I. Objectives of 351 Surgical Course

General Objectives:

i. Students who successfully complete the course are expected to be able to demonstrate the clinical skills and methods required to clinically define common surgical diseases.

ii. Students will have the ability to adopt a problem solving approach to common surgical diseases.

Specific Objectives:

At the end of the course students will be able to

i. Perform, record, present, and discuss in detail skills of history taking of common surgical diseases.

ii. Demonstrate knowledge of the symptoms and signs of common surgical diseases.

iii. Demonstrate appropriate skills to conduct comprehensive clinical examination of surgical patients.

iv. Demonstrate the appropriate ways to identify physical signs of common surgical diseases.
v. Formulate a reasonable differential diagnosis of surgical problems based on history and physical examination.
vi. Demonstrate a basic knowledge of common and urgent surgical problems.

vii. Adopt self learning techniques in particular with the use of the teaching laboratory aids.

Surgery Course 351

Department of Surgery

Course Outline

Page 2

II. Course content:

**General Guidelines:**

- the course contain a theoretical and a clinical part, that should work in harmony toward the set objectives rather than two separate courses.
- the course will be clinically oriented in its two parts.
- the theoretical part consist of 2 lectures per week, the students will be divided into three groups – two male and one female, each group will have a separate schedule, according to the college regulations.
- the clinical part consist of 2 clinical sessions per week.
- the course is composed of 8 credits hours in the medical school curriculum.
Clinical Sessions:

- The clinical sessions is the main part of the course, where students will learn in it the principles of history taking, clinical examination and problem solving approach for the common surgical diseases.

- Students will be divided into sub-groups, with an average of 10 students in each group.

- The clinical sessions will be composed of:
  - bed-side teaching sessions.
  - clinical skill laboratory sessions.
  - surgical clinic sessions.
  - surgical emergency sessions.

- All the 4 different clinical allocations will serve the main objectives of the course.

- Detailed distribution of students will be arranged accordingly.

Lectures:
Theoretical lectures will serve to give more explanation of the clinical practice in a problem based approach.

The objective of each lecture (syllabus) will be clearly identified (see appendix I).

The suggested table of lectures as listed below:

**PRINCIPLES OF SURGERY**

<table>
<thead>
<tr>
<th></th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Introduction to mechanisms of trauma and treatment</td>
</tr>
<tr>
<td>2</td>
<td>Specific organ trauma</td>
</tr>
<tr>
<td>3</td>
<td>Sterilization and operation room set-up</td>
</tr>
<tr>
<td>4</td>
<td>History of surgery</td>
</tr>
<tr>
<td>5</td>
<td>Surgical Infections and antibiotics</td>
</tr>
<tr>
<td>6</td>
<td>Wounds and wound healing</td>
</tr>
<tr>
<td>7</td>
<td>I.V. Fluids and acid base disorder</td>
</tr>
<tr>
<td>8</td>
<td>Blood products and transfusion</td>
</tr>
<tr>
<td>9</td>
<td>Shock and metabolic response to surgery</td>
</tr>
<tr>
<td>10</td>
<td>Injuries due to burn</td>
</tr>
<tr>
<td>11</td>
<td>Nutrition of the surgical patient</td>
</tr>
<tr>
<td>12</td>
<td>General complications of surgery</td>
</tr>
<tr>
<td>13</td>
<td>Principles of surgical oncology</td>
</tr>
</tbody>
</table>

**NEUROSURGERY**

<table>
<thead>
<tr>
<th></th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td>Presentation and management of raised intracranial pressure (intracranial tumours, infection &amp; hemorrhage)</td>
</tr>
<tr>
<td>15</td>
<td>Common congenital neurosurgical diseases</td>
</tr>
</tbody>
</table>

**VASCULAR**

<table>
<thead>
<tr>
<th></th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>16</td>
<td>Venous disorders/lymphatic disorders (Compartment Syndrome)</td>
</tr>
<tr>
<td>17</td>
<td>Management of atherosclerotic disease</td>
</tr>
<tr>
<td>Page</td>
<td>Section</td>
</tr>
<tr>
<td>------</td>
<td>---------------------------------------------</td>
</tr>
<tr>
<td>18</td>
<td>Vascular investigations</td>
</tr>
<tr>
<td></td>
<td><strong>UROLOGY</strong></td>
</tr>
<tr>
<td>19</td>
<td>Presentation of the common urinary tract disorder</td>
</tr>
<tr>
<td>20</td>
<td>Emergency and urology</td>
</tr>
<tr>
<td>21</td>
<td>Common urogenital tumours including adrenals</td>
</tr>
<tr>
<td>22</td>
<td>Presentation &amp; management of common pediatric urinary tract anomalies &amp; vesicoureteric reflux</td>
</tr>
<tr>
<td></td>
<td><strong>GEN. SURGERY</strong></td>
</tr>
<tr>
<td>23</td>
<td>Differential diagnosis of abdominal pain (acute &amp; chronic)</td>
</tr>
<tr>
<td>24</td>
<td>Presentation &amp; management of biliary obstruction and biliary stones</td>
</tr>
<tr>
<td>25</td>
<td>Differential diagnosis of abdominal masses &amp; abdominal hernias</td>
</tr>
<tr>
<td>26</td>
<td>Presentation &amp; management of common surgical diseases of the stomach and duodenum</td>
</tr>
<tr>
<td>27</td>
<td>Presentation &amp; management of common surgical diseases of the small and large bowel (include appendix and rectum)</td>
</tr>
<tr>
<td>28</td>
<td>Presentation &amp; management of common neck swellings and the thyroid gland &amp; parathyroid glands</td>
</tr>
<tr>
<td>29</td>
<td>Presentation &amp; management of portal hypertension &amp; common surgical diseases of the liver</td>
</tr>
<tr>
<td>30</td>
<td>Presentations &amp; management of common breast diseases</td>
</tr>
<tr>
<td>31</td>
<td>Pancreatic problem</td>
</tr>
<tr>
<td>32</td>
<td>Presentation &amp; management of common anorectal conditions</td>
</tr>
<tr>
<td>33</td>
<td>Superficial swelling (lumps &amp; pumps)</td>
</tr>
<tr>
<td></td>
<td><strong>PEDIATRIC</strong></td>
</tr>
<tr>
<td>34</td>
<td>Presentation &amp; management of common neonatal surgical emergencies</td>
</tr>
<tr>
<td>35</td>
<td>Presentation &amp; management of acute abdomen in children</td>
</tr>
<tr>
<td>36</td>
<td>Presentation &amp; management of pediatric inguinoscrotal conditions and acute scrotum</td>
</tr>
</tbody>
</table>
PLASTIC

37  Presentation & management of common peripheral nerve injuries
38  Presentation & management of common congenital plastic surgery & hand diseases
39  Presentation & management of common skin & soft tissue tumours

THORACIC

40  Presentation & management of common esophageal diseases
41  Presentation & management of common thoracic diseases

CARDIAC

42  Presentation & management of common cardiac surgical diseases

III. Assessment of Students:

A. Theory:

- Each lecturer will provide 5 single answer and 5 x 5 true and false questions for each lecture yearly, with a difficulty grade for each questions:
  a. Difficult  b. Average  c. Easy
• The questions will be reviewed by the course committee for any possible improvement.

• Questions which do not meet the set objectives of the lecture will not be approved and the lecturer will be asked to provide another set of questions.

• After approval of the questions by the committee they will be included in the exam bank.

• There will be 2 continuous exam and one final exam.

• Each continuous assessment exam will be composed of 60 single answer questions and (20x5) True and False Questions.

• Final examination will be composed of 100 single answer and (40x5) true and false questions.
  o 50% of the questions should be (grade B=average)
  o 25% (grade A=difficult) and 25% (grade C=easy)

• After each exam the questions paper will be analyzed in one of the programmes designed for that, and the question bank will be reviewed accordingly.

B. Clinical

• The final clinical exam will be an OSCE Exam where different stations will be conducted at the end of the year, different objectively made stations to test different clinical skills will be constructed.

C. Distribution of Marks:

Role of the staff members:

A. Residents and Registrars:
Although teaching skills is part of the training for the residents, the 351 course teaching need experienced teachers to know the needed information for the student level, accordingly, residents and registrars are not going to be involved in the teaching of 351 surgical course and session can't be handed over to them.

B. Senior Registrars:

1) They will be involved in the clinical teaching according to the need per speciality
2) They will help in invigilation of the theoretical examinations
3) They will not be involved in the clinical examinations
4) They will not be asked to give theoretical lectures

C. Non-teaching staff consultants:

1. They will be always involved in the clinical teaching
2. They will be asked to conduct one clinical session per week
3. They might be asked to help in the clinical examinations according to the need.
4. They will help in invigilation of the theoretical examinations.

D. Clinical Tutors (Clinical Teaching Staff):
1) They will conduct one clinical session per week
2) They might be asked to give some lectures
3) They will be involved in the clinical examination

**E. Teaching Staff:**

1. They will conduct one clinical session per week
2. They will give an average of 3-9 lectures per year
1. They will conduct the clinical examination
2. They will prepare the multiple choice questions bank
3. They will invigilate in the theory examinations

**F. 351 Course Committee:**

1. Organization of the course with a specific objective for each member
2. Upgrading the course
3. Identifying points of difficulties and solve them
4. 351 Course Committee are:
   a. Dr. Mohammed Al-Naami, Chairman
   b. Dr. Mohammed Al-Akeely
   c. Dr. Gamal Khairy
   d. Dr. Ahmad Zubaidi
e. Dr. Omer El-Farouk
f. Dr. Sherif El-Watidy
g. Dr. Mohammad Al-Omar
h. Dr. Saquib Mallick
i. Dr. Abdulrahman Al-Zahem
j. Dr. Ayman Al-Jazaer

G. 351 Course Organiser:

1. Chair the 351 course committee
2. Be responsible for the course organization. The day to day teaching will be the responsibility of each teaching staff according to the schedule.
3. Write an Annual Report to the Head of the Department about the progress of the course throughout the year.

IV. Assessment of the course:

1. The course will be assessed by the teaching staff, organizing committee and the students.

2. A questionnaire will be designed for all those concerned to identify all possible points for improvement.

3. An annual assessment of the course will be made.