	S	Outpatient clinic	CIVA
DERM12.3	Explain diagnostic approaches and laboratory tests for STDs	K	Large group lecture	Short answer question
DERM12.4	Outline treatment protocols and prevention strategies Health Promotion: Promote safe sex practices and STI screening to reduce transmission of sexually-associated skin conditions and lower community risk.	K	Large group lecture	Short answer question

DERM13.1 I DERM13.2 I DERM13.3 I DERM13.4 I	Recognize skin diseases caused by physical agents (heat, cold, radiation) Describe mechanisms of pruritis and related skin responses	K	Large group lecture Outpatient	MCQ
DERM13.1 I DERM13.2 I DERM13.3 I DERM13.4 I	Define pruritis and identify its causes Recognize skin diseases caused by physical agents (heat, cold, radiation) Describe mechanisms of pruritis and		lecture	MCQ
DERM13.2 I DERM13.3 I DERM13.4 I	Recognize skin diseases caused by physical agents (heat, cold, radiation) Describe mechanisms of pruritis and		lecture	MCQ
DERM13.3 I DERM13.4 I	physical agents (heat, cold, radiation) Describe mechanisms of pruritis and	S	Outpatient	
DERM13.4 I			clinic	CIVA
		K	Large group lecture	Short answer question
1	Explain management of pruritis and physical agent-related skin diseases Health Promotion: Enhance public understanding of chronic itch causes and environmental factors to reduce unnecessary suffering and promote medical consultation.	K	Large group lecture	Short answer question
Dermatological	l Emergencies			
(List common dermatological emergencies (Stevens-Johnson syndrome, toxic epidermal necrolysis)	K	Large group lecture	MCQ
DERM14.2 1	Identify clinical signs and symptoms requiring urgent care	S	Outpatient clinic	CIVA
	Explain immediate management principles	K	Large group lecture	Short answer question
1 8 1	Discuss complications and prognosis Health Promotion: Raise awareness about signs of skin emergencies to encourage urgent medical care and prevent severe health outcomes.	K	Large group lecture	Short answer question
Hair Disorders				
	Describe common hair disorders (alopecia, hirsutism)	K	Large group lecture	MCQ
	Recognize clinical patterns of hair loss and growth abnormalities	S	Outpatient clinic	CIVA
DERM15.3	Explain diagnostic evaluation and tests for hair disorders	K	Large group lecture	Short answer question
	Outline treatment options for hair disorders	K	Large group lecture	Short answer question

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
DERM16.1	List common nail disorders and their causes	K	Large group lecture	MCQ
DERM16.2	Identify clinical features of nail diseases (onychomycosis, psoriasis)	S	Outpatient clinic	CIVA
DERM16.3	Describe diagnostic methods for nail disorders	K	Large group lecture	Short answer question
DERM16.4	Explain treatment strategies for nail diseases	K	Large group lecture	Short answer question
17. Vasculitis				
DERM17.1	Define vasculitis and classify types affecting the skin	K	Large group lecture	MCQ
DERM17.2	Recognize clinical presentations of cutaneous vasculitis	S	Outpatient clinic	CIVA
DERM17.3	Explain diagnostic investigations (biopsy, lab tests)	K	Large group lecture	Short answer question
DERM17.4	Describe treatment options and prognosis	K	Large group lecture	Short answer question
Skin and Systemic Diseases				
DERM18.1	List systemic diseases with skin manifestations (lupus, diabetes)	K	Large group lecture	MCQ
DERM18.2	Identify skin signs that suggest systemic disease	S	Outpatient clinic	CIVA
DERM18.3	Explain pathophysiology linking skin and systemic disorders	K	Large group lecture	Short answer question
DERM18.4	Outline management strategies for skin symptoms in systemic diseases	K	Large group lecture	Short answer question
Tumors of the Skin				
DERM19.1	Differentiate benign and malignant skin tumors	K	Large group lecture	MCQ
DERM19.2	Recognize clinical features of common skin tumors (BCC, SCC, melanoma)	S	Outpatient clinic	CIVA
DERM19.3	Describe diagnostic workup including biopsy and imaging	K	Large group lecture	Short answer question
DERM19.4	Explain treatment modalities and prognosis	K	Large group lecture	Short answer question

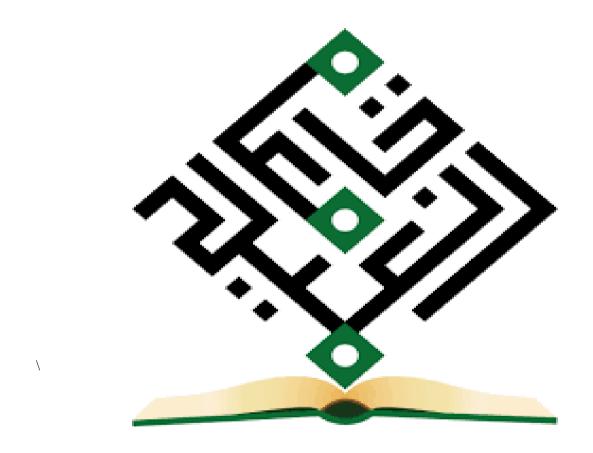
Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Pigmentary Disorders				
DERM20.1	List common pigmentary disorders (vitiligo, melasma, albinism)	K	Large group lecture	MCQ
DERM20.2	Recognize clinical features and differential diagnosis	S	Outpatient clinic	CIVA
DERM20.3	Explain pathogenesis and contributing factors	K	Large group lecture	Short answer question
DERM20.4	Describe treatment options and patient counseling	K	Large group lecture	Short answer question
Connective Tissue Diseases				
DERM21.1	Define major connective tissue diseases affecting skin (SLE, scleroderma)	K	Large group lecture	MCQ
DERM21.2	Identify skin manifestations of connective tissue diseases	S	Outpatient clinic	CIVA
DERM21.3	Explain diagnostic criteria and investigations	K	Large group lecture	Short answer question
DERM21.4	Outline management principles and complications	K	Large group lecture	Short answer question

Practical

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
Types of Skin	Lesions				
DERM1.1	Observe various patient presentations with skin lesions. Practice describing primary and secondary lesions using correct terminology. Discuss the morphology and classification of skin lesions.	K/S	Outpatient clinic	Short answer question, CIVA	
Bacterial Infe	ctions				
DERM2.1	Identify clinical signs of common bacterial infections (e.g. impetigo, folliculitis). Understand diagnostic approaches and differential diagnosis. Discuss appropriate antibiotic treatments and resistance issues.	K/S	Outpatient clinic	Short answer question, CIVA	
Viral Infections					
DERM3.1	Recognize viral skin infections such as herpes simplex, herpes zoster, HPV, and molluscum contagiosum. Discuss lesion progression and contagious stages. Review antiviral treatment options and preventive strategies	K/S	Outpatient clinic	Short answer question, CIVA	
Fungal Infect	ions				
DERM4.1	1-Examine patients with suspected fungal infections (tinea corporis, capitis, etc.). 2-Observe Wood's lamp and KOH preparation (if available). 3-Learn the clinical features that distinguish fungal from other skin conditions	K/S	Outpatient clinic	Short answer question, CIVA	
Fungal Infect	Fungal Infections				
DERM5.1	1-Discuss complex fungal cases and less common presentations. 2-Focus on diagnosis and treatment of recurrent or resistant fungal infections. 3-Review systemic antifungal therapy indications	K/S	Outpatient clinic	Short answer question, CIVA	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Papulosquam	ous Diseases			
DERM6.1	Examine classic presentations of psoriasis, lichen planus, and pityriasis rosea. Discuss chronic disease patterns and management strategies. 3. Emphasize the importance of clinical patterns and histopathology	K/S	Outpatient clinic	Short answer question, CIVA
Dermatitis				
DERM7.1	Learn to differentiate between atopic, contact, and seborrheic dermatitis. Discuss triggers and pathophysiology of eczema. Observe patients with acute vs. chronic dermatitis and treatment approaches	K/S	Outpatient clinic	Short answer question, CIVA
Pilosebaceous Disorders				
DERM8.1	Identify common pilosebaceous disorders: acne vulgaris, rosacea, folliculitis. Review treatment modalities including topical and systemic options. 3. Understand acne grading and complication prevention.	K/S	Outpatient clinic	Short answer question, CIVA
Drug Reactions				
DERM9.1	Observe cutaneous drug eruptions (e.g., urticaria, SJS/TEN). Learn how to take detailed drug histories and recognize patterns. Discuss emergency management of severe reactions	K/S	Outpatient clinic	Short answer question, CIVA
CTD and Vas	culitis			
DERM10.1	Identify skin findings in connective tissue diseases (SLE, dermatomyositis). Recognize clinical patterns of vasculitis. Discuss systemic involvement and importance of early referral.	K/S	Outpatient clinic	Short answer question, CIVA

OPHTHALMOLOGY



Fifth grade

Academic program discretion

This academic program description provides a brief overview of the key features of the program and the expected learning outcomes for the student, demonstrating whether the student has made the most of the available opportunities. It is accompanied by a description of each course within the program.

or the unumere opportunities, it is used in pur	I
Educational Establishment	University of al-ameed
2-Scientific Department	College of medicine
3-Name of the Professional Academic Program.	Modified traditional curriculum
4-Final Graduation Certificate	M.B.Ch.B
5- Educational system: Annual/courses/other	Annual
6-Approved accreditation program	Applied for Iraqi National Guideline on Standards for Established and Accrediting Medical School
7-Other external factors	Availability of relevant scientific research in the field of specialization Access to global electronic networks Access to traditional and digital libraries Teaching aids such as data show and PowerPoint presentations Availability of equipped classrooms Use of free online communication platforms (e.g., Free Conference Call)
8-Date the description was written 9- objectives of academic program	2024/9/15

Graduate doctors with a strong foundation in ophthalmology, enabling them to understand, diagnose, and manage eye diseases in emergency departments, ophthalmology wards, and outpatient clinics. Strengthen students' clinical skills through theoretical and practical discussions, direct patient examinations in hospitals, and hands-on training in skills laboratories. Additionally, conduct ophthalmology workshops at the college to discuss clinical cases and explore their management.

Provide training and skills to practice ophthalmology safely, focusing on diagnosing and treating common and urgent ophthalmic conditions, managing ocular trauma, and handling ophthalmic emergencies.

Integrate modern educational techniques and advanced technology into teaching methods and ophthalmology training programs. Utilize digital imaging, artificial intelligence, and telemedicine to enhance learning, improve diagnostic accuracy, and facilitate knowledge sharing. Promote cultural exchange and establish bilateral partnerships with medical schools and professional ophthalmology organizations at the regional and international levels to expand

professional ophthalmology organizations at the regional and international levels to expand academic and scientific collaboration in the field of ophthalmology.

Strengthen collaboration between the college and the community by organizing seminars, conferences, and awareness campaigns on national ophthalmic health issues, including preventable

blindness, diabetic retinopathy, and pediatric eye care.

Support the preparation of future leaders in ophthalmology, empowering them to achieve excellence in their medical specialties through research, innovation, and leadership development in the field of ophthalmology.

OPHTHALMOLOGY \ Grade 5

Code: OPTH 507 3 Credits

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Anatomy a part 1	nd physiology of the eye			
OPTH1.1	Understand the gross anatomy of the eyeball and its layers: Learn about the sclera, uvea, and retina, and their specific functions, which are vital for vision and ocular health. Clinical Benefit: Knowledge of the eyeball's structure is essential in diagnosing conditions such as glaucoma, diabetic retinopathy, and retinal detachments, allowing for better management and prevention of vision loss.	K	Large group lecture	MCQ & short answer Questions
OPTH 1.2	Understand the physiological mechanisms of aqueous humor production and its regulation: The production, circulation, and drainage of aqueous humor are crucial for maintaining intraocular pressure, affecting conditions like glaucoma. Clinical Benefit: Understanding aqueous humor dynamics helps in the diagnosis and treatment of glaucoma, preventing further optic nerve damage and vision impairment due to high intraocular pressure	K	Large group lecture	MCQ & short answer Questions
Anatomy a part 2	nd physiology of the eye			
OPTH 2.1	Understand the detailed anatomy of the cornea and its clinical relevance: Recognizing the five layers of the cornea and their role in maintaining transparency is	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	crucial for diagnosing and managing corneal diseases like keratoconus and corneal dystrophies. Clinical Benefit: A solid understanding of corneal anatomy helps in the diagnosis and treatment of conditions that affect vision, such as corneal abrasions and keratoconus, ensuring better management and preventing vision loss.			
OPTH 2.2	Recognize the neural pathway of vision and its integration with neurological lesions: Understanding how visual information is transmitted from the retina to the brain helps in diagnosing neurological conditions that affect vision, such as optic neuritis and glaucoma. Clinical Benefit: This knowledge is vital for identifying visual field defects and neurological disorders, allowing early detection and appropriate management of conditions like glaucoma, optic neuropathies, and brain lesions that impact vision.	K	Large group lecture	MCQ & short answer Questions
Diseases o	f eyelids part 1			
OPTH 3.1	Understand the anatomy and pathology of the eyelids: Knowledge of the eyelid structure, including the tarsal plates, meibomian glands, and orbicularis oculi muscle, aids in diagnosing and managing common eyelid conditions such as blepharitis and eyelid malpositions. Clinical Benefit: This understanding helps in treating eyelid disorders, improving patient outcomes in conditions like blepharitis, hordeolum, and ptosis, and preventing complications like	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
	corneal damage.				
OPTH 3.2	Identify and manage eyelid infections and inflammations: Recognizing the causes, diagnosis, and treatment options for conditions such as herpes simplex, herpes zoster, and xanthelasma ensures effective management and prevention of complications. Clinical Benefit: Early diagnosis and treatment of eyelid infections and inflammatory conditions reduce the risk of serious complications, such as vision loss, chronic inflammation, or systemic effects, and improve cosmetic outcomes.	K	Large group lecture	MCQ & short answer Questions	
Diseases of	Diseases of eyelids part 2				
OPTH 4.1	Understand the clinical features and management of benign and malignant eyelid tumors learn to differentiate between benign tumors like papillomas and seborrheic keratosis and malignant ones like basal cell carcinoma and sebaceous gland carcinoma, along with appropriate management strategies. Clinical Benefit: Early detection and correct management of eyelid tumors can prevent malignancy spread, preserve ocular function, and improve cosmetic outcomes through surgical excision and reconstructive procedures.	K	Large group lecture	MCQ & short answer Questions	
OPTH 4.2	Recognize and manage eyelid conditions related to functional and traumatic issues Understand the clinical presentation and treatment of conditions such as floppy eyelid syndrome, blepharospasm,	K	Large group lecture	MCQ & short answer Questions	

hemifacial spasm, and traumatic eyelid injuries, and the surgical management of congenital ptosis. Clinical Benefit: Proper diagnosis and treatment of functional and traumatic eyelid disorders improve patient comfort, restore eyelid function, and prevent long-term visual or cosmetic complications, such as corneal exposure or eyelid malposition. Disorders of lacrimal system OPTH Understand the anatomy and 5.1 physiology of the lacrimal system Learn how tear production, drainage, and the role of the nasolacrimal duct contribute to maintaining ocular surface health and comfort. Clinical Benefit: A solid understanding of lacrimal system function aids in diagnosing and treating conditions OPTH Recognize and manage lacrimal system function aids in diagnosing and treating conditions OPTH Recognize and manage lacrimal system function, and management of conditions like dacryocystitis, congenital nasolacrimal duct obstruction, and epiphora, and the surgical techniques used for treatment. Clinical Benefit: Timely intervention in conditions affecting the lacrimal system, including surgery for dacryocystorhinostomy (DCR) and lacrimal probing,	Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OPTH 5.1 Understand the anatomy and physiology of the lacrimal system Learn how tear production, drainage, and the role of the nasolacrimal duct contribute to maintaining ocular surface health and comfort. Clinical Benefit: A solid understanding of lacrimal system function aids in diagnosing and treating conditions OPTH 5.2 Recognize and manage lacrimal system disorders Understand the etiology, clinical presentation, and management of conditions like dacryocystitis, congenital nasolacrimal duct obstruction, and epiphora, and the surgical techniques used for treatment. Clinical Benefit: Timely intervention in conditions affecting the lacrimal system, including surgery for dacryocystorhinostomy (DCR) and lacrimal probing,		eyelid injuries, and the surgical management of congenital ptosis. Clinical Benefit: Proper diagnosis and treatment of functional and traumatic eyelid disorders improve patient comfort, restore eyelid function, and prevent long-term visual or cosmetic complications, such as corneal exposure or eyelid			
5.1 physiology of the lacrimal system Learn how tear production, drainage, and the role of the nasolacrimal duct contribute to maintaining ocular surface health and comfort. Clinical Benefit: A solid understanding of lacrimal system function aids in diagnosing and treating conditions OPTH Recognize and manage lacrimal system disorders Understand the etiology, clinical presentation, and management of conditions like dacryocystitis, congenital nasolacrimal duct obstruction, and epiphora, and the surgical techniques used for treatment. Clinical Benefit: Timely intervention in conditions affecting the lacrimal system, including surgery for dacryocystorhinostomy (DCR) and lacrimal probing,	Disorders of	of lacrimal system			
system disorders Understand the etiology, clinical presentation, and management of conditions like dacryocystitis, congenital nasolacrimal duct obstruction, and epiphora, and the surgical techniques used for treatment. Clinical Benefit: Timely intervention in conditions affecting the lacrimal system, including surgery for dacryocystorhinostomy (DCR) and lacrimal probing,		physiology of the lacrimal system Learn how tear production, drainage, and the role of the nasolacrimal duct contribute to maintaining ocular surface health and comfort. Clinical Benefit: A solid understanding of lacrimal system function aids in diagnosing	K		short answer
alleviates symptoms like chronic tearing and infection, enhancing patient comfort and preventing complications Diseases of conjunctiva part 1	5.2	system disorders Understand the etiology, clinical presentation, and management of conditions like dacryocystitis, congenital nasolacrimal duct obstruction, and epiphora, and the surgical techniques used for treatment. Clinical Benefit: Timely intervention in conditions affecting the lacrimal system, including surgery for dacryocystorhinostomy (DCR) and lacrimal probing, improves tear drainage and alleviates symptoms like chronic tearing and infection, enhancing patient comfort and preventing complications	K	0 0 1	short answer

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OPTH 6.1	Understand the normal anatomy and function of the conjunctiva Learn about the conjunctiva's role in ocular surface immunity and its importance in maintaining eye health and preventing infections. Clinical Benefit: Knowledge of conjunctival anatomy and function helps in diagnosing and treating conjunctival conditions such as infections and inflammation, leading to better management of diseases like conjunctivitis and pterygium.	K	Large group lecture	MCQ & short answer Questions
OPTH 6.2	Differentiate and manage types of conjunctivitis and other conjunctival disorders Recognize the clinical features of bacterial, viral, and allergic conjunctivitis and understand the management strategies, including the use of antibiotics, antihistamines, and surgical interventions for pterygium and subconjunctival hemorrhage.	K	Large group lecture	MCQ & short answer Questions
Diseases o	of conjunctiva part 2			
OPTH 7.1	Understand the presentation and management of conjunctival disorders Recognize the clinical features of conditions such as superior limbic keratoconjunctivitis, conjunctival xerosis, and conjunctival tumors, along with their respective treatments. Clinical Benefit: Early identification and proper management of conjunctival disorders, such as conjunctival tumors and superior limbic keratoconjunctivitis, help prevent vision-threatening complications and ensure appropriate therapeutic	K	group s	MCQ & hort answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	interventions.			
OPTH 7.2	Recognize the systemic impact and management of conjunctival conditions Learn how systemic issues like vitamin A deficiency, autoimmune diseases, and trachoma manifest in the conjunctiva and understand their management, including conjunctival biopsy and the WHO SAFE strategy. Clinical Benefit: Understanding the relationship between systemic diseases and conjunctival health aids in diagnosing underlying conditions like vitamin A deficiency and trachoma, enabling targeted treatment and improving public health outcomes, especially in endemic areas	K	Large group lecture	MCQ & short answer Questions
Diseases of	f cornea part 1			
OPTH 8.1	Understand the structure and function of the cornea Learn about the cornea's role in vision, ocular protection, and its importance in maintaining optical clarity and integrity. Clinical Benefit: Knowledge of corneal structure aids in the diagnosis and treatment of conditions like keratitis, corneal ulcers, and keratoconus.	K	Large group lecture	MCQ & short answer Questions
OPTH 8.2	Recognize and manage corneal infections and disorders: Understand the clinical presentation, diagnosis, and management of bacterial, viral, fungal, and Acanthamoeba keratitis, as well as conditions requiring corneal transplantation and cross-linking.	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OPTH 9.1	understand the clinical features and management of corneal dystrophies and degenerations: Learn about conditions like Fuchs' endothelial dystrophy, band keratopathy, and lipid keratopathy, including their clinical presentations and treatment options. Clinical Benefit: Accurate diagnosis and effective management of corneal dystrophies and degenerations help preserve vision and prevent the need for corneal transplantation by addressing symptoms early.	K	Large group lecture	MCQ & short answer Questions
OPTH 9.2	Recognize and manage corneal disorders requiring surgical intervention Understand the clinical presentation and treatment options for conditions like keratoconus, recurrent corneal erosion, and peripheral ulcerative keratitis, including the role of surgery and artificial corneas. Clinical Benefit: Proper management of advanced corneal conditions such as keratoconus and autoimmune-related keratitis improves visual outcomes and reduces the risk of blindness through timely surgical intervention and appropriate use of keratoprosthesis.	K	Large group lecture	MCQ & short answer Questions
	sclera and episclera	IZ.	T	MCO 6
OPTH 10.1	Understand the anatomy and pathology of the sclera and episclera Learn about the structure, function,	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	and vascular supply of the sclera and episclera, and how these tissues relate to other ocular structures, including the differentiation between episcleritis and scleritis.			
OPTH 10.2	Recognize and manage scleritis and its systemic associations Understand the causes, clinical features, and management of scleritis, including its classification, complications, and systemic connections to diseases like rheumatoid arthritis and granulomatosis with polyangiitis. Clinical Benefit: Knowledge of scleritis' systemic associations and complications ensures timely diagnosis, accurate management (including immunosuppressive therapy), and prevention of severe outcomes such as scleral thinning and secondary glaucoma.	K	Large group lecture	MCQ & short answer Questions
Refractive	error			
OPTH 11.1	Understand the physiological basis and classification of refractive errors Learn about the optical principles of refraction and the types of refractive errors (myopia, hyperopia, astigmatism, and presbyopia), including their clinical presentation. Clinical Benefit: Accurate diagnosis and understanding of refractive errors enable appropriate correction methods.	K	Large group lecture	MCQ & short answer Questions
OPTH 11.2	Learn about the treatment options and management of refractive errors Explore various treatment methods for refractive errors, including optical aids like glasses and	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
	contact lenses, as well as surgical interventions like LASIK, PRK, and intraocular lenses. Clinical Benefit: Knowledge of refractive error treatments, including surgical options, ensures optimal vision correction and helps manage complications.				
Cornea and refractive surgery					
OPTH 12.1	Understand the indications, techniques, and complications of refractive surgery Learn about LASIK, PRK, and SMILE, including patient selection criteria, benefits, and potential risks such as ectasia and dry eye syndrome. Clinical Benefit: Proper preoperative assessment and surgical planning reduce complications and improve patient outcomes in refractive surgery.	K	Large group lecture	MCQ & short answer Questions	
OPTH 12.2	Recognize the role of corneal cross-linking and transplantation in managing corneal disorders Understand the indications and techniques for corneal cross-linking in keratoconus and post-refractive surgery ectasia, as well as the different types of corneal transplants. Clinical Benefit: Early intervention with cross-linking can prevent keratoconus progression, while appropriate transplant selection helps restore vision in severe corneal pathology.	K	Large group lecture	MCQ & short answer Questions	
Disorders of	of lens part 1				
OPTH 13.1	Understand the pathophysiology, classification, and systemic associations of cataracts Learn about the risk factors, types of cataracts, and how systemic diseases like diabetes influence	K	Large group lecture	MCQ & short answer Questions	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	their progression. Clinical Benefit: Early identification of cataracts and associated systemic conditions allows for timely intervention and better visual prognosis.			
OPTH 13.2	Recognize the principles of cataract surgery and intraocular lens (IOL) implantation Understand surgical techniques such as phacoemulsification and extracapsular cataract extraction, along with IOL selection criteria. Clinical Benefit: Proper surgical planning and IOL selection optimize visual rehabilitation and minimize postoperative complications.	K	Large group lecture	MCQ & short answer Questions
Disorders of	of lens part 2			
OPTH 14.1	Understand the causes and management of ectopia lentis and traumatic lens dislocation Learn the genetic associations (e.g., Marfan syndrome, homocystinuria) and surgical interventions for displaced lenses. Clinical Benefit: Early diagnosis and appropriate management prevent visual impairment and complications like secondary glaucoma.	K	Large group lecture	MCQ & short answer Questions
OPTH 14.2	Recognize advances in cataract surgery and postoperative rehabilitation Understand techniques like femtosecond laser-assisted cataract surgery and the role of multifocal/accommodating IOLs in presbyopia. Clinical Benefit: Improved surgical precision, faster recovery, and enhanced patient satisfaction	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	through personalized lens implantation.			
Diseases of	f uveal tract I			
OPTH 15.1	Differentiate infectious and non- infectious causes of uveitis and their diagnostic approach Learn to identify systemic associations using slit-lamp examination, imaging, and laboratory tests. Clinical Benefit: Accurate classification of uveitis ensures targeted treatment, preventing complications like vision loss.	K	Large group lecture	MCQ & short answer Questions
OPTH 15.2	Understand the management and complications of anterior uveitis Explore corticosteroid use, immunosuppressive therapy, and the role of biologic agents in refractory cases. Clinical Benefit: Timely treatment reduces inflammation, preventing secondary issues like glaucoma, cataracts, and macular edema.	K	Large group lecture	MCQ & short answer Questions
Diseases of	f uveal tract II			
OPTH 16.1	Differentiate posterior and intermediate uveitis, including their systemic associations Understand the clinical presentation, imaging findings, and treatment approaches for conditions like toxoplasmosis, viral retinitis, and pars planitis. Clinical Benefit: Accurate diagnosis helps prevent vision-threatening complications such as retinal detachment and macular edema.	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
OPTH 16.2	Recognize the role of immunomodulatory therapy and surgical interventions in chronic uveitis Learn indications for corticosteroids, biologic agents, and surgeries like vitrectomy and cataract extraction.	K	Large group lecture	MCQ & short answer Questions	
Ocular injury					
OPTH 17.1	Differentiate between types of ocular trauma (blunt, penetrating, perforating) and their clinical implications. Clinical Benefit: Enables early identification of high-risk injuries (e.g., globe rupture, intraocular foreign body), ensuring timely surgical intervention and reducing vision-threatening complications.	K	Large group lecture	MCQ & short answer Questions	
OPTH 17.2	Develop a systematic approach for assessing and managing ocular trauma, including imaging and surgical decision-making.	K	Large group lecture	MCQ & short answer Questions	
Glaucoma	part 1				
OPTH 18.1	understand the pathophysiology and classification of glaucoma, including its various forms Clinical Benefit: Enhances the ability to correctly diagnose the type of glaucoma and select the appropriate treatment, ultimately preventing vision loss due to optic nerve damage.	K	Large group lecture	MCQ & short answer Questions	
OPTH 18.2	Develop proficiency in the clinical diagnosis and management of primary open-angle glaucoma (POAG), including diagnostic tests and medical therapies. Clinical Benefit: Improves early detection and effective management of POAG, reducing the risk of progression to blindness through personalized treatment plans that optimize IOP	K	Large group lecture	MCQ & short answer Questions	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	control.			
Glaucoma	part 2			
OPTH 19.1	Understand the pathophysiology, clinical presentation, and risk factors of primary angle-closure glaucoma (PACG), and its acute management. Clinical Benefit: Enables timely recognition and intervention of PACG, reducing the risk of irreversible vision loss through acute medical management and emergency laser treatment.	K	Large group lecture	MCQ & short answer Questions
OPTH 19.2	Familiarize with the diagnosis and management of secondary glaucomas and congenital glaucoma, including surgical options. Clinical Benefit: Ensures comprehensive care for secondary and congenital glaucomas, enhancing the ability to manage complex glaucoma cases and prevent further complications, particularly in pediatric patients.	K	Large group lecture	MCQ & short answer Questions
Ocular tum OPTH 20.1	Classify ocular tumors into benign and malignant types, identifying primary and metastatic tumors. Clinical Benefit: Provides a foundational understanding to differentiate between benign and malignant ocular tumors, enabling timely and accurate diagnosis, critical for initiating the	K	Large group lecture	MCQ & short answer Questions
OPTH 20.2	appropriate treatment. Describe the clinical presentation and management of retinoblastoma, uveal melanoma, and orbital tumors, with an emphasis on surgical and radiotherapy interventions.	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Retinal dis	ease part 1			
OPTH 21.1	Describe the anatomy and function of the retina, including its blood supply and role in vision. Clinical Benefit: Understanding retinal anatomy and blood supply is critical for diagnosing and managing retinal diseases effectively, ensuring appropriate treatment decisions for conditions like diabetic retinopathy and retinal vascular occlusions.	K	Large group lecture	MCQ & short answer Questions
OPTH 21.2	Explain the pathophysiology, risk factors, and treatment options for diabetic retinopathy and diabetic macular edema, including the use of laser photocoagulation, anti-VEGF therapy, and vitrectomy.	K	Large group lecture	MCQ & short answer Questions
Retinal dis	ease part 2			
OPTH 22.1	Describe the classification, clinical features, and genetic basis of age-related macular degeneration (AMD). Clinical Benefit: Understanding AMD classification and genetics helps in diagnosing the condition early, providing personalized management plans to slow disease progression and optimize visual outcomes in elderly patients.	K	Large group lecture	MCQ & short answer Questions
OPTH 22.2	Explain the role of anti-VEGF therapy in the management of wet AMD and its long-term outcomes. Clinical Benefit: Knowledge of anti-VEGF therapy is essential for effectively managing wet AMD, preventing vision loss, and ensuring patients receive the most appropriate and evidence-based treatment for long-term visual preservation.	K	Large group lecture	MCQ & short answer Questions
Uses of las	er in ophthalmology			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
23.1 OPTH	Explain the principles of laser physics and its application in ophthalmology. Clinical Benefit: Understanding laser principles enhances the effectiveness of treatment and ensures appropriate laser use in various ocular conditions, improving patient outcomes and minimizing complications.	K	Large group lecture	MCQ & short answer Questions
OPTH 23.2	Describe the indications, techniques, and complications of laser photocoagulation in diabetic retinopathy and retinal vein occlusions. Clinical Benefit: Mastery of laser photocoagulation techniques is critical in preventing vision loss in patients with diabetic retinopathy or retinal vein occlusions, helping manage these conditions with minimal risk. thalmology part 1	K	Large group lecture	MCQ & short answer Questions
OPTH 24.1	Describe the visual pathway and common sites of lesions leading to visual field defects. Clinical Benefit: Understanding the visual pathway and lesion locations helps in accurately diagnosing visual field defects, enabling targeted interventions to preserve vision and prevent further visual loss.	K	Large group lecture	MCQ & short answer Questions
OPTH 24.2	Discuss the clinical presentation, diagnosis, and management of optic neuritis, including its association with multiple sclerosis. Clinical Benefit: Early recognition and treatment of optic neuritis, especially in patients with multiple sclerosis, can reduce vision loss and improve patient prognosis through appropriate immunomodulatory therapies	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Neuro-oph	thalmology part 2			
OPTH 25.1	Describe the common causes and clinical presentation of compressive optic neuropathies, including tumors and vascular lesions. Clinical Benefit: Early identification of compressive optic neuropathies allows for timely intervention, such as surgical resection or radiation, to prevent permanent vision loss.	K	Large group lecture	MCQ & short answer Questions
OPTH 25.2	Discuss the diagnosis and management of cranial nerve palsies affecting eye movements (III, IV, VI). Clinical Benefit: Accurate diagnosis and prompt treatment of cranial nerve palsies, whether from ischemic, traumatic, or neoplastic causes.	K	Large group lecture	MCQ & short answer Questions
Strabismus	1			
OPTH 26.1	Define strabismus and explain the classification into concomitant and incomitant types. Clinical Benefit: Understanding the types of strabismus helps guide appropriate treatment plans, such as surgical intervention or vision therapy.	K	Large group lecture	MCQ & short answer Questions
OPTH 26.2	Discuss the clinical assessment of strabismus, including Hirschberg test, cover tests, and extraocular motility examination. Clinical Benefit: Proper assessment is essential for diagnosing the type and severity of strabismus, ensuring accurate treatment, including occlusion therapy, prism glasses, or surgery, to improve visual function and alignment.	K	Large group lecture	MCQ & short answer Questions
Strabismus	part 2			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OPTH 27.1	Describe the clinical features and management of paralytic strabismus due to cranial nerve palsies (III, IV, VI). Clinical Benefit: Understanding the causes of paralytic strabismus, such as cranial nerve palsies, enables timely diagnosis and targeted treatments (e.g., prisms, surgery, or botulinum toxin), improving eye alignment and function.	K	Large group lecture	MCQ & short answer Questions
OPTH 27.2	Explain the pathophysiology and clinical assessment of restrictive strabismus, including thyroid eye disease and orbital fractures. Clinical Benefit: Identifying restrictive strabismus helps to distinguish between mechanical causes (such as orbital fractures) and neurologic ones, guiding the appropriate surgical or medical management to restore ocular motility and prevent permanent visual impairment.	K	Large group lecture	MCQ & short answer Questions
The eye an	d systemic diseases part 1			
OPTH 28.1	Explain the ocular manifestations of diabetes mellitus, including diabetic retinopathy and diabetic macular edema, and their management. Clinical Benefit: Recognizing diabetic retinopathy and diabetic macular edema in a timely manner allows for early intervention (e.g., laser photocoagulation, anti-VEGF treatment) to prevent vision loss and improve the patient's quality of life.	K	Large group lecture	MCQ & short answer Questions
OPTH 28.2	Discuss hypertensive retinopathy, its grading, and its significance as a marker of systemic vascular disease.	K	Large group lecture	MCQ & short answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods	
	Clinical Benefit: Understanding hypertensive retinopathy and its grading helps detect systemic hypertension early and manage it appropriately to prevent further ocular and cardiovascular complications.				
The eye an	The eye and systemic diseases part2				
OPTH 29.1	Describe the ophthalmic manifestations of metabolic disorders such as Wilson's disease (Kayser-Fleischer rings) and Fabry disease (corneal verticillata). Clinical Benefit: Identifying Kayser-Fleischer rings and corneal verticillata allows for early diagnosis of systemic metabolic conditions like Wilson's and Fabry diseases, leading to appropriate systemic management and preventing irreversible ocular and systemic damage.	K	Large group lecture	MCQ & short answer Questions	
OPTH 29.2	Discuss the ocular effects of vitamin deficiencies, including vitamin A deficiency (xerophthalmia, night blindness). Clinical Benefit: Recognizing signs of vitamin A deficiency in the eye (xerophthalmia, night blindness)	K	Large group lecture	MCQ & short answer Questions	
	n ophthalmology				
OPTH 30.1	Discuss recent developments in the diagnosis and treatment of age-related macular degeneration, including gene therapy and artificial retinas. Clinical Benefit: Understanding emerging treatments like gene therapy and artificial retinas allows ophthalmologists to offer new treatment options for patients with age-related macular degeneration, potentially	K	Large group lecture	MCQ & short answer Questions	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	preserving vision and improving quality of life.			
OPTH 30.2	Explain the role of minimally invasive glaucoma surgery (MIGS) in glaucoma management. Clinical Benefit: Familiarity with MIGS techniques enables clinicians to provide safer and less invasive treatment alternatives for glaucoma patients, reducing recovery times and minimizing surgical risks.	K	Large group lecture	MCQ & short answer Questions

Practical

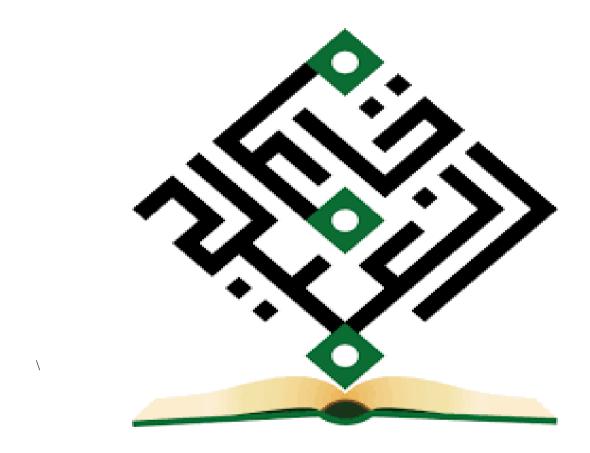
Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessment Methods
Glaucoma				
OPTH 1.1	Explain the pathophysiology, risk factors, and types of glaucoma (e.g., open-angle vs. angle-closure). Clinical Benefit: Enhances early identification of at-risk patients, leading to timely screening and prevention of vision loss.	K/S/C	Small group Out patients clinic	SIVA exam
OPTH 1.2	Demonstrate the correct technique for measuring intraocular pressure (IOP) using tonometry. Clinical Benefit: Facilitates early diagnosis and monitoring of glaucoma progression, improving treatment outcomes and preserving vision.	K/S/C	Small group Out patients clinic	SIVA exam
Eye trauma				
OPTH 2.1	Identify and classify common types of ocular injuries (e.g., corneal abrasions, foreign bodies, retinal detachment). Clinical Benefit: Improves the ability to recognize and prioritize	K/S/C	Small group Out patients clinic	SIVA exam

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessment Methods
	treatment for different types of eye trauma, minimizing the risk of permanent damage and loss of vision			
OPTH 2.2	Demonstrate the appropriate management of a penetrating eye injury, including the use of protective coverings and the referral process. Clinical Benefit: Ensures timely and proper intervention to prevent complications such as infection, bleeding, or further damage, preserving vision and reducing the risk of long-term disability.	K/S/C	Small group Out patients clinic	SIVA exam
Red eye				
OPTH 3.1	Differentiate between common causes of red eye, including conjunctivitis, dry eye, and uveitis. Clinical Benefit: Enhances diagnostic accuracy, ensuring appropriate treatment for the underlying cause of red eye, which can prevent complications such as vision loss or chronic discomfort.	K/S/C	Small group Out patients clinic	SIVA exam
OPTH 3.2	Identify red flags that indicate more serious conditions, such as acute angle-closure glaucoma or orbital cellulitis, in patients presenting with red eye. Clinical Benefit: Promotes timely referral and management of potentially sight-threatening or life-threatening conditions, improving patient outcomes and reducing the risk of permanent damage.	K/S/C	Small group Out patients clinic	SIVA exam
Eye squint				
OPTH 4.1	Recognize and differentiate between types of strabismus, such as esotropia (inward turning) and exotropia (outward turning), and understand their potential causes.	K/S/C	Small group Out patients clinic	SIVA exam

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessment Methods
	Clinical Benefit: Early recognition of strabismus can help guide timely treatment to prevent amblyopia (lazy eye) and ensure proper visual development, especially in children.			
OPTH 4.2	Understand and demonstrate the steps for a comprehensive ocular examination to assess eye alignment, including the coveruncover test and the Hirschberg test. Clinical Benefit: Accurate assessment and diagnosis of eye misalignment lead to effective management strategies, such as corrective glasses, vision therapy, or surgical interventions, to correct eye alignment and improve visual function.	K/S/C	Small group Out patients clinic	SIVA exam
Vision loss OPTH 5.1	Recognize the common causes of vision loss, including diabetic retinopathy, macular degeneration, glaucoma, and cataracts. Clinical Benefit: Enhances early identification of treatable conditions, leading to timely interventions and preserving vision in patients at risk of progressive sight loss.	K/S/C	Small group Out patients clinic	SIVA exam
OPTH 5.2	Understand and demonstrate the steps for conducting a comprehensive visual field test and retinal examination. Clinical Benefit: Improves diagnostic accuracy for detecting conditions like glaucoma or retinal	K/S/C	Small group Out patients clinic	SIVA exam

Number	Learning Objective	Domain K/S/A/ C	Teaching Learning Methods	Assessment Methods
	diseases, enabling earlier treatment that can slow or prevent further vision loss and improve patient outcomes.			

ENT



Fifth grade

1) Educational Establishment	University of Al-Ameed
2) Scientific Department	College of Medicine – Surgical department
3) Name of the Professional Academic Program.	Modified Traditional Curriculum
4) Final Graduation Certificate	M.B.Ch.B
5) Educational system: Annual/courses/other	Annual
6) Approved accreditation program	Iraqi National Guideline on Standards for Established and Accrediting Medical School
7) Other external factors	 Availability of relevant scientific research in the field of specialization Access to global electronic networks Access to traditional and digital libraries Teaching aids such as data show and PowerPoint presentations Availability of equipped classrooms Use of free online communication platforms (e.g., Free Conference Call)
8) Date the description was written	2024/9/15

9) Objectives of the academic program:

To provide a comprehensive understanding of the anatomy, physiology, and pathology of the ear, nose, throat, and related head and neck structures, with emphasis on their clinical correlations.

To enable students to recognize and manage common ENT disorders, including infections, inflammations, tumors, congenital anomalies, and trauma affecting the upper airway and sensory organs.

To develop essential diagnostic and therapeutic skills, including otoscopic examination, nasal endoscopy, and laryngoscopy, as well as interpretation of audiological and radiological findings.

To train students to handle emergency situations in ENT practice, such as airway obstruction, epistaxis, facial trauma, and acute infections.

To promote the application of evidence-based medicine in ENT diagnosis and treatment, and encourage clinical reasoning in selecting appropriate investigations and management plans.

To emphasize the importance of interprofessional collaboration in the management of ENT conditions, particularly those requiring surgical intervention, rehabilitation, or referral to other specialties.

To prepare students for ethical and patient-centered care, respecting patient communication needs, especially in disorders affecting hearing, speech, and airway.
The most reliable resources for program information are: Alan G. Kerr.Scott-Brown's otolaryngology.
k J.LEE.Essential Otolaryngology Alan G. Kerr.Scott-Brown's Otolaryngology K.J.LEE.Essential Otolaryngology
Alan G. Kerr.Scott-Brown's Otolaryngology K.J.LEE.Essential Otolaryngology
Keith G. Allman and Iain H. Wilsom. Oxford Handbook of Anaesthesia

ENT \ Grade 5	
Code OTOR 508	3 Credits

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods			
Anatomy	Anatomy and physiology of the nose						
OTOR 1.1	Describe the anatomical structure of the nose, including external and internal components, and their clinical relevance.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)			
OTOR 1.2	Explain the physiological functions of the nose, including olfaction, air filtration, humidification, and resonance in speech.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)			
OTOR 1.3	Discuss the blood supply and venous drainage of the nasal cavity and their implications in epistaxis.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)			
OTOR 1.4	Describe the innervation of the nasal mucosa and its role in allergic and non-allergic rhinitis.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment			

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				(CIVA)
OTOR 1.5	Explain the mucociliary clearance mechanism and its role in preventing infections such as sinusitis.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 1.6	Discuss the development of the nasal septum and common congenital anomalies such as choanal atresia.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 1.7	Describe the clinical significance of the paranasal sinuses in infections and their relation to the orbit and brain.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Anatomy	and physiology of the ear			
OTOR 2.1	Describe the anatomical structure of the external, middle, and inner ear and their clinical relevance.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 2.2	Explain the function of the tympanic membrane and ossicles in sound transmission and the impact of dysfunction on hearing loss	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions &Clinical Image And Video Assessment(CIVA
OTOR 2.3	Discuss the role of the Eustachian tube in middle ear ventilation and its clinical significance in otitis media.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 2.4	Describe the cochlear mechanism of hearing, including the function of hair cells and their damage in noise-induced hearing loss.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 2.5	Explain the vestibular system and its role in balance, including the clinical presentation of vestibular disorders such as vertigo.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 2.6	Discuss the blood supply and innervation of the ear and their importance in facial nerve dysfunction	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				And Video Assessment (CIVA)
OTOR 2.7	Recognize the embryological development of the ear and common congenital anomalies such as microtia and atresia.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Anatomy	and physiology of the mouth, phar	ynx, and lary	/nx	
OTOR 3.1	Describe the anatomical structures of the oral cavity, pharynx, and larynx, emphasizing their roles in respiration, swallowing, and speech.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 3.2	Explain the physiology of deglutition and the role of the pharyngeal muscles in preventing aspiration.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 3.3	Discuss the innervation of the larynx, including the role of the recurrent laryngeal nerve in vocal cord function .	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 3.4	Explain the physiological mechanisms of voice production and the impact of laryngeal diseases on phonation	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 3.5	Recognize the importance of lymphatic drainage of the pharynx and larynx in the spread of infections and malignancies.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 3.6	Describe the vascular supply of the oral cavity and pharynx and its clinical significance in hemorrhage.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 3.7	Discuss the protective functions of the tonsils and adenoids and their role in recurrent infections.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 3.8	Explain the embryology of the larynx and common congenital anomalies such as laryngomalacia.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
				& Clinical Image And Video Assessment (CIVA)		
Diseases of	Diseases of the external ear					
OTOR 4.1	Identify and describe common external ear pathologies, including acute and chronic otitis externa, fungal infections, trauma, foreign bodies, and impacted cerumen, along with their causes, risk factors, clinical presentations, and diagnostic approach.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 4.2	Apply clinical examination techniques to evaluate external ear disorders, including the use of otoscopy to assess the external auditory canal and tympanic membrane, recognizing signs of inflammation, infection, or injury.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 4.3	Formulate appropriate treatment and management plans for external ear conditions using topical and systemic medications, proper ear hygiene techniques, and identifying cases that require surgical intervention or ENT referral.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 4.4	Recognize potential complications and their clinical implications, such as malignant otitis externa and cellulitis,	K	Large group lectures	multiple choice questions (MCQ) & Short Answer		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	particularly in high-risk groups like diabetics and immunocompromised patients, and understand the importance of early intervention.			Questions & Clinical Image And Video Assessment (CIVA)
Otitis med	dia with effusion			
OTOR 5.1	Define Otitis Media with Effusion and distinguish it from other forms of otitis media, focusing on its non-suppurative nature and the presence of fluid behind the tympanic membrane without signs of acute infection.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 5.2	Explain the pathophysiology of OME, including Eustachian tube dysfunction, negative middle ear pressure, and the accumulation of sterile fluid, particularly in pediatric populations.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 5.3	Identify the typical clinical features of OME, such as hearing loss, aural fullness, and speech delay in children, and learn how to perform an otoscopic examination to observe a dull, retracted tympanic membrane with visible fluid levels or air bubbles.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 5.4	Discuss diagnostic tools and criteria, including tympanometry and audiometry, to confirm the presence of middle ear effusion and assess the degree of conductive hearing loss.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				Assessment (CIVA)
OTOR 5.5	Review the treatment options and management strategies, from observation and medical therapy to the indications for surgical interventions like myringotomy and grommet (ventilation tube) insertion.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 5.6	Understand the potential complications and long-term consequences of untreated or recurrent OME, such as speech and language delay, chronic otitis media, and impact on academic performance.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Acute otit	ris media			
OTOR 6.1	Define Acute Otitis Media and describe its epidemiology, emphasizing its high prevalence in infants and young children and its relationship to upper respiratory tract infections.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 6.2	Understand the pathophysiology and clinical presentation of acute otitis media, including the role of Eustachian tube dysfunction, common pathogens (such as Streptococcus pneumoniae, Haemophilus influenzae), and the typical symptoms like otalgia, fever, and hearing loss.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	Recognize key diagnostic features through otoscopic examination, differentiating AOM from otitis media with effusion, and appreciate the significance of tympanic membrane changes (e.g., bulging, erythema, immobility).	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
	Identify evidence-based treatment strategies, including indications for antibiotic therapy, analgesia, and monitoring, as well as when to consider referral to ENT or surgical intervention (e.g., tympanostomy tubes in recurrent cases).	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Chronic o	titis media			
OTOR 7.1	Understand the pathophysiology and classification of chronic otitis media, distinguishing between safe (tubotympanic) and unsafe (atticoantral) types, with emphasis on chronic inflammation and persistent tympanic membrane perforation.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 7.2	Identify common clinical presentations and complications, such as conductive hearing loss, otorrhea, and potential development of cholesteatoma, as well as intracranial and extracranial complications.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 7.3	Review diagnostic and therapeutic strategies, including otoscopic examination, hearing evaluation, imaging for	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
	complications, and the role of medical versus surgical management, especially tympanoplasty and mastoidectomy.			Questions & Clinical Image And Video Assessment (CIVA)		
Complica	Complications of otitis media					
OTOR 8.1	Recognize the major extracranial and intracranial complications of otitis media, including mastoiditis, facial nerve palsy, labyrinthitis, brain abscess, meningitis, and lateral sinus thrombosis.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 8.2	Understand the clinical features and diagnostic approach for each complication, including when to suspect complications based on worsening or atypical symptoms.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 8.3	Discuss appropriate management plans, including urgent referral, imaging choices (CT/MRI), intravenous antibiotics, and surgical interventions like mastoidectomy when indicated.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
Hearing loss						
OTOR 9.1	Classify hearing loss into conductive, sensorineural, and mixed types, understanding the pathophysiological differences and their impact on auditory function.	K	Large group lectures	multiple choice questions (MCQ) &Short Answer Questions &Clinical Image And Video		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				Assessment (CIVA)
OTOR 9.2	Identify the causes of hearing loss across different age groups, including congenital, acquired, genetic, and environmental factors, with particular attention to common clinical scenarios.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 9.3	Interpret audiometric tests, such as pure tone audiometry, speech audiometry, and tympanometry, to diagnose the type and degree of hearing loss.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 9.4	Discuss treatment and management strategies, including medical, surgical, and rehabilitative approaches such as hearing aids, cochlear implants, and speech therapy.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 9.5	Recognize the impact of hearing loss on a patient's quality of life and psychological well-being, and understand the importance of early intervention.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Facial ner	ve			,

Number	Learning Objective	Domain K/S/A/C	Teaching Learning	Assessment Methods	
OTOR 10.1	Understand the anatomy of the facial nerve, including its origin, course, branches, and its relationship with surrounding structures such as the brainstem, temporal bone, and facial muscles.	K	Methods Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)	
OTOR 10.2	Identify the functions of the facial nerve, including motor control of facial muscles, sensory functions related to taste on the anterior two-thirds of the tongue, and parasympathetic innervation to lacrimal and salivary glands.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)	
OTOR 10.3	Discuss diagnostic tools used in evaluating facial nerve function, such as electromyography (EMG), facial nerve conduction studies, and imaging techniques (CT/MRI) to assess for structural abnormalities.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)	
OTOR 10.4	Understand the management of facial nerve injuries and disorders, including pharmacological treatments, physical therapy, and surgical options for restoring function.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)	
Diseases of nasal septum					
OTOR 11.1	Understand the anatomy of the nasal septum and its clinical significance in nasal airflow and breathing.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer	

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				Questions & Clinical Image And Video Assessment (CIVA)
OTOR 11.2	Recognize common diseases of the nasal septum, such as deviation and perforation, and how they impact nasal function and airflow.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions &Clinical Image And Video Assessment (CIVA)
OTOR 11.3	Identify clinical symptoms associated with nasal septum disorders, including nasal obstruction, difficulty breathing, and recurrent infections.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 11.4	Learn diagnostic methods to evaluate nasal septum disorders, such as physical examination, nasal endoscopy, and imaging techniques.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 11.5	Understand treatment options, including medical management and surgical interventions (e.g., septoplasty), to address nasal septum disorders and enhance patient quality of life.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
Allergic r	Allergic rhinitis and nasal polyposis					
OTOR 12.1	Understand the pathophysiology of allergic rhinitis and nasal polyposis, focusing on the immune system's response to allergens and the resulting inflammation of the nasal mucosa.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 12.2	Recognize clinical symptoms of allergic rhinitis, such as sneezing, nasal congestion, and itching, and nasal polyposis, including persistent nasal obstruction and loss of smell.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 12.3	Identify risk factors for allergic rhinitis and nasal polyposis, including genetic predisposition, environmental allergens, and underlying conditions like asthma or sinusitis.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 12.4	Learn diagnostic methods, such as skin tests, nasal endoscopy, and imaging, to assess the presence and severity of allergic rhinitis and nasal polyps.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 12.5	Understand management strategies, including pharmacologic treatments (e.g., antihistamines, nasal	K	Large group lectures	multiple choice questions (MCQ) & Short Answer		

Number	Learning Objective corticosteroids), immunotherapy (allergy shots), and surgical interventions (e.g.,	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods Questions & Clinical Image
	polypectomy) to relieve symptoms and improve quality of life.			And Video Assessment (CIVA)
Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Epistaxis				
OTOR 13.1	Understand the causes of epistaxis, including local factors (e.g., trauma, dry air, infections) and systemic conditions (e.g., bleeding disorders, hypertension).	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 13.2	Recognize clinical manifestations, such as the amount of bleeding, its duration, and associated symptoms (e.g., lightheadedness, dizziness).	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions
OTOR 13.3	Identify the types of epistaxis, differentiating between anterior (more common) and posterior epistaxis, based on the location of bleeding.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 13.4	Learn diagnostic approaches, including physical examination (e.g., nasal speculum examination) and investigations (e.g., coagulation profile) to assess underlying causes.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				(CIVA)
OTOR 13.5	Understand the management of epistaxis, focusing on conservative measures (e.g., applying pressure, using nasal decongestants), medical treatments (e.g., cauterization, packing), and surgical options for recurrent case	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Sinusitis and	d its complications			
OTOR 14.1	Understand the pathophysiology of sinusitis, including the causes (viral, bacterial, allergic) and how they lead to sinus inflammation.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 14.2	Identify common symptoms, such as nasal congestion, facial pressure, and headache, and differentiate between acute and chronic forms of sinusitis.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 14.3	Learn the diagnostic methods, including physical examination and imaging (e.g., CT scans) to confirm sinusitis and identify complications.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 14.4	Recognize complications like orbital cellulitis and brain abscesses, and understand when urgent treatment is required.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 14.5	Understand basic treatment options, including nasal decongestants, antibiotics, and corticosteroids for managing inflammation and infection.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Benign and	malignant conditions of the nose	and paranasa	ıl sinuses	
OTOR 15.1	Understand the classification of benign and malignant tumors of the nose and sinuses, including examples like nasal polyps (benign) and squamous cell carcinoma (malignant).	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 15.2	Identify key clinical features of benign conditions, such as nasal obstruction, congestion, and recurrent infections, and distinguish them from malignant conditions that may present with more serious symptoms like nasal bleeding or a persistent mass.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 15.3	Learn the diagnostic techniques used for these conditions, including physical examination, imaging (CT,	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	MRI), and biopsy for histopathological evaluation.			Questions & Clinical Image And Video Assessment (CIVA)
OTOR 15.4	Recognize the treatment options for benign conditions like surgery or medications (e.g., corticosteroids) and the aggressive treatments required for malignancies, such as surgery, radiation, or chemotherapy.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 15.5	Understand the importance of early detection, particularly in malignant conditions, to improve prognosis and prevent the spread of cancer to surrounding structures	K/A	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Trauma to t	he face and CSF rhinorrhea			
OTOR 16.1	Understand the types of facial trauma: Recognize various forms of facial trauma, including fractures of the nasal bone, maxilla, zygoma, and mandible, and their potential effects on airway and function.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 16.2	Identify the clinical features of facial trauma, such as swelling, pain, deformities, and difficulties in breathing or speaking, and the importance of early assessment and stabilization.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
				Assessment (CIVA)		
OTOR 16.3	Learn the diagnostic methods for facial trauma and CSF rhinorrhea, including physical examination, imaging (CT, MRI), and the use of beta-2 transferrin testing to confirm CSF leakage.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 16.4	Understand the management strategies: For facial trauma, treatment ranges from conservative care for minor fractures to surgical intervention for severe cases. CSF rhinorrhea may require surgical repair, often via endoscopic or open techniques, and prophylactic antibiotics to prevent infections like meningitis.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 16.5	Recognize the complications: Complications of facial trauma include infections, airway compromise, and long- term functional impairments, while CSF rhinorrhea can lead to meningitis if not properly managed.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
Diseases of	Diseases of the tonsils and adenoids					
OTOR 17.1	Identify the normal anatomy and physiological roles of the tonsils and adenoids, and explain how their location and function contribute to local immune defense, especially in pediatric patients.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				(CIVA)
OTOR 17.2	Distinguish between acute and chronic tonsillitis through interpretation of clinical symptoms such as sore throat, fever, lymphadenopathy, and by correlating laboratory results with patient history.	K	Large group lectures	(MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 17.3	Detect the clinical manifestations of adenoidal hypertrophy, including nasal obstruction, mouth breathing, snoring, and its complications like otitis media with effusion and sleep-disordered breathing.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 17.4	Assess patients presenting with recurrent tonsillitis using established clinical criteria (e.g., Paradise criteria) to determine whether surgical intervention, such as tonsillectomy or adenoidectomy, is indicated.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 17.5	Formulate individualized treatment strategies for managing tonsillar and adenoidal conditions, incorporating both medical therapies (e.g., antibiotics, anti-inflammatories) and surgical options when appropriate.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 17.6	Defend clinical decisions regarding surgery by integrating patient symptoms, frequency of infections,	K	Large group lectures	multiple choice questions (MCQ) & Short Answer

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	quality of life, and existing clinical guidelines to ensure evidence-based practice.			Questions & Clinical Image And Video Assessment (CIVA)
Tumours of	the pharynx			
OTOR 18.1	Identify and describe the anatomical regions of the pharynx, including the nasopharynx, oropharynx, and hypopharynx, and explain how the location of tumours can affect symptoms and treatment options.	K	Large group lectures	(MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 18.2	Recognize the clinical manifestations of pharyngeal tumours, such as dysphagia, hoarseness, and a lump in the throat, and differentiate them from other causes based on patient history and physical examination.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 18.3	Analyze the risk factors for pharyngeal cancers, including smoking, alcohol use, and HPV infection, and explain how they contribute to tumour development.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 18.4	Assess the role of imaging techniques like CT scans, MRIs, and biopsies in diagnosing pharyngeal tumours and determining their stage and spread.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				(CIVA)
OTOR 18.5	Evaluate the appropriate treatment options for pharyngeal tumours, including surgery, radiation therapy, and chemotherapy, and justify the treatment approach based on tumour size, location, and stage.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 18.6	Design a follow-up plan for patients post-treatment, addressing potential complications such as dysphagia, speech difficulties, and recurrence of the tumour.	K	Large group lectures	multiple choice questions (MCQ) &Short Answer Questions& Clinical Image And Video Assessment (CIVA)
Congenital	diseases of the larynx			
OTOR 19.1	Identify and describe the anatomical regions of the pharynx, including the nasopharynx, oropharynx, and hypopharynx, and explain how the location of tumours can affect symptoms and treatment options. Recognize the clinical manifestations of pharyngeal tumours, such as dysphagia, hoarseness, and a lump in the throat, and differentiate them from other causes based on patient history and physical examination.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 19.2	Analyze the risk factors for pharyngeal cancers, including smoking, alcohol use, and HPV infection, and explain how they contribute to tumour development. Assess the role of imaging	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	techniques like CT scans, MRIs, and biopsies in diagnosing pharyngeal tumours and determining their stage and spread.			And Video Assessment (CIVA)
OTOR 19.3	Evaluate the appropriate treatment options for pharyngeal tumours,, and justify the treatment approach based on tumour size, location, and stage. Design a follow-up plan for patients post-treatment, addressing potential complications	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Inflammato	ory conditions of the larynx			
OTOR 20.1	Identify Common Laryngeal Inflammatory Conditions Recognize and differentiate between acute laryngitis, chronic laryngitis, and laryngeal tuberculosis	K	Large group lectures	multiple choice questions (MCQ) &Short Answer Questions& Clinical Image And Video Assessment (CIVA)
OTOR 20.2	Describe the inflammation processes in the larynx and identify symptoms like hoarseness, throat pain, and stridor, linked to different inflammatory conditions.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 20.3	Learn the diagnostic methods, including clinical examination, laryngoscopy, and imaging. Understand treatment options such as antibiotics for infections, corticosteroids for inflammation, and vocal rest for functional causes.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				(CIVA)
OTOR 20.4	Recognize potential complications, including airway obstruction or chronic voice disorders, and understand preventive measures, including proper vocal hygiene and avoiding irritants.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Tumours of	the larynx			
OTOR 21.1	Identify Types of Laryngeal Tumours Understand the classification of laryngeal tumors, distinguishing between benign and malignant types, such as squamous cell carcinoma, papillomas, and laryngeal polyps.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 21.2	Learn the risk factors for laryngeal cancer, including smoking, alcohol use, and HPV infection. Recognize common symptoms such as persistent hoarseness, dysphagia, pain, and stridor.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 21.3	Understand the diagnostic process, including physical examination, laryngoscopy, biopsy, and imaging studies (CT, MRI) to assess tumour size and spread.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 21.4	Learn the treatment modalities for laryngeal tumors, including surgical resection, radiation therapy, and chemotherapy. Understand the criteria for deciding between organ preservation versus laryngectomy.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 21.5	Be aware of complications such as airway obstruction, metastasis, and voice changes. Learn about the prognosis based on tumour type, stage, and treatment outcomes.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Stridor, voc	al cord paralysis			
OTOR 22.1	Identify and describe the common congenital abnormalities of the larynx, such as laryngomalacia, vocal cord paralysis, and congenital stridor, and explain their impact on normal breathing and voice production. Recognize the clinical signs and symptoms associated with congenital laryngeal diseases, including stridor, hoarseness, and difficulty feeding, and differentiate these from other respiratory conditions through clinical evaluation.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 22.2	Discuss the embryological development of the larynx and how disruptions in this process can lead to congenital laryngeal conditions, providing a foundation for understanding their pathophysiology.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	Analyze the diagnostic approach for congenital laryngeal diseases,			Assessment (CIVA)
OTOR 22.3	Evaluate the management and treatment options for congenital laryngeal diseases, including conservative management, surgery, and speech therapy, and justify the treatment plan based on the severity of symptoms and the specific diagnosis. Develop a follow-up strategy for infants with congenital laryngeal diseases to monitor their respiratory function, vocal development, and potential long-term effects.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Tracheostor	my			
OTOR 23.1	Define tracheostomy and explain the indications for performing this procedure, such as airway obstruction, long-term ventilation needs, and respiratory failure, emphasizing clinical decision-making. Identify the different types of tracheostomy tubes and their components, including cuffed and uncuffed tubes, and discuss when each type is used based on the patient's clinical condition.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 23.2	Demonstrate an understanding of the step-by-step process of performing a tracheostomy, Evaluate the potential complications associated with tracheostomy, and apply appropriate interventions to manage these complications.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 23.3	Assess the nursing care required for a patient with a tracheostomy, including airway management, suctioning, and the prevention of respiratory infections, based on evidence-based clinical guidelines. Develop a management plan for long-term tracheostomy care, including patient and family education on the use of the tracheostomy tube, emergency procedures, and regular follow-ups to monitor respiratory function.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Sleep apnea			T -	
OTOR 24.1	Describe the pathophysiological mechanisms underlying obstructive and central sleep apnea, emphasizing how airway obstruction or neurological dysfunction leads to disrupted sleep and systemic complications. Identify key clinical features of sleep apnea syndrome—such as loud snoring, witnessed apneas, daytime sleepiness—and correlate them with diagnostic criteria used in sleep studies like polysomnography.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 24.2	Differentiate between obstructive and central sleep apnea based on patient history, physical examination, and diagnostic results to aid in accurate diagnosis and management planning. Analyze the complications of	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	untreated sleep apnea, including cardiovascular risks (e.g., hypertension, arrhythmia), metabolic dysfunction, and impaired cognitive function.			Assessment (CIVA)
OTOR 24.3	Develop an individualized treatment plan for patients with sleep apnea, integrating behavioral modifications, CPAP therapy, and potential surgical interventions such as uvulopalatopharyngoplasty (UPPP), based on severity and patient compliance. Evaluate patient response to treatment using follow-up sleep studies and clinical feedback, and adjust management plans accordingly to improve quality of life and reduce comorbid risks.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Hoarseness				
OTOR 25.1	Define hoarseness as an abnormal change in voice quality, pitch, or volume due to pathology affecting the vocal cords or laryngeal structures. List the common causes of hoarseness, including laryngitis, vocal cord nodules or paralysis, laryngeal tumors, and gastroesophageal reflux disease (GERD). Explain the clinical significance of persistent hoarseness lasting more than two weeks and its potential	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	link to laryngeal malignancies, especially in high-risk individuals such as smokers.			
OTOR 25.2	Conduct a focused history and physical examination to evaluate hoarseness, emphasizing voice use patterns, associated symptoms (e.g., dysphagia, hemoptysis), and risk factors. Interpret findings from diagnostic tools like indirect laryngoscopy, flexible nasolaryngoscopy, and imaging (CT/MRI) to identify the underlying pathology.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 25.3	Formulate an evidence-based management plan based on etiology, ranging from voice rest and medical therapy to referral for phonosurgery or oncology when indicated. Monitor voice improvement or progression and counsel patients on voice hygiene and preventive strategies, particularly for those with occupational voice demands.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Trauma of the larynx and cervical masses				
OTOR 26.1	Describe the anatomical structures of the larynx and neck relevant to traumatic injuries and the potential impact on airway function and phonation. Identify the clinical features and mechanisms of laryngeal trauma (e.g., blunt trauma, penetrating injuries) and recognize red flag signs requiring urgent intervention.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 26.2	Differentiate between benign and malignant cervical masses based on history, physical examination, and initial diagnostic workup such as ultrasound or fine-needle aspiration (FNA). Develop an initial clinical approach to the management of laryngeal trauma,	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 26.3	Formulate a differential diagnosis for cervical swellings in different age groups, incorporating knowledge of congenital, inflammatory, and neoplastic causes. Collaborate effectively with surgical, radiological, and oncology teams in the evaluation and treatment planning for patients presenting with cervical masses or laryngeal trauma.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Trauma of t	he larynx and cervical masses			
OTOR 27.1	Describe the anatomical structures of the larynx and neck relevant to traumatic injuries and the potential impact on airway function and phonation. Identify the clinical features and mechanisms of laryngeal trauma (e.g., blunt trauma, penetrating injuries) and recognize red flag signs requiring urgent intervention.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 27.2	Differentiate between benign and malignant cervical masses based on history, physical examination, and initial diagnostic workup such as ultrasound or fine-needle aspiration (FNA).	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				And Video Assessment (CIVA)
OTOR 27.3	Develop an initial clinical approach to the management of laryngeal trauma, including airway protection, imaging modalities, and indications for surgical intervention.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 27.4	Formulate a differential diagnosis for cervical swellings in different age groups, incorporating knowledge of congenital, inflammatory, and neoplastic causes.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 27.5	Collaborate effectively with surgical, radiological, and oncology teams in the evaluation and treatment planning for patients presenting with cervical masses or laryngeal trauma.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
ENT emergencies				
OTOR 28.1	Recognize the signs and symptoms of common ENT emergencies such as epistaxis, airway obstruction, peritonsillar abscess, foreign body aspiration, and sudden sensorineural hearing loss.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
OTOR 28.2	Distinguish between life- threatening and non-life- threatening ENT conditions using clinical assessment and diagnostic tools to prioritize management.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 28.3	Apply appropriate first-line emergency interventions, including airway stabilization, nasal packing, or abscess drainage, based on current clinical guidelines.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 28.4	Integrate decision-making skills in emergency scenarios to determine when to escalate care or refer to specialized ENT or surgical services.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 28.5	Demonstrate confidence and accuracy in initiating basic life support (BLS) and managing airway compromise in ENT-related trauma or obstruction cases.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
Infection in	Infection in ENT					
OTOR 29.1	Identify common bacterial, viral, and fungal infections affecting the ear, nose, and throat, including otitis media,	K	Large group lectures	multiple choice questions (MCQ) & Short Answer		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	rhinosinusitis, and pharyngitis.			Questions & Clinical Image And Video Assessment (CIVA)
OTOR 29.2	Differentiate between acute and chronic infections, understanding their pathophysiology and clinical manifestations, to inform diagnosis and treatment.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 29.3	Apply appropriate diagnostic tests, such as culture, PCR, or imaging, to confirm the presence of infection and determine the causative agent.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 29.4	Evaluate the treatment options for ENT infections, including antibiotic selection, supportive care, and non-pharmacological interventions, considering patient-specific factors.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 29.5	Demonstrate the ability to recognize complications of ENT infections, such as abscess formation or sepsis, and escalate care when necessary.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
				(CIVA)
Trauma in E	ENT	Number of	learning Object	ctives: (8)
OTOR 30.1	Identify the common causes of trauma in ENT, including blunt force, penetrating injuries, and thermal or chemical burns, and their effects on the ear, nose, and throat.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 30.2	Differentiate between types of trauma, such as nasal fractures, tympanic membrane perforation, and laryngeal injury, based on clinical examination and imaging findings.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 30.3	Assess the severity of ENT trauma, recognizing when immediate intervention is required, and applying appropriate first-aid measures (e.g., airway management, bleeding control).	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 30.4	Implement diagnostic tools, such as nasal endoscopy, CT scans, and hearing tests, to assess the extent of injury and formulate a treatment plan.	K/S	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 30.5	Evaluate treatment options for ENT trauma, including surgical and conservative interventions, and understand the potential complications, such as infection, scarring, and airway obstruction.	K	Large group lectures	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
Larynx Ex	kamination + Laryngeal Instruments	+ Laryngea	l Case	
OTOR 1.1	Identify the anatomical structures of the larynx, including vocal cords, epiglottis, and surrounding tissues, during a clinical examination of the larynx.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image and Video Assessment (CIVA)
OTOR 1.2	Perform a detailed laryngeal examination using essential laryngeal instruments (e.g., laryngoscope, rigid endoscope) to assess for abnormalities such as inflammation, lesions, and asymmetry.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 1.3	Demonstrate proficiency in the correct handling and use of laryngeal instruments during clinical assessments, ensuring safety and accuracy during the procedure.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 1.4	Analyze common clinical cases of laryngeal conditions such as hoarseness, dysphagia, or airway	K/S	Small group learning, Clinical	multiple choice questions (MCQ)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	obstruction, and correlate examination findings with possible diagnoses, including conditions like laryngitis, vocal cord paralysis, or laryngeal carcinoma.		session, Outpatient clinic & Skill lab	& Short Answer Questions & Clinical Image And Video Assessment (CIVA)
	Evaluate the need for further diagnostic procedures based on findings during the laryngeal examination, recommending appropriate follow-up tests or treatments, including imaging or biopsy when necessary.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Ear Exam	ination + Ear Instruments + Ear Cas	es		
OTOR 2.1	Identify the anatomical landmarks of the ear, including the outer ear, middle ear, and inner ear, during a comprehensive ear examination. Perform a thorough ear examination using otoscopic instruments to inspect for abnormalities such as ear infections, perforations, or foreign bodies, demonstrating correct technique and patient comfort.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 2.2	Demonstrate proficiency in using specialized ear instruments, such as the otoscope, tuning fork, and tympanometer, to assess hearing function and detect signs of conductive or sensorineural hearing loss.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 2.3	Analyze common clinical cases of ear conditions such as otitis media, ear trauma, or cerumen impaction, correlating physical examination findings with potential diagnoses.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 2.4	Develop a treatment and management plan based on ear examination findings, recommending appropriate interventions, such as ear cleaning, antibiotics, or referral for audiological testing.	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Nose Exam	mination + Nasal Instruments + Nas	al Cases		
OTOR 3.1	Perform a systematic anterior rhinoscopy using a nasal speculum and headlight to identify common nasal pathologies (e.g., septal deviation, polyps) in a clinical skills lab by the end of the session.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 3.2	Identify and correctly name at least five nasal examination instruments (e.g., Thudicum nasal speculum, nasal dressing forceps) during a practical demonstration with 100% accuracy. Demonstrate proper handling and sterilization techniques for nasal instruments during a practical lab within a 10-minute time limit.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 3.3	Interpret clinical findings from at least three nasal cases (e.g., allergic rhinitis, epistaxis, nasal trauma) and present differential diagnoses and management plans during a case-based discussion.	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 3.4	Assess patient history and perform a complete ENT examination including nasal inspection and palpation in a simulated patient encounter, scoring ≥85% on the departmental checklist.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Audiolog	y			
OTOR 4.1	By the end of the session, students will be able to describe the basic principles of audiology, including hearing tests, audiogram interpretation, and common auditory disorders, and demonstrate their understanding by interpreting an audiogram case study	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 4.2	Identify the different types of hearing loss (conductive, sensorineural, and mixed) and their clinical presentations.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
OTOR 4.3	Successfully differentiate between the types of hearing loss by analyzing case scenarios provided during the session.	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 4.4	The content is aligned with students' current level of knowledge and can be achieved through interactive case-based learning.	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions &Clinical Image And Video Assessment (CIVA)
ENT Eme	rgencies			
OTOR 5.1	Recognize and manage the most common ENT emergencies, such as foreign body aspiration, epistaxis (nosebleeds), and acute airway obstruction. By the end of the session, students will be able to list and describe the steps involved in the management of each emergency scenario and demonstrate their knowledge through case discussions.	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 5.2	This objective is achievable with the use of case studies, demonstrations, and structured guidelines that will be provided throughout the lecture. Understanding ENT emergencies is critical in clinical practice to ensure timely intervention and prevent complications.	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number OTOR 5.3	Learning Objective Students should be able to accurately identify and describe the management of these emergencies by the conclusion of the class, within the 2-hour session.	Domain K/S/A/C K	Teaching Learning Methods Small group learning, Clinical session, Outpatient clinic & Skill lab	Assessment Methods multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
Case Disc	eussion			
OTOR 6.1	Develop clinical reasoning by analyzing ENT cases involving common conditions students should be able to take a focused ENT history, suggest appropriate differential diagnoses, and outline an initial management plan for at least two case scenarios.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 6.2	Through interactive discussion, supervision, and guided clinical scenarios, students will practice applying theoretical knowledge in real-life clinical contexts.	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)
OTOR 6.3	Strengthening diagnostic and management skills in ENT is crucial for future clinical rotations and patient care responsibilities.	K	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods		
X-RAY						
OTOR 7.1	By the end of the session, students will be able to identify key radiological features of common ENT conditions such as sinusitis, nasal bone fractures, mastoiditis, and deviated nasal septum, and correlate them with clinical presentations to aid diagnosis and management.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 7.2	By the end of this session, students will be able to analyze ENT-related X-ray images, distinguish between normal and pathological findings, and apply this knowledge in forming accurate clinical impressions for cases involving trauma, infections, or structural abnormalities.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
Slide show						
OTOR 8.1	students will be able to identify and summarize key clinical features, diagnostic approaches, and management plans for the most prevalent ENT diseases (such as otitis media, allergic rhinitis, sinusitis, tonsillitis, and nasal polyps) through analysis of visual slide presentations, and demonstrate their understanding by participating in a case-based discussion.	K/S	Small group learning, Clinical session, Outpatient clinic & Skill lab	multiple choice questions (MCQ) & Short Answer Questions & Clinical Image And Video Assessment (CIVA)		
OTOR 8.2	Differentiate between similar ENT conditions shown in slide images (e.g., allergic vs. infectious rhinitis) using clinical reasoning within 5 minutes per	K	Small group learning, Clinical session, Outpatient	multiple choice questions (MCQ) & Short Answer		

Number	Learning Objective	Domain K/S/A/C	Teaching Learning Methods	Assessment Methods
	case in a timed activity. Summarize key learning points from each ENT case slide including likely diagnosis, investigation, and basic management steps in a written report submitted by the end of the session.		clinic & Skill lab	Questions & Clinical Image And Video Assessment (CIVA)