



Otorhinolaryngology (ENT-318) Study Guide

Rotation Otorhinolaryngology (ENT-318) STUDY GUIDE



Sohag University





Otorhinolaryngology (ENT-318) Study Guide

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Under supervision of

Medical Education Centre Faculty of Medicine Sohag University

2025 - 2026





Otorhinolaryngology (ENT-318) Study Guide

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All Staff Members of Otorhinolaryngology Department.

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Basic Information about the Block

Program on which the course is given: Bachelor of Medicine and Surgery (M.B. B.Ch.).

Elements (Major or minor) of the program: Major -Undergraduate

Departments offering the course: Otorhinolaryngology department.

Academic. year/level: 3rd year

❖ Date of specification approval: 2025-2026

* Title: Otorhinolaryngology

❖ Code: ENT-318

Credit points: 7.5 points

Toal hours: 255 hours

Lectures: 30 hours

Practicals: 45 hours

Case based discussions: 38 hours

Student learning activities:112

• Portfolio: 97 hours

• Formative assessment: 0.5 point=15 hours

Methods	Total hours
1- Lectures	30
2-Clinical/ Tutorial	83
Total	113

Block Map

Total marks	Days/weks	Points	Code	Responsible department	Block الوحدة التعليمية	Year
150	5×5	7.5	ENT- 318	Otorhinolaryngology	Otorhinolaryngology جراحة الأذن والأنف والحنجرة	3rd Y ear





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NARS competencies covered by the block

The competency areas of the NARS- ENT competency framework are:

- 1- The graduate as a health care provider.
- 2- The graduate as a health promoter.
- 3- The graduate as a professional.
- 4- The graduate as a scholar and scientist.
- 5- The graduate as a member of the health team and a part of the health care system.
- 6- The graduate as a lifelong learner and researcher.

L	Jpon completion of this course, students should be able to:				
	NARS areas	NARS key competencies			
	1. The graduate as a	1.1. Take and record a structured, patient centered history.			
	health care	1.2. Adopt an empathic and holistic approach to the patients and			
	provider.	their problems.			
	1	1.3 Assess the mental state of the patient.			
		1.4. Perform appropriately timed full physical examination of 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 procedures 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 (EBM) in management decisions.			





	1.14. Respect patients' rights and involve them and /or their
	families/careers 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 non-
	pharmacological approaches to alleviate pain and provide
	palliative care for seriously ill people, aiming to relieve
	their suffering and improve their quality of life.
2. The graduate as a	2.3 Discuss the role of nutrition and physical activity in health.
$\boldsymbol{\mathcal{O}}$	2.5 Describe the principles of disease prevention, and empower
health promoter.	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.
	2.9 Adopt suitable measures for infection control.
3. The graduate as a	3.1. Exhibit appropriate professional behaviors and relationships in
$\boldsymbol{\mathcal{C}}$	all aspects of practice, demonstrating honesty, integrity,
professional.	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.
4. The graduate as a	4.5 Identify various causes (genetic, developmental, metabolic,
scholar and scientist.	toxic, microbiologic, autoimmune, neoplastic, degenerative, and
	traumatic) of illness/disease and explain the ways in which they
	operate on the body (pathogenesis).





	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.
5. The graduate as a	5.1 Recognize the important role played by other health care
member of the health team and a part of the health care system.	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.
	5.9 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.
	5.12 Demonstrate accountability to patients, society, and the profession.
6. The graduate as a lifelong learner and	6.1 Regularly reflect on and assess his/her performance using various performance indicators and information sources.
researcher.	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.
	6.6 Effectively manage learning time and resources and set priorities.
	6.8 Critically appraise research studies and scientific papers in terms of integrity, reliability, and applicability.





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6.10 Summarize and present to professional and lay audiences the
findings of relevant research and scholarly inquiry.

Professional Information

Block Aims

Overall Aim of the course

"Otorhinolaryngology is the science dealing with the various diseases of the ear, nose and throat."

At the end of the course, the students should be able to:-

- 1. Acquire the essential knowledge and understanding of the common ear, nose and throat diseases and disorders with an insight on emergencies.
- 2. Formulate a differential diagnosis and plan for required investigations and the appropriate treatment of common ENT diseases.
- 3. Acquire appropriate clinical skills and decision-making.
- 4. Understand the professional, ethical and legal responsibilities in the subject.
- 5. Counsel patients and their families about common ENT diseases.

Intended learning outcomes of course (ILOs)

At the end of the course, the student should be able to

I- Kn	owledge and Understanding			
K .1	Describe the basic pathophysiology of common Ear, Nose and Throat (ENT) diseases and			
	emergencies.			
K.2	Identify the clinical symptoms and signs of the common ENT diseases, as well as related			
	head and neck disorders and the methods of transmission of common ENT infection.			
K.3	Describe basis and interpretation of diagnostic tools for the ENT diseases including the			
	applicable recent modalities of diagnosis.			
K.4	Outline the diagnosis and management of medical and surgical acute illnesses and			
	emergencies priorities for different ENT and Head & Neck emergencies and to be able to			
	refer whenever necessary.			
K.5	Discuss the relationship between some general symptoms or illnesses and ENT and Head &			
	Neck diseases and the interaction between ENT and other specialties.			
K.6	Discuss complications of major diseases beyond the capacities of general practitioner and			
	decide when to refer them to specialist.			





K.7	Outline the principle of management strategies applied to common and life threatening
	illnesses including the indications, advantages, disadvantages of: Intervention including the
	non-invasive and invasive techniques.
K.8	Outline the principle of management strategies applied to common and life threatening
	illnesses including the indications, advantages, disadvantages of: Operative care including
	pre- and post-care.
K.9	Describe basis and interpretation of common diagnostic investigations e.g. lab, radiological
	and pathological (stressing on their role in management plans).

II- P	ractical and Intellectual Skills
S.1	Obtain and record informative history from patients with ENT and Head & Neck problems.
S.2	Perform adequate clinical examination for ENT and Head & Neck patients with knowledge of use of common examination tools.
S.3	Estimate the rational use of commonly used drugs, keeping in mind their adverse reactions.
S.4	Integrate basic anatomical, biochemical and physiological facts with the most important symptoms and signs of disease in ENT and Head & Neck patients into meaningful diagnostic formulation.
S.5	Formulate appropriate management plans for individual patients presenting with the most common ENT and Head & Neck disorders.
S.6	Solve problems and clinical scenarios using critical and analytical thinking and seek out information by using personal judgment and available information.
S.7	Choose common investigative procedures and their interpretation including applicable recent modalities.
S.8	Recognize different rehabilitation methods for the common handicapping problems in ENT
S .9	Integrate a management strategy for patients with common acute and chronic ENT conditions
S.10	Design an initial plan of management for stabilization of injured and critically ill ENT patients.
S.11	Classify risk factors for disease and injury to help provide different strategies for appropriate response.
S.12	Integrate evidence-based medicine in solving clinical problems based on analysis of data retrieved from the literature using information technologies and library resources, in order to help solve a clinical problem based on evidence.

III- P	III- Professional attitude, behavioral skill and communication skills				
A.1	Demonstrate respect and work cooperatively with other health care professions for effective patient management.				
A.2	Share in all types of inter-professional activities including collaborative and shared learning.				
A.3	Communicate clearly, sensitively and effectively with patients and their relatives, and colleagues from a variety of health and social care professions				





A.4	Respect patients and their relatives, superiors, colleagues and any other member of the health
	profession.

IV-G	eneral and Transferable Skills
G.1	Perform practice-based improvement activities using portfolio.
G.2	Practice effectively using a written health record, electronic medical record, or other digital technology
G.3	Display effective communication with patients, their families and community through proper verbal and written means, respecting their beliefs and level of education.
G.4	Display respect, compassion, and integrity; a responsiveness to the needs of patients and society.
G.5	Display a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent.
G.6	Work effectively with others as a member of teamwork by acting in small group.
G.7	Display adequate cooperation with his/her colleagues
G.8	Arrange the efforts required to accomplish the tasks in specified time.
G.9	Verify the use of sources of biomedical information to remain current with advances in knowledge and practice.
G.10	Share in the work efficiently in responsible manner keeping the Instruments and Equipment of the Department intact and clean.
G .11	Adhere to the basic ethical and medicolegal principles that should be applied in practice.
G.12	Describe his/her work and that of others using constructive feedback.
G.13	Present regular reflection on and assess his/her performance using various performance indicators and information sources.
G.14	Initiate a personal learning plan to enhance professional practice
G.15	Identify opportunities and use various resources for learning.
G.16	Accept Using computers efficiently in reaching biomedical information to remain current with advances in knowledge and practice.
G.17	Present information clearly in written, electronic and verbal forms.
G.18	Accept working affectively within a multidisciplinary team.





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Learning Outcomes of the Block

Each competency will be broken down into one or more learning outcomes that may be K, S or A or all.

NARS Key competencies	Learning outcomes for each key competencies	Domain Know, Know how, Show how, Does	Teaching method	Assessment method
1.1. Take and record a structured, patient centered history.	S1. Perform a focused history based on all relevant information (including obtaining data from secondary sources) in the following common clinical problems: • Ear diseases • Nose and paranasal sinuses diseases • Pharyngeal diseases • Esophageal diseases • Laryngeal diseases S2. Document and present the clinical encounter (case) concisely in an oral presentation, as a written	Show how	Skill lab or bed side Mini - CEX training OSCE training Skill lab or bed side Mini - CEX training OSCE	Portfolio OSCE ACC Portfolio OSCE ACC
	document, and entered into an electronic medical record in the following common clinical problems: -Clinical problems Mentioned in S1.		training	
1.2. Adopt an empathic and holistic approach to the patients and their	K1. A1. Address psychological and social factors when assessing patients and developing care plans in any clinical situations Mentioned in S1 &S10	Know how Show how	Cases Skill lab	Quizzes Formative written Final written Portfolio
problems.			or bed side Mini - CEX training	OSCE





			OSCE	
			training	
	S3. A2.	Show how	Skill lab	Portfolio
	Interact with patients showing 7		or bed side	OSCE
	key tips of empathic and		Mini - CEX	ACC
	holistic approach:		training	
	Making eye contact		OSCE	
	Let your patient know		training	
	you're listening		training	
	, ,			
	Be aware of your body			
	language			
	Be curious about your			
	patient			
	Record details that			
	humanize your patient			
	Show support to your			
	patient			
	 Look deeper for ways to 			
	empathize with your			
	patient			
	S4.	Show how	Skill lab or	Portfolio
	Establish that patients are		bed side	OSCE
	attentive—eg, by assessing		Mini - CEX	ACC
	their level of attention while the		training	
	history is taken or by asking		OSCE	
	them to immediately repeat 3		training	
	words			
	S5.	Show how	Skill lab or	Portfolio
1.3 Assess the mental	Perform an assessment of vital		bed side	OSCE
state of the patient.	signs		Mini - CEX	ACC
1			training	
			OSCE	
			training	
	S6.	Show how	Skill lab or	Portfolio
	Perform a detailed physical		bed side	OSCE
	examination of all body		Mini - CEX	ACC
	systems		training	
			OSCE	
			training	
1.4. Perform	S7.	Show how	Skill lab or	Portfolio
appropriately timed	Perform a focused physical	2110 11 110 11	bed side	OSCE
full physical	examination based on the		Mini - CEX	OSPE
examination 1 of	patient's chief complaint and		training	ACC
	= =		OSCE	ACC
patients appropriate to	review of systems in the			
the age, gender, and	following common clinical problems:		training	
clinical presentation	problems:			





of the patient while	-Mentioned in S1			
being culturally sensitive.	S8. Detect all significant abnormal findings on physical examination in the following common clinical problems: -Mentioned in S1 &S7. S9. Report findings in notes	Show how	Skill lab or bed side Mini - CEX training OSCE training Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC Portfolio OSCE OSPE ACC
1.5. Prioritize issues to be addressed in a patient encounter.	S10. A3. Identify the cultural concerns and goals of patients and their families for a specific encounter during the interaction with a stable patient presenting with one of the following straightforward problems: • Ear diseases • Nose and paranasal sinuses diseases • Pharyngeal diseases • Esophageal diseases • Laryngeal diseases	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
1.6. Select the appropriate investigations and interpret their results	K2. S11. Select common investigations relevant to the findings on history and physical examination in the following common clinical problems: - Mentioned in S1 & S10	Know how	Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC
taking into consideration cost/ effectiveness factors.	K3. Describe the purpose of common diagnostic tests, including blood tests, tests of other body fluids, and basic imaging tests relevant to the following common clinical problems:	Know	Lectures	Quizzes Formative written Final written





	 -Mentioned in S1, S7, S10 Radiology CBC Coagulation profile CSF Audiological assessment Vestibular assessment Nasofiberoptic examination 			
	S12. Interpret in a simulated case, the results of the following commonly ordered tests. • Radiology • CBC • Coagulation profile • CSF • Audiological assessment • Vestibular assessment • Nasofiberoptic examination	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
	K4. & S13. Recognize that there is a degree of uncertainty in all clinical decision making.	Know how	Cases	Quizzes Formative written Final written
1.7. Recognize and		Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
respond to the complexity, uncertainty, and ambiguity inherent in medical practice.	K5. &S14. Identify clinical situations in which complexity, uncertainty, and ambiguity may play a role in decision-making. • Ear discharge • Deafness • Tinnitus • Vertigo • Sore throat • Dysphagia • Dysphonia • Nasal obstruction • Stridor	Know how Show how	Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC





Know how Know how Show how	Cases Lecture Case	Quizzes Formative written Final written Quizzes Formative written Final written
	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
	uanning	
Know how	Lecture Case	Quizzes Formative written Final written
Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
Know Know how	Lecture Case	Quizzes Formative written Final written
Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
]	Know how Show how Know Know how	Know Lecture Know how Case Show how Skill lab or bed side Mini - CEX training OSCE training Know Lecture Know how Case Show how Skill lab or bed side Mini - CEX training





	 Nose and paranasal sinuses diseases Pharyngeal diseases Esophageal diseases Laryngeal diseases K10. Describe the indications for the following essential medical procedures (diagnostic and intervention), how they are performed, common risks, and follow-up care Ear wash Audiometry & Tympanometry Vestibular tests (e.g Caloric test) 	Know	Lecture	Quizzes Formative written Final written
1.11. Perform diagnostic and intervention procedures in a	 Nasal endoscopy Esophagoscopy Laryngoscopy Bronchoscopy Barium Swallow Flexible Nasolaryngoscopy CT scan of the nose and PNS K11. S18. 	Know	Lecture	Quizzos
skillful and safe manner, adapting to unanticipated findings or changing clinical circumstances.	Implement plans for care prior to any of the following procedures • Ear wash	Know	Lecture	Quizzes Formative written Final written
Circumstances.	 Audiometry & Tympanometry Vestibular tests (e.g Caloric test) Nasal endoscopy Esophagoscopy Laryngoscopy Bronchoscopy Barium Swallow Flexible Nasolaryngoscopy CT scan of the nose and PNS 	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
	S19. A4. Perform the following essential medical procedures in a supervised or simulated setting	Show how	Skill lab or bed side Mini - CEX training	Portfolio OSCE OSPE ACC





	 Otoscopic examination Ear wash Caloric test Anterior Rhinoscopy Sinuscopic examination Nasal packing Indirect laryngeal examination Flexible nasolaryngoscopy 	Know	OSCE training Lecture	Quizzes
1.12. Adopt strategies and apply measures that promote patient safety.	Recognize examples of patient safety incidents (adverse events, error, near misses, preventable adverse event) in the clinical setting • Ear wash	Know how	Case	Formative written Final written
1.13. Establish patient-centered management plans in partnership with the patient, his/her family and other health professionals as	K14. S21. Formulate a broad differential diagnosis for each problem, based on the clinical encounter and investigations done to date in patient presenting with one of the following problems: • Ear discharge • Deafness • Tinntius • Vertigo • Sore throat • Dysphagia • Dysphonia • Nasal obstruction • Stridor	Know how Show	Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC
appropriate, using Evidence Based Medicine in management decisions.	K15. S22. Establish a therapeutic and management plan with appropriate timelines and follow up In a patient presenting with any of one or more of the following acute illnesses and/or complex problems, • Ear discharge • Deafness • Tinnitus • Vertigo • Sore throat	Know how Show how	Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC





	DysphagiaDysphoniaNasal obstructionStridor			
1.14. Respect patients' rights and involve them and /or	A5. Exhibit honesty and integrity with patients, physicians and other health professionals. A6. Demonstrate caring and compassion during all interactions with patients. A7. Recognize the importance of trusting relationships with patients and others. A8. Recognize and maintain boundaries when interacting with patients. A9. Demonstrate sensitivity with respect to peers, colleagues, and patients As Mentioned in S1 &S10	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
their families/careers in management decisions.	K16. A10. Consistently maintain patient confidentiality in all clinical, social and electronic settings, while recognizing situations that require disclosure of	Know how	Case	Quizzes Formative written Final written
	confidential information.	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSPE ACC
	K17. Describe the underlying ethical principles and legal process of informed consent	Know how	Case	Quizzes Formative written Final written
	K18. S23. Describe the process of how to obtain informed consent for a test or treatment procedure	Know how	Case	Quizzes Formative written Final written





		Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
	K19. Describe the characteristics of an acutely ill patient in terms of findings on history, physical examination and basic investigations in the following clinical situations	Know how	Lecture Case	Quizzes Formative written Final written
	K20. S24. Recognize when a patient has abnormal vital signs that	Know how	Lecture	Quizzes Formative written Final written
1.15. Provide the appropriate care in cases of emergency.	requires immediate attention and investigation in the following clinical situations • Epistaxis • Ear trauma • Vertigo • Stridor	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
	K21. S25. Recognize when a patient has a complaint or physical finding that suggests the possibility of a severe illness	Know how	Lecture Case	Quizzes Formative written Final written
	and therefore requires immediate attention and investigation in the following clinical situations -Mention in K20. S24.	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
	K22. Apply the steps taken in the emergency care of acutely ill patients in the following clinical situations -Mention in K20. S24.	Know how	Lecture Case	Quizzes Formative written Final written
	K23. S26. Identify potential underlying causes of a patient's	Know how	Lecture Case	Quizzes Formative written Final written





	deterioration in the following clinical situations -Mention in K20. S24.	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
	S27 Start the initial emergency care plan for a patient with the following Epistaxis Stridor FB inhalation -Mentioned in K9, S17	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
2.5 Describe the principles of disease prevention, and empower communities, specific groups or individuals by raising their awareness and building their capacity.	K 27. Apply preventive measures for common ENT problem (e.g Hearing Loss)	Know how	Lecture	Quizzes Formative written Final written
2.6 Recognize the epidemiology of common diseases within his/her community, and apply	K26. Apply methods reducing the incidence and prevalence of following common diseasesMention in K24.	Know how	Lecture Case	Quizzes Formative written Final written
the systematic approaches useful in reducing the incidence and prevalence of those diseases.	K27 Identify and apply screening tests appropriate at different life stages	Know how	Lecture	Quizzes Formative written Final written
2.9 Adopt suitable measures for infection control.	K28. S29. Apply principles of patient safety related to infection prevention and control practices in ENT field	Know how Show how	Case Skill lab or bed side Mini - CEX training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC





			OSCE	
			training	
	K29. S30.	Know	Lecture	Quizzes
	Demonstrate the procedures			Formative
	involved in universal body			written
	substance precautions,	Know how	Case	Final written
	including hand washing, and			
	donning and doffing of gowns,	Show how	Skill lab or	Portfolio
	gloves, masks, and eye		bed side	OSCE
	protection		Mini - CEX	OSPE
	protection		training	ACC
			OSCE	1100
			training	
	K30. S31.	Know	Lecture	Quizzes
	Apply principles of infection	I SITIO VV	Lecture	Formative
	control when dealing with a			written
	patient who may have a	Know how	Case	Final written
	communicable disease	Timow now	Cusc	Tillal Wittell
	Communication disease	Show how	Skill lab or	Portfolio
		Bilow how	bed side	OSCE
			Mini - CEX	ACC
			training	ACC
			OSCE	
			training	
3.1. Exhibit	K31. A11	Know how	Case	Quizzes
appropriate	Demonstrate the ability to give	Know now	Case	Formative
professional	feedback to colleagues in a			written
behaviors and	respectful manner.			Final written
relationships in all	respectful manner.			Tillal Witten
aspects of practice,		Show how	Skill lab or	Portfolio
demonstrating			bed side	OSCE
honesty, integrity,			Mini - CEX	ACC
commitment,			training	ACC
communicity,			OSCE	
respect.			training	
товрест.	K32 A12.	Show	Skill lab or	Portfolio
3.3. Respect the	Demonstrate the application of	SHOW	bed side	OSCE
different cultural	patient autonomy and respect		Mini - CEX	ACC
beliefs and values in	for persons in specific case		training	ACC
the community they	situations		OSCE	
serve.	Situations		training	
			aaming	
	K33. A13.	Know	Lecture	Quizzes
3.4. Treat all patients	Identify medicolegal principles	IXIIOW	Lecture	Formative
equally, and avoid	that obligate physician to Treat	Know how	Case	written
stigmatizing any	all patients equally,	ISHOW HOW	Case	Final written
category regardless of	an panents equally,			Tillal Willell
<u> </u>	75			





their social, cultural, ethnic backgrounds, or their disabilities.		Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
	A14. Demonstrate in clinical encounters avoiding stigmatizing any category regardless of their social, cultural, ethnic backgrounds, or their disabilities.	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
	K34. A15. Avoid disclosing confidential patient information in online communications.	Know how	Case	Quizzes Formative written Final written
		Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
3.5. Ensure	K35. A16. Explain the potential abuses of technology-enabled communication and their relationship to professionalism.	Know how	Case	Quizzes Formative written Final written
confidentiality and privacy of patients' information.	r r	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
	K36. A17. Follow relevant policies regarding the appropriate use of electronic medical records	Know how	Case	Quizzes Formative written Final written
		Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
	K37. A18.	Know how	Case	Quizzes





3.6. Recognize basics of medico-legal aspects of practice, malpractice and avoid common medical errors.	Apply basics of medico legal practices in common clinical situations including: -Mentioned in K7. S15.	Show how	Skill lab or bed side Mini - CEX training OSCE	Formative written Final written Portfolio OSCE ACC
	K38. A19. Demonstrate how to avoid common medical errors in the following common clinical situations: -Mentioned in K7. S15.	Know how Show how	case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE ACC
3.7. Recognize and	K39. S31. A 21. Demonstrate the capacity to reflect on their own competencies and identify situations where one requires help	Know how Show how	Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE ACC
manage conflicts of interest.	K40. S32. Demonstrate the capacity to identify situations where cognitive biases may have affected their patient Management	Know how Show how	Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE ACC
3.8. Refer patients to appropriate health facility at the appropriate stage.	K41. Describe the nature of clinical expertise and of its limits	Know how	Case	Quizzes Formative written Final written





	K42. S33. Recognize the range of possible transitions a patient may	Know	Lecture	Quizzes Formative written
	encounter (e.g., hospital to home, hospital to long term	Know how	Case	Final written
	care facility, emergency department to ward in the following clinical settings examples -Mentioned in K7. S15.	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
	K43. List indications of admission to hospital in the following clinical situations	Know how	Lecture	Quizzes Formative written Final written
	-Mentioned in K7. S15. K44 List criteria of home discharge in the following clinical	Know	Lecture	Quizzes Formative written
	situations -Mentioned in K7. S15.	Know how	Case	Final written
3.9. Identify and report any	K46. A22. Participate in peer assessment	Know	Lecture	Quizzes Formative written
unprofessional and unethical behaviors or		Know how	Case	Final written
physical or mental conditions related to himself, colleagues or any other person that might jeopardize patients' safety		Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
4.5 Identify various causes (genetic, developmental,	K47. Identify various causes (genetic, developmental, metabolic,	Know	Lecture	Quizzes Formative written
metabolic, toxic, microbiologic, autoimmune, neoplastic, degenerative, and traumatic) of illness/disease and explain the ways in which they operate on the body (pathogenesis).	toxic, microbiologic, autoimmune, neoplastic, degenerative, and traumatic) of the following diseases -Mentioned in S1 S10, A3 K7, S15	Know how	Case	Final written





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	K48. S34.	Know	Lecture	Quizzes
	Choose categories of			Formative
	Individual drugs in each of the	V1	Casa	written
	following clinical conditions	Know how	Case	Final written
	-Mentioned in S1	G1 1	G1 111 1 1	
	S10, A3	Show how	Skill lab or	Portfolio
	K7, S15		bed side	OSCE
	Principle of antimicrobial		Mini - CEX	OSPE
4.7 Describe drug	therapy		training	ACC
actions: therapeutics	Antivertigenous		OSCE	
and	Antiviral drugs.		training	
pharmacokinetics;	Antimicrobial drugs.			
side effects and	Anti-inflammatory drugs.			
interactions, including	• Immunotherapy.			
multiple treatments,	• Coagulants			
long term conditions	Anticoagulants			
and non-prescribed	K 52.	Know	Lecture	Quizzes
medication; and	Mention mechanism of action,	I XIIO W	Lecture	Formative
effects on the	side effects and uses of drugs in	Know how	Case	written
population.	the clinical conditions	Know now	Case	Final written
				rillai wittteli
	K50.	Know	Lecture	Quizzes
	Demonstrate in the following			Formative
	clinical situations how to	Know how	Case	written
	prescribe relevant drugs			Final written
	-Mentioned in S1			
	S10, A3			
	K7, S15			
4.8 Demonstrate basic	K51. S35	Know	Lecture	Quizzes
sciences specific	Interpret the following			Formative
practical skills and	diagnostic modalities	Know how	Case	written
procedures relevant to	Audiogram			Final written
future practice,				
recognizing their		Show how	Skill lab or	Portfolio
scientific basis, and			bed side	OSCE
interpret common			Mini - CEX	OSPE
diagnostic modalities,			training	ACC
including: imaging,			OSCE	
electrocardiograms,			training	
laboratory assays,			8	
pathologic studies,				
and functional				
assessment tests.	K54. A23.	Vnovy horr	Coco	Ouizzaa
5.2 Respect		Know how	Case	Quizzes
colleagues and other	Demonstrate respect and			Formative
health care	cooperation with all health care			written
professionals and				Final written





work cooperatively	providers in the following	Show how	Skill lab or	Portfolio
with them,	clinical settings		bed side	OSCE
negotiating	-Mentioned in S1		Mini - CEX	OSPE
overlapping and	S10, A3		training	ACC
shared responsibilities	K7, S15		OSCE	
and engaging in	,		training	
shared decision-				
making for effective				
patient management.				
5.3 Implement strategies to promote understanding, manage differences,	K55 Identify clinical scenarios that are likely to lead to conflict K56. Describe the root causes of conflict in inter- professional teams K57 Describe approaches to conflict resolution	Know how	Case	Quizzes Formative written Final written
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and resolve conflicts in a manner that supports collaborative work.	K58. A24. Recognize one's own approach to conflict	Know how	Case	Quizzes Formative written Final written
	K59 A25. Demonstrate the capacity to resolve conflicts that occur with colleagues related to issues such as prioritization of duties	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
5.4 Apply leadership	K60. A26. Identify aspects of their own leadership style(s) (including; strengths, weaknesses, and biases). K61. A27 Participate in reflective	Know how Show how	Case Skill lab or bed side Mini - CEX training	Quizzes Formative written Final written Portfolio OSCE ACC
skills to enhance team functioning, the learning environment, and/or the health care delivery system.	processes to inform their personal leadership development. K62. A28 Appreciate that leadership is not demonstrated only by leaders but that all physicians will be required to demonstrate "leadership" in the course of their careers.		OSCE training	
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	K63. A29. Reflect on motivations, capabilities, skills, boundaries, and purpose as a leader. K64. A30. Demonstrate teamwork and collaboration STYLES in the healthcare setting and participate in team-building and collaboration exercises. A31. S38.	Show how	Skill lab or	Portfolio
5.5 Communicate effectively using a written health record, electronic medical record, or other digital technology.	Communicate effectively with patients A32. Communicate with colleagues A33. S39. Communicate in breaking bad news A34. Communicate with relatives A35. Communicate with disabled people A36. Communicate in seeking informed consent S40. A37. Communicate in writing (including medical records) S41. A38. Communicate in dealing with aggression		bed side Mini - CEX training OSCE training	OSCE ACC
5.6 Evaluate his/her work and that of others using constructive feedback	A39. Consistently seek out and welcome feedback from others. 41. Accept constructive feedback. A40. S42. Demonstrate the capacity to reflect upon feedback and use this as a basis for enhanced learning of relevant competencies. A41. S43. Provide constructive feedback to colleagues about aspects of	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC





	their clinical competence when			
	requested to do so.			
5.7 Recognize own personal and professional limits and seek help from colleagues and supervisors when necessary.	 K65. S44. Shows how to refer to other professionals in the following clinical situations: Hypertension Infective endocarditis complications Valvular heart disease. Diabetes mellitus. Haemorrhagic blood diseases K66. S45. Shows how to seek further 	Know how Show how	Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE ACC
	support and advice in the following clinical situations -Mentioned in K65. S44.			
	S46. Use information and communication technologies to enhance knowledge, skills and judgment in providing evidence-informed, safe, effective and efficient patient care.	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
5.9 Use health informatics to improve the quality of patient care.	S47. Gather relevant data from a variety of sources, including literature, web-based resources, electronic health records and databases.	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
	K67. S48. Critically assess the reliability, quality and comprehensiveness of all data used to inform health care decisions.	Know how Show how	Case Skill lab or	Quizzes Formative written Final written
			bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
5.10 Document clinical encounters in an accurate, complete, timely, and accessible	K68. S49. Write medical record in the following clinical situations -Mentioned in S1	Know how	Case	Quizzes Formative written Final written





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manner, in compliance with regulatory and legal requirements.	S10, A3 K7, S15	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
5.12 Demonstrate accountability to patients, society, and the profession.	S50, A42. Reflect on examples from their clinical rotations and acknowledge that near misses, adverse events, and patient safety incidents (PSIs).	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
6.1 Regularly reflect on and assess his/her performance using various performance indicators and information sources.	S 52. A43. Reflect on experiences in the preclinical setting to identify areas requiring improvement a modify behavior. S52. A44. Reflect on experiences in the clinical setting to identify areas requiring improvement and modify behavior by use of ethical frameworks. S53. A45. Evaluate teachers and programs in an honest, fair, and constructive manner.	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
6.2 Develop, implement, monitor, and revise a personal learning plan to enhance professional practice	K69 Use portfolio as a tool to develop and monitor a learning plan. S54. A46. Reflect on achievement of the required competencies. S55. A47. Use portfolio to improve self-awareness to enhance performance. A48. Demonstrate appropriate use and enhancement of resilience skills. S56. A49. Demonstrate the connection between self-care and patient safety.	Know Show how	Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE ACC





6.3 Identify opportunities and use various resources for learning.	S 58. Use various resources of learning including LMS. S58. A50. Contribute to a positive atmosphere in the classroom and in clinical learning settings by demonstrating the following behaviors: • Participating enthusiastically as a learner • Providing encouragement to colleagues • Refraining from belittling colleagues' efforts	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
	K70. Identify the various different collaborators they will work within the clinical environment to provide patient care.	Know how	Case	Quizzes Formative written Final written
6.4 Engage in interprofessional activities and collaborative learning to continuously improve personal practice and contribute to collective improvements in	K71. A51. Demonstrate a general understanding of the roles and responsibilities of collaborators in the clinical environment.	Know how	Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE ACC
practice.	S59. Participate in inter-professional activities.	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
6.6 Effectively	K72. Describe the concepts of the declared, taught, learned, and hidden Curriculum.	Know how	Lecture Case	Quizzes Formative written Final written
manage learning time and resources and set priorities.	K73. Describe factors that can positively or negatively affect the learning environment.	Know how	Lecture Case	Quizzes Formative written Final written
	K74. S60. A52.	Know	Lecture	Quizzes





Develop a systematic approach to learning and a time management strategy. Show how Skill lab or bed side Portfolio Mini - CEX GSCE training OSPE OSCE training CSCE training CSCE training OSCE OSCE OSCE OSCE OSCE OSCE OSCE OSCE					
management strategy. Show how			Know how	Case	
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of research studies and their training					
application to clinical issues. OSCE					
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Otorhinolaryngology (ENT-318) Study Guide

Structure of the block

Week	Lectures (Number of hours)	Practical (Number of hours)	PORTFLIO TASKS (NUMBER)	CASE BASED Discussions (Number of hours)	Formative Assessment (NUMBER)	Revision and Exams	Total
1 st	6	9	1	8	1		
2 nd	6	9	2	8	1		
3 rd	6	9	3	8	1		
4 th	6	9	4	7	1		
5 th	6	9	1	7			
Total	30	45		38	4		

As regard lecture, practical and case-based discussion, Number = contact hours

Learning Methods

- 1- Lectures for knowledge outcomes.
- 2- Practical (Bedside/Skill lab/ Outpatient clinic) sessions to gain clinical skills.
- 3-Task based log (may use incision academy/clinical key cases).
- 4- Group discussions (Case based).

Methods of Student Assessment

1. Formative:

This is used to monitor student's learning to provide ongoing feedback that can be used by instructors to improve their teaching and by students to improve their learning. It is given once weekly and the answers are presented and discussed immediately with you after the assessment.

2. Summative

It is used to evaluate student's achievements at the end of an instructional unit. The grades tell whether the student achieved the learning goal or not.

- 1- 20% of the degree (30 degrees): At the end of the block (Electronic MCQ exam: case scenarios, clinical photos).
- 2- 10% of the degree (15 degrees): At the end of the block: for Portfolio.

(Attendance, Assignments, and Attendance of formative exam)

3-40% of the degree (60 degrees): Final written MCQ exam at the end of the year.





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4- 30% of the degree (45 degrees): Final clinical exam at the end of the year (OSCE exam: Static stations in MCQ; Dynamic stations with checklist)

Assessment task	Type of assessment	Proportion of total assessment	
		%	Marks
End block exam	Case based MCQ (best answer)	20%	30
Portfolio	Task based log	10%	15
Final written exam	MCQ (best answer)	40%	60
OSCE Final	Typical OSCE stations using standardized, real or skill lab encounters	30%	45
Total		100%	150

Block evaluation

- Students' results
- Students' feedback
- Tutors' feedback





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Block contents

Lecture Topics and Their Intended Learning Outcomes

Choose one source for each topic

Topic		No of Hours			
The course	30 hours				
The Ear	10 hours				
	Contact hours	Week	ILOS	Reference (Department book)	
1- Diseases of external ear: - Anatomy of the external ear a- Congenital anomalies of ear, wax, foreign bodies b- Otitis externa c- Tumors of the external ear	1	1 st week	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8, K 9	P 1-14 37:38 43:54	
2- Trauma to the ear: (Haematoma auris, perichondritis, TM perforation, TB fracture, otitic barotrauma)	1	1 st week	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8, K 9	P 38:43 55:59	
 3- Diseases of middle ear: - Anatomy of the middle ear a- Acute, chronic SOM b- Complications of SOM c- Non-suppurative OM - Otosclerosis - Tumors 	1 2 1	1 st week	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8, K 9	P 1-14 60:93	
4- Facial nerve paralysis	1	1 st week	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8, K 9	P 15-16 26-27 100:104	





		1		
5- Diseases of inner ear:				
- Anatomy of the inner ear			K 1, K 2,	70
a- Labyrinthitis (Bacterial, viral, toxic)	1	2 nd	K 3, K 4, K 5, K 6,	P 1-14
b- Vertigo (Meniere's syndrome, Vestibular neuronitis,	1	week	K 7, K 8,	94 : 99
BPPV) and acoustic neuroma	•		K 9	
6- Hearing loss in adults and children and			K 1, K 2,	P
	1	2 nd	K 3, K 4,	25-27
management	1	week	K 5, K 6, K 7, K 8,	28-30 31:33
		.,	K 7, K 8,	105
The Mouth and Pharynx			6 hours	
1- Diseases of nasopharynx:			K 1, K 2,	n
- Anatomy of the nasopharynx	2	2 nd	K 3, K 4,	P 236-249
a- Adenoids, snoring and OSA		week	K 5, K 6, K 7, K 8,	267-270
b- Benign and malignant NP tumors			K 9	311-318
2- Diseases of oropharynx:			K 1, K 2,	P
- Anatomy of the oropharynx	1	2 nd	K 3, K 4, K 5, K 6,	236-249
a- Acute and chronic inflammations	1	week	K 7, K 8,	272-291 307-310
b- Oropharyngeal ulcerations and tumors	_		K 9	307-310
3- Suppuration of the spaces related to pharynx		2 nd	K 1, K 2, K 3, K 4,	
	1	week	K 5, K 4,	P 292-299
			K 7, K 8,	272-277
4- Diseases of hypopharynx:			K 9	
- Anatomy of the hypopharynx		4	K 1, K 2, K 3, K 4,	P 236-249
a- Plummer Vinson's syndrome	1	3 rd	K 5, K 6,	288-289
b- Hypopharyngeal pouch		week	K 7, K 8,	319-322 324-325
c- Hypopharyngeal carcinoma			K 9	324-323
The esophagus			1 hour	
1- Dysphagia: causes, management			K 1, K 2,	P
- Anatomy of theoesophagus	,	3 rd	K 3, K 4,	P 250-253
- Corrosive swallow - FB swallowing		week	K 5, K 6, K 7, K 8,	263-266
- Achalasia - Tumors			K 9	326-331
The Nose and Paranasal sinuses	8 hours			
1- Anatomy of the nose and nasal septum			K 1, K 2,	
2- Congenital malformations, and foreign bodies	2	3 rd	K 3, K 4, K 5, K 6,	P
3- Trauma to the nose - Diseases of nasal septum		week	K 7, K 8,	263-266
- Discuses of flasar septum			K 9	





	1	_	1	
3- Acute and chronic inflammations of the nose	1	3 rd week	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8, K 9	P 166-187
4- Allergy and nasal polyps	1	3 rd week	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8, K 9	P 206-210
5- Epistaxis	1	4 th week	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8, K 9	P 145-150
6- Anatomy of the paranasal sinuses			K 1, K 2,	P
- Acute and chronic sinusitis- Fungal sinusitis	1	4 th week	K 3, K 4, K 5, K 6, K 7, K 8, K 9	127-132 134-135 188-196
7- Complications of sinusitis	1	4 th week	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8, K 9	P 197-205
8- Cysts and tumors of nose, PNS	1	4 th week	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8, K 9	P 211-220
The Larynx		4	4 hours	
1- Anatomy of the larynx - Congenital anomalies - Trauma to the larynx	1	4 th week	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8, K 9	P 333-345 353-361
3- Inflammations of the larynx	1	5 th week	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8, K 9	P 364-372
4- Neurological disorders of the larynx			K 1, K 2,	
- Voice induced disorders (MAP lesions)	1	5 th week	K 3, K 4, K 5, K 6, K 7, K 8, K 9	P 382-385 373-375
5- Benign and malignant tumors of larynx	1	5 th week	K 1, K 2, K 3, K 4, K 5, K 6,	P 376-381





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			K 7, K 8, K 9	
The trachea and bronchi	1 hour			
1- FB inhalation ;Tracheostomy Anatomy of the trachea	1	5 th week	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8, K 9	P 346 386-391

^{*}Date of lectures is recorded in the timetable

Skills and tasks, and Their Intended Learning Outcomes. In addition to real patients and skills stated in the NARS should be learned either in practical or group discussion

Торіс			No of Hours	
The course		45	hours	
The Ear			hours	
Topic Contact hours			ILOs	
1- Anatomy, Examination and investigations	1	1 st week	S1- S12 G1-G18 A1-A4	
2- Symptoms of ear diseases:. - Deafness - Tinnitus - Vertigo - Pain - Facial nerve paralysis - Discharge	2	1 st week	S1- S12 G1-G18 A1-A4	
3- Clinical cases showing diseases of external ear: - Congenital - Wax - Foreign bodies, trauma - Otitis externa	2	1 st week	S1- S12 G1-G18 A1-A4	
 4- Clinical cases showing diseases of middle ear: - Congenital anomalies - Acute SOM - CSOM - Complications of OM - Non-suppurative OM 	5	1 st week	S1- S12 G1-G18 A1-A4	





5- Facial nerve paralysis	2	1 st week	S1- S12 G1-G18 A1-A4
6- Otosclerosis - ME Tumors	1	1 st week	S1- S12 G1-G18 A1-A4
 7- Audiology: Types of hearing loss in adults and children Assessment of hearing Management of deafness including HA and CI Vertigo Tinitus 	1	2nd week	S1- S12 G1-G18 A1-A4
8- Principles of some operations: - Myringotomy - Cortical mastoidectomy - Radical mastoidectomy - Stapedotomy - Tympanoplasty	1	2nd week	S1- S12 G1-G18 A1-A4
The Nose and Paranasal sinuses		12	hours
1- Anatomy, Examination and investigations including endoscopy	1	2nd week	S1- S12 G1-G18 A1-A4
2- Symptoms and signs of nasal diseases: - Nasal discharge - Nasal obstruction - Headache - Smell disorders - Proptosis - Epistaxis	1	2nd week	S1- S12 G1-G18 A1-A4
3- Clinical cases showing: - Congenital malformations - CSF rhinorrhea - Foreign bodies, trauma	2	2nd week	S1- S12 G1-G18 A1-A4
4- Clinical cases showing acute and chronic inflammations of the nose	2	2nd week	S1- S12 G1-G18 A1-A4
5- Clinical cases showing allergy and nasal polypi	1	2nd week	S1- S12 G1-G18 A1-A4
6- Clinical cases showing diseases of nasal septum	1	3 rd week	S1- S12 G1-G18
7- Clinical cases showing acute and chronic sinusitis and complications.	2	3 rd week	S1- S12 G1-G18 A1-A4
8- Cysts and tumors of the nose, PNS	1	3 rd week	S1- S12 G1-G18 A1-A4





 9- Principles of some operations: - Radical antrum operation - Septal surgery - FESS - Nasal endoscopy 	1	3 rd week	S1- S12 G1-G18 A1-A4
The Mouth, Pharynx and Esophagus		10.5	hours
1- Anatomy, Physiology, Examination and Investigations of pharynx, esophagus, Symptoms of pharyngeal diseases, Dysphagia	1	3 rd week	S1- S12 G1-G18 A1-A4
2- Clinical cases showing diseases of nasopharynx: - Adenoids - NP tumors	2	3 rd week	S1- S12 G1-G18 A1-A4
3- Clinical cases showing diseases of oropharynx: - Inflammations - Oropharyngeal ulcerations - Tumors	2	3 rd week	S1- S12 G1-G18 A1-A4
4- Clinical cases showing suppuration of the spaces related to pharynx	2	4 th week	S1- S12 G1-G18 A1-A4
5- Clinical cases showing diseases of hypopharynx: - Inflammations - Hypopharyngeal pouch - Tumors	1	4 th week	S1- S12 G1-G18 A1-A4
 6- Clinical cases showing diseases of esophagus including: - FB swallowing - Perforation - Achalasia - Cancer esophagus 	1.5	4 th week	S1- S12 G1-G18 A1-A4
7- Principles of some operations: - Tonsillectomy - Adenoidectomy	1	4 th week	S1- S12 G1-G18 A1-A4
The Larynx and Trachea		7.5 hou	rs
1- Anatomy, Examination and investigations of larynx and trachea	1	4 th week	S1- S12 G1-G18 A1-A4
2- Symptoms of laryngeal diseases: - Hoarseness of voice - Stridor - Pain, cough, expectoration	.75	4 th week	S1- S12 G1-G18 A1-A4
3- Clinical cases showing congenital anomalies of the larynx	.75	4 th week	S1- S12 G1-G18 A1-A4
4- Acute and chronic laryngitis	1	5 th week	S1- S12 G1-G18 A1-A4





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5- Neurological disorders of the larynx	1	5 th week	S1- S12 G1-G18 A1-A4
6- Benign and malignant tumors of larynx	1	5 th week	S1- S12 G1-G18 A1-A4
7- Principles of phoniatrics: - Voice induced disorders (MAP lesions)	.5	5 th week	S1- S12 G1-G18 A1-A4
8- Trauma to larynx; FB inhalation; Tracheostomy; Laryngofissure; Cricothyroidotomy	1.5	5 th week	S1- S12 G1-G18 A1-A4

^{*}Date is recorded in the timetable

Self -Directed Learning and Group Discussion (SDL &GD) (cases scenario with MCQs)

	Learning	ing and Group Discussion (SDL &GD) (ca		Date		Hours
No.	No. outcomes Title of cases and reference K and A		Weeks	from	to	
		Case 1a: Furunculosis of EAC Case 1b: Herpes Zoster Oticus Case 1c: Malignant otitis externa				2
1.		Case 1d:Traumatic perforation of tympanic membrane Case 1e:Longitudinal fracture of skull base Case 1f: Otitic barotrauma				2
		Case 1g: Acute suppurative otitis media Case 1h:CSOM, Tubotympanic type Case 1i:CSOM,Cholesteatoma				2
		Case 1j: Otosclerosis Case 1k: Glomus Jagulare Case 1L: Glomus Tympanicum				1





		_		
	Case 1M: Complication of CSOM:			3
	Mastoiditis			
	Case 1N: Complication of CSOM:			
	Petrositis			
	Case 10: Complication of CSOM:			
	Labrynithitis			
	Case 1P: Complication of CSOM:			
	:Lateral sinus thrombophelipitis			
	Case 1Q: Complication of CSOM:			
	Temporal lobe abscess			
	Case 1R: Complication of CSOM:			
	Cerebellar abscess			
	Case 1S: Complication of CSOM:			
	Meningitis			
	Case 1T: Complication of CSOM:			
	Facial palsy			
	Case 1U: Bell's Palsy			2
	Case 2a: Adenoid enlargement			1
	Case 2b: Angiofibroma			
	Case 2c: Nasopharyngeal carcinoma			4
	Case 2d: Adenotonsillar hypertrophy			1
	Case 2e: Peritonsillar abcess			2
2.	Case 2f: Acute retropharangeal abcess			
				1
	Case 2g: Post tonsillectomy bleeding			•
	Case 2h: Diphtheria			
	Case 2i: Agranulocytosis			1
	<u> </u>			1
	Case 2j : Plummer vinson syndrome			1
	Case 21: Consor by parkers by			
	Case 21 : Cancer hypopharynx			1
	Case 1m : FB swallow			1
	Case 1n: Postcorrosive dysphagia			
	Case 3a: Traumatic CSF rhinorrhea			1
	Case 3 b: Septal haematoma			
	Case 3c: Rhinoscaleroma			1
3.	Case 3d: Severe epistaxis			1
	Case 3e: Epistaxis			
	Case 3e: Complicated Septal surgery			1





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	Case 3f: Nasal allergy with allergic nasal polypi Case 3g: Allergic nasal polypi Case 3 h: Antrochoanal polyp	2
	Case 3i: Sinusitis with orbital complications Case 3j: Sinusitis complicated by cavernous sinus thrombosis Case 3k: Frontal mucopyocele	2
	Case 3L: Inverted papilloma Case 3m: Cancer maxilla	2
	Case 4a: Laryngomalacia Case 4b: Subglottic haemangioma	2
4.	Case 4c,4d,4e,4f: Acute laryngotracheobronchitis Case 4g: TB laryngitis Case 4h: Acute laryngitis Case 4i: VF leukoplakia	2
	Case 4j: Trans glottic carcinoma Case 4k: Rt glottic Carcinoma	2
	Case 4l, 4m, 4n: FB inhalation Case 4o: Tracheostomy Complications	2
	Total	38

*Date is recorded in the timetable

Blueprint of the block

N 0.	List of topics (Lectures/ cases)	Learning outcomes	Weight % from total	Total mark	End of the block	Final written exam
	The ear			10 hours		
	Diseases of external ear: • Anatomy of the external ear	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8, K 9	3.3 %	3	1	2





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	 Congenital anomalies of ear, wax, foreign bodies Otitis externa Tumors of the external ear 					
2	Trauma to the ear: (Haematoma auris, perichondritis, TM perforation, TB fracture, otitic barotrauma)	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8, K 9	3.3 %	3	1	2
3,4 ,5, 6	Diseases of middle ear: • Anatomy of the middle ear • Acute, chronic SOM • Complications of SOM • Non-suppurative OM • Otosclerosis • Tumors	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8, K 9	13.2%	12	4	8
7	Facial nerve paralysis	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8, K 9	3.3 %	3	1	2
8,9	Diseases of inner ear: • Anatomy of the inner ear • Labyrinthitis (Bacterial, viral, toxic) • Vertigo (Meniere's syndrome, Vestibular neuronitis, BPPV) • Acoustic neuroma	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8, K 9	6.6%	6	2	4
10	Hearing loss in adults and children and management	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8,K 9	3.3 %	3	1	2
	The Mouth and Pharynx	6 hours				





11,	Diseases of					
12	nasopharynx:	K 1, K 2,				
ļ	Adenoids, snoring	K 3, K 4,	6.6%	6		
	and OSA	K 5, K 6,			2	4
ļ	Benign and	K 7, K 8,				
ļ	malignant NP	K 9				
	tumors					
13,	Diseases of					
14	oropharynx:	K 1, K 2,				
ļ	 Acute and chronic 	K 3, K 4,	6.6%	6		
ļ	inflammations	K 5, K 6,			2	4
ļ	 Oropharyngeal 	K 7, K 8,				
ļ	ulcerations and	K 9				
l	tumors					
15	Suppuration of the	K 1, K 2,				
ļ	spaces related to	K 3, K 4,				
ļ	pharynx	K 5, K 6,	3.3 %	3	1	2
ļ		K 7, K 8,				
1/	0	K 9				
16	Diseases of					
ļ	hypopharynx:					
ļ	Plummer Vinson's	K 1, K 2,	3.3 %	3		
ļ	syndrome	K 3, K 4,				
	Hypopharyngeal	K 5, K 6,			1	2
	pouch	K 7, K 8,				
	Hypopharyngeal	K 9				
	carcinoma					
	Carcinoma					
	The esophagus	1 hour				
17	Dyanhagia: causes					
1/	Dysphagia: causes,					
ļ	management	K 1, K 2,				
	• Corrosive swallow	K 3, K 4,	2 2 0/			
	 FB swallowing 	K 5, K 6,	3.3 %	3	1	2
	 Achalasia 	K 7, K 8,				
ļ	• Tumors	K 9				
	The Nose and					
	Paranasal	8 hours				
	sinuses					
18,	Congenital					
	O	K 1, K 2,				
10	malformations					
19	malformations	K 3, K 4,	<i>4.40/</i>	<i>(</i>	l ,	Į.
19	Foreign bodies	K 3, K 4, K 5, K 6,	6.6%	6	,	4
19	Foreign bodies Trauma to the nose		6.6%	6	2	4
19	Foreign bodies	K 5, K 6,	6.6%	6	2	4





20	Acute and chronic	K 1, K 2,				
	inflammations of	K 3, K 4,				
	the nose	K 5, K 6,	3.3 %	3	1	2
		K 7, K 8,			-	
		K 9				
21	Allergy and nasal	K 1, K 2,				
	polyps	K 3, K 4,			1	2
		K 5, K 6, K 7, K 8,K 9	3.3 %	3	1	
22	Epistaxis	K 1, K 2,				
22	Epistaxis	K 1, K 2, K 3, K 4,				
		K 5, K 6,	3.3 %	3		
		K 7, K 8,	3.3 /0	3	1	2
		K 9				
23	Acute and chronic	K 1, K 2,				
	sinusitis	K 3, K 4,				
	Fungal sinusitis	K 5, K 6,	3.3 %	3	1	2
		K 7, K 8,				
24	C 1: 4: 6	K 9				
24	Complications of	K 1, K 2,				
	sinusitis	K 3, K 4, K 5, K 6,	2.2.0/	2	1	2
		K 3, K 0, K 7, K 8,	3.3 %	3	1	2
		K 9				
25	Cysts and tumors of	K 1, K 2,				
	nose, PNS	K 3, K 4,				
	11050, 1115	K 5, K 6,	3.3 %	3	1	2
		K 7, K 8,	0.0 70			
		K 9				
	The Larynx			4 hours		
	-		T	4 Hours		I
26	Congenital	K 1, K 2,				
	anomalies	K 3, K 4,		-	1	
	Trauma to the	K 5, K 6, K 7, K 8,	3.3 %	3	1	2
	larynx	K /, K o, K 9				
27	Inflammations of the	K 1, K 2,				
2,	larynx	K 1, K 2, K 3, K 4,				
	iai yiix	K 5, K 6,	3.3 %	3	1	2
		K 7, K 8,	3.3 /0	3		
		K 9				
28	Neurological	W 1 W 2				
	disorders of the	K 1, K 2,				
	larynx	K 3, K 4,	3.3 %	3	1	2
	Voice induced	K 5, K 6, K 7, K 8,			1	<u> </u>
	disorders (MAP	K /, K o, K 9				
	lesions)	13.7				
1	1 /		1		I	1





29	Benign and malignant tumors of larynx	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8, K 9	3.3 %	3	1	2
	The trachea and bronchi		11	nour		
30	FB inhalation Tracheostomy	K 1, K 2, K 3, K 4, K 5, K 6, K 7, K 8, K 9	3.3 %	3	1	2
	Total		100%	90 marks	30 marks	60 marks Including 25% short answer questions and modified essay questions (15 marks)

NO.	LIST OF TOPICS	Learning outcomes	Weight	Marks الدور الثاني ، ٤٪	Marks الدور الأول ۳۰٪
	The ear	15 hours			
	1- Anatomy, Examination and investigations	S1- S12 G1-G18 A1-A4	2.2 %	1	1
	2- Symptoms of ear diseases: - Deafness - Tinnitus - Vertigo - Pain - Facial nerve paralysis - Discharge	S1- S12 G1-G18 A1-A4	4.4 %	3	2
	3- Clinical cases showing diseases of external ear: - Congenital - Wax - Foreign bodies, trauma - Otitis externa	S1- S12 G1-G18 A1-A4	4.4 %	3	2





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	4- Clinical cases showing				5
	diseases of middle ear:				3
	- Congenital anomalies - Trauma	S1- S12			
	- Trauma - Acute SOM	G1-G18	11 %	5	
	- CSOM	A1-A4			
	- Complications of OM				
	- Non-suppurative OM				
	5- Facial nerve paralysis	S1- S12			
	The state of the s		4.4.0/		2
		G1-G18	4.4 %	3	
		A1-A4			
	6- Otosclerosis	S1- S12			_
	- ME Tumors	G1-G18	2.2 %	1	1
		A1-A4	2.2 /0	1	
		A1-A4			
	7- Audiology:				1
	- Types of hearing loss in				1
	adults and children	S1- S12			
	- Assessment of hearing	G1-G18	2.2 %	1.5	
	- Management of deafness	A1-A4			
	including HA and CI				
	- Vertigo - Tinitus				
	8- Principles of some				
	operations:				1
	- Myringotomy	S1- S12			
	- Cortical mastoidectomy	G1-G18	2.2 %	1.5	
	- Radical mastoidectomy	A1-A4			
	- Stapedotomy				
	- Tympanoplasty				
	The N	Nose and PNS			
	1- Anatomy, Examination	S1- S12			
	and investigations	G1-G18	2.2 %	1	1
	including endoscopy	A1-A4			
	2- Symptoms and signs of				
	nasal diseases:				1
	- Nasal discharge	S1- S12			
	- Nasal obstruction	G1-G18	2.2 %	1	
	- Headache	A1-A4	, ,		
	- Smell disorders	122 127			
	- Proptosis				
	- Epistaxis				





3- Clinical cases showing:- Congenital malformations- Foreign bodies, trauma,- CSF rhinorrhea	S1- S12 G1-G18 A1-A4	4.4 %	3	2
4- Clinical cases showing acute and chronic inflammations of the nose	S1- S12 G1-G18 A1-A4	4.4 %	3	2
5- Clinical cases showing allergy and nasal polypi	S1- S12 G1-G18 A1-A4	2.2 %	1.5	1
6- Clinical cases showing diseases of nasal septum	S1- S12 G1-G18 A1-A4	2.2 %	1.5	1
7- Clinical cases showing acute and chronic sinusitis and complications.	S1- S12 G1-G18 A1-A4	4.4 %	3	2
8- Cysts and tumors of the nose, PNS	S1- S12 G1-G18 A1-A4	2.2 %	1.5	1
9- Principles of some operations: - Radical antrum operation - Septal surgery - FESS - Nasal endoscopy	S1- S12 G1-G18 A1-A4	2.2 %	1.5	1
The Mouth , Pl	narynx and Eso	phagus		
1- Anatomy, Physiology, Examination and Investigations of pharynx, esophagus, Symptoms of pharyngeal diseases, Dysphagia	S1- S12 G1-G18 A1-A4	2.2 %	1	1
2- Clinical cases showing diseases of nasopharynx: - Adenoids - NP tumors	S1- S12 G1-G18 A1-A4	4.4 %	3	2
3- Clinical cases showing diseases of oropharynx: - Inflammations - Oropharyngeal ulcerations - Tumors	S1- S12 G1-G18 A1-A4	4.4%	3	2
4- Clinical cases showing suppuration of the spaces related to pharynx	S1- S12 G1-G18 A1-A4	4.4 %	3	2





5- Clinical cases showing diseases of hypopharynx: - Inflammations - Hypopharyngeal pouch - Tumors 6- Clinical cases showing	S1- S12 G1-G18 A1-A4	2.2 %	1	1
diseases of esophagus including: - FB swallowing - Perforation - Achalasia - Cancer esophagus	S1- S12 G1-G18 A1-A4	3.3 %	2	1.5
7- Principles of some operations: - Tonsillectomy - Adenoidectomy	S1- S12 G1-G18 A1-A4	2.2 %	1.5	1
The Lary	nx and Trache	ea		
1- Anatomy, Examination and investigations of larynx and trachea	S1- S12 G1-G18 A1-A4	2.2 %	1.5	1
2- Symptoms of laryngeal diseases: - Hoarseness of voice - Stridor - Pain - Cough, expectoration	S1- S12 G1-G18 A1-A4	1.65 %	1	0.75
3- Clinical cases showing congenital anomalies of the larynx	S1- S12 G1-G18 A1-A4	1.65 %	1	0.75
4- Acute and chronic laryngitis	S1- S12 G1-G18 A1-A4	2.2 %	1.5	1
5- Neurological disorders of the larynx	S1- S12 G1-G18 A1-A4	2.2 %	1	1
6- Benign and malignant tumors of larynx	S1- S12 G1-G18 A1-A4	2.2 %	1	1
7- Principles of phoniatrics: - Voice induced disorders (MAP lesions)	S1- S12 G1-G18 A1-A4	1.1 %	0.5	0.5
8- Trauma to larynx; FB inhalation; Tracheostomy;	S1- S12 G1-G18 A1-A4	3.3 %	2	1.5





Laryngofissure; Cricothyroidotomy			
	100%	60 marks	45 marks 30%

Assessment task	Type of assessment	Proportion of total		
		%	Marks	
Mid-term exam	At least case based MCQ (best answer)	20%	30	
Portfolio	Assignments	10%	15	
(75% of its mark is	Quizzes Formative assessment			
A requirement to				
enter final exam)				
Final written exam	75% MCQ (best answer)	40%	60	
	25% short answer questions			
	And modified			
	short assay = 15 marks			
Practical /clinical	OSCE	30%	45	
Total		100%	150 marks	
	الدور الثاني			





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Final exam	25% Short answer questions and modified essay questions= (22.5 marks)75% MCQs	60%	90	
Practical exam	OSCE	40%	60	
Total		100%	150	

Lecture Outlines

Lecture (1) Diseases of external ear

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Discus diagnosis and illustrate variant types of EAC anomalies.
- 2. Identify ear wax, indications and complications of ear wash.
- 3. Identify methods of FB removal of the ear.
- 4. Identify different types of otitis externa.

Contents:

- Anatomy of external ear
- Congenital anomalies of the ear;
 - *Embryological background
 - *Microtia, Macrotia, Anotia
 - *Accessory auricle
 - *Preauricular cyst and sinus
 - *Bat ear
 - *Congenital meatal atresia; (clinical picture, investigation, treatment)
- Ear wax; (definition, clinical picture, treatment)
- Ear wash; (indications, contraindications, technique, complications).
- Foreign body in ear; (type of patient, type of FB, clinical picture, complications, treatment).
- Otitis externa; (definition, classification, etiology, clinical picture, treatment).

Lecture (2) Trauma to the ear

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Identify traumatic conditions of the ear
- 2. Discuss diagnosis, management of skull base fracture
- 3. Discuss diagnosis, management of traumatic TM perforation





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4. Identify causes, symptoms, diagnosis and management of otitic barotrauma on the ear

Contents:

- **Haematoma auris**: (definition, etiology, clinical picture, complications, treatment)
- **Perichondritis**; (definition, etiology, clinical picture, complications, treatment)
- **TM perforation**; (TM anatomy, etiology, clinical picture, differential diagnosis, treatment)
- **Otitic barotrauma**; (ET anatomy, definition, predisposing factors, mechanism, clinical picture, treatment)
- Fracture base of the skull; (types, incidence, etiology, clinical picture, investigations, treatment).

Lecture (3) Diseases of middle ear

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Identify variant of otitis media
- 2. Discus symptoms, signs, diagnosis and management of AOM specially in children
- 3. Describe proper plan for chronic discharging ear
- 4. Discus symptoms, signs, diagnosis and management of chronic SOM
- 5. Differentiate between tubotympanic and atticoantral types of chronic SOM

Contents:

- 1- Anatomy of the middle ear
- **2- Acute otitis media;** (definition, etiology, pathology, clinical picture, treatment). **Acute otitis media in infants and children** (definition, etiology, pathology, clinical picture, treatment).
- **3- Chronic suppurative OM;** (definition, types)
 - **Safe (tubotympanic);** (definition, characters, etiology, clinical picture, investigations, treatment)
 - **Unsafe (attioantral);** (definition, characters, etiology, clinical picture, investigations, treatment)
 - *Differentiation between tubotympanic and atticoantral types of chronic SOM

Lecture (4) Diseases of middle ear

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Identify classification of complications of otitis media.
- 2. Identify manifestations of complicated otitis media.
- 3. Discuss clinical picture and diagnosis of complications of OM.
- 4. Describe proper investigations for diagnosis of complicated otitis media.
- 5. Illustrate the guidelines in management of complicated OM.

Contents:

Mastoid air cells anatomy

Complications of SOM; (definition, etiology, types)





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1- Cranial:

Mastoiditis, Mastoid abscess

Petrositis

Labrynthitis

Otogenic facial paralysis

2- ExtraCranial : Otitis externa, Bezold's abscess, Citteli 's abscess, Jugular vein thrombosis

Lecture (5) Diseases of middle ear

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Identify manifestations of complicated otitis media
- 2. Clarify types of complication of OM
- 3. Diagnose of complications of OM
- 4. Describe proper investigations for diagnosis
- 5. Illustrate the guidelines in management of complicated OM

Contents:

Complications of SOM;

3- IntraCranial:

Lateral sinus thrombophlebitis

Extradural abscess

Subdural empyema

Brain abscess

Meningitis

Lecture (6) Diseases of middle ear

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Clarify types of chronic non-suppurative otitis media.
- 2. Identify manifestations and managment of chronic non-suppurative otitis media.
- 3. Discus diagnosis of Otosclerosis and its management.
- 4. Describe proper investigations for diagnosis of middle ear tumor.
- 5. Illustrate the guidelines in management of middle ear tumors.

Contents:

Chronic non-suppurative OM;

- Secretory OM; (definition, etiology, clinical picture, investigations, treatment).
- Adhesive OM (definition, etiology, types, clinical picture, investigations, treatment).
- Tympanosclerosis (definition, pathology, cause, clinical picture, treatment).
- Otosclerosis; (definition, causes, types, incidence, clinical picture, investigations, treatment).
- **Tumors** (types, incidence, etiology, clinical picture, investigations, treatment).





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Lecture (7) Facial nerve paralysis

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Describe Facial nerve anatomy.
- 2. Identify the etiology of facial nerve paralysis.
- 3. Discus the clinical picture of facial nerve paralysis.
- 4. Identify Investigations of facial nerve paralysis.
- 5. Clarify Pathology of facial nerve paralysis.
- 6. Enumerate the guidelines of facial nerve treatment.

Contents:

Facial nerve anatomy
Etiology of Facial nerve paralysis
Clinical picture
Investigations
Pathology of facial nerve paralysis
Results of nerve paralysis
Treatment
Bell s palsy

Lecture (8) Diseases of inner ear

Specific learning Objectives

Traumatic Facial Paralysis

By the end of the lecture, the student will be able to:

- 1. Describe types of Labyrinthitis.
- 2. Identify the etiology of Labyrinthitis.
- 3. Discuss the clinical picture of Labyrinthitis
- 4. Identify Investigations of Labyrinthitis.
- 5. Clarify Pathology of Labyrinthitis.
- 6. Enumerate the guidelines of Labyrinthitis management.

Contents:

Anatomy of inner ear

Labyrinthitis (Bacterial, viral, toxic) Definition, Types, Clinical picture, Investigations, Treatment

Lecture (9) Diseases of inner ear





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Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Identify physiology of equilibrium.
- 2. Discuss causes of vertigo.
- 3. Discuss the etiology, incidence, clinical picture, investigations, , treatment of Meniere's disease
- 4. Dicuss etiology, incidence, clinical picture, investigations, , treatment of Vestibular neuronitis
- 5. Clarify BPPV etiology, incidence, clinical picture, investigations, , treatment
- 6. Enumerate the general guidelines of vertigo management

Contents:

Vertigo; (definition, causes, investigations)

Meniere's syndrome; (definition, etiology, incidence, clinical picture, investigations, treatment)

Vestibular neuronitis, (definition, etiology, treatment)

BPPV; (characters, causes, treatment)

Lecture (10)

Hearing loss in adults and children

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Identify types of hearing loss.
- 2. Identify etiology of hearing loss.
- 3. Discuss assessement of hearing in a child and adult.
- 4. Identify plan for treatment modalities of hearing loss.

Contents:

Deafness; (definition, types, assessment of hearing in children and adult, management modalities of hearing loss).

Conductive hearing loss; (definition, etiology).

Sensorineural hearing loss; (definition, etiology).

Mixed hearing loss; (definition, etiology).

Psychogenic hearing loss

Deafness in children (Deaf-Mutism); (causes, assessment of hearing in children).

Lecture (11) Diseases of the Nasopharynx

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Identify diagnosis, and management of Adenoid
- 2. Identify diagnosis, and management Obstructive Sleep Apnea.

Contents:





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Anatomy of the nasopharynx

Adenoid; (definition, age, cause, clinical picture, investigations, treatment).

Snoring and OSA; (definition, types of apnea, causes of OSA, clinical picture, complications, investigations, treatment).

Lecture (12) Diseases of the Nasopharynx

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Identify diagnosis and management of angiofibroma.
- 2. Identify diagnosis and management nasopharyngeal carcinoma.

Contents:

Benign and malignant NP tumors

Angiofibroma; (definition, age, sex, causes, pathology, clinical picture, investigations, treatment) **Nasopharyngeal carcinoma;** (age, sex, race, predisposing factors, pathology, clinical picture, investigations, treatment).

Lecture (13) Diseases of the Oropharynx

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Identify types of acute and chronic pharyngitis
- 2. Discuss the clinical picture of various types of acute and chronic pharyngitis
- 3. Discuss the proper investigations for acute and chronic pharyngitis
- 4. Discuss the proper management of acute and chronic pharyngitis

Contents:

Anatomy of oropharynx

Acute and chronic inflammations

Acute tonsillitis; (definition, causes, pathology, clinical picture, investigations, complications, treatment)

Chronic tonsillitis; (definition, causes, pathology, clinical picture, investigations, treatment) **Septic Focus;** (definition, examples clinical picture)

Diphtheria; (causative organism, mode of transmission, age, incubation period, types, pathology, clinical picture, complications, investigations, treatment, DD).

Vincent angina; (causative organism, predisposing factors, clinical picture, investigations, treatment).

Oral monliasis; (causative organism, predisposing factors, clinical picture, treatment).

Infectious mononucleosis; (causative organism, clinical picture, investigations, treatment)

Agranulocytosis; (definition, etiology, clinical picture, investigations, treatment).

Leukemia; (definition, etiology, clinical picture, investigations, treatment).

Acute non - specific pharyngitis; (causative organism, clinical picture, treatment)

Chronic non specific pharyngitis; (etiology, clinical picture, treatment).





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Chronic specific pharyngitis; (pharyngoscleroma, TB, syphilis).

Lecture (14) Diseases of the Oropharynx

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Identify diagnosis, causes and management of oropharyngeal ulcerations.
- 2. Identify diagnosis and management of oropharyngeal tumors.

Contents:

Oropharyngeal ulcerations and tumors;

Oropharyngeal ulcerations; (definition, causes, clinical picture, treatment).

Oropharyngeal tumors; benign and malignant tumors

(age, sex, predisposing factors, pathology, clinical picture, investigations, treatment).

Lecture (15)

Suppurations of the spaces related to the Pharynx

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Enumerate pharyngeal suppurations
- 2. Identify diagnosis and management of peritonsillar abscess (quinsy.
- 3. Identify diagnosis and management of parapharyngeal abscess.
- 4. Identify diagnosis and management of retropharyngeal abscess (acute and chronic).
- 5. Identify diagnosis and management of Ludwig's angina.

Contents:

Peritonsillar abscess (quinsy); (definition, peritonsillar space, etiology, clinical picture, complications, DD, treatment).

Parapharyngeal abscess; (definition, parapharyngeal space, etiology, clinical picture, investigations, complications, DD, treatment).

Retropharyngeal abscess; acute and chronic; (definition, retropharyngeal space, etiology, clinical picture, complications, DD, treatment).

Ludwig's angina; (definition, submandibular space, etiology, clinical picture, complications, treatment).

Lecture (16) Diseases of the hypopharynx

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Enumerate causes of hypopharyngeal dysphagia.
- 2. Identify diagnosis and management of Plummer Vinson's syndrome.





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- 3. Identify diagnosis and management of hypopharyngeal pouch.
- 4. Identify diagnosis and management of hypopharyngeal carcinoma.

Contents:

Anatomy of hypopharynx

Plummer Vinson's syndrome; (definition, etiology, clinical picture, investigations, prognosis, DD, treatment)

Hypopharyngeal pouch; (definition, etiology, clinical picture, investigations, treatment).

Hypopharyngeal carcinoma; (age, sex, predisposing factors, pathology, clinical picture, investigations, treatment).

Lecture (17) Diseases of the Esophegaus

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Identify the meaning of dysphagia.
- 2. Enumerate causes of dysphagia.
- 3. Identify investigations of dysphagia.
- 4. Discuss the plan for management of dysphagia including: Corrosive swallow ,FB swallowing .Achalasia and Tumors

Contents:

Anatomy of oesophagus

Dysphagia: (definition, causes, investigations).

Corrosive swallow; (etiology, types of corrosives, clinical pictue, investigations, treatment).

FB swallowing; (type of FB, type of patient, site of impaction, clinical picture, investigations, treatment).

Achalasia; (definition, causes, clinical picture, investigations, treatment)

Tumors; benign and malignant tumours

Cancer Oesophagus; (age, sex, predisposing factors, pathology, clinical picture, treatment).

Stricture oesophagus; (causes)

Lecture (18) Diseases of the Nose and PNS

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Identify variable nasal anomalies.
- 2. Identify diagnosis and management of choanal atresia.
- 3. Identify diagnosis and management of congenital nasal mass.
- 4. Identify diagnosis and management of foreign body in the nose.

Contents:

Congenital malformations and foreign bodies

Anatomy of the nose





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Choanal atresia: (definition, causes, types, clinical picture, investigations, treatment).

Congenital nasal mass: (classification, investigations, treatment).

Foreign body in the nose: (type of patient, type of FB, clinical picture, complications, treatment).

Lecture (19) Diseases of the Nose and PNS

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Identify the variable effects of trauma to the nose.
- 2. Discuss diagnosis and management of fracture nasal bones.
- 3. Discuss diagnosis and management of oro-antral fistula.
- 4. Discuss diagnosis and management of CSF rhinorrhea.
- 5. Discuss diagnosis and management of deviated septum.
- 6. Discuss diagnosis and management of septal hematoma.
- 7. Discuss diagnosis and management of septal abscess.
- 8. Discuss diagnosis and management of Septal perforation.

Contents:

Trauma to the nose - Diseases of nasal septum

Anatomy of nasal septum

Fracture nasal bones; (causes, clinical picture, investigations, treatment).

Oro-antral fistula; (definition, causes, clinical picture, investigations, treatment).

CSF rhinorrhea; (definition, origin, causes, clinical picture, complications, investigations, treatment).

Deviated septum; (causes, pathology, clinical picture, complications, investigations, treatment).

Septal hematoma; (definition, causes, clinical picture, complications, treatment).

Septal abscess; (definition, causes, clinical picture, complications, treatment).

Septal perforation; (causes, clinical picture, treatment).

Lecture (20) Diseases of the Nose and PNS

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Categorize the types of acute and chronic inflammation of the nose
- 2. Clarify the clinical pictures of these inflammations
- 3. Identify the etiology of these inflammations
- 4. Clarify the clinical pictures of these variables inflammations
- 5. Identify the proper investigations
- 6. Identify the proper treatment of these inflammations

Contents:

Acute and chronic inflammations of the nose

Furunculosis; (definition, causes, clinical picture, complications, treatment).

Vestibulitis; (definition, causes, clinical picture, treatment).





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Acute rhinitis

Diphtheria; (causes, clinical picture, treatment).

Common cold; (causes, clinical picture, complications, treatment).

Influenza; (causes, clinical picture, complications, treatment).

Exanthemata; (clinical picture).

Chronic rhinitis

Hypertrophic rhinitis; (definition, causes, clinical picture, treatment).

Atrophic rhinitis; (definition, causes, clinical picture, treatment).

Rhinoscleroma; (causes, pathology, clinical picture, investigations, complications, treatment).

Lupus; (causes, sites, clinical picture, treatment).

Syphilis; (causes, types, sites, clinical picture, treatment).

Leprosy; (causes, sites, clinical picture, treatment).

Lecture (21) Diseases of the Nose and PNS

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Clarify Allergic rhinitis: types, causes, pathogenesis, clinical picture, investigations, treatment.
- 2. Clarify Allergic polyps: clinical picture, investigations, treatment.
- 3. Clarify Antro-choanal polyp: causes, clinical picture, investigations, treatment.
- 4. Clarify Vasomotor rhinitis: clinical picture, treatment

Contents:

Allergy and nasal polyps

Allergic rhinitis: definition, types, causes, pathogenesis, clinical picture, investigations, treatment.

Allergic polyps: definition, clinical picture, investigations, treatment,

Antro-choanal polyp: definition, causes, clinical picture, investigations, treatment.

Vasomotor rhinitis: definition, clinical picture, treatment.

Lecture (22) Diseases of the Nose and PNS

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1.Define of epistaxis
- 2. Clarify Causes of epistaxis
- 3. Know the Blood supply of the nose
- 4. Clarify the proper Management of epistaxis.

Contents:

Epistaxis:

Definition, Blood supply, Causes and Management.





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Lecture (23) Diseases of the Nose and PNS

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1.Identify types of sinusitis
- 2. Clarify of sinusitis in children
- 3. Clarify the clinical picture of sinusitis
- 4. Clarify the proper management of sinusitis
- 5. Identify the fungal sinusitis, how to manage and its complications.

Contents:

Acute and chronic sinusitis - Fungal sinusitis

Anatomy of paranasal sinuses

Acute sinusitis: definition, causes, clinical picture, investigations, treatment. **Chronic sinusitis**: definition, causes, clinical picture, investigations, treatment. **Sinusitis in children**: definition, causes, clinical picture, investigations, treatment.

Fungal sinusitis:

Mycetoma: causes, clinical picture, investigations, treatment.

Allergic fungal rhinosinusitis: causes, clinical picture, investigations, treatment.

Chronic invasive rhinosinusitis: causes, subtypes, clinical picture, investigations, treatment,

prognosis.

Acute invasive rhinosinusitis: causes, clinical picture, investigations, treatment, prognosis.

Lecture (24) Diseases of the Nose and PNS

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Identify the complications of sinusitis and their manifestations
- 2. Clarify the pathology of complicated sinusitis
- 3. Clarify the proper investigations of these complications
- 4. Clarify the proper management of these complications

Contents:

Complications of sinusitis

Orbital complications: definition, clinical picture, investigations, treatment.

Complication of posterior group of sinuses

Osteomyelitis of frontal bone: clinical picture, investigations, treatment.

Cavernous sinus thrombosis: causes, clinical picture, investigations, treatment.

Mucoceles: definition, causes, sites, pathogenesis, clinical picture, investigations, treatment.

Lecture (25) Diseases of the Nose and PNS





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Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Identify the nasal tumors and their manifestations
- 2. Clarify the pathology of nasal tumors
- 3. Clarify the proper investigations of the nasal tumors
- 4. Clarify the proper management of the nasal tumors
- 5. Clarify types of nasal cysts.

Contents:

Cysts and tumors of nose, PNS

Benign tumors

Osteoma: definition, sites, clinical picture, investigations, treatment.

Inverted papilloma: definition, sites, types, clinical picture, investigations, treatment, prognosis.

Hemangioma: types, treatment. Locally malignant tumors

Adamantinoma: origin, clinical picture, investigations, treatment.

Osteoclastoma: definition.

Fibrous dysplasia: definition, sites, types, clinical picture, investigations, treatment. **Malignant tumors**: causes, pathology, clinical picture, investigations, treatment.

Cysts of the nose and sinuses: classification.

Lecture (26) Diseases of the Larynx

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Clarify variable anomalies of the larynx
- 2. Identify the clinical manifestation of these anomalies
- 3. Clarify how to manage these anomalies
- 4. Clarify effects of trauma to the larynx
- 5. Clarify the clinical presentation of laryngeal trauma
- 6. Clarify the proper management of the trauma of the larynx

Contents:

Anatomy of the larvnx

Congenital anomalies

Congenital web: definition, clinical picture, treatment.

Laryngomalacia: definition, pathology, clinical picture, treatment. **Congenital subglottic stenosis**: definition, clinical picture, treatment.

Subglottic hemangioma: clinical picture, treatment.

Laryngo-tracheo-esophgeal cleft Congenital vocal cord paralysis





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Congenital cyst: clinical picture, treatment.

Trauma to the larynx: Types of trauma, clinical picture, treatment.

Lecture (27) Diseases of the Larynx

Specific learning Objectives

By the end of the lecture, the student will be able to:

1. Identify variable types of acute and chronic laryngitis

2. Clarify causes, clinical picture, investigations and treatment for these inflammations

Contents:

Inflammations of the larynx

Acute larvngitis

Acute nonspecific laryngitis: definition, causes, clinical picture, treatment.

Acute laryngitis in children: causes, treatment.

Acute epiglottitis: definition, causes, clinical picture, treatment.

Acute laryngotracheobronchitis: definition, causes, clinical picture, treatment. **Laryngeal diphtheria**: definition, causes, clinical picture, investigations, treatment.

Chronic laryngitis

Chronic atrophic laryngitis: definition, causes, clinical picture, treatment.

Chronic diffuse hypertrophic laryngitis: definition, causes, clinical picture, treatment.

Chronic localized hypertrophic laryngitis

Vocal cord nodules: cause, pathology, clinical picture, treatment. **Vocal cord polyp:** cause, pathology, clinical picture, treatment. **Leukoplakia:** cause, pathology, clinical picture, treatment.

Chronic laryngitis

Laryngoscleroma: definition, causes, site, clinical picture, investigations, treatment.

TB laryngitis: definition, causes, site, clinical picture, complications, treatment.

Syphilis: definition, causes, site, clinical picture, complications, treatment.

Leprosy: definition, causes, site, clinical picture, complications, treatment.

Fungal infection: causes.

Perichondritis of the larynx: definition, causes, clinical picture, complications, treatment.

Lecture (28) Diseases of the Larynx

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1.Identify MAP lesions
- 2. Clarify types of MAP lesions
- 3. Clarify the clinical manifestations of MAP lesions
- 4. Identify the guidelines of managements of MAP lesions

Contents:





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Neurological disorders of the larynx Voice

induced disorders (MAP lesions): causes ,clinical picture ,investigation and treatment

Lecture (29) Diseases of the Larynx

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Identify benign and malignant laryngeal lesions
- 2. Clarify types of benign and malignant laryngeal lesions
- 3. Clarify predisposing factors of benign and malignant laryngeal lesions
- 4. Clarify the clinical manifestations of benign and malignant laryngeal lesions
- 5. Identify the guidelines of managements of benign and malignant laryngeal lesions

Contents:

Benign and malignant tumors of larynx

Benign tumors

- -Single papilloma: cause, pathology, clinical picture, treatment, prognosis.
- -Multiple papilloma: cause, pathology, clinical picture, treatment, prognosis.

Cancer larynx: incidence, causes, pathology, prognosis, clinical picture, investigations, TNM classifications, treatment.

Lecture (30) Diseases of the Trachea and Bronchi

Specific learning Objectives

By the end of the lecture, the student will be able to:

- 1. Identify the FB inhalation types of FB, sites, clinical picture, investigations, treatment
- 2.Identify the indications, types, values, technique, post-operative care, complications of tracheostomy.

Contents:

Anatomy of the trachea

FB inhalation; (type of patient, types of FB, sites, clinical picture, investigations, treatment.

Tracheostomy; (definition, indications, types, values, technique, post operative care, complications).





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Outlines of topics for self-directed learning and case based discussions

Case 1a: Frunculosis of EAC

Specific learning Objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination, and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with frunculosis of EAC.

Case 1b: Herpes Zoster Oticus

Specific learning Objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory test findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Herpes Zoster Oticus.

Case 1c: Malignant Otitis Externa

Specific learning Objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory test findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Malignant Otitis Externa

Case 1d: Traumatic perforation of the Tympanic membrane

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Tympanic membrane perforation.

Case 1e: Longitudinal fracture of the skull base

Specific learning Objectives:





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- 1. Integrate the results of history, physical examination and laboratory test findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Longitudinal fracture of the skull base.

Case 1f: Otitic barotrauma

Specific learning Objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination, and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Otitic barotrauma.

Case 1g: Acute suppurative otitis media

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Identify the risk factors of acute suppurative otitis media.
- 3. Construct appropriate management regarding a case with acute suppurative otitis media.

Case 1h: CSOM, Tubotympanic type

Specific learning Objectives:

By the end of the lecture the student will be able to:

- 1- Integrate the results of history, physical examination and laboratory test findings into a meaningful diagnostic formulation.
- 2- Select the appropriate investigations.
- 3- Construct appropriate management regarding a case with CSOM, Tubotympanic type.

Case 1i: CSOM, Cholestatoma

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with CSOM, Cholestatoma.

Case 1j: Otosclerosis

Specific learning objectives:





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- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Otosclerosis.

Case 1k: Glomus Jagulare

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Glomus Jagulare.

Case 1L: Glomus Tympanicum

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Glomus Tympanicum.

Case 1m: Complication of CSOM, Mastoiditis

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Complicated CSOM with mastoiditis.

Case 1n: Complication of CSOM, Petrositis

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Complicated CSOM with Petrositis.

Case 10: Complication of CSOM, Labyrinthitis

Specific learning objectives:

By the end of case discussion, the student will be able to:

1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.





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- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Complicated CSOM with Labrynthitis.

Case 1p: Complication of CSOM, Lateral sinus thrombophlebitis

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Complicated CSOM with Lateral sinus thrombophlebitis.

Case 1q: Complication of CSOM, Temporal lobe abscess

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Complicated CSOM with Temporal lobe abscess.

Case 1r: Complication of CSOM, Cerebellar abscess

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Complicated CSOM with Cerebellar abscess.

Case 1s: Complication of CSOM, Meningitis

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Complicated CSOM with meningitis.

Case 1t: Complication of CSOM, Facial nerve palsy

Specific learning objectives:





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- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Complicated CSOM with facial nerve palsy.

Case 1u: Bell's palsy

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Identify the risk factors and treatment of Bell's palsy.
- 4. Construct appropriate management regarding a case with Bell's palsy.

Case 2a: Adenoid Enlargement

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Identify the treatment of adenoid enlargement.

Case 2b: Angiofibroma

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Identify the complications and the management of angiofibroma.

Case 2c: Nasopharyngeal carcinoma

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with nasopharyngeal carcinoma.

Case 2d: Adenotonsillar hypertrophy





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Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Identify the treatment of adenotonsillar hypertrophy.

Case 2e: Peritonsillar abscess

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Identify the Complications of Peritonsillar abscess.
- 4. Construct appropriate management regarding a case with Peritonsillar abscess.

Case 2f: Acute retropharyngeal abscess

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Identify the Complications of acute retropharyngeal abscess.
- 4. Construct appropriate management regarding a case with acute retropharyngeal abscess.

Case 2g: Post tonsillectomy bleeding

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Identify the indications and complications of the tonsillectomy operatiom.
- 3. Construct appropriate management regarding a case with Post tonsillectomy bleeding.

Case 2h: Diphtheria

Specific learning objectives:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.





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3. Construct appropriate management regarding a case with Diphtheria.

Case 2f: Agranulocytosis

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Identify the risk factors of agranulocytosis.
- 4. Construct appropriate management regarding a case with agranulocytosis.

Case 2j: Plummer Vinson Syndrome

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Identify the complications and management of Plummer Vinson syndrome

Case 2k: Pyriform Fossa Malignancy

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Pyriform fossa malignancy.

Case 2L: Hypopharyngral carcinoma

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Hypopharyngral carcinoma.

Case 2m: FB Swallow

Specific learning objectives:





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- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with FB swallow.

Case 2n: Post corrosive dysphagia

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Post corrosive dysphagia.

Case 3a: Traumatic CSF rhinorrhea

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Identify the risk factors for meningitis and the warning signs of deterioration.
- 4. Construct appropriate management regarding a case with Traumatic CSF rhinorrhea.

Case 3b: Septal hematoma

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Septal hematoma.

Case 3c: Rhinoscleroma

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Rhinoscleroma.

Case 3d: Epistaxis due to general cause





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Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Identify the correct method and precautions of nasal packing.
- 4. Construct appropriate management regarding a case with Epistaxis.

Case 3e: Epistaxis due to local cause

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 5. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 6. Select the appropriate investigations.
- 7. Identify the correct method and precautions of nasal packing.
- 8. Construct appropriate management regarding a case with Epistaxis.

Case 3f: Complicated septal surgery

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with deviated septum and surgical septal correction.

Case 3g: Nasal allergy with allergic nasal polypi

Specific learning objectives:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Allergic nasal polypi.





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Case 3h: Allergic nasal Polypi

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 4. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 5. Select the appropriate investigations.
- 6. Construct appropriate management regarding a case with Allergic nasal polypi.

Case 3i: Antrochoanal Polyp

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations..
- 3. Construct appropriate management regarding a case with antrochoanal polyp.

Case 3j: Sinusitis with orbital complications

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Identify the risk factors for the complications of sinusitis.
- 4. Construct the appropriate management of a case of complicated sinusitis.

Case 3k: Sinusitis complicated by cavernous sinus thrombosis

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Identify the risk factors of the complications of sinusitis
- 4. Construct the appropriate management of a case of Cavernous sinus thrombosis.

Case 31: Frontal mucopyocele

Specific learning objectives:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.





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3. Construct appropriate management regarding a case with Frontal mucocele.

Case 3m: Inverted Papilloma

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with Inverted Papilloma.

Case 3m: Cancer Maxilla

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 4. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 5. Select the appropriate investigations.
- 6. Construct appropriate management regarding a case with cancer Maxillary sinus.

Case 4a: Laryngomalacia

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate plan of management of a case of Laryngomalacia.

Case 4b: Subglottic haemangioma

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate plan of management of a case of Subglottic hemangioma.

Case 4c, 4d, 4e, 4f: Acute laryngotracheobronchitis (CROUP)

Specific learning objectives:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.





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3. Construct the appropriate plan of management of a case of Croup.

Case 4g: TB laryngitis

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with TB laryngitis.

Case 4h: Acute laryngitis

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Construct appropriate management regarding a case with acute laryngitis.

Case 4i: VF leukoplakia

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Identify the risk of malignant transformation of leukoplakia.
- 4. Construct the appropriate plan of management of a case with VF leukoplakia.

Case 4j: Transglottic carcinoma

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations
- 3. Identify the risk of malignant transformation of leukoplakia.
- 5. Construct appropriate management regarding a case with transglottic carcinoma.

Case 4k: Rt glottic Carcinoma

Specific learning objectives:

By the end of case discussion, the student will be able to:

1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.





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- 2. Select the appropriate investigations.
- 3. Identify the risk factors for Glottic carcinoma.
- 4. Construct the appropriate management of a case with glottis carcinoma

Case 4l, 4m, 4n: FB inhalation

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation.
- 2. Select the appropriate investigations.
- 3. Identify the complications of FB inhalation
- 4. Construct the appropriate management of a case of FB inhalation.

Case 40: Tracheostomy complications

Specific learning objectives:

By the end of case discussion, the student will be able to:

- 1. Integrate the results of history, physical examination and laboratory findings into a meaningful diagnostic formulation
- 2. Identify the steps of tracheostomy operation.
- 3. Identify the complications of tracheostomy operation and how to manage them.

Practical sessions outlines

- 1. Obtain and record informative history.
- 2. Examine the patients systematically appropriate to the age, gender, and clinical presentation of the patient while being culturally sensitive.
- 3. Design and /or present a structured, patient centered history and an appropriately timed full physical examination of patients.
- 4. Integrate the results of history, physical examination, and laboratory test findings into a meaningful diagnostic formulation.
- 5. Apply measures that promote patient safety.
- 6. Apply suitable measures for infection control when dealing with the patients and instruments.
- 7. Construct appropriate management algorithm (both diagnostic and therapeutic) for patients.





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Timetable of the block

للفرقة الثالثة لائحة جديدة





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توزيع المحاضرات والدروس للفرقة الثالثة (المرحلة الإكلينيكية)

مرفق ملف شؤن الطلاب





Otorhinolaryngology (ENT-318) Study Guide

الخريطة بحسب التواريخ

مرفق ملف شئون الطلاب





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List of references

- 1. Department book
- 2. Logan Turner's textbook
- 3. Periodicals, Web sites, etc
 - https://www.utmb.edu/otoref/default.asp
 - https://www.pubmed.ncbi.nlm.nih.gov/pubmed/
 - https://www.ekb.eg/
 - http://emedicine.medscape.com/
 - http://www.drtbalu.com/otology.html

Facilities required for teaching and learning

- Lecture halls.
- Data show, AV aids.
- Library.
- Examination tools for the students.

Course	coordinator:	Prof.	Mohamed	Abd .	Al Ghafar
		Dr/ k	Khaled Gan	nal De	ahi

Head of Department: Prof. Mohamed Abd Al Ghafar

	م مناقشة واعتماد توصيف المقرر من مجلس القسم بتاريخ
Date:	