



**Rotation Surgery 3a GIT,
Liver–biliary system,
pancreas, abdomen and
peritoneum (SUR-529)
STUDY GUIDE
2024 -2025**



Prepared by

Departement of:

-General Surgery

Under supervision of

Medical Education Department

Faculty of Medicine

Sohag University

2024-2025

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Surgery 3a(SUR-529) Study Guide	
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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:**

Undergraduate

- **Departments offering the course:**

General Surgery

Academic. year/level:

5th year.

Prerequisites

Achieving 75% of points of blocks in the first 5 semesters

Date of specification approval:

2024 -2025

⊕ **Title: Surgery 3a GIT, Liver–biliary system, pancreas, and peritoneum**

⊕ **Code: (SUR-529)**

⊕ **Credit points:7.5**

⊕ **Weeks: 4 weeks.**

⊕ **Lectures: 14 hours**

⊕ **Practical :14 hours**

⊕ **Case based discussions :62 hours**

⊕ **Student learning activities: 105 hours.**

(3.5 points)

Portfolio Tasks: (90 hours) (Total 15 marks)

Attendance (7.5 marks), - Formative assessment=15 hours (3.25 marks) - Case presentations (3.25 marks)

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Block Map

Total marks	Days/weeks	Points	Code	Responsible department	Block	Year
150	4 weeks	7.5	(SUR-529)	General Surgery	Surgery 3 a: GIT, Liver–biliary system, pancreas, abdomen and peritoneum	5th year

NARS competencies the block is expected to share in their student achievement

NARS areas	NARS key competencies
1- The graduate as a health care provider.	1.1. Take and record a structured, patient centered history.
	1.2. Adopt an empathic and holistic approach to the patients and their problems.
	1.3 Assess the mental state of the patient.
	1.4. Perform appropriately timed full physical examination 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 examination and laboratory test findings into a meaningful diagnostic formulation.
2- The graduate as a health	2.1 Identify the basic determinants of health and principles of health improvement.

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promoter.	2.2 Recognize the economic, psychological, social, and cultural factors that interfere with wellbeing
	2.3 Discuss the role of nutrition and physical activity in health.
	2.4 Identify the major health risks in his/her community, including demographic, occupational and environmental risks; endemic diseases, and prevalent chronic diseases.
3- The graduate as a professional.	3.1. Exhibit appropriate professional behaviors and relationships in all aspects of practice, demonstrating honesty, integrity, commitment, compassion, and respect.
	3.2 Adhere to the professional standards and laws governing the practice, and abide by the national code of ethics issued by the Egyptian Medical Syndicate.
	3.3. Respect the different cultural beliefs and values in the community they serve.
4- The graduate as a scholar and scientist.	4.1 Describe the normal structure of the body and its major organ systems and explain their functions.
	4.2 Explain the molecular, biochemical, and cellular mechanisms that are important in maintaining the body's homeostasis.
	4.3 Recognize and describe main developmental changes in humans and the effect of growth, development and aging on the individual and his family.
	4.4 Explain normal human behavior and apply theoretical frameworks of psychology to interpret

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5- The graduate as a member of the health team and a part of the health care system.	5.1 Recognize the important role played by other health care professions in patients' management.
	5.2 Respect colleagues and other health care professionals and work cooperatively with them, negotiating overlapping and shared responsibilities and engaging in shared decision-making for effective patient management.
	5.3 Implement strategies to promote understanding, manage differences, and resolve conflicts in a manner that supports collaborative work.
	5.4 Apply leadership skills to enhance team functioning, the learning environment, and/or the health care delivery system.
6- The graduate as a lifelong learner and researcher.	6.1 Regularly reflect on and assess his/her performance using various performance indicators and information sources.
	6.2 Develop, implement, monitor, and revise a personal learning plan to enhance professional practice
	6.3 Identify opportunities and use various resources for learning.

Professional Information

Block Aims

Overall Aims

1. This block aims to provide students with fundamental knowledge and clinical skills that enable him/her to detect, manage and/or refer common and important * Diseases of the Gastrointestinal System , Liver–biliary system, pancreas, abdomen , peritoneum and pediatric GIT diseases.
2. By the end of the blocks, the students will be able to take informative history, perform appropriately timed physical examination of patients appropriate to the age, gender, and clinical presentation of the patient while being culturally sensitive, do some clinical procedures and interpret important investigations related to * Diseases of the Gastrointestinal System , Liver–biliary system, pancreas, abdomen , peritoneum and pediatric GIT diseases
3. By the end of the blocks, the students will be able to counsel patients and their families about common * Diseases of the Gastrointestinal System , Liver–biliary system, pancreas, abdomen , peritoneum and pediatric GIT diseases

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Learning Outcomes of **the Block**:

Each competency will be broken down into one or more learning outcomes that may be A, C or D 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.	C1. Perform a focused history based on all relevant information (including obtaining data from secondary sources) in the following common clinical problems: - Dysphagia - Reflux diseases - Gastritis - Gastric cancer - Peptic ulcer diseases - Zollinger Ellison syndrome - Malabsorption - IBS - GIT bleeding - IBD - Diarrhea - Ileus - Small bowel obstruction - Appendicitis - Diverticular diseases - Large bowel obstruction - Colon and rectal cancer - Mesenteric ischaemia - pediatric GIT diseases - - Cholestasis and biliary colic - Acute cholecystitis - Choledocholithiasis - Sclerosing cholangitis - Hepatic cases , Jaundice and biliary cirrhosis - Hepatocellular carcinoma and hepatic focal lesions - Portal hypertension - Splenomegaly	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC

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	- Pancreatitis (acute and chronic) - Pancreatic cancer - Peritoneum			
	C2. Document and present the clinical encounter (case) concisely in an oral presentation, as a written document, and entered into an electronic medical record in the following common clinical problems: -Clinical problems Mentioned in C1.	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
1.2. Adopt an empathic and holistic approach to the patients and their problems.	A1. D1. Address psychological and social factors when assessing patients and developing care plans in any clinical situations. - Mentioned in C1 & C10	Know how Show how	Cases Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE ACC
	C3. D2. Interact with patients showing 7 key tips of empathic and holistic approach: • Making eye contact • Let your patient know you're listening • 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	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
1.3 Assess the mental state of the patient.	C4. Establish that patients are attentive—eg, by assessing their level of attention while the history is taken or by	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC

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	asking them to immediately repeat 3 words			
	C5. Perform an assessment of vital signs	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
	C6. Perform a detailed physical examination of all body systems	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
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.	C7. Perform a focused physical examination based on the patient's chief complaint and review of systems in the following common clinical problems: -Mentioned in C1 Clinical problems Mentioned in C1. In addition to: - Hepatomegaly & splenomegaly - Ascites by various technique - Manifestation of liver cell failure	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
	C8. Detect all significant abnormal findings on physical examination in the following common clinical problems: - Mentioned in C1 & C7	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
	C9. Report findings in notes	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
1.5. Prioritize issues to be addressed in a patient encounter.	C1. Perform a focused history based on all relevant information (including obtaining data from secondary sources) in the following common clinical problems: - Dysphagia - Reflux diseases - Gastritis - Gastric cancer	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC

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	following common clinical problems: - Mentioned in C1 ,C7,C10			
	C12. Interpret in a simulated case, the results of the following commonly ordered tests. - Body Mass index - Liver function test - Photos in the following common clinical problems: Mentioned in C1 ,C7,C10	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
1.7. Recognize and respond to the complexity, uncertainty, and ambiguity inherent in medical practice.	A4. & C13. Recognize that there is a degree of uncertainty in all clinical decision making.	Know how	Cases	Quizzes Formative written Final written
	A5. & C14. Identify clinical situations in which complexity, uncertainty, and ambiguity may play a role in decision-making. - Obstructive jaundice	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
	A5. & C14. Identify clinical situations in which complexity, uncertainty, and ambiguity may play a role in decision-making. - Obstructive jaundice	Know how	Skill lab or bed side Mini - CEX training	Quizzes Formative written Final written
	A6. Integrate and apply knowledge of foundational Biomedical and clinical topics together with clinical skills to diagnose and address the following common medical problems: Mentioned in C1,C7,C10	Show how	OSCE training	Portfolio OSCE OSPE ACC
1.8. Apply knowledge of the clinical and biomedical sciences relevant to the clinical problem at hand.	A6. Integrate and apply knowledge of foundational Biomedical and clinical topics together with clinical skills to diagnose and address the following common medical problems: Mentioned in C1,C7,C10	Know how	Cases	Quizzes Formative written Final written
1.10. Integrate the results of history, physical and laboratory test findings into a meaningful diagnostic formulation.	C1. Perform a focused history based on all relevant information (including obtaining data from secondary sources) in the following common clinical problems: - Dysphagia - Reflux diseases - Gastritis	Know	Lecture	Quizzes Formative written Final written
		Know how	Case	Portfolio OSCE OSPE ACC
		Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC

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	- Gastric cancer - Peptic ulcer diseases - Zollinger Ellison syndrome - Malabsorption - IBS - GIT bleeding - IBD - Diarrhea - Ileus - Small bowie obstruction - Appendicitis - Diverticular diseases - Large bowel obstruction - Colon and rectal cancer - Mesenteric ischaemia - pediatric GIT diseases - Cholestasis and biliary colic - Acute cholecystitis - Choledocholithiasis - Sclerosing cholangitis - Hepatic cases , Jaundice and biliary cirrhosis - Hepatocellular carcinoma and hepatic focal lesions - Portal hypertension - Pancreatitis (acute and chronic) - Pancreatic cancer			
	A8. C16. Propose a most likely or working diagnosis for each problem based on the clinical encounter and investigations done to date in a stable patient presenting with one of the following straightforward problems: - Mentioned in A7. C15.	Know Know how Show how	Lecture Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC
	A9. C17 Formulate a broad differential diagnosis for each problem, based on the clinical encounter and investigations done to date in an emergency or acute illness patient presenting with one of the following: - Acute gastritis - GIT bleeding - IBD	Know Know how Show how	Lecture Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC

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	- peritonitis - Ransons criteria for acute pancreatitis			
1.11. Perform diagnostic and intervention procedureC2 in a skillful and safe manner, adapting to unanticipated findings or changing clinical circumstances.	A10. Describe the indications for the following essential medical procedures (diagnostic and intervention), how they are performed, common risks, and follow-up care - Ryl insertion - Gastric wash - Proctosigmoidoscopic decompression - Hydrostatic reduction	Know	Lecture	Quizzes Formative written Final written
	A11. C18. Implement plans for care prior to any of the following procedures - Ryl insertion - Gastric wash - Proctosigmoidoscopic decompression - Hydrostatic reduction	Know Show how	Lecture Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC
	C19. D 4. Perform the following essential medical procedures in a supervised or simulated setting - Ryl insertion - Gastric wash - Proctosigmoidoscopic decompression - Hydrostatic reduction	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
	C20. Implement plans following the following procedures, including monitoring for post-procedure complications and intervening effectively for major complications that occur. - Proctosigmoidoscopic decompression - Hydrostatic reduction	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
1.12. Adopt strategies and apply measures	A 12. Recognize examples of patient safety incidents (adverse	Know Know how	Lecture Case	Quizzes Formative written Final written

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that promote patient safety.	events, error, near misses, preventable adverse event) in the clinical setting - Proctosigmoidoscopic decompression - Hydrostatic reduction			
	A 13. Differentiate between cases where an adverse event has occurred from those that are due to the underlying medical illness in the following clinical situation. - Surgical Hypertension - Gastrointestinal bleeding - Obstructive jaundice	Know how	Case	Quizzes Formative written Final written
	A 14. Demonstrate disclosure of a simple medical error to a patient or family (e.g., inadvertent cancellation of a test), In the following clinical case as an example - Obstructive jaundice	Know how	Case	Quizzes Formative written Final written
	A15. Propose an approach to reducing the frequency of medical error in response to a patient safety using an example - Evaluation of obstructive jaundice	Know how	Case	Quizzes Formative written Final written
1.13. Establish patient-centered management plans in partnership with the patient, his/her family and other health professionals as appropriate, using Evidence Based Medicine in management decisions.	A16. C21. Propose a preliminary management plan In a simulated case discussion, or in a REAL stable patient presenting with any one of the following straightforward problems, Dysphagia - Reflux diseases - Gastritis - Gastric cancer - Peptic ulcer diseases - Zollinger Ellison syndrome - Malabsorption - IBS -	Know Know how Show	Lecture Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC

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	GIT bleeding - IBD - Diarrhea - Ileus - Small bowel obstruction - Diverticular diseases - Large bowel obstruction - Colon and rectal cancer - Mesenteric ischaemia - pediatric GIT diseases Cholestasis and biliary - colic Acute cholecystitis - Choledocholithiasis - Sclerosing cholangitis - Hepatic cases , Jaundice - and biliary cirrhosis Hepatocellular carcinoma - and hepatic focal lesions Portal hypertension - Pancreatitis (acute and - chronic) Pancreatic cancer - Peritoneum - Splenomegally			
	A17. S 22. 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, - GIT bleeding - Acute pancreatitis - IBD - Acute appendicitis - Peritonitis - Acute pancreatitis	Know Know how Show	Lecture Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC
1.14. Respect patients' rights and involve them and /or their families/careers in Management decisions.	A5. Exhibit honesty and integrity with patients, physicians and other health professionals. A6. Demonstrate caring and compassion during all interactions with patients. A7.	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC

	Recognize the importance of trusting relationships with patients and others. A8. Recognize and maintain boundaries when interacting with patients. A 9. Demonstrate sensitivity with respect to peers, colleagues, and patients. - As Mentioned in C1 &C10			
	A18. A10. Consistently maintain patient confidentiality in all clinical, social and electronic settings, while recognizing situations that require disclosure of confidential information.	Know how Show how	Case Skill lab or bed side Mini - CEX training OSCE training	Quiezes Formative written Final written Portfolio OSPE ACC
	A19. Describe the underlying ethical principles and legal process of informed consent	Know how	Case	Quiezes Formative written Final written
	A20. C23. Describe the process of how to obtain informed consent for a test or treatment procedure	Know how Show how	Case Skill lab or bed side Mini - CEX training OSCE training	Quiezes Formative written Final written Portfolio OSCE ACC
1.15. Provide the appropriate care in cases of emergency, including cardio-pulmonary resuscitation, immediate life support measures and basic first aid procedures.	A21. Describe the characteristics of an acutely ill patient in terms of findings on history, physical examination and basic laboratory investigations in the following clinical situations - - GIT bleeding - Acute pancreatitis - IBD - cholangitis - Acute appendicitis - Peritonitis	Know Know how	Lecture Case	Quiezes Formative written Final written

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	- Acute pancreatitis			
	A22. C24. Recognize when a patient has abnormal vital signs that requires immediate attention and investigation in the following clinical situations - GIT bleeding - Acute pancreatitis - IBD - cholangitis - Acute appendicitis - Peritonitis - Acute pancreatitis	Know Know how Show how	Lecture Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC
	A23. C25. Recognize when a patient has a complaint or physical finding that suggests the possibility of a severe illness (including life- threatening) and therefore requires immediate attention and investigation in the following clinical situations - Mention in A22. C24.	Know Know how Show	Lecture Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC
	A24. Apply the steps taken in the emergency care of acutely ill patients in the following clinical situations - Mention in A22. C24.	Know Know how	Lecture Case	Quizzes Formative written Final written
	A25. C26. Identify potential underlying causes of a patient's deterioration in the following clinical situations - Mention in A22. C24.	Know Know how Show how	Lecture Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC
	C27 Start the initial emergency care plan for a patient with the following common life- threatening conditions - Mentioned in A9, C17	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
	A 26.	Know	Lecture	Quizzes

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2.3 Discuss the role of nutrition and physical activity in health.	Identify role of integrating diet and physical activity on general health and well-being across the lifespan - Nutrition in GIT disorder - Nutrition in liver disorder Nutrition in pancreatic disorder	Know how	Case	Formative written Final written
	C28. D11 Educate patients and populations about strategies that promote an active and healthy lifestyle along -- Nutrition in GIT disorder - Nutrition in liver disorder Nutrition in pancreatic disorder	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
2.5 Describe the principles of disease prevention, and empower communities, specific groups or individuals by raising their awareness and building their capacity.	A 27. Apply preventive measures for the following health problems: - GERD - GIT cancers - Peptic ulcer - IBS - Cholelithiasis	Know Know how	Lecture Case	Quizzes Formative written Final written
	A28. Apply methods reducing the incidence and prevalence of following common diseases. - Mention in A27.	Know Know how	Lecture Case	Quizzes Formative written Final written
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.	A29 Identify and apply screening tests appropriate at different life stages	Know Know how	Lecture Case	Quizzes Formative written Final written
	A30. C29. Apply principles of patient safety related to infection prevention and control practices in the following situations - Ryl insertion - Gastric wash	Know Know how Show how	Lecture Case Skill lab or bed side Mini - CEX training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC

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	- Proctosigmoidoscopic decompression - Hydrostatic reduction		OSCE training	
	A31. C30. Demonstrate the procedures involved in universal body substance precautions, including handwashing, and donning and doffing of gowns, gloves, masks, and eye protection	Know Know how Show how	Lecture Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC
	A32. C31. Apply principles of infection control when dealing with a patient who may have a communicable Disease	Know Know how Show how	Lecture Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE ACC
3.1. Exhibit appropriate professional behaviors and relationships in all aspects of practice, demonstrating honesty, integrity, commitment, compassion, and respect.	A33. D 12 Demonstrate the ability to give feedback to colleagues in a respectful manner .	Know how Show how	Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE ACC
3.3. Respect the different cultural beliefs and values in the community they serve.	A34 D 13. Demonstrate the application of patient autonomy and respect for persons in specific case situations	Show	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
3.4. Treat all patients equally, and avoid stigmatizing any category regardless of their social, cultural, ethnic backgrounds, or their disabilities.	A35. D 14.. Identify medicolegal principles that obligate physician to Treat all patients equally,	Know Know how Show how	Lecture Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE ACC

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	A 15. 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
3.5. Ensure confidentiality and privacy of patients' information.	A36. D16. 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
	A37. D17. Explain the potential abuses of technology-enabled communication and their relationship to professionalism.	Know how	Case	Quizzes Formative written Final written
		Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
	A38. D18. 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
3.6. Recognize basics of medico-legal aspects of practice, malpractice and avoid common medical errors.	A39. D 19. Apply basics of medicolegal practices in common clinical situations including: - Mentioned in A7. C15.	Know how	Case	Quizzes Formative written Final written
		Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
	A40. D20. Demonstrate how to avoid common medical errors in the	Know how	Case	Quizzes Formative written

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	following common clinical situations: - Mentioned in A7. C15.	Show how	Skill lab or bed side Mini - CEX training OSCE training	Final written Portfolio OSCE ACC
3.7. Recognize and manage conflicts of interest.	A41. C31. D 21. Demonstrate the capacity to reflect on their own competencies and identify situations where one requires help	Know how	Case	Quizzes Formative written Final written
		Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
3.7. Recognize and manage conflicts of interest.	A42. C32. Demonstrate the capacity to identify situations where cognitive biases may have affected their patient management	Know how	Case	Quizzes Formative written Final written
		Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
3.8. Refer patients to appropriate health facility at the appropriate stage.	A43. Describe the nature of clinical expertise and of its limits	Know how	Case	Quizzes Formative written Final written
	A44. C33. Recognize the range of possible transitions a patient may encounter (e.g., hospital to home, hospital to long term care facility, emergency department to ward in the following clinical settings examples - Mentioned in A7. C15.	Know	Lecture	Quizzes Formative written Final written
		Know how	Case	Portfolio OSCE ACC
		Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
	A45. List indications of admission to hospital in the following clinical situations - Mentioned in A7. C15.	Know	Lecture	Quizzes Formative written Final written
	A46 List criteria of home discharge in the following clinical situations	Know how	Case	Portfolio OSCE ACC
		Know	Lecture	Quizzes Formative written Final written
		Know how	Case	Portfolio OSCE ACC

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	- Mentioned in A7. C15.			
	A47 List the elements of a high quality written “handover of care” Document in the following clinical settings examples - GIT bleeding - Acute pancreatitis - Peritonitis	Know Know how	Lecture Case	Quizzes Formative written Final written
	A48. D22 List the elements of a high quality verbal and written handover of care in the following clinical settings examples - GIT bleeding - Acute pancreatitis - Peritonitis	Know Know how Show how	Lecture \ Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE ACC
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	A49. D 23. Participate in peer assessment	Know Know how Show how	Lecture Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC
4.5 Identify various causes (genetic, developmental, metabolic, toxic, microbiologic, autoimmune, neoplastic, degenerative, and traumatic) of illness/disease and explain the ways in which they operate on the body (pathogenesis).	A50. Identify various causes (genetic, developmental, metabolic, toxic, microbiologic, autoimmune, neoplastic, degenerative, and traumatic) of the following diseases mentioned in C1 C10, A3 A7, C15	Know Know how	Lecture Case	Quizzes Formative written Final written
4.7 Describe treatment options;	A51. C34.	Know	Lecture	Quizzes

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and effects on the population.	Choose categories of Individual drugs in each of the following clinical conditions mentioned in C1 C10 , A3 D7, C15	Know how Show how	Case \ Skill lab or bed side Mini - CEX training OSCE training	Formative written Final written Portfolio OSCE OSPE ACC
	A 52. Mention modalities of treatment following clinical conditions mentioned in C1 C10 , A3 D7, C15	Know Know how	Lecture Case	Quizzes Formative written Final written
	A53. Demonstrate in the following clinical situations how to prescribe relevant drugs mentioned in C1 C10 , A3 D7, C15	Know Know how	Lecture Case	Quizzes Formative written Final written
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, laboratory assays, pathologic studies, and functional assessment tests.	A54. C35 Interpret the following diagnostic imaging modalities - - -Endoscopic photos in IBD, peptic ulcer and GIT bleeding - obstructive jaundice A55. C36 Interpret the following laboratory assays, - Liver function test - Inflammatory marker in IBD - Hepatitis markers - Ascitic fluid analysis and SAAG A56, C37 Interpret the following pathologic studies, - IBD - A57, C38	Know Know how Show how	Lecture Case Skill lab or bed side Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC

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	Interpret the following functional assessment tests. 5-HTT level in carcinoid syndrome - Liver function test			
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.	A58. D 24. Demonstrate respect and cooperation with all health care providers in the following clinical settings mentioned in - C1 - C10 , A3 - D7, C15	Know how Show how	Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC
5.3 Implement strategies to promote understanding, manage differences, and resolve conflicts in a manner that supports collaborative work.	A59 Identify clinical scenarios that are likely to lead to conflict A60. Describe the root causes of conflict in interprofessional teams A61 Describe approaches to conflict resolution	Know how	Case	Quizzes Formative written Final written
	A62. D 25. Recognize one's own approach to conflict A63 D 26. Demonstrate the capacity to resolve conflicts that occur with colleagues related to issues such as prioritization of duties	Know how Show how	Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC
5.4 Apply leadership skills to enhance team functioning, the learning environment, and/or the health care delivery system.	A64. D27. Identify aspects of their own leadership style(s) (including, strengths, weaknesses, and biases. A65. D 28 Participate in reflective processes to inform their personal leadership development.	Know how Show how	Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE ACC

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	A66. D 29 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. A67. D 30. Reflect on motivations, capabilities, skills, boundaries, and purpose as a leader. A68. D 31. Demonstrate teamwork and collaboration STYLES in the healthcare setting, and participate in team-building and collaboration exercises.			
5.5 Communicate effectively using a written health record, electronic medical record, or other digital technology.	A32. C39. Communicate effectively with patients A 33. Communicate with colleagues A34. C40. Communicate in breaking bad news A 35. Communicate with relatives A 36. Communicate with disabled people A37. Communicate in seeking informed consent C 41. A38. Communicate in writing (including medical records) C 42. A39. Communicate in dealing with aggression	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
5.6 Evaluate his/her work and that of others using constructive feedback	A40. Consistently seek out and welcome feedback from others. A 41. Accept constructive feedback. A42. C43. Demonstrate the capacity to reflect upon feedback and use this as a basis for enhanced learning of relevant	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC

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in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements.	Write medical record in the following clinical situations mentioned in: - C1 - C10 , A3 - D 7, C15	Show how	Skill lab or bed side Mini - CEX training OSCE training	Formative written Final written Portfolio OSCE OSPE ACC
5.12 Demonstrate accountability to patients, society, and the profession.	C 51, A44. Reflect on examples from their clinical rotations and acknowledge that near misses, adverse events and patient safety incidents (PSIs) will occur. - GIT bleeding - Peritonitis	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.	C 52. A45. Reflect on experiences in the preclinical setting to identify areas requiring improvement and modify behavior. C53. A46. Reflect on experiences in the clinical setting to identify areas requiring improvement and modify behaviour by use of ethical frameworks. C54. A47. 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	A73 Use portfolio as a tool to develop and monitor a learning plan.	Know	lecture	Quizzes Formative written Final written
	C55. A 48. Reflect on achievement of the required competencies. C56. A49. Use portfolio to improve self-awareness to enhance performance.. A50. Demonstrate appropriate use and enhancement of resilience skills.	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC

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	C57. A51. Demonstrate the connection between self-care and patient safety.			
6.3 Identify opportunities and use various resources for learning.	C 58. Use various resources of learning including LMS. C59. A 52.. Contribute to a positive atmosphere in the classroom and in clinical learning settings by demonstrating the following behaviours: ▪ 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
6.4 Engage in inter-professional activities and collaborative learning to continuously improve personal practice and contribute to collective improvements in practice.	A74. Identify the various different collaborators they will work within the clinical environment to provide patient care.	Know how	Case	Quizzes Formative written Final written
	A75. D 53. Demonstrate a general understanding of the roles and responsibilities of collaborators in the clinical environment.	Know how Show how	Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE ACC
	C60. Participate in inter-professional activities.	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
6.6 Effectively manage learning time and resources and set priorities.	A76. Describe the concepts of the declared, taught, learned, and hidden Curriculum.	Know Know how	Lecture Case	Quizzes Formative written Final written
	A77. Describe factors that can positively or negatively affect the learning environment.	Know Know how	Lecture Case	Quizzes Formative written Final written

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	A78. C61. A54. Develop a systematic approach to learning and a time management strategy.	Know Know how Show how	Lecture Case Skill lab or bed side Mini - CEX training OSCE training	Quizzes Formative written Final written Portfolio OSCE OSPE ACC
	C62. A 55. Access supports available to students to deal with stress and the health issues that are common in medical school.	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE OSPE ACC
	A79. a Describe strategies for reporting and managing witnessed or Experienced mistreatment.	Know Know how	Lecture Case	Quizzes Formative written Final written
6.8 Critically appraise research studies and scientific papers in terms of integrity, reliability, and applicability.	C63. Select appropriate sources of knowledge as they relate to addressing focused questions. Identify appropriate sources that answer a clinical question.	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
6.10 Summarize and present to professional and lay audiences the findings of relevant research and scholarly inquiry.	C64. A56. Plan and deliver an effective presentation.	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC
	C65, A57. Explain to patients and families in general terms the results of research studies and their application to clinical issues.	Show how	Skill lab or bed side Mini - CEX training OSCE training	Portfolio OSCE ACC

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Structure of the block

<i>Week</i>	Lectures (NUMBER)	Practical (NUMBER)	PORTFLIO TASKS (NUMBER)	CASE BASED Discussions (NUMBER)
1st	1	1	2	2
	1	1	2	2
	1	1	2	2
	1	1	2	2
2nd	1	1	2	2
	1	1	2	2
	1	1	2	2
	1	1	2	2
3rd	1	1	2	2
	1	1	2	2
	1	1	2	2
4th	1	1	2	2
	1	1	2	2
	1	1	2	2

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

Learning Methods

- 1- Lectures for knowledge outcomes.
- 2- Practical (Bedside/skill lab) sessions to gain clinical skills.
- 3- Task based log (may use inscion 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's given at least once in the form of quizzes that is made available for the students at the E-learning site at

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the end of the block.

Answers are presented instantly after the attempts and discussed on the students groups or in person with the teaching staff

Questions should be consistent with the level of the final exam. The student's attendance is a condition for entering the summative exams. The electronic or paper achievement file must be used to follow up on the students' evaluation, and its completion is a condition for entering the final exams

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.

The student's performance will be assessed according to the following:

الدور الأول **First role**

Assessment task	Type of assessment	Proportion of total assessment	
		%	Marks
End block exam	MCQ (single answer)	20%	30 marks
Portfolio	May include: • Attendance • Formative assessment • Case presentations	10%	(Total 15 marks) (7.5 marks) (3.25 marks) (3.25 marks)
Final exam	75 % MCQ (45 Marks) 25 % Short answer and Modified answer questions (15 Marks)	40%	60 marks
OSCE Final	Typical OSCE stations using standardized, real or skill lab encounters	30%	45 marks
Total		100%	150

Block evaluation

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

Contents

Lecture Topics and Their Learning Outcomes

Choose one source for each topic

No.	Learning outcomes A	Lectures Titles And specified reference	Week No.	Date*		Contact Hours
				From	to	
1	A1-4, A6,-8, A10,A11, A14, A18, A19, A20 ,A27 -29 , A33-41, A43- 46, A49, A50, A52, A53,A55, A58, A59-68, A712-A79	Oesophagus USMLE Step 2 CK lecture notes Surgery (Kaplan Medical2019 , P120 TO 122) Chapter Diseases of GIT.	1 st week			1
2,3	A1-4, A6- -55 , A57 – A79	Stomach and bariatric surgery - USMLE Step 2 CK lecture notes Surgery (Kaplan Medical2019 , P123 Chapter Diseases of GIT - USMLE Step 2 CK lecture notes (2020) Internal Medicine (Kaplan Medical), Chapter 4: Gastroenterology P195-199, 210-214				1
4	A1-4, A6- -55 , A57 – A79	Small bowel and appendix and peritoneum USMLE Step 2 CK lecture notes Surgery (Kaplan Medical2019 , P124 TO 128) Chapter Diseases of GIT.				1
5	A14, A6-55 , A57 – A79	Colon USMLE Step 2 CK lecture notes surgery(Kaplan Medical2019) Chapter Diseases of GIT, p126 to p 128.				1
6	A1-4, A6-8, A10, A16, A18-20, A29, A31-46, A49-53, A55,A57-A68, A7-79	Anorectal diseases USMLE Step 2 CK lecture notes surgery (Kaplan Medical2019) Chapter Diseases of GIT, p129 to p 130.	2 nd week			1
						1

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7,8	A1-4, A6-8, A10, A16, A18-20, A29, A31-46, A49-53, A55, A57-A68, A7-79	Liver USMLE Step 2 CK lecture notes surgerplan Medical2019) Chapter Hepatobiliary, p 139 to 142				2
9,10	A1-4, A6-9, A10, A16, A17-25, A29, A31-53, A55, A57-A68, A7-79	Gall bladder disease and jaundice - USMLE Step 2 CK lecture notes surgery(Kaplan Medical2019) Chapter Hepatobiliary, p 142 to 145 - Amboss	3 rd week			2
11	A1A4, A6 -A79	Pancreatic diseases - USMLE Step 2 CK lecture notes surgery(Kaplan Medical2019) Chapter Hepatobiliary, p 146 to 148 - Ambos lectures				1
12	A1-A4, A6-8, A16, A18-20, A29, A31-46, A49-55, A58-79	Spleen and portal hypertension AMBOSS	4 th week			1
13		Pediatric GIT diseases USMLE Step 2 CK lecture notes surgery(Kaplan Medical2019) Chapterpediatric surgery p167 to 173.				1
14		Pediatric GIT diseases USMLE Step 2 CK lecture notes surgery(Kaplan Medical2019) Chapterpediatric surgery p167 to 173.				1
Total						14 Hour

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Skills and tasks and Their Learning Outcomes

In addition to real patients and skills stated in the NARS should be learned either in practical or group discussion

No.	Learning outcomes Cand A	Bedside/skill lab sessions and titles	Weeks	Date*		Hours
				From	To	
1.	C1-C13, C15, C16, C18-21, C23, C27, C30-34, C36, C39- C44-, C46 - 65 D1-10,12-D57	History taking and examination of Dysphagia and Dyspepsia	1 st week			1
2.	C1-C13, C15- -27, C30-36, C39- -C65 D1-10,12-D57 D1-10,12-D57	History taking & examination of pediatric case with congenital megacolon and imperforate anus				1
3.	C1-C13, C15- -27, C30-36, C39- -C65 D1-10,12-D57	History taking & examination of Abdominal mass				1
4.	C1-C13, C15, C16, C21, C23, C28 , C30- 34, C39- 65 A1-21, 23 - 57	History taking and examination of obesity case with calculation of body mass index and measure waist circumference and indications of bariatric Surgery				1
5.	C1-C13, C15-17, C21-27 , C30- 34, C36, C38 – 50, C52-65 A1-10 , 12- 21, 23 - 57	History and examination for cases with cancer stomach	2 nd week			1
6.	C1-C13, C15-17, C21-27 , C30- 34, C36, C38 – 50, C52-65 A1-10 , 12- 21, 23 - 57	History taking and examination of case with stoma				1
7.	C36, C38 A1-10 , 12- 21, 23 - 57	Reading ABG and ransons criteria and interpret the findings in cases with acute and chronic pancreatitis				1
8.	C7, C8 A1-10 , 12- 21, 23 - 57	Examine sign of piles fissure and perianal fistula				1
9.	C1-C13, C15-17, C21-27 , C30- 34, C36, C38 – 50, C52-65 D1-10,12-D57	History & Examine Portal hypertension	3 rd week			1

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10.	C28 A1-21, 23 - 57	History and examination of splenomegaly	4 TH Week			1
11.	C7,C8 A1-10 , 12- 21, 23 - 57	Examine case of jaundice				1
12.	C18,C19 A1-10 , 12- - 57	Learning of Ryle insertion and gastric wash .				1
13.	C18,C19 A1-10 , 12- - 57	History and examination for cases with cancer colon				1
14.	C1-C13, C15-17, C21-27 , C30- 34, C36, C38 – 50, C52-65 A1-10 , 12- 21, 23 - 57	Hepatic cases history and examination; investigations.				1
		Total				14

Self Directed Learning and Group Discussion (SDL &GD) (cases scenario with 10 MCQs)

No.	Learning oucomes A and D	Title of cases and reference	Weeks	Date*		Hours
				from	to	
1.	A1-4, A6,-8, A10,A11, A14, A18, A19, A20 ,A27 -29 , A33- 41, A43- 46, A49, A50, A52, A53,A55, A58, A59-68, A712-A79 D 1-10,12-D 57	1. Case 1: Dysphagia First Aid cases USMLE step 2CK 2 nd edition p130	1 st week			2
2.	A1-4, A6- -55 , A57 – A79 D1-10,12-D57 D1-10,12-D57	2. Case 2: chronic pancreatitis First Aid cases USMLE step 2CK 2 nd edition p132				2
3.	A1-4, A6- -55 , A57 – A79 D1-10,12-D57	3. Case3: Achalasia and GERD First Aid cases USMLE step 2CK 2 nd edition p134, 141				2

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4.	A1-4, A6-8, A10, A16, A18-20, A29, A31-46, A49-53, A55, A57-A68, A7-79 D1-10, 12-D57	4. Case 4: carcinoid syndrome First Aid cases USMLE step 2CK 2 nd edition p135				2
5.	A1-4, A6-9, A10, A16, A17-25, A29, A31-53, A55, A57-A68, A7-79 D1-10, 12-21, 23-57	5. Case 5: colon cancer First Aid cases USMLE step 2CK 2 nd edition p136	2 nd week			2
6.	A1-4, A6-9, A10, A16, A17-25, A29, A31-53, A55, A57-A68, A7-79 D1-10, 12-21, 23-57	6. Case 6: Diverticulitis First Aid cases USMLE step 2CK 2 nd edition p139.				2
7.	A1-4, A6-8, A10, A16, A18-20, A29, A31-46, A49-53, A55, A57-A68, A7-79 D1-10, 12-21, 23-57	7. Case 7: Esophageal carcinoma First Aid cases USMLE step 2CK 2 nd edition p140				2
8.	A1-4, A6-9, A10, A16, A17-25, A29, A31-53, A55, A57-A68, A7-79 D1-10, 12-D57	8. Case 8: JAUNDICE First Aid cases USMLE step 2CK 2 nd edition p131				2
9.	A1-4, A6-9, A10, A16, A17-25, A29, A31-53, A55, A57-A68, A7-79 D1-10, 12-D57	9. Case 9: Hiatal hernia First Aid cases USMLE step 2CK 2 nd edition p144	3 rd week			2
10.	A1A4, A6-A79 D1-21, 23-57	10. Case 10: IBD First Aid cases USMLE step 2CK 2 nd edition p146				2
11.	A1-A4, A6-8, A16, A18-20, A29, A31-46, A49-55, A58-79 D1-10, 12-21, 23-57	11. Case (11) IBS First Aid cases USMLE step 2CK 2 nd edition p150				2
12.	A1-8, A16, A18-20, A29, A31-46, A49-55, A58-79	12. Case (12) Peptic ulcer Disease First Aid cases USMLE step 2CK 2 nd edition p151	4 th week			2
13.	A1-A4, A6-8, A16, A18-20, A29, A31-46, A49-55, A58-79 D1-10, 12-21, 23-57	13. Case (13) small bowel obstruction First Aid cases USMLE step 2CK 2 nd edition p154				2
14.	A1-A4, A6-8, A16, A18-20, A29, A31-46, A49-55, A58-79 D1-10, 12-21, 23-57	14. Case (14) Zollinger Ellison syndrome First Aid cases USMLE step 2CK 2 nd edition p162				2
	Total					28

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Portofolio

No.	Week number	Task to be recorded in the Portofolio	Quiz Case Based MCQs	Formative assessment
1.	1 st	- History taking and examination of patient with dysphagia - NO. 1-Case 1: dysphagia	Answer the quiz of each lecture in this week (e-Learning).	
2.	2 nd	- History taking & examination of pediatric case with congenital megacolon and imperforate anus - NO. 2-Case 2: Gastric outlet obstruction	Answer the quiz of each lecture in this week (e-learning).	Attend and pass the formative exam at the end of the week
3.	3 rd	- History taking & examination of abdominal mass - NO. 3: Case 3: Achalasia and GERD	Answer the quiz of each lecture in this week (e-learning).	
4.	4 th	- History taking and examination of obesity case - NO. 4 Case 4: carcinoid syndrome	Answer the quiz of each lecture in this week (e-learning).	Attend and pass the formative exam at the end of the week
5.	5 th	- History taking and examination of case with appendicitis - NO.5 Case 5: colon cancer	Answer the quiz of each lecture in this week (e-learning).	
6.	6 th	- History taking and examination of case with stoma - NO. 6 Case 6: Diverticulitis	Answer the quiz of each lecture in this week (e-learning).	Attend and pass the formative exam at the end of the week

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7.	7 th	• Reading ABG and ransons criteria and interpret the findings and interpret the findings in cases with pancreatitis • Case 7: esophageal carcinoma	Answer the quiz of each lecture in this week (e-learning).	
8.	8 th	• Examine sign of piles fissure and perianal fistula • Case 8: Jaundice	Answer the quiz of each lecture in this week (e-learning).	Attend and pass the formative exam at the end of the week
9.	9 th	• History & Examine Portal hypertension • Case (9) Hiatus hernia	Answer the quiz of each lecture in this week (e-learning).	
10.	10 th	• History and examination of splenomegally • Case (10) IBD	Answer the quiz of each lecture in this week (e-learning).	Attend and pass the formative exam at the end of the week
11.	11 th	• Examine case of jaundice • Case (11) IBS	Answer the quiz of each lecture in this week (e-learning).	
12.	12 th	• Learning of Ryle insertion and gastric wash • Case (12) Peptic ulcer disease	Answer the quiz of each lecture in this week (e-learning).	Attend and pass the formative exam at the end of the week
13.	13 th	• History and examination for cases with cancer colon and cancer stomach • Case (13) small bowel obstruction	Answer the quiz of each lecture in this week (e-learning).	
14.	14 th	• Hepatic cases history and examination; investigations. • Case (14) Zollinger Ellison syndrome	Answer the quiz of each lecture in this week (e-learning).	Attend and pass the formative exam at the end of the week
	total			

Blueprint of the block

No.	List of Topics (Lectures/cases)	Learning outcomes	Weight* % From total	Total marks	End of the block	Final exam
1.	Esophagus (strictures, Achalasia, GERD Cancer)	A1-4, A6,-8, A10,A11, A14, A18, A19, A20 ,A27 -29 , A33- 41, A43- 46, A49, A50, A52, A53,A55, A58, A59-68, A712- A79	8.3%	7 marks	4	3
2.	Stomach and bariatric surgery A	A1-4, A6- -55 , A57 – A79	6.6%	6 marks	3	3
3.	Stomach and bariatric surgery B	A1-4, A6- -55 , A57 – A79	6.6%	6 marks	4	2
4.	Small bowel and appendix and peritoneum	A1-4, A6- -55 , A57 – A79	8.3%	8 marks	5	3
5.	Colon (diverticular diseases, polyps, cancer, IBD)	A14, A6-55 , A57 – A79	8.3%	8 marks	5	3
6.	Anorectal diseases	A1-4, A6-8, A10, A16, A18- 20, A29, A31- 46, A49-53, A55,A57-A68, A7-79	8.3%	7 marks	5	2
7.	Liver diseases A	A1-4, A6-9, A10, A16, A17- 25, A29, A31- - 53, A55,A57- A68, A7-79	6.6%	6 marks	4	2
8.	Liver diseases B	A1-4, A6-9, A10, A16, A17- 25, A29, A31- - 53, A55,A57- A68, A7-79	6.6%	6 Marks	0	6
9.	GB diseases	A1-4, A6-8, A10, A16, A18-	6.7%	6 marks	0	6

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		20, A29, A31-46, A49-53, A55, A57-A68, A7-79				
10.	Jaundice	A1-4, A6-8, A10, A16, A18-20, A29, A31-46, A49-53, A55, A57-A68, A7-79	6.7%	6 marks	0	6
11.	Pancreatic diseases	A1A4, A6 -A79	6.7%	6 marks	0	6
12.	Spleen and portal hypertension	A7, A53, A55, A6 -9, A17, A31, A14, A10, A46	6.7%	6 marks	0	6
13	Pediatric GIT A	A1-8, A16, A18-20, A29, A31-46, A49-55, A58-79	6.7 %	6 marks	0	6
14	Pediatric GIT B	A1-8, A16, A18-20, A29, A31-46, A49-55, A58-79	6.7 %	6 marks		
Total				90	30	60

Weight*= decided according to hours, amounts of information and clinical significance

Practical blueprint

	List of sessions/practical or clinical topics	Learning outcomes (C and A)	Weight* %From total	Number of stations/Cases	Marks الدور الاول	الدور الثاني
1.	History taking and examination of dysphagia and Dyspepsia	1-C13, C15,C16, C18-21. C23, C27, C30- 34, C36,C39-C44-, C46 - 65 D1-10,12-D57	6.6 %		3 marks	4
2.	History taking & examination of pediatric case with congenital megacolon and imperforate anus	C1-C13, C15- -27, C30-36, C39- -C65 D1-10,12-D57 D1-10,12-D57	8.9 %		4 marks	5
3.	History taking & examination of Abdominal mass	C1-C13, C15- -27, C30-36, C39- -C65 D1-10,12-D57	8.9 %		4 marks	5
4.	History taking and examination of obesity case with calculation of body mass index and measure waist circumference and indications of bariatric surgery	C1-C13, C15,C16, C21. C23, C28 , C30-34, C39- 65 D1-21, 23 - 57	6.6 %		3 marks	4
5.	History taking and examination of case with appendicitis	C1-C13, C15-17, C21-27 , C30- 34, C36, C38 – 50, C52-65 D1-10 , 12- 21, 23 - 57	6.6 %		3 marks	4
6.	History taking and examination of case with stoma	C1-C13, C15-17, C21-27 , C30- 34, C36, C38 – 50, C52- 65 D1-10 , 12- 21, 23 - 57	6.6 %		3 marks	4

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7.	Reading ABG and ransons criteria and interpret the findings in cases with acute and chronic pancreatitis	C36, C38 D1-10 , 12- 21, 23 - 57	6.6 %		3 marks	4
8.	Examine sign of piles fissure and perianal fistula	C7,C8 D1-10 , 12- 21, 23 - 57	6.6 %		3 marks	4
9.	History & Examine Portal hypertension	C1-C13, C15-17, C21-27 , C30- 34, C36, C38 – 50, C52- 65 D1-10,12-D57	6.6 %		3 marks	4
10.	History and examination of splenomegally	C28 D1-21, 23 - 57	6.6 %		3 marks	4
11.	Examine case of jaundice	C7,C8 D1-10 , 12- 21, 23 - 57	8.9 %		4 marks	5
12.	Learning of Ryle insertion and gastric wash.	C18,C19 D1-10 , 12- - 57	6.6 %		3 marks	4
13.	History and examination for cases with cancer colon and cancer stomach	C18,C19 D1-10 , 12- - 57	6.6 %		3 marks	4.5
14.	Hepatic cases history and examination; investigations.	C1-C13, C15-17, C21-27 , C30- 34, C36, C38 – 50, C52- 65 D1-10 , 12- 21, 23 - 57	6.6 %		3 marks	4.5
	Total		100%		45	60 marks

Weight*= decided according to hours, amounts of information and clinical significance

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دور ثاني

Exam	Final (60%)	Practical (40 %)	Total
SUR-529	75 % MCQ (68 Marks) 25 % Short answer and Modified answer questions(22 Marks)	60 Marks	150 Marks
Total	90 Marks	60 Marks	150 Marks

Lecture Outlines

Lecture (1) Esophagus (GERD, Motility disorders)

USMLE Step 2 CK lecture notes Surgery (Kaplan Medical 2019 , P120 TO 122) Chapter Diseases of GIT.

Specific learning Objectives

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

- Identify classification of motility disorders and how to differentiate between them
- Discuss diagnosis, management of GERD.

Contents:

- Classification of motility disorders.
- Diagnosis of GERD
- Management of GERD.

Esophagus (Cancer, perforations)

USMLE Step 2 CK lecture notes Surgery (Kaplan Medical 2019 , P120 TO 122) Chapter Diseases of GIT.

Specific learning Objectives:

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

- Identify risk factors and diagnosis and management of esophageal cancer.
- Identify causes and symptoms and diagnosis and management of esophageal perforation.
- Differentiate between benign and malignant dysphagia.

Contents:

- Esophageal cancer: risk factors, clinical manifestation, diagnosis and management.
- Esophageal perforation: causes, clinical manifestation, diagnosis and management..

Lecture (2,3) Gastritis, peptic ulcer and H. Pylori

Amboss

USMLE Step 2 CK lecture notes (2020) Internal Medicine (Kaplan Medical), Chapter 4: Gastroenterology P195-199, 210-214

Specific learning Objectives:

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

- 1- Compare the etiology, clinical presentation, and management of acute gastritis and chronic gastritis.
- 2- Understand pathophysiology of PUD .
- 3- Recognize the risk factors and typical presentation of peptic ulcer disease.
- 4- Management of gastritis and PUD .

Contents:

- 1- Definition
- 2- Etiology and pathogenesis
- 3- Different types of gastritis
- 4- Clinical presentation
- 5- Diagnosis and investigations
- 6- Complications
- 7- Treatment

Gastric cancer, Gastric outlet obstruction

Specific learning Objectives:

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

- Identify risk factors and diagnosis and management of gastric cancer.
- Discuss diagnosis, management of gastric outlet obstruction.

Contents:

- Gastric cancer: risk factors, clinical manifestation, diagnosis and management.
- Gastric outlet obstruction: causes, clinical manifestation, diagnosis and management..

Bariatric Surgery

Specific learning Objectives:

By the end of the lecture the student will be able to: Understanding measurement of BMI

- Indications, principles, types, complications of bariatric surgery

Lecture (4)

Small intestinal obstruction

USMLE Step 2 CK lecture notes Surgery (Kaplan Medical 2019 , P124 TO 128) Chapter Diseases of GIT.

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- USMLE Step 2 CK lecture notes Surgery (Kaplan Medical 2019 , P123 Chapter Diseases of GIT

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Specific learning Objectives:

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

1-Identify of different causes of small intestinal obstruction. 2- manage cases of small intestinal obstruction.

Contents:

1-Definition. 2-

Causes.

3-Signs & symptoms.

4-Investigation for diagnosis of small intestinal obstruction. 5-Treatment of small intestinal obstruction

Diseases of the appendix

USMLE Step 2 CK lecture notes Surgery (Kaplan Medical 2019 , P124 TO 128) Chapter Diseases of GIT.

Specific learning Objectives:

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

1- Identify typical and atypical presentation of appendicitis.

2- Identify complications of appendicitis and how to manage each one

Contents:

1-Appendicitis : causes, clinical pictures, complications, treatment 2- Carcinoid tumor : pathophysiology, clinical pictures, diagnosis, treatment, prognosis

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2-Colon cancer : etiology, pathology, diagnosis, management, screening, prognosis

Lecture (5 Anorectal diseases

USMLE Step 2 CK lecture notes surgery (Kaplan Medical2019) Chapter Diseases of GIT, p129 to p 130.

Specific learning Objectives:

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

1-Identify benign anorectal diseases and how to manage each one.

Content

- Anal fissure : causes, diagnosis, treatment
- Hemorrhoids : causes, diagnosis, treatment
- Fistula in ano : causes, types, diagnosis, treatment
- Rectal prolapse : pathophysiology, types, causes, treatment

Neoplastic anorectal diseases

USMLE Step 2 CK lecture notes surgery (Kaplan Medical2019) Chapter Diseases of GIT, p129 to p 130.

Specific learning Objectives:

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

1-Identify neoplastic anorectal diseases and how to manage each one.

Content

- Rectal cancer : etiology, pathology, diagnosis, management, screening, prognosis
- Anal cancer : squamous cell carcinoma, basal cell carcinoma

Lecture 6,7) liver (surgical infections)

USMLE Step 2 CK lecture notes surgery(Kaplan Medical2019) Chapter Hepatobiliary, p 139 to 142

Specific learning Objectives:

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

1-Identify liver infections requiring surgical intervention;

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2-How to manage such infections

Contents:

- 1-Amebic liver abscess
- 2-Pyogenic liver abscess
- 3- Hydatid disease

Liver (Hepatic focal lesions)

USMLE Step 2 CK lecture notes surgery(Kaplan Medical2019) Chapter Hepatobiliary, p 139 to 142

Specific learning Objectives:

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

- 1-Different types of hepatic focal lesions
- 2-How to diagnose and treat such lesions

Content

- 1-Benign lesions : focal nodular hyperplasia, hepatic adenoma.
- 2-Malignant lesions : hepatocellular carcinoma, liver secondaries

Lectures (8) Gallbladder diseases

USMLE Step 2 CK lecture notes surgery(Kaplan Medical2019) Chapter Hepatobiliary, p 142 to 145

Specific learning Objectives:

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

- 1-Identify clinical presentations of gall stones and how to manage.
- 2-Identify causes and management of cholecystitis.

Content

- 1-Gall stones : types, causes, clinical presentation, complications, management.
- 2-Acute cholecystitis : causes, diagnosis, complications, treatment.
- 3-Chronic cholecystitis : causes, clinical presentation, management

CBD stones, biliary strictures, cholangitis

USMLE Step 2 CK lecture notes surgery(Kaplan Medical2019) Chapter Hepatobiliary, p 142 to 145

Specific learning Objectives:

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

- 1-Identify clinical presentation of CBD stones and its management.
- 2-Identify causes of biliary strictures and cholangitis and principles of management.

Content

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1-CBD stones : etiology, clinical presentations, diagnosis, treatment..

2-Biliary strictures : causes, diagnosis, treatment.

3-Cholangitis : causes, diagnosis, treatment

Lectures (9)

Pancreatic diseases (Acute and chronic Pancreatitis, pancreatic pseudocyst)

- USMLE Step 2 CK lecture notes surgery(Kaplan Medical2019) Chapter Hepatobiliary, p 146 to 148
- Amboss

Specific learning Objectives:

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

1-Recognize the presentation and risk factors of acute pancreatitis .

2-Understand the management and the complications of acute pancreatitis.

7- Discuss the diagnostic approach for chronic pancreatitis

8- Identify types, causes, management of pancreatic pseudocyst.

Contents

1-Acute pancreatitis

- Etiology
- Pathophysiology
- Clinical picture
- Diagnosis
- Differential diagnosis
- Treatment
- Complications
- Prognosis

2-Chronic pancreatitis

- Etiology
- Clinical picture
- Diagnosis
- Treatment

3-pancreatic pseudocyst

-types

-causes

- management

Pancreatic diseases (Chronic Pancreatitis and Pancreatic pseudocyst)

Surgery 3a (SUR-529) Study Guide

- USMLE Step 2 CK lecture notes surgery(Kaplan Medical2019) Chapter Hepatobiliary, p 146 to 148
- Amboss

Specific learning Objectives:

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

- 1- Discuss the diagnostic approach for chronic pancreatitis
- 2- Identify types, causes, management of pancreatic pseudocyst.

Contents

1-Chronic pancreatitis

- Etiology
- Clinical picture
- Diagnosis
- Treatment

2-pancreatic pseudocyst

-types

-causes

- management

Lectures (10) Splenic diseases

Amboss

Specific learning Objectives:

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

- 1-Understand the types and management of splenic cysts.

2-Identify causes of splenomegaly and indications of splenectomy.

Contents

1-Splenectomy

- Indications
- Preparations
- Complications

2-Splenic cysts

- types
- diagnosis
- management

3- Splenomegally

- causes

Portal hypertension and ascites

AMBOSS

Specific learning Objectives:

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

- 1-Discuss the causes and clinical picture of portal hypertension.
- 2- Understand the diagnosis and management of ascites, Spontaneous bacterial peritonitis.

Contents

1-Portal hypertension

- Definition
- Etiology
- Clinical picture
- Diagnosis
- Treatment
- Complications
- Esophageal variceal hemorrhage

2- Ascites

- Etiology

- Pathophysiology
 - Clinical picture
 - Subtypes and variants
 - Diagnosis
 - Classification
 - Treatment
 - Complications
- 3-Spontaneous bacterial peritonitis

Lectures (11)A pediatric surgery

USMLE Step 2 CK lecture notes surgery(Kaplan Medical2019) Chapter pediatric surgery, p167 to 173
Amboss

Specific learning Objectives:

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

- 1-Identify Causes of neonatal intestinal obstruction
- 2-How to manage.

Content

- 1-Esophageal atresia and TOF: causes, diagnosis, treatment.
- 2- CHPS : causes, clinical picture, diagnosis, treatment.
- 3-Intestinal atresia and NEC : diagnosis, treatment.
- 4- Small bowel volvulus meckels diverticulum : diagnosis, treatment.

Lecture (12) Pediatric surgery B

MLE Step 2 CK lecture notes surgery(Kaplan Medical2019) Chapter pediatric surgery, p167 to 173

AMBOSS

Specific learning Objectives:

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

- 1 Common surgical pediatric GIT and hepatopancreatobiliary diseases

Contents

- 1-Meconium ileus
- 2Intussusception and its management
- 3- Congenital megacolon
- 4-Anorectal malformation

Lecture (13) PERITONEUM

AMBOSS

Specific learning Objectives:

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

- 1-Discuss the types, causes and clinical picture of peritonitis.
- 2-Understand the diagnosis and management of peritoneal tumors.

Contents

1-peritonitis

- types
- Etiology
- Clinical picture
- Diagnosis
- Treatment

2- peritoneal tumors

- Etiology
- types
- Diagnosis
- Treatment

Lecture14) Jaundice

AMBOSS

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

- 1-Define jaundice, and its types
- 2-Describe epidemiology, risk factors, clinical presentations, differential diagnosis investigation and management of all types of jaundice

Contents

- 1-Definition
- 2-Epidemiology
- 3-Etiology
- 4-Pathogenesis
- 5-Clinical features
- 6-Differential diagnosis
- 7-Diagnosis
- 8-Management.

Outlines of topics for self directed learning and case based discussions

Case 1: dysphagia and dyspepsia

First Aid cases USMLE step 2CK 2nd edition p130

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 dysphagia and dyspepsia

Case 2: chronic pancreatitis

First Aid cases USMLE step 2CK 2nd edition p132

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 pancreatitis

Case 3: Achalasia and GERD

First Aid cases USMLE step 2CK 2nd edition p134,141

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 Achalasia, gerd

Case 4: Carcinoid syndrome

First Aid cases USMLE step 2CK 2nd edition p135

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 **Carcinoid syndrome**

Case 5: Colon cancer

First Aid cases USMLE step 2CK 2nd edition p136

Specific learning Objectives:

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

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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 colon cancer

Case 6: Diverticulitis

First Aid cases USMLE step 2CK 2nd edition p139

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 Diverticulitis

Case 7: Esophageal cancer

First Aid cases USMLE step 2CK 2nd edition p140

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 cancer esophagus

Case 8: Jaundice

First Aid cases USMLE step 2CK 2nd edition p131

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 Jaundice

Case 9: Hiatal hernia

First Aid cases USMLE step 2CK 2nd edition p144

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 Hiatal hernia

Case 10: IBD

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First Aid cases USMLE step 2CK 2nd edition p146

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 IBD

Case (11) IBS

First Aid cases USMLE step 2CK 2nd edition p150

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 IBS

Case(12) Peptic ulcer disease

First Aid cases USMLE step 2CK 2nd edition p151

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 of Peptic ulcer disease

Case (13) Small bowel obstruction

First Aid cases USMLE step 2CK 2nd edition p154

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 different cases of small bowel obstruction

Case (14)Zollinger- Ellison syndrome

First Aid cases USMLE step 2CK 2nd edition p162

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 cases of **Zollinger- Ellison syndrome**
- 3-Construct appropriate management algorithm (both diagnostic and therapeutic) for patients with IBD

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. Show how to measure body temperature and its interpretation, to do proper general and abdominal examination, and interpret Photos. Show how to examine eye and abdomen in obstructive jaundice. Describe the proper site of paracentesis and its steps and indications, use peripheral venous cannula, urethral catheter; ryles tube insertion and Sengstaken tube insertion..
5. Integrate the results of history, physical examination and laboratory test findings into a meaningful diagnostic formulation.
6. Apply measures that promote patient safety.
7. Apply suitable measures for infection control when dealing with the patients and instruments.
8. Construct appropriate management algorithm (both diagnostic and therapeutic) for patients with common