



NARS, outline of the New M.B. & B.Ch. Program by Integrated-Curriculum



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Anticipations



Learning Goal/Objectives

Learning Goal

Develop participants' knowledge and skills to enable them to recognize **M.B.& B.CH. Learning Program** and **Courses** to achieve consistency between:

- **Intended Learning Outcomes (I.L.Os.)**
- **Scientific content.**
- **Teaching and learning methods.**
- **Students Evaluation Methods.**





Learning Objectives

Learning Objectives

By the end of this activity, students should be able to:

1. Explain the following concepts and terms (National Academic Reference Standards - Graduate attributes – Output-Based Learning – Learning Program – Courses- Curriculum ... etc).
2. Describes the National Academic Reference Standards Standard (NARS) issued by the National Authority for Quality Assurance and Accreditation of Education (NAQAAE).
3. Define the meaning of learning outcomes (I.L.Os.)
4. Identify the relationship between NARS and (ILOs).

Learning Objectives (Continue.)

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3. Define the meaning of learning outcomes (I.L.Os.)
4. Identify the relationship between NARS and (ILOs).

Why to change?

- Adopting and applying the new academic standards (**NARS**) for the bachelor's degree and complying with **accreditation standards**, as determined by the **World Federation for Medical Education (WFME)**
- **WFME** will not recognize any college and add it to the new World Wide Web-based "**Health Academic Institution Database**" Unless the college is accredited by the national body responsible for **accreditation** of medical colleges (**NAQAAE**).

Why to change (continue.)?

Updating the educational program / courses for the bachelor degree:

To be matching with

Community needs

NARS

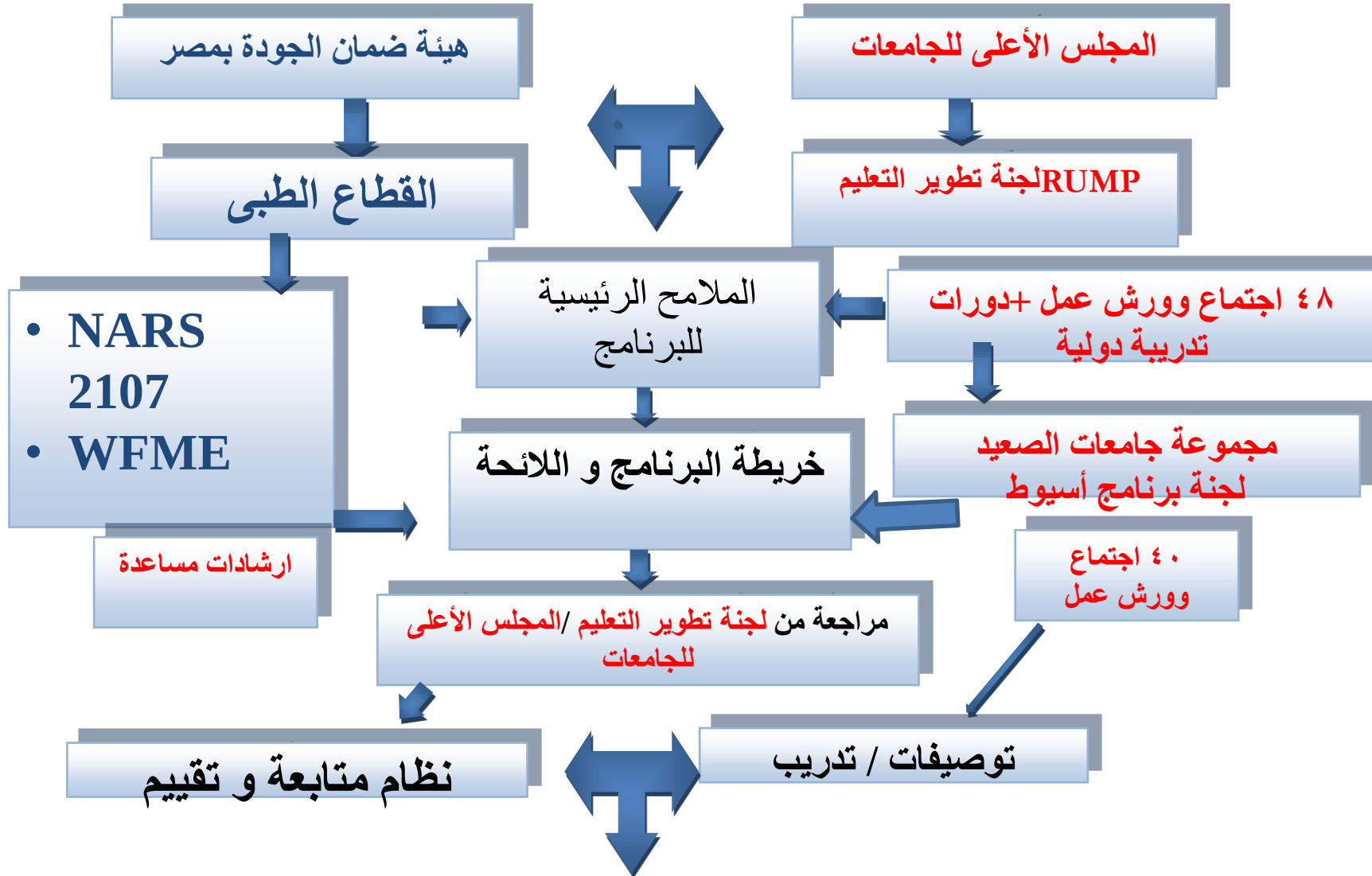
Modern Trends

Medical Education is changing:

- **Medical knowledge** has increased exponentially.
- **Information technology** has distinct role.
- **Diseases' Pattern** is different.
- **Healthcare delivery** system has changed.
- Increasing demand for **social accountability**.
- **Patients expectations** are different.
- **Student body** is different than used to be.
- **Factual knowledge** should be reduced to minimum
- More concentration on **skills** especially clinical, communication
- **How to learn** more than what to learn
- How to **retrieve** and **appraise** information than to recall it

Curriculum Development

How this curriculum was developed



Philosophy of the new curriculum: Shift to
SPICES Model
of Medical curriculum

From:

To:

Teacher Centred

Student Centred

Didactic/ Information
Gathering

Problem Based

Discipline Based

Integrated

Hospital Based

**Community/common
cases/ Based**

Structured

**Electives/student
selected courses**

Apprenticeship/
Opportunistic

**Systematic
development of
competencies**

Harden, 1984: Medical Education

From:

To:

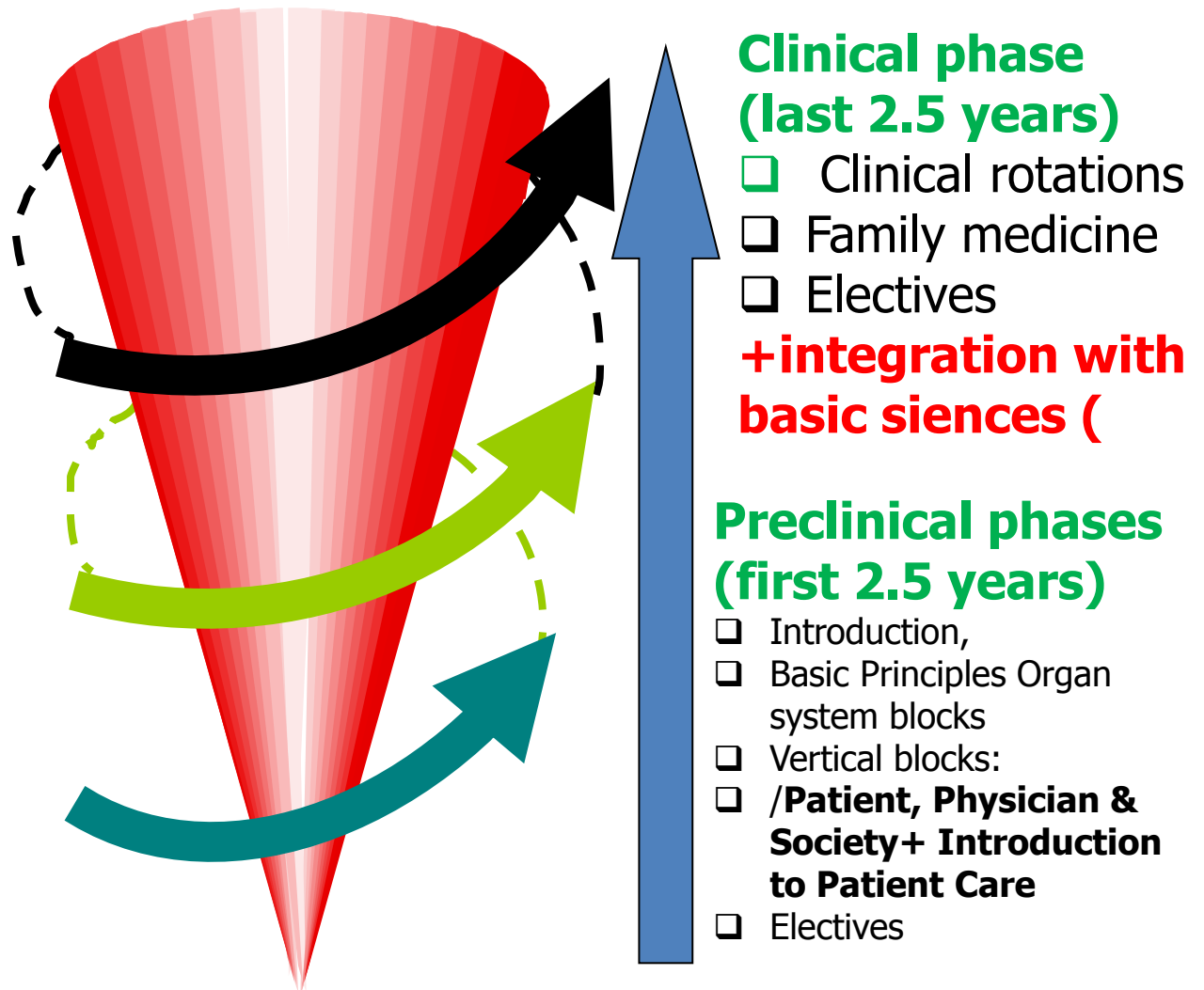
Outcome-Based Learning:

what a student should **be able to do** when he / she finishes the **learning program**

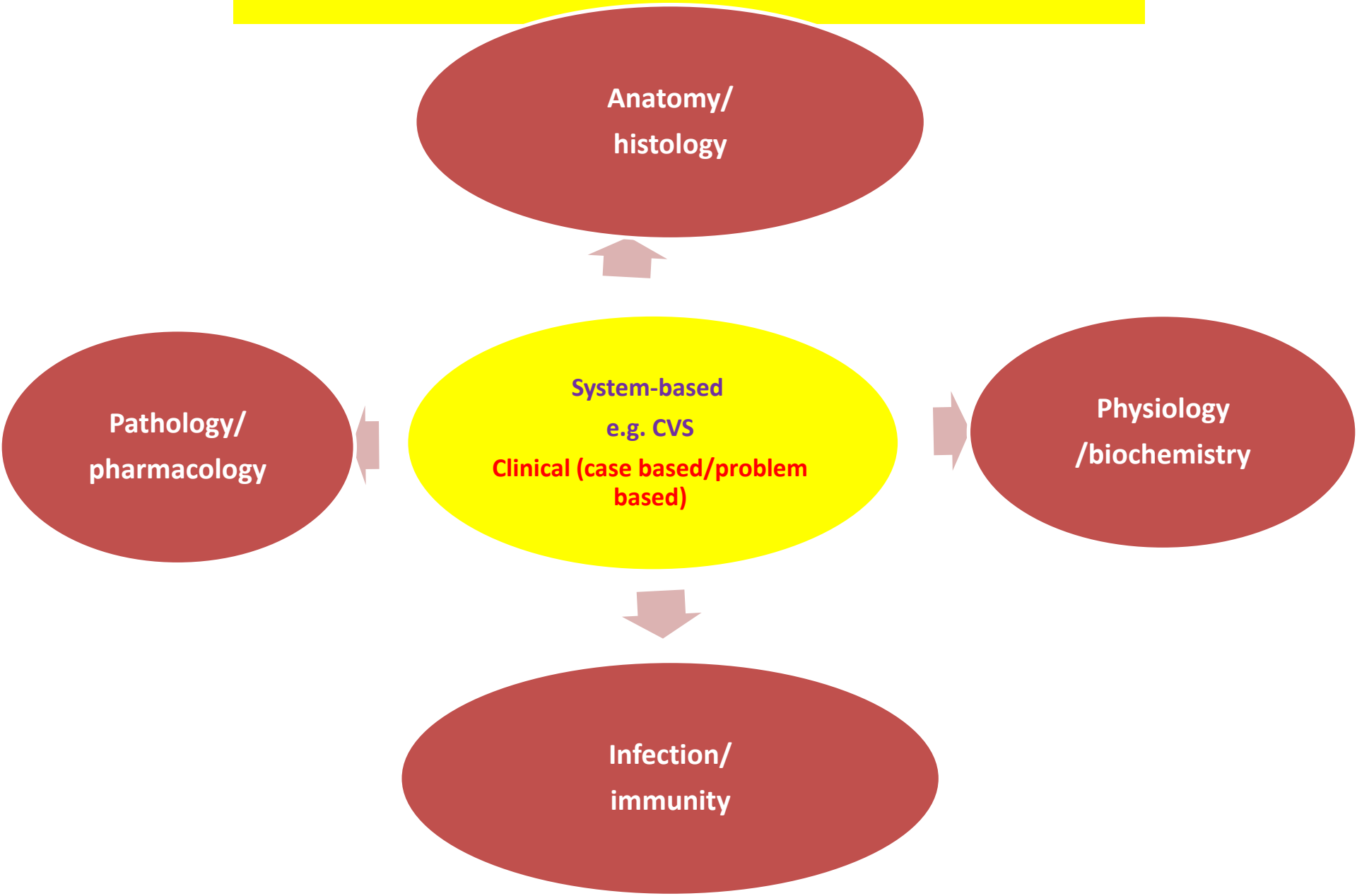
Competency-based learning:

focuses on the **student's demonstration of ILOs** as central to the learning process. It is concerned chiefly with **a student's progression** through curriculum at their own pace, depth, etc.

our curriculum is
spiral curriculum
five years followed by two foundation years



System-based blocks



National Academic Reference Standards (NARS 2017):
Knowledge/ skills/ attitudes
to be achieved from this curriculum

- **consists of 6 competency areas,**
- I- The graduate as **a health care provider.**
- II-The graduate as **a health promoter.**
- III- The graduate as **a professional.**
- IV- The graduate as **a scholar and scientist.**
- V- The graduate as **a member of the health team and a part of the health care system.**
- VI- The graduate as **a lifelong learner and researcher**

National Academic Reference Standards (NARS 2017):
Knowledge/ skills/ attitudes
to be achieved from this curriculum

a health care provider.	a health promoter	a professional	a scholar and scientist	a member of the health team and a part of the health care system.	a lifelong learner and researcher
provide quality, safe, patient-centered care, applying integrated knowledge and clinical skills, and adhering to professional values	Improves health of individuals and communities prevent diseases, reduce deaths and promote quality life style	adhere to the professional and ethical codes, standards of practice, and laws governing practice.	build his clinical practice on a base of knowledge of scientific principles and basic medical and social sciences,	work and collaborate effectively with physicians and other colleagues as a part of health care system,	Deal with practice uncertainty and knowledge gaps and reflect on his own performance,

I: The graduate as a health care provider

- 1.1. Take and record a structured, patient centered history.**
- 1.2. Adopt an empathic and holistic approach to the patients and their problems.**
- 1.3. Assess the mental state of the patient.**
- 1.4. Perform appropriately timed full physical examination 1of patients appropriate to the age, gender, and clinical presentation of the patient while being culturally sensitive.**
- 1.5. Prioritize issues to be addressed in a patient encounter.**
- 1.6. Select the appropriate investigations and interpret their results taking into consideration cost/ effectiveness factors.**
- 1.7. Recognize and respond to the complexity, uncertainty, and ambiguity inherent in medical practice.**
- 1.8. Apply knowledge of the clinical and biomedical sciences relevant to the clinical problem at hand.**
- 1.9. Retrieve, analyze, and evaluate relevant and current data from literature, using information technologies and library resources, in order to help solve a clinical problem based on evidence (EBM).**
- 1.10. Integrate the results of history, physical and laboratory test findings into a meaningful diagnostic formulation.**
- 1.11. Perform diagnostic and intervention procedures² in a skillful and safe manner, adapting to unanticipated findings or changing clinical circumstances.**
- 1.12. Adopt strategies and apply measures that promote patient safety.**
- 1.13. Establish patient-centered management plans in partnership with the patient, his/her family and other health professionals as appropriate, using Evidence Based Medicine in management decisions.**
- 1.14. Respect patients' rights and involve them and /or their families/carers in management decisions.**
- 1.15. Provide the appropriate care in cases of emergency, including cardio-pulmonary resuscitation, immediate life support measures and basic first aid procedures.**
- 1.16. Apply the appropriate pharmacological and nonpharmacological approaches to alleviate pain and provide palliative care for seriously ill people, aiming to relieve their suffering and improve their quality of life.**
- 1.17. Contribute to the care of patients and their families at the end of life, including management of symptoms, practical issues of law and certification**

The graduate as a health promoter

- 2.1 Identify the basic determinants of health and principles of health improvement.**
- 2.2 Recognize the economic, psychological, social, and cultural factors that interfere with wellbeing.**
- 2.3 Discuss the role of nutrition and physical activity in health.**
- 2.4 Identify the major health risks in his/her community, including demographic, occupational and environmental risks; endemic diseases, and prevalent chronic diseases.**
- 2.5 Describe the principles of disease prevention, and empower communities, specific groups or individuals by raising their awareness and building their capacity.**
- 2.6 Recognize the epidemiology of common diseases within his/her community, and apply the systematic approaches useful in reducing the incidence and prevalence of those diseases.**
- 2.7 Provide care for specific groups including pregnant women, newborns and infants, adolescents and the elderly.**
- 2.8 Identify vulnerable individuals that may be suffering from abuse or neglect and take the proper actions to safeguard their welfare.**
- 2.9 Adopt suitable measures for infection control.**

The graduate as a professional

- **3.1. Exhibit appropriate professional behaviors and relationships in all aspects of practice, demonstrating honesty, integrity, commitment, compassion, and respect.**
- **3.2. Adhere to the professional standards and laws governing the practice, and abide by the national code of ethics issued by the Egyptian Medical Syndicate.**
- **3.3. Respect the different cultural beliefs and values in the community they serve.**
- **3.4. Treat all patients equally, and avoid stigmatizing any category regardless of their social, cultural, ethnic backgrounds, or their disabilities.**
- **3.5. Ensure confidentiality and privacy of patients' information.**
- **3.6. Recognize basics of medico-legal aspects of practice, malpractice and avoid common medical errors.**
- **3.7. Recognize and manage conflicts of interest.**
- **3.8. Refer patients to appropriate health facility at the appropriate stage.**
- **3.9. Identify and report any unprofessional and unethical behaviors or physical or mental conditions related to himself, colleagues or any other person that might jeopardize patients' safety.**

The graduate as a scholar and scientist

- **4.1 Describe the normal structure of the body and its major organ systems and explain their functions.**
- **4.2 Explain the molecular, biochemical, and cellular mechanisms that are important in maintaining the body's homeostasis.**
- **4.3 Recognize and describe main developmental changes in humans and the effect of growth, development and aging on the individual and his family.**
- **4.4 Explain normal human behavior and apply theoretical frameworks of psychology to interpret the varied responses of individuals, groups and societies to disease.**
- **4.5 Identify various causes (genetic, developmental, metabolic, toxic, microbiologic, autoimmune, neoplastic, degenerative, and traumatic) of illness/disease and explain the ways in which they operate on the body (pathogenesis).**
- **4.6 Describe altered structure and function of the body and its major organ systems that are seen in various diseases and conditions.**
- **4.7 Describe drug actions: therapeutics and pharmacokinetics; side effects and interactions, including multiple treatments, long term conditions and non-prescribed medication; and effects on the population.**
- **4.8 Demonstrate basic sciences specific practical skills and procedures relevant to future practice, recognizing their scientific basis, and interpret common diagnostic modalities, including: imaging, electrocardiograms, laboratory assays, pathologic studies, and functional assessment tests.**

The graduate as a member of the health team and a part of the health care system

- **5.1 Recognize the important role played by other health care professions in patients' management.**
- **5.2 Respect colleagues and other health care professionals and work cooperatively with them, negotiating overlapping and shared responsibilities and engaging in shared decision-making for effective patient management.**
- **5.3 Implement strategies to promote understanding, manage differences, and resolve conflicts in a manner that supports collaborative work.**
- **5.4 Apply leadership skills to enhance team functioning, the learning environment, and/or the health care delivery system.**
- **5.5 Communicate effectively using a written health record, electronic medical record, or other digital technology.**
- **5.6 Evaluate his/her work and that of others using constructive feedback.**
- **5.7 Recognize own personal and professional limits and seek help from colleagues and supervisors when necessary.**
- **5.8 Apply fundamental knowledge of health economics to ensure the efficiency and effectiveness of the health care system.**
- **5.9 Use health informatics to improve the quality of patient care.**
- **5.10 Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements.**
- **5.11 Improve the health service provision by applying a process of continuous quality improvement.**
- **5.12 Demonstrate accountability to patients, society, and the profession.**

The graduate as a lifelong learner and researcher

- **6.1 Regularly reflect on and assess his/her performance using various performance indicators and information sources.**
- **6.2 Develop, implement, monitor, and revise a personal learning plan to enhance professional practice**
- **6.3 Identify opportunities and use various resources for learning.**
- **6.4 Engage in inter-professional activities and collaborative learning to continuously improve personal practice and contribute to collective improvements in practice.**
- **6.5 Recognize practice uncertainty and knowledge gaps in clinical and other professional encounters and generate focused questions that address them.**
- **6.6 Effectively manage learning time and resources and set priorities.**
- **6.7 Demonstrate an understanding of the scientific principles of research including its ethical aspects and scholarly inquiry and Contribute to the work of a research study.**
- **6.8 Critically appraise research studies and scientific papers in terms of integrity, reliability, and applicability.**
- **6.9 Analyze and use numerical data including the use of basic statistical methods.**
- **6.10 Summarize and present to professional and lay audiences the findings of relevant research and scholarly inquiry**

Fundamental physical examination skills to be achieved from this curriculum

- **Measuring body temperature**
- **.Measuring pulse rate, respiratory rate and blood pressure**
- **Anthropometric Measurements and assessment of nutritional status**
- **Chest examination**
- **Heart examination**
- **Abdominal examination**
- **Locomotor system examination**
- **Nervous system examination**
- **Examination of the jugular veins**
- **Ear examination**
- **Throat examination**
- **External Eye and fundus examination**
- **Breast examination**
- **Examination of the thyroid**
- **Lymph nodes examination**
- **PV examination**
- **Assessment of uterine fundus level in pregnancy**
- **PR examination**
- **Examining lumps**

Basic diagnostic and intervention procedures to be achieved from this curriculum

- Performing venipuncture and collect blood samples.
- Inserting a cannula into peripheral veins.
- Establishing peripheral intravenous access and setting up an infusion; use of infusion devices
- Giving intramuscular, subcutaneous, intradermal and intravenous injections.
- Suturing of superficial wounds.
- Performing cardiopulmonary resuscitation and basic life-support
- Performing and interpreting basic bedside laboratory tests
- Performing and interpreting ECG
- Managing an electrocardiograph (ECG) monitor
- Using a nebulizer for administration of inhalation therapy
- Performing male and female bladder catheterization
- Administering basic oxygen therapy
- Wound care and basic wound dressing
- Managing Blood transfusion
- Inserting a nasogastric tube.
- Administering local anesthetics
- Performing the procedure of normal labor
- Taking swabs for different diagnostic purposes

Practical skills to be achieved from this curriculum

- Dissecting the different parts and organs of the human body
- Performing Biochemical and microscopic urine and stool analysis
- Performing basic biochemical blood tests
- Preparing urine and stool specimen for microscopic examination
- Identification of parasites and parasitic ova under the microscope
- Identification of different normal tissue sections under the microscope
- Identification of different pathological alterations in tissue sections under the microscope
- Identification of gross pathological alterations in different body organ specimens
- Determining blood group and performing cross matching and computability tests
- Preparing and examining blood films and assessing hemoglobin value in a blood sample
- Obtaining and handling a blood sample for culture
- Performing and interpreting basic respiratory function tests.
- Identifying different bacteria and fungi under the microscope
- Differentiating different bacterial growth in culture

Curriculum Map

Why Credit points are not credit hours?

Credit Points

Measure and record the student's **overall achievements** in order to acquire the required information and skills, whether in **classrooms, laboratories, workshops, conferences, exams or training** in skills during work or field training, or patient-managements; Whether **in the presence of the teacher or self-directed activities**. It is more suitable for Medicine.

Credit Hours

Measure and record **only student attendance within classes, laboratories, workshops and conferences in the presence of the teacher only.**

Rules for the bylaws

- **Each credit point** = 30 hours “maximum” student activity
- **Student activity includes:**
 - **Contact Hours with the teacher** (theoretical - interactive - practical - clinical): 50%
 - **Self-directed learning activities:** 40%
 - **Attendance in the formative examinations:** 10%
- **Example**: A course with 2 points = 60 hours; Divided into:
 - * **One point (30 hours)**: for lectures, small groups' discussion, & practical / clinical.
 - * **0.8 points (24 hours)**: self-directed learning (presentation - electronic interaction - research preparation ...)
 - * **0.2 points (6 hours)**: formative examinations.

Students Evaluation

- It is an integral part of the learning activities.
- The design of student assessment should be based on the ILOs of the learning program
- Realistic and reliable assessment tools must be used.
- The assessment of the students should be based on the integrated evaluation, not the assessment of the subjects,
- It should be based on **blue-print** of each Block, taking into consideration the **NARS** evaluation rules

Students Evaluation

- Students are not allowed to enter the examinations unless they meet the attendance of **75% of the hrs.**
- The faculty must adopt the **Formative Assessment** System, which does not include any grades, and the coordinator is obliged to give feedback to the student, and its attendance is a requirement for the entry of the **Summative Assessment**. The student uses the **(Student Portfolio)** For follow-up.

Students Evaluation

- The **Summative Assessment** includes the **continuous periodic Evaluation**, and **final examinations**.
- The continuous periodic Evaluation : is done at the end of the block or the unit of study or semester and the student is tested for 30% of the total mark.

Students Evaluation

-Final Examinations:

***Date**: Done at: The end of the semester in the first three years & The end of the academic year in the last two years

***Components**: The final exam consists of 70% divided into:

= Integrated editorial test: 40% «minimum».

= Practical / Clinical test: 30%.

Students Evaluation

Written Exams: Subjective questions e.g. multiple choice, extended pairing questions, or scenario questions based on clinical cases.

Practical Test: OPCE, OSPE and direct monitoring such as Mini Clinical Evaluation Exercise (Mini-CEX)

Students Evaluation

There is no role for

- Traditional Oral tests
- Clinical tests for short and long cases

Students Evaluation

For the student; In order to succeed ; should obtain:

- 60% of the final grades;
- 40% in written examination scores.

If a student fails: He is allowed to enter the summer round exam and his score of success is 60 %

If he fails in the summer round, he is entitled to a maximum score of 84.9% at the end of the 2nd school year.

Students Evaluation

Students are not transferred from one grade to another unless they succeed in all Blocks, educational units or clinical courses .

Students Evaluation

Calculation of grades :

G.P.A. = Number of credit points x 15 for
the first 5 semesters

G.P.A. = Number of credits x 20 for the last
5 semesters

**First year/ First semester: 15 weeks /30 points:
preclinical phase (introduction, principles blocks
and vertical "Patient, Physician & Society
(PPS)"themes)**

Block	points	days/week	learning activities		
			Contact hours/points	formative assessment/feedback	assignment and other home and self learning portfolio based evidence)
Principles of studying medicine	1	1 week	15hours 0.5 point		0.5 point
Principles of microscopic and Macroscopic tructures	12	7 weeks	150 6 points	0.5 point	5.5 points
Cell biology and function	12	7 weeks	150 6 points	0.5 point	5.5 points
Patient, Physician & Society: Introduction to Being a Physician Ethics, Law & Professionalism Behavioral Medicine	5	vertical:	65 2.5 Points	0.5 point	2 points

First year/Second semester: 16 weeks/30points: preclinical phase (introduction, principles blocks and vertical "Introduction to Patient Care" themes)

Block	points	days/week	learning activities		
			Contact hours/points	formative assessment/feedback	assignment and other home and self learning (portfolio based evidence)t
Infection and immunity	12.5	8 weeks	162 6.5 points	0.5point	5.5 points
Mechanisms and principles of diseases and therapy	12.5	8 weeks	162 hours 6.5 points	0.5point	5.5 points
Introduction to Patient Care Medical Interviewing Introduction to Physical Examination 1 Clinical Experiences 1	5	vertical:	65 2.5 points	0.5 point	2 points

**Second year/Third semester: 15 weeks/30
points/preclinical phase (organ system blocks and vertical
"Introduction to Patient Care" themes)**

Block	points	days/week	learning activities		
			Contact hours/points	formative assessment/feedback	assignments and other home and self learning (portfolio based evidence)
Cardiovascular system	8	5 weeks	100 4 points	0.25 point	3.75 point
GIT,	8	5 weeks	100 4 points	0.25 point	3.75 point
Skin & Musculoskeletal	8	5 weeks	100 4 points	0.25 point	3.75 point
Introduction to Patient Care Block Advanced Physical Examination 2 Clinical Experiences 2 Advanced Medical Interviewing Clinical Procedures	2	vertical:	30 1 point	0.25 point	0.75 point
Elective	4	Vertical	60 2 points	0.5 point	1.5 points

**Second year: Fourth semester: 17 weeks/30
points/preclinical phase (organ system blocks
and vertical "Introduction to Patient Care"
themes)**

Block	points	days/week	learning activities		
			contact hours/points	formative assessment/feedback	assignments and other home and self learning (portfolio based evidence)
Respiratory and renal systems	9.5	7 weeks	143 5 points	0.5 points	4 points
Hematology	5	3 weeks	75 2.5 points	0.25 points	2.25 points
Health & illness in the community	9.5	7 weeks	143 5 points	0.5 points	4 points
Introduction to Patient Care Block Advanced Physical Examination 2 Clinical Experiences 2 Advanced Medical Interviewing Clinical Procedures	2	vertical:	30 1 point	0.25 points	0.75 points
elective 2	4	vertical: 4 hours/week/semester	60 2 points	0.25 point	1.75 points

**Third year/ Fifth Semester: 16 weeks/30
points/preclinical phase (organ system blocks and
vertical "[Investigation and Discovery](#)" themes)**

Block	points	days/week	learning activities		
			Contact hours/points	formative assessment/feedback	assignments and other home and self learning (portfolio based evidence)
Neurosciences	12.5	8 weeks	162 6.5 points	0.5 point	5.5 points
Endocrinology, Reproduction & Developmental Biology	12.5	8 weeks	162 6.5 points	0.5 point	5.5 points
Evidence-Based Medicine - Fundamentals	2	vertical:	30 1 point	0.25 point	0.75 point
Investigation and Discovery/Scholar ly Project Epidemiology and data management	1.5	vertical:	22.5 0.75 Point	0.5 point 0.25 Point	1.5 points 0.50 Point
elective 3	1.5	vertical:	22.5 0.75 Point	0.5 point 0.25 Point	1.5 points 0.50 Point

Third year/ Sixth Semester: 18 weeks/33 points /clinical phase (clinical rotations and vertical "[Investigation and Discovery](#)" themes)

Block	points	days/week	learning activities		
			Contact hours/points	formative assessment/ feedback	assignments and other home and self learning (portfolio based evidence)
Medicine 1 Introduction to general medicine, Hematology, Endocrinology, Nephrology,	10	6weeks	135 4.5 points	0.5 point	4 points
Surgery I Wound Healing, bleeding, shock, blood transfusion, haemostasis, surgical infections, postoperative complications, abdominal trauma emergencies, surgical anuria, surgical nutrition (enteral and parenteral)Surgery of head and neck, lymphatic system (3 weeks) • Thyroid and Para thyroid, supra renal gland, abdominal walls and hernias, Breast. (4 weeks) • Oncology (principles) .(one week)	13	8 weeks	195 6.5 points	0.5 points	6 points
Forensic Medicine and toxicology	6	4 weeks	90 3 points	0.5 point	2.5 point
Investigation and Discovery/Scholarly Project Epidemiology and data management	2	vertical:	30 1 point	0.25 point	0.75 point
elective 4	2	vertical:	30 1 point	0.25 point	0.75 point

Three rotations to be as follows: 6 weeks for medicine 1, 6 weeks for surgery 1, 6 for weeks fronsic"4 weeks" and completion of surgery1 "2 weeks"

Fourth year: 35 weeks 65 points clinical phase (clinical rotations)

Block	points	days/week	learning activities		
			contact hours/points	formative assessment / feedback	assignments and other home and self Learning (portfolio based evidence)
Medicine II a. Liver–biliary system (2 weeks) b. Tropical medicine (2 weeks) c. Nutrition, GIT, (2 weeks) d. Rheumatology and clinical immunology (2 weeks)	15 (3.5tropical)	8 weeks#	195 6.5 points	0.5 points	6 points
Gynecology & Obstetrics	18	10 weeks	250 9 points	0.5 points	8 points
<i>Pediatrics.</i>	18	10 weeks	250 9 points	0.5 points	8 points
<i>Physichatry</i>	4	3 weeks*	75 2.5 points	0.2 5 point	2.25 points
<i>Surgery II</i> Anesthesia, pain management ,intensive care, fluids and electrolytes and body response to trauma.	4	2 weeks*	60 2 points	0.25 point	1.75 points
elective 5	3	vertical:	45 1.5 points	0.5 point	1 points
Family medicine (at end of year)	3	2 weeks	45, 1.5 points	0.5 points	1.5 points

Rotations are 11 weeks each as follow: Obstetrics and Gynec. + 1 week Physichatry, Pediatrics + 1 week Physichatry, Medicine II + Surgery II + 1 week Physichatry

Fifth year: 40 weeks/ 70points: clinical phase (clinical rotations and family medicine)

Block	points	days/week	learning activities		
			contact hours/points	formative assessment /feedback	Assignments and other Home and self learning
<i>Ophthalmology</i> #	9	6weeks	135/4.5 points	0.5 point	4 points
<i>Ear, Nose & Throat</i>	7.5	4 weeks	105/3.5 Points	0.25 points	3.25 points
Medicine III Clinical investigations (laboratory and infection control :2 weeks and radiology: 2 weeks)	6.5	4 weeks	105/3.5 Points	0.25 points	3.25 points
<i>Surgery IV</i> cardiothoracic surgery, plasticsurgery,Neurosurgery,Vascular surgery(one week each)	6	4 weeks	105/3.5 Points	0.25 points	3.25 points
<i>Surgery IV</i> Orthopedics & trauma	5.5	4 weeks	100/3 Points	0.25 points	3.25 points
<i>Surgery IV</i> Urology	5.5	4 weeks	100/3 Points	0.25 points	3.25 points
<i>Surgery III</i> a GIT, Liver–biliary system, pancreas, abdomen and peritoneum	7.5	4 weeks	105/3.5 Points	0.25 points	3.25 points
<i>Medicine IV</i> Neurology, Dermatology	6.5	4 weeks	105/3.5 Points	0.25 points	3.25 points
<i>Medicine IV</i> cardiology, chest	6.5	4 weeks	105/3.5 Points	0.25 points	3.25 points
Elective 6	2.5	vertical: 2 hrs/week first 15 weeks	23 1.25 points	0.25 points	1 points
Surgery IIIb # acute emergencies	4	2 weeks	60, 2 points	0.25 points	1.75 points
Family medicine(2 ours/week for36 weeks)	3	vertical	45, 1.5 points	0.25 points	1.25 points

2 weeks of Surgery IIIb + 2 weeks of *Ophthalmology* = one rotation. * portfolio based evidence

Teaching/ Learning Strategies

Formal (lecture/class) teaching methods		Portfolio evidence based Assignments	Other Portfolio evidence based
Large group	Small group		
Effective lecture	Case based	Presentation	Formative assessment
Team based 25%	Problem based	Survey/ research	E-Learning
Case based	Tutorial	Self assessment	Portfolio reflection
Seminar	Self directed learning	Practical/clinical service based	
Field training	Skill training/ bed side teaching	Field training	
	Field training	Writing / Handouts	

Needs for successful curriculum implementation

- **Good supply of necessary materials:**
 - **Blocks Specifications**
 - **Detailed schedules**
 - **Study Guides**
 - **Portfolios**
- **Administrative support**
- **Good quality based monitoring and evaluation strategy:**
 - ensure Alignment between NARS, Program and course/block ILOS**
- **Ensure good training**
 - Program for faculty building capacity**

إستراتيجيات التدريس والتعلم والتقويم باللائحة الجديدة

- الواجبات المطلوبة من القائمين على التدريس في
" تحت إشراف ومتابعة:Block كل وحدة تعليمية "
- السيد الأستاذ الدكتور / رئيس القسم المختص.
- Block منسق المقرر .

المحاضرات:

- يقوم عضو هيئة التدريس المسئول بتسليم handout للمحاضرة في صورة PowerPoint أو word (منسق جيدا و يمكن تحويله الى PDF) إلى مركز تطوير التعليم ١٠ أيام قبل المحاضرة ويراعي فيها:
- الوضوح وجودة العرض و الرسومات و الجداول التوضيحية.
- الارتباط الكامل بالمخرجات.
- تصلح كمصدر أساسي للمذاكرة.
- إشتمالها علي عدد من الأسئلة.
- إشتمالها علي مرجع أساسي واحد + رابط إلكتروني للمساعدة.

المحاضرات:

- سيتم عرض المحاضرة على الموقع الإلكتروني للطلاب قبل ميعادها ب ٧ أيام.
- تتضمن المحاضرة:
 - ✓ مناقشة حول الأسئلة.
 - ✓ عرض تفاعلي (سيتم إرسال نموذج لعناصر المحاضرة التفاعلية و التدريب عليه).
 - ✓ أسئلة أخرى يجيب عليها الطالب لاحقاً في الموقع الإلكتروني.

المحاضرات:

- سيحدد المنسق ٢٠-٢٥% من المحاضرات لتتم بطريقة (Team-Based Learning TBL) وفقاً لنموذج سيتم إرساله والتدريب عليه.
- يمكن لعضو هيئة التدريس إقتراح تعديل في ILOs في المحتوى الخاص به ولكن بعد اعتماد المنسق ومركز تطوير التعليم مسبقاً قبل تحضير المحاضرات.

التدريب العملي

- يتولى منسق المقرر/ رئيس القسم تحديد الأدوات المساعدة لتحقيق المخرجات المستهدفة العملية كما هو مكتوب بالتوصيف وتشمل هذه الأدوات:
- كتاب تدريب الطالب: علي:
- ✓ كتابة بيانات علي رسومات توضيحية.
- ✓ أسئلة وحالات متعددة الاختيارات.
- ✓ بعض الوسائل التوضيحية من خلال الوسائط المتعددة من الإنترنت.

الجلسات التفاعلية الأخرى

Seminars, SDL, Small group discussions

- يتولى منسق المقرر (**Block**) من قبل القسم بالتعاون مع عضو هيئة التدريس المسئول عن الجلسة التجهيز وتكليف الطلاب بما هو مطلوب وفقاً للتوصيف ومراعاة تفاعل الطلاب.

التعليم الإلكتروني:

- سيتم عرض جميع المحاضرات والوسائل التوضيحية الأخرى علي موقع الكلية بالتنسيق بين منسق البلوك، وحدة الخدمات الإلكترونية بالكلية.
- سيتم تخصيص صفحة تفاعلية يلتزم الطالب بدخولها وإجابة الأسئلة الموضوعة من عضو هيئة التدريس المسئول عن التدريس وتتيح للأخير التعرف علي المشاركين – الناجحين – الراسبين – غير المشاركين.

ملف الإنجازات

Student Portfolio

- تم إعداده لكل مقرر/ بلوك.
- يقوم عضو/ أعضاء هيئة التدريس المسؤولين عن التدريس في الأسبوع المحدد التحقق مما سجله الطالب فيما يخص الأنشطة التفاعلية والواجبات واعتماده.
- الإمتحانات التكوينية.
- توثيق الحضور في المحاضرات (إداري) وفي الجلسات (إداري).

استراتيجيات التقويم

• تشكل لجنة لكل بلوك؛ مكونة من:

- منسق البلوك

- رئيس/ رؤساء الأقسام المشاركة في البلوك

- منسق التدريس عن كل قسم من الأقسام المشاركة في
البلوك

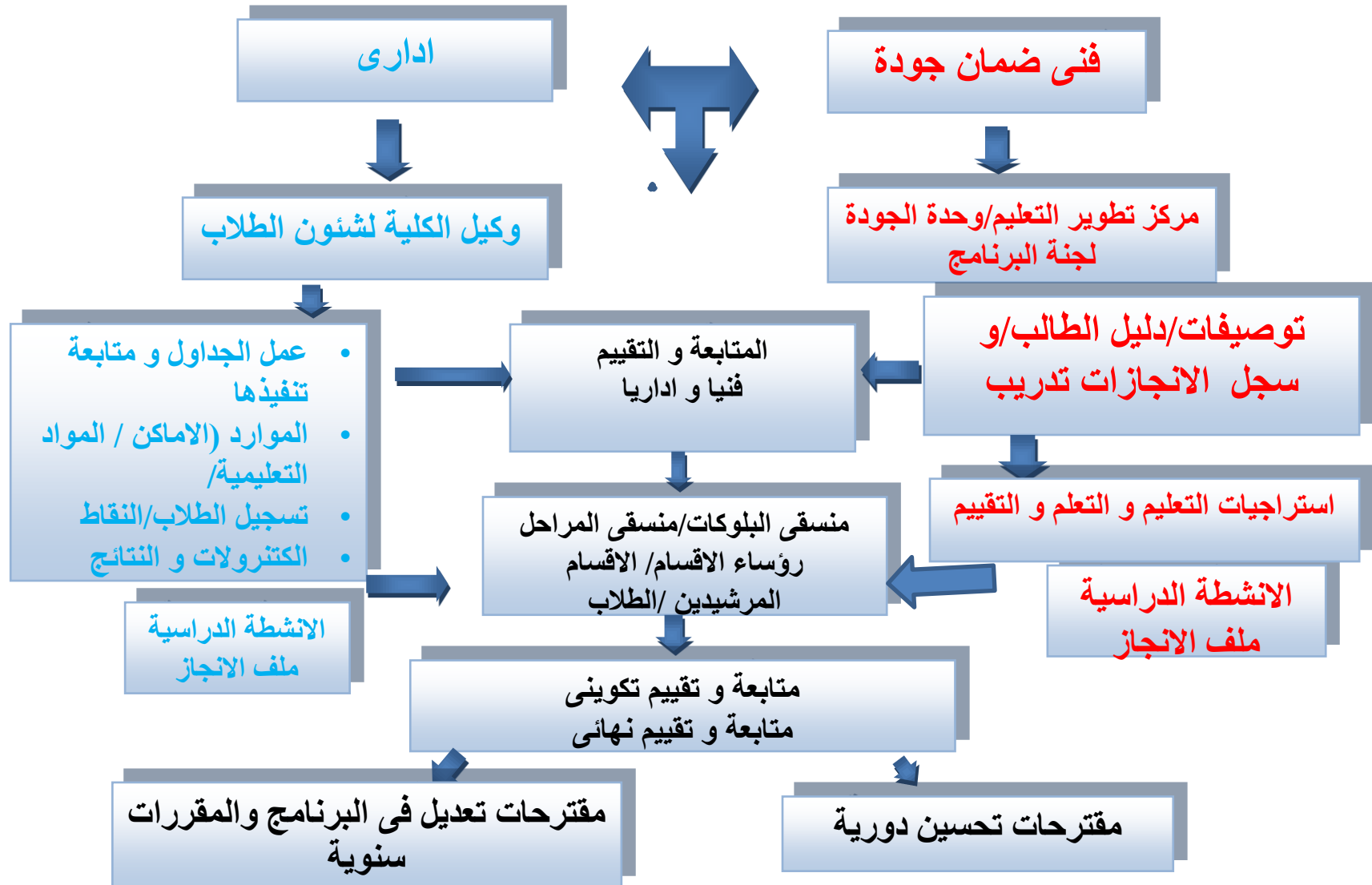
استراتيجيات التقويم «تابع»

- تتولى هذه اللجنة أعمال اللجنة الثلاثية المنصوص عليها فى قرارات ضمان الجودة المعتمدة من مجلس الكلية و أهمها:
- (قبل بداية البلوك Blue-print عمل مخطط الامتحان)
- إعداد الامتحانات التكوينية بالرجوع لأعضاء هيئة التدريس المشاركين فى التدريس
- إعداد امتحانات أعمال السنة فى نهاية البلوك
- التقييم النهائى لملفات الانجاز
- إعداد بنكى أسئلة للبلوك بالرجوع لأعضاء هيئة التدريس المشاركين فى التدريس؛ أحدهما مفتوح /معلن و آخر مغلق سرى (وفقاً لنموذج سيتم إرساله والتدريب عليه).
- إعداد امتحانات نهاية السنة و منسق البلوك مسئول عن سرية الامتحان التحريرى و التواصل مع العميد/ وكيل الكلية/ الكنترول.

Table of specifications of theblock exam paper (Blue-print).

[illegible]

Curriculum management



Summary & Conclusions

Accountability



**Did you meet
your
anticipation?**

عزيزي الطالب

- يرجى الانتباه لضرورة الدخول على موقع الكلية:

<http://www.sohag-univ.edu.eg/facemed/>

- يرجى التسجيل على موقع البرنامج

- **Reflection**
 - Seminar
 - Portfolio



Thank you

يسعدنا التواصل مع حضراتكم

<http://www.sohag-univ.edu.eg/facemed/>

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