GENERAL GUIDELINES

* Avoid classification as much as possible.
* Minimize the no. of lectures.
* Supplement with tutorials.
* Tutorial has to be structured and informative ***“NOT LECTURE”*** with many example and clinical scenarios.

# LECTURES

**1st and 2nd week**

1. Principles of Fractures – for the first week.

(Mech. of Injuries, Bone repair, Soft tissue repair, types of fractures, Guidelines of Fracture and soft tissue management).

1. Soft Tissues Injuries – which includes:

Pathophysiology of:

* 1. Peripheral Nerve Inj.
  2. Mechanical Knee Disorder

1. Limbs Fractures Dislocation (2 hours)

“Common Fractures and Dislocations”

* 1. Dislocations
  2. Supracondylar Fracture in Children
  3. Proximal Femoral Fracture
  4. Articular Fracture
  5. Hip dislocation/Pelvic Inj.

It has to be general lectures covering:

1. Mechanics of Injuries
2. Clinical picture of a fracture
3. Complications of Fractures
4. First Aid of a Fracture (Principles)
5. Outline of Treatment (Cast, MUA, Fixation)
6. Mechanical Disorder of Spine and Spinal Injuries (2 hours)

**3rd Week**

“Principles of Orthopaedics”

Two days lecture

**Aim to cover**:

1. Terminology (Varu/valgus, malrotation non-union/mal-union/FFD etc.)
2. Aetiology & D/D (thinking process and organization of thoughts when facing clinical problem)
   1. Congenital
   2. Neurological
   3. Metabolic
   4. Infection
   5. Tumours
3. Presentation:
   1. Pain (types, nature, etc.)
   2. Swelling
   3. Limp
   4. Deformity
   5. Loss of function
4. Investigations

(ESR, CRP, CBC, X-ray, Bone Scan, Nerve Conduction, Biopsies, Arthroscopy, etc.)

## Treatment

1. In general (Conservative vs. Operative)
2. Pain control (e.g. drugs, splints, assurance, etc.)
3. Reconstruction
4. Deformity correction
5. Orthotics/Prosthetics
6. P.O.P.
7. Traction

**4th week**

1. C.D.H. and C.T.E.V. (2 hours)
2. Paralytic Disorders – (Polio and C.P.) (2 hours)
3. Osteoarthrosis which covers Diff. Diagnosis of inflammatory joints dis.
4. Metabolic Bone Diseases (Rickets, Osteomalacia, hyperparathyroidism, osteoporosis)
5. Bone Tumours
   1. General Principles
   2. Benign tumours (bone cysts, osteochondroma)
   3. Malignant tumours (Giant cell – intermediate), osteosarcoma, Ewings, Secondaries)

**TUTORIALS**

**EXAMINATIONS**

**1st & 2nd week**

1. Knee
2. Hip
3. Upper Limbs
4. Foot and Ankle
5. Back and Neuro

**3rd week**

1. P.O.P.
2. Traction
3. Instruments ( IMN, K-wire, Screws, Plates (including DHS, Condylar, etc.), Prosthesis, External fixators)
4. Orthotics and Prosthetics
5. Investigations and X-ray
6. Physiotherapy

**4th and 5th week**

1. Bone and Joint Infection (3-4 hours)
2. Chronic Specific Bone Infection
3. Common Hip Disorders
4. Common Knee Disorders
5. Common Back Disorders

**EXAMINATION**

1. MCQs T/F with negative marking.
2. Increase the number of MCQs (Most appropriate answers).
3. Limit short notes to the final written exam and it has to be clinical problem solving types.

### FOR THE MCQs BANK

1. For each departmental meeting, each member has to submit two MCQ questions to update the MCQ bank.

## TO CONDUCT EXAMS

1. Formation of written exam committee of two for one academic year in rotation. Suggest *Dr. Zamzam* and *Dr. Khoshhal* for next year. This committee will be responsible for preparation of the written exams for all cycles and will share and help in preparation for the second continuous assessment exam.
2. The committee is not responsible for the conduction of the written exam, and it is the responsibility of the course organizer to do so and perform the correction of the exam and finalization of the result.
3. The committee will be exempted from being course organizers for that year.