



# البرنامـج الأكاديمي والمقرر الدراسي لكلية الطب

Description of  
Academic  
Program  
&  
Syllabus

College of  
Medicine



اعداد وتصميم  
الدكتور زهير عاصم عبد الكريم

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## Academic Program Description 2024-2025

**University Name: University of Babylon**

**College: College of Medicine**

**Scientific Department: The Single-Department College**

**Academic Program Name: Bachelor of Medicine and Surgery**

**Final Certificate Name: Bachelor of Medicine and Surgery**

**Study System: Semester System (Courses)**


**Description Preparation Date: 16/9/2024**

**File Completion Date: 16/9/2024**

Audited by the Quality Assurance and University File was  
reviewed by the Division of Quality Assurance and University  
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# Description of Academic Program & Syllabus College of Medicine

وصف  
البرنامج الأكاديمي والمقرر الدراسي  
لكلية الطب



## Introduction:

The academic program at the College of Medicine aims to prepare qualified physicians with the scientific competence and professional skills necessary to provide safe and effective healthcare. They are equipped with strong capabilities for lifelong learning and a deep understanding of their rights and responsibilities from the moment of graduation. This program seeks to enable graduates to enter the labour market with confidence and independence and to continue their professional journey without obstacles.

The program spans six academic years and follows the course system, where each academic year consists of two semesters, except for the sixth year, which is divided into four semesters. The curriculum is based on a competency-based educational approach that focuses on achieving clear learning outcomes, including theoretical knowledge, practical skills, and professional behaviours. This is delivered within an integrated educational framework that connects education and assessment to comprehensively develop student capabilities.

The curriculum is designed in a sequential and cumulative manner to ensure consistency and integration across the four main pillars of the program:

1. Basic biomedical sciences
2. Behavioural and social sciences
3. Clinical sciences
4. Professional skills

The curriculum clearly defines the skills, knowledge, and behaviours and students are expected to acquire and demonstrate by the end of their studies. It also outlines the course content, its chronological sequence, and the teaching and assessment methods used, based on the latest recognized principles and methods in modern medical education.

The total instructional hours allocated for the program amount to 5,430 hours, which is equivalent to 254 credit units. These are distributed as follows:

- 2,190 theoretical hours (equivalent to 146 credit units)
- 3,240 practical and clinical hours (equivalent to 108 credit units)

Credit units are calculated according to the following standards:

- Every 15 theoretical hours = 1 credit unit
- Every 30 practical or clinical hours = 1 credit unit

The program places significant emphasis on developing students' analytical and critical thinking skills, reinforcing the principles of evidence-based medicine and scientific research. It ensures horizontal integration between courses within a single stage, and vertical integration across different academic stages, guaranteeing a gradual and coherent development of knowledge and skills aligned with modern medical education needs.

The program utilizes a variety of teaching and learning strategies, including:

- Traditional lectures
- Small group learning
- Case-based learning
- Practical training in laboratories
- Bedside clinical teaching
- Clinical case presentations
- Clinical skills labs
- Community-based field training
- E-learning supported by modern digital platforms

The program allocates sufficient and organized time for clinical training, starting from the third year through the sixth, covering major medical specialties such as:

- Internal medicine and its subspecialties
- Surgery and its subspecialties
- Psychiatry
- Paediatrics
- Obstetrics and gynaecology
- Family medicine

This training aims to strengthen the students' hands-on clinical experience through direct interaction with patients under specialized academic supervision in real and safe clinical environments.

The program also gives great importance to patient safety, as it is one of the essential pillars of modern medical practice. It includes training students on risk prevention, reducing medical errors by:

- Following hygiene practices (e.g., handwashing)
- Using gloves and masks
- Respecting patient privacy and data confidentiality

- Controlling drug dispensing procedures
- Receiving supervised training
- Raising awareness of complex practices related to patient safety in clinical settings

The program includes comprehensive training in clinical skills, such as:

- Taking medical histories
- Conducting physical examinations
- Communicating effectively with patients and their families
- Performing procedures and medical tests
- Managing emergency cases
- Writing prescriptions

It also trains students in professional skills, such as:

- Patient management
- Teamwork
- Leadership
- Interdisciplinary collaboration

Each student is required to document their clinical training in a dedicated clinical logbook for each course. This logbook records their progress in both clinical and professional skills and includes activities related to health promotion and disease prevention. It serves as a primary tool in the continuous assessment of student performance and ensures that program requirements are met in a gradual and integrated manner.

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## 1. Program Vision

The academic program at the College of Medicine–University of Babylon aims to be among the top programs at the national level by providing advanced medical education and preparing graduates who possess continuous learning skills and a strong sense of professional responsibility. This enables them to practice medicine confidently and independently and to contribute to improving healthcare

## 2. Program Mission

The academic program seeks to develop its graduates by qualifying general physicians who are competent and committed to professionalism. The program also aims to continuously review its curriculum to ensure it meets the health and societal needs.

## 3. Program Objectives

The academic program aims to enable students to:

1. Understand the foundational knowledge in the biomedical and clinical sciences, including the natural growth of the human body and its physiological and pathological development.
2. Diagnose and manage common medical conditions by:
  - Effectively communicating with patients.
  - Taking thorough clinical histories and performing physical examinations.
- Requesting and interpreting investigations accurately.
- Prescribing medications rationally and using appropriate nutrition plans.
- Designing evidence-based treatment plans and implementing them effectively.
3. Demonstrate professional behavior by:
  - Showing responsibility and commitment to continuous professional development.
  - Adhering to ethical principles and showing respect for diverse cultures.
4. Acquire basic clinical skills and be able to:



- Perform essential medical procedures.
- Apply basic life support (BLS) techniques for various age groups.
- 5. Contribute to community health by:
  - Identifying and analyzing public health problems.
  - Proposing solutions to community health challenges.
- 6. Adhere to medical ethics, including:
  - Respecting patient privacy and non-discrimination.
  - Working collaboratively within healthcare teams.
- 7. Engage in lifelong learning and continuous professional development.
- 8. Practice evidence-based medicine by:
  - Evaluating scientific information and applying it in clinical decision-making.

#### 4. Program Accreditation

The college obtained a 4 year (2024-2028) specialized academic accreditation from (Accreditation and quality assurance commission for higher education institutions) which are recognized globally.

#### 5. Other external influences

Ministry of higher education and scientific research



## 6. Program Structure

Program Structure	No of Courses	Credit hours	Percentage	Reviews*
Institution Requirements	4	8	3.1%	
College Requirements	55	246	96.9%	
Department Requirements	—	—		
Summer Training	—	—		

## 7. Program Discription

Level / year	Code	Course name	Credit Hours	
			Th	Pr
Year 1 / Course 1				
Year 1 / Course 1	MeANi100001	Human anatomy	30	60
Year 1 / Course 1	MeMPi100002	Medical physics	45	30
Year 1 / Course 1	MeMTi100003	Medical terminology	30	—
Year 1 / Course 1	MeCSi100004	Computer science	15	30
Year 1 / Course 2				
Year 1 / Course 2	MeBCii100005	Biochemistry	60	30



Year 1 / Course 2	MeANii100006	Human anatomy	30	60
Year 1 / Course 2	MeHRii100007	Human rights	30	—
Year 1 / Course 2	MeMBii100008	Medical biology	45	30
Year 1 / Course 2	MePHii100009	Physiology	45	30
<b>Year 2 / Course 1</b>				
Year 2 / Course 1	MeANi200001	Human anatomy	45	60
Year 2 / Course 1	MeHLi200002	History	30	30
Year 2 / Course 1	MeCBi200003	Crimes of Baath regime in Iraq	30	—
Year 2 / Course 1	MePHi200004	Physiology	60	30
Year 2 / Course 1	MeBCi200005	Biochemistry	45	30
<b>Year 2 / Course 2</b>				
Year 2 / Course 2	MeANii200006	Human anatomy	45	60
Year 2 / Course 2	MeHLii200007	History	15	60
Year 2 / Course 2	MeEMii200008	Embryology	30	—
Year 2 / Course 2	MePHii200009	Physiology	60	30



Year 2 / Course 2	MeBCii200010	Biochemistry	45	30
Year 2 / Course 2	MeCSii200011	Computer science	15	30
<b>Year 3 / Course 1</b>				
Year 3 / Course 1	MeCSi300001	Medicine	60	30
Year 3 / Course 1	MeBEi300002	Behavioral science	30	—
Year 3 / Course 1	MeMLi300003	Microbiology	45	30
Year 3 / Course 1	MePRi300004	Parasitology	30	30
Year 3 / Course 1	MeGPi300005	Pathology	30	30
Year 3 / Course 1	MePAi300006	Pharmacology	45	30
<b>Year 3 / Course 2</b>				
Year 3 / Course 2	MeSEii300007	Surgery	30	30
Year 3 / Course 2	MeGPii300008	Pathology	30	30
Year 3 / Course 2	MeCOii300009	Community medicine	30	30
Year 3 / Course 2	MeMLii300010	Microbiology	45	30
Year 3 / Course 2	MePRii300011	Parasitology	30	30
Year 3 / Course 2	MePAii300012	Pharmacology	45	30
<b>Year 4 / Course 1</b>				





Year 4 / Course 1	MeCSi400001	Medicine	60	60
Year 4 / Course 1	MeMTi400002	Medical ethics	30	—
Year 4 / Course 1	MeCOi400003	Community medicine	60	60
Year 4 / Course 1	MeSEi400004	Surgery	45	30
Year 4 / Course 1	MeGPi400005	Pathology	30	30
Year 4 / Course 1	MeFMi400006	Forensic medicine	60	60
<b>Year 4 / Course 2</b>				
Year 4 / Course 2	MeCSii400007	Medicine	60	60
Year 4 / Course 2	MeGPii400008	Pathology	30	30
Year 4 / Course 2	MeOBii400009	Obstetric	60	90
Year 4 / Course 2	MeCOii400010	Community medicine	45	60
Year 4 / Course 2	MeSEii400011	Surgery	45	60
<b>Year 5 / Course 1</b>				
Year 5 / Course 1	MeSEi500001	Surgery Orthopedic	45	30
Year 5 / Course 1	MeRAi500002	Radiology	30	30
Year 5 / Course 1	MeGYi500003	Gynecology	60	60



Year 5 / Course 1	MePEi500004	Pediatrics	30	30
Year 5 / Course 1	MeOPi500005	Ophthalmology	30	30
Year 5 / Course 1	MeMDi500006	Medicine	45	30
<b>Year 5 / Course 2</b>				
Year 5 / Course 2	MeSEii500007	Surgery (m specialties)	45	60
Year 5 / Course 2	MeENii500008	ENT	30	30
Year 5 / Course 2	MeDEii500009	Dermatology	30	30
Year 5 / Course 2	MeMDii500010	Medicine	30	30
Year 5 / Course 2	MePEii500011	Pediatrics	30	30
Year 5 / Course 2	MePSii500012	Psychiatric	60	30
<b>Year 6</b>				
Year 6	MeSEa600001	Surgery	—	360
Year 6	MeGYa600002	Gynecology and Obstetrics	—	300
Year 6	MeMDa600003	Medicine	—	360
Year 6	MePEa600004	Pediatrics	—	300

## 8. Expected learning outcomes of the program

### Knowledge

<p>Out come 1</p>	<p><b>A. The graduate will be able to apply to medical practice biomedical scientific principles, method and knowledge relating to: anatomy, biochemistry, cell biology, genetics, immunology, microbiology, molecular biology, nutrition, pathology, pharmacology and physiology. The graduate will be able to:</b></p> <ol style="list-style-type: none"> <li>1. Explain normal human structure and functions.</li> <li>2. Explain the scientific bases for common disease presentations.</li> <li>3. Justify the selection of appropriate investigations for common clinical cases.</li> <li>4. Explain the fundamental principles underlying such investigative techniques.</li> <li>5. Select appropriate forms of management for common diseases, and ways of preventing common diseases, and explain their modes of action and their risks from first principles.</li> <li>6. Demonstrate knowledge of drug actions: therapeutics and pharmacokinetics; drug side effects and interactions, including for multiple treatments, long term conditions and non-prescribed medication; and also including effects on the population, such as the spread of antibiotic resistance.</li> <li>7. Make accurate observations of clinical phenomena and appropriate critical analysis of clinical data.</li> </ol>
	<p><b>B. Apply psychological principles, method and knowledge to medical practice.</b></p> <ol style="list-style-type: none"> <li>1. Explain normal human behavior at an individual level.</li> <li>2. Discuss psychological concepts of health, illness and disease.</li> <li>3. Apply theoretical frameworks of psychology</li> </ol>





Out come 2	<ol style="list-style-type: none"> <li>4. Explain psychological factors that contribute to illness, the course of the disease and the success of treatment.</li> <li>5. Discuss psychological aspects of behavioral change and treatment compliance.</li> <li>6. Discuss adaptation to major life changes, such as bereavement; comparing and contrasting the abnormal adjustments that might occur in these situations.</li> <li>7. Identify appropriate strategies for managing patients with dependence issues and other demonstrations of self-harm.</li> </ol>
Out come 3	<p><b>C. Apply social science principles, method and knowledge to medical practice.</b></p> <ol style="list-style-type: none"> <li>1. Explain normal human behavior at a societal level.</li> <li>2. Discuss sociological concepts of health, illness and disease.</li> <li>3. Apply theoretical frameworks of sociology to explain the varied responses of individuals, groups and societies to disease.</li> <li>4. Explain sociological factors that contribute to illness, the course of the disease and the success of treatment – including issues relating to health inequalities, the links between occupation and health and the effects of poverty and affluence.</li> <li>5. Discuss sociological aspects of behavior Ural changes and treatment compliance.</li> </ol>
	<p><b>D. Apply to medical practice the principles, method and knowledge of population health and the improvement of health and healthcare.</b></p> <ol style="list-style-type: none"> <li>1. Discuss basic principles of health improvement, including the wider determinants of health, health inequalities, health risks and disease surveillance.</li> <li>2. Assess how health behaviors and outcomes are affected by the diversity of the patient population.</li> </ol>



Out come 4	<ol style="list-style-type: none"> <li>3. Discuss the principles underlying the development of health and health service policy, including issues relating to health economics and equity, and clinical guidelines.</li> <li>4. Explain and apply the basic principles of communicable disease control in hospital and community settings.</li> <li>5. Evaluate and apply epidemiological data in managing healthcare for the individual and the community.</li> <li>6. Recognise the role of environmental and occupational hazards in ill-health and discuss ways to mitigate their effects.</li> <li>7. Discuss the role of nutrition in health.</li> <li>8. Discuss the principles and application of primary, secondary and tertiary prevention of disease.</li> <li>9. Discuss from a global perspective the determinants of health and disease and variations in healthcare delivery and medical practice.</li> </ol>
Outcome 5	<p><b>E. Apply scientific method and approaches to medical research.</b></p> <ol style="list-style-type: none"> <li>1. Critically appraise the results of relevant diagnostic, prognostic and treatment trials and other qualitative and quantitative studies as reported in the medical and scientific literature.</li> <li>2. Formulate simple relevant research questions in biomedical science, psychosocial science or population science, and design appropriate studies or experiments to address the questions.</li> <li>3. Apply findings from the literature to answer questions raised by specific clinical problems.</li> <li>4. Understand the ethical and governance issues involved in medical research.</li> </ol>

Skills	
Outcome 1	<p><b>A. The graduate will be able to carry out a consultation with a patient:</b></p> <ol style="list-style-type: none"> <li>1. Take and record a patient's medical history, including family and social history, talking to relatives or other carers where appropriate.</li> <li>2. Elicit patients' questions, their understanding of their condition and treatment options, and take their opinions into consideration.</li> <li>3. Perform a full physical examination.</li> <li>4. Perform a mental-state examination.</li> <li>5. Assess a patient's capacity to make a particular decision that does not contradict legal requirements.</li> <li>6. Determine the extent to which patients want to participate in deciding management options with their health care providers.</li> <li>7. Provide explanation, advice, reassurance and support.</li> </ol>
Outcome 2	<p><b>B. Diagnose and manage clinical presentations.</b></p> <ol style="list-style-type: none"> <li>1. Interpret findings from the history, physical examination and mental-state examination, appreciating the importance of clinical, psychological, social and cultural factors.</li> <li>2. Make an initial assessment of a patient's problems and a differential diagnosis. Understand the processes by which doctors make and test a differential diagnosis.</li> <li>3. Formulate a plan of investigation in partnership with the patient, obtaining informed consent as an essential part of this process.</li> <li>4. Interpret the results of investigations, and the results of the diagnostic procedures in Appendix 1.</li> <li>5. Synthesize a full assessment of the patient's problems and define the likely diagnosis or diagnoses.</li> <li>6. Make clinical judgments and decisions, based on the available evidence, in conjunction with colleagues and as appropriate. This may include situations of uncertainty.</li> <li>7. Formulate a plan for treatment, management and discharge</li> </ol>





	<p>according to best evidence in partnership with the patients, their families and other health professionals with consideration to patients' concerns and preferences.</p> <ol style="list-style-type: none"> <li>Support patients in caring for themselves.</li> <li>Identify the signs that suggest children or other vulnerable people may be suffering from abuse or neglect and know what action to take to safeguard their welfare.</li> <li>Contribute to the care of terminal patients and their families, including management of symptoms, practical issues of law and certification, and effective communication and team working.</li> </ol>
Outcome 3	<p><b>C. Communicate effectively with patients, their families and colleagues in a medical context.</b></p> <ol style="list-style-type: none"> <li>Communicate clearly, sensitively and effectively with patients, their relatives or other carers, and colleagues from the medical and other professions, by listening, sharing and responding.</li> <li>Communicate clearly, sensitively and effectively with individuals and groups regardless of their age, social, cultural or ethnic backgrounds or their disabilities, in appropriate language.</li> <li>Communicate by spoken, written and electronic methods including medical records and be aware of other non-verbal methods of communication used by patients like body language and facial expression.</li> <li>Communicate appropriately in difficult circumstances, such as when breaking bad news, and when discussing sensitive issues, such as alcohol consumption, smoking or obesity.</li> <li>Communicate appropriately with difficult, angry, or violent patients.</li> <li>Communicate appropriately with people with mental illness.</li> <li>Communicate appropriately with vulnerable patients.</li> <li>Communicate effectively in various roles, for example, as patient advocate, teacher, manager or improvement leader.</li> </ol>

Outcome 4	<p><b>D. Provide immediate care in all medical emergencies</b></p> <ol style="list-style-type: none"> <li>1. Assess and recognise the severity of a clinical presentation and a need for immediate emergency care</li> <li>2. Diagnose and manage acute medical emergencies.</li> <li>3. Provide basic first aid.</li> <li>4. Provide immediate life support.</li> <li>5. Provide cardio-pulmonary resuscitation or direct other team members to carry out resuscitation.</li> </ol>
Outcome 5	<p><b>E. Prescribe drugs safely, effectively and economically.</b></p> <ol style="list-style-type: none"> <li>1. Establish an accurate drug history, covering both prescribed and other medication.</li> <li>2. Plan appropriate drug therapy for common indications, including pain and distress.</li> <li>3. Provide a safe and legal prescription, with emphasis on pregnancy, lactation, children, organ transplant, allergy, and elderly.</li> <li>4. Calculate appropriate drug doses and record the outcome accurately.</li> <li>5. Provide patients with appropriate information about their medicines.</li> <li>6. Access reliable information about medicines according to need.</li> <li>7. Detect and report adverse drug reactions.</li> <li>8. Demonstrate awareness about the existence of a range of alternative therapies used by patients and awareness about possible effects on or interaction with other treatments taken by patients.</li> </ol>
Outcome 6	<p><b>F. Carry out practical procedures safely and effectively.</b></p> <ol style="list-style-type: none"> <li>1. Be able to perform a range of diagnostic procedures, as listed in <b>Appendix 1</b> and measure and record the findings.</li> <li>2. Be able to perform a range of therapeutic procedures, as listed in <b>Appendix 2</b>.</li> <li>3. Be able to demonstrate correct practice in general aspects of practical procedures, as listed in <b>Appendix 3</b>.</li> </ol>



Outcome 7	<p><b>G. Use information effectively in a medical context.</b></p> <ol style="list-style-type: none"> <li>1. Keep accurate, legible and complete clinical records.</li> <li>2. Make effective use of computers and other information systems, including storing and retrieving information.</li> <li>3. Keep to the requirements of confidentiality and data protection legislation and codes of practice in all dealings with information.</li> <li>4. Access information sources and use the information in relation to patient care, health promotion, giving advice and information to patients, and research and education.</li> <li>5. Apply the principles, method and knowledge of health informatics to medical practice.</li> </ol>
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Attitude	
	<p><b>A. Professional and ethical responsibilities</b></p>
Outcome 1	<p><b>1. Newly qualified doctors must behave according to ethical and professional principles.</b>  <b>They must be able to:</b></p> <ol style="list-style-type: none"> <li>a. Demonstrate the clinical responsibilities and role of the doctor.</li> <li>b. Demonstrate compassionate professional behavior and their professional responsibilities in making sure the fundamental needs of patients are addressed.</li> <li>c. Summarise the current ethical dilemmas in medical science and healthcare practice; the ethical issues that can arise in everyday clinical decision-making; and apply ethical reasoning to situations which may be encountered in the first years after graduation.</li> <li>d. Maintain confidentiality and respect patients' dignity and privacy.</li> <li>e. Act with integrity, be polite, considerate, trustworthy and honest.</li> <li>f. Take personal and professional responsibility for their actions.</li> </ol>





- g. Manage their time and prioritize effectively.
- h. Recognize and acknowledge their own personal and professional limits and seek help from colleagues and supervisors when necessary, including when they feel that patient safety may be compromised.
- i. Protect patients from any risk posed by their own health including:
  - the risks to their health and to patient safety posed by self-prescribing medication and substance misuse
  - the risks to their health and to patient safety posed by fatigue – they must apply strategies to limit the impact of fatigue on their health.
- j. Recognize the potential impact of their attitudes, values, beliefs, perceptions and personal biases (which may be unconscious) on individuals and groups and identify personal strategies to address this.
- k. Demonstrate the principles of person-centered care and include patients and, where appropriate, their relatives, carers or other advocates in decisions about their healthcare needs.
- l. Explain and demonstrate the importance of:
  - seeking patient consent, or the consent of the person who has parental responsibility in the case of children and young people, or the consent of those with lasting power of attorney or independent mental capacity advocates if appropriate
  - providing information about options for investigations, treatment and care in a way that enables patients to make decisions about their own care
  - assessing the mental capacity of a patient to make a particular decision, including when the lack of capacity is temporary, and knowing when and how to take action.
- m. Act appropriately, with an inclusive approach, towards patients and colleagues.
- n. Respect patient's wishes about whether they wish to participate in the education of learners.

	<p>o. Access and analyse reliable sources of current clinical evidence and guidance and have established methods for making sure their practice is consistent with these.</p> <p>p. Explain and demonstrate the importance of engagement with revalidation,6 including maintaining a professional development portfolio which includes evidence of reflection, achievements, learning needs and feedback from patients and colleagues.</p> <p>q. Engage in their induction and orientation activities, learn from experience and feedback, and respond constructively to the outcomes of appraisals, performance reviews and assessments.</p>
Outcome 2	<p><b>B. Legal responsibilities</b></p> <p><b>Newly qualified doctors must demonstrate knowledge of the principles of the legal framework in which medicine is practiced in the jurisdiction in which they are practicing, and have awareness of where further information on relevant legislation can be found.</b></p>
Outcome 3	<p><b>C. Patient safety and quality improvement</b></p> <p><b>Newly qualified doctors must demonstrate that they can practice safely. They must participate in and promote activity to improve the quality and safety of patient care and clinical outcomes. They must be able to:</b></p> <ol style="list-style-type: none"> <li>Place patients' needs and safety at the centre of the care process.</li> <li>Promote and maintain health and safety in all care settings and escalate concerns to colleagues where appropriate, including when providing treatment and advice remotely.</li> <li>Recognize how errors can happen in practice and that errors should be shared openly and be able to learn from their own and others' errors to promote a culture of safety.</li> <li>Apply measures to prevent the spread of infection, and apply the principles of infection prevention and control.</li> <li>Describe the principles of quality assurance, quality improvement, quality planning and quality control, and in</li> </ol>



	<p>which contexts these approaches should be used to maintain and improve quality and safety.</p> <ul style="list-style-type: none"> <li>f. Describe basic human factors principles and practice at individual, team, organizational and system levels and recognize and respond to opportunities for improvement to manage or mitigate risks.</li> <li>g. Apply the principles and methods of quality improvement to improve practice (for example, plan, do, study, act or action research), including seeking ways to continually improve the use and prioritization of resources.</li> <li>h. Describe the value of national surveys and audits for measuring the quality of care.</li> </ul>
Outcome 4	<p><b>D. Dealing with complexity and uncertainty</b></p> <p><b>The nature of illness is complex and therefore the health and care of many patients is complicated and uncertain. Newly qualified doctors must be able to recognize complexity and uncertainty. And, through the process of seeking support and help from colleagues, learn to develop confidence in managing these situations and responding to change. They must be able to:</b></p> <ul style="list-style-type: none"> <li>a. Recognize the complex medical needs, goals and priorities of patients, the factors that can affect a patient's health and wellbeing and how these interact. These include psychological and sociological considerations that can also affect patients' health</li> <li>b. Identify the need to adapt management proposals and strategies for dealing with health problems to take into consideration patients' preferences, social needs, multiple morbidities, frailty and long term physical and mental conditions</li> <li>c. Demonstrate working collaboratively with patients, their relatives, carers or other advocates, in planning their care, negotiating and sharing information appropriately and supporting patient self-care</li> </ul>



	<p>d. Demonstrate working collaboratively with other health and care professionals and organizations when working with patients, particularly those with multiple morbidities, frailty and long term physical and mental conditions</p>
Outcome 5	<p><b>E. Dealing with complexity and uncertainty</b></p> <p><b>The nature of illness is complex and therefore the health and care of many patients is complicated and uncertain. Newly qualified doctors must be able to recognize complexity and uncertainty. And, through the process of seeking support and help from colleagues, learn to develop confidence in managing these situations and responding to change. They must be able to:</b></p> <ul style="list-style-type: none"> <li>a. Recognize how treatment and care can place an additional burden on patients and make decisions to reduce this burden where appropriate, particularly where patients have multiple conditions or are approaching the end of life</li> <li>b. Manage the uncertainty of diagnosis and treatment success or failure and communicate this openly and sensitively with patients, their relatives, carers or other advocates</li> <li>c. Evaluate the clinical complexities, uncertainties and emotional challenges involved in caring for patients who are approaching the end of their lives and demonstrate the relevant communication techniques and strategies that can be used with the patient, their relatives, carers or other advocates.</li> </ul>



<p>Outcome 6</p>	<p><b>F. Safeguarding vulnerable patients</b>  <b>Newly qualified doctors must be able to recognise and identify factors that suggest patient vulnerability and take action in response. They must be able to:</b></p> <ol style="list-style-type: none"> <li>Identify signs and symptoms of abuse or neglect and be able to safeguard children, young people, adults and older people, using appropriate systems for sharing information, recording and raising concerns, obtaining advice, making referrals and taking action</li> <li>Take a history that includes consideration of the patient's autonomy, views and any associated vulnerability, and reflect this in the care plan and referrals</li> <li>Assess the needs of and support required for children, young people and adults and older people who are the victims of domestic, sexual or other abuse</li> <li>Assess the needs of, and support required, for people with a learning disability</li> <li>Assess the needs of, and support required, for people with mental health conditions.</li> <li>Adhere to the professional responsibilities in relation to procedures performed for non-medical reasons, such as female genital mutilation<sup>9</sup> and cosmetic interventions<sup>10</sup>.</li> <li>Explain the application of health legislation that may result in the deprivation of liberty to protect the safety of individuals and society.</li> <li>Recognize where addiction (to drugs, alcohol, smoking or other substances), poor nutrition, self neglect, environmental exposure, or financial or social deprivation are contributing to ill health. And take action by seeking advice from colleagues and making appropriate referrals.</li> <li>Describe the principles of equality legislation in the context of patient care.</li> </ol>
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<p>Outcome 7</p>	<p><b>G. Leadership and team working</b> Newly qualified doctors must recognise the role of doctors in contributing to the management and leadership of the health service. They must be able to:</p> <ol style="list-style-type: none"> <li>Describe the principles of how to build teams and maintain effective team work and interpersonal relationships with a clear shared purpose</li> <li>Undertake various team roles including, where appropriate, demonstrating leadership and the ability to accept and support leadership by others.</li> <li>Identify the impact of their behaviour on others.</li> <li>Describe theoretical models of leadership and management that may be applied to practice.</li> </ol>
<p>Outcome 8</p>	<p><b>H. Newly qualified doctors must learn and work effectively within a multi-professional and multi-disciplinary team and across multiple care settings. This includes working face to face and through written and electronic means, and in a range of settings where patients receive care, including community, primary, secondary, mental health, specialist tertiary and social care settings and in patients' homes. They must be able to:</b></p> <ol style="list-style-type: none"> <li>Demonstrate their contribution to effective interdisciplinary team working with doctors from all care settings and specialties, and with other health and social care professionals for the provision of safe and high-quality care.</li> <li>Work effectively with colleagues in ways that best serve the interests of patients. This includes: <ul style="list-style-type: none"> <li>safely passing on information using clear and appropriate spoken, written and electronic communication.</li> <li>at handover in a hospital setting and when handing over and maintaining continuity of care in primary, community and social care settings.</li> <li>when referring to colleagues for investigations or advice.</li> </ul> </li> </ol>

	<ul style="list-style-type: none"> <li>- when things go wrong, for example when errors happen.</li> <li>- questioning colleagues during handover where appropriate.</li> <li>- working collaboratively and supportively with colleagues to share experiences and challenges that encourage learning.</li> <li>- responding appropriately to requests from colleagues to attend patients.</li> <li>- applying flexibility, adaptability and a problem-solving approach to shared decision making with colleagues.</li> </ul> <p>c. Recognize and show respect for the roles and expertise of other health and social care professionals and doctors from all specialties and care settings in the context of working and learning as a multi-professional team.</p>
Appendix 1	<p><b>Diagnostic procédures</b></p> <ol style="list-style-type: none"> <li>1.Measuring body temperature using an appropriate recording device.</li> <li>2.Measuring pulse rate and blood pressure using manual techniques and automatic electronic devices.</li> <li>3.Transcutaneous monitoring of oxygen saturation, applying, and taking readings from, an electronic device which measures the amount of oxygen in the patient's blood.</li> <li>4.Venepuncture, inserting a needle into a patient's vein to take a sample of blood for testing, or to give an injection into the vein.</li> <li>5.Managing blood samples correctly: Making sure that blood samples are placed in the correct containers, and that these are labelled correctly and sent to the laboratory promptly and in the correct way. Taking measures to prevent spilling and contamination.</li> <li>6.Taking blood cultures: Taking samples of venous blood to test for the growth of infectious organisms in the blood. Requires special blood containers and laboratory procedures.</li> <li>7.Measuring blood glucose: Measuring the concentration of</li> </ol>



- glucose in the patient's blood at the bedside, using appropriate equipment and interpreting the results.
8. Managing an electrocardiograph (ECG) monitor: Setting up a continuous recording of the electrical activity of the heart. Ensuring the recorder is functioning correctly, and interpreting the tracing.
  9. Performing and interpreting a 12-lead electrocardiograph (ECG): Recording a full, detailed tracing of the electrical activity of the heart, using a machine recorder (electrocardiograph). Interpreting the recording for signs of heart disease.
  10. Basic respiratory function tests: Carrying out basic tests to see how well the patient's lungs are working (for example, how much air they can breathe out in one second).
  11. Urine multi dipstick test: Testing a sample of urine for abnormal contents, such as blood or protein. The urine is applied to a plastic strip with chemicals which change color in response to specific abnormalities.
  12. Advising patients on how to collect a mid-stream urine specimen: Obtaining a sample of urine from a patient, usually to check for the presence of infection, using a method which reduces the risk of contamination by skin bacteria.
  13. Taking nose, throat and skin swabs: Using the correct technique to apply sterile swabs to the nose, throat and skin.
  14. Nutritional assessment: Making an assessment of the patient's state of nutrition. This includes an evaluation of their diet; their general physical condition; and measurement of height, weight and body mass index.
  15. Pregnancy testing: Performing a test of the urine to detect hormones which indicate that the patient is pregnant.





## Appendix 2

### Therapeutic procedures

1. Administering oxygen Allowing the patient to breathe a higher concentration of oxygen than normal, via a face mask or other equipment.
2. Establishing peripheral intravenous access and setting up an infusion; use of infusion devices. Puncturing a patient's vein in order to insert an indwelling plastic tube (known as a 'cannula'), to allow fluids to be infused into the vein (a 'drip'). Connecting the tube to a source of fluid. Appropriate choice of fluids and their doses. Correct use of electronic devices which drive and regulate the rate of fluid administration.
3. Making up drugs for parenteral administration: Preparing medicines in a form suitable for injection into the patient's vein. May involve adding the drug to a volume of fluid to make up the correct concentration for injection.
4. Dosage and administration of insulin and use of sliding scales: Calculating how many units of insulin a patient requires, what strength of insulin solution to use, and how it should be given (for example, into the skin, or into a vein). Use of a 'sliding scale' which links the number of units to the patient's blood glucose measurement at the time.
5. Subcutaneous and intramuscular injections, Giving injections beneath the skin and into muscle.
6. Blood transfusion Following the correct procedures to give a transfusion of blood into the vein of a patient (including correct identification of the patient and checking blood groups). Observation for possible reactions to the transfusion, and actions if they occur.
7. Male and female urinary catheterization Passing a tube into the urinary bladder to permit drainage of urine, in male and female patients.
8. Instructing patients in the use of devices for inhaled medication: Providing instructions for patients about how to use inhalers correctly, for example, to treat asthma.
9. Use of local anesthetics Using drugs which produce numbness and



	<p>prevent pain, either applied directly to the skin or injected into skin or body tissues.</p> <p>10. Skin suturing Repairing defects in the skin by inserting stitches (normally includes use of local anaesthetic).</p> <p>11. Wound care and basic wound dressing Providing basic care of surgical or traumatic wounds and applying dressings appropriately.</p> <p>12. Correct techniques for 'moving and handling', including patients: Using, or directing other team members to use, approved methods for moving, lifting and handling people or objects, in the context of clinical care, using methods that avoid injury to patients, colleagues, or oneself.</p>
Appendix 3	<p><b>General aspects of practical procedures</b></p> <ol style="list-style-type: none"> <li>1. Giving information about the procedure, obtaining and recording consent, and ensuring appropriate aftercare: Making sure that the patient is fully informed, agrees to the procedure being performed, and is cared for and watched appropriately after the procedure.</li> <li>2. Hand washing (including surgical 'scrubbing up'): Following approved processes for cleaning hands before procedures or surgical operations.</li> <li>3. Use of personal protective equipment (gloves, gowns, masks): Making correct use of equipment designed to prevent the spread of body fluids or cross-infection between the operator and the patient.</li> <li>4. Infection control in relation to procedures: Taking all steps necessary to prevent the spread of infection before, during or after a procedure.</li> <li>5. Safe disposal of clinical waste, needles and other 'sharps': Ensuring that these materials are handled carefully and placed in a suitable container for disposal.</li> </ol>

## 9. Teaching and learning strategies

**Brainstorming strategy:** This is to make the student active and effective in educational situations and to accustom students to respect different opinions and benefit from the ideas and information of others.

**Teamwork strategy:** Students are divided into small groups, given specific tasks (common goals) and must rely on cooperation (knowledge and skill exchange) in order to accomplish the task required of them.

**Problem-solving strategy or problem-based learning:** This is done by making students anxious and stimulating their thinking about a problem. This is done by - defining the problem and formulating it, then analyzing and collecting data and analyzing the causes and factors, after which solutions are proposed and then implemented.

## 10. Evaluation methods

Evaluation methods would include consideration of:

- Student achievement include assessment in all domains: knowledge, skills and attitudes.
- Using a wide range of assessment methods and formats.
- Ensure using integrated assessment.
- Using of personal portfolio and log-books.
- Balance between formative and summative assessment with a ratio of 3:1.
- Avoiding conflicts of interest in the methods and results of assessments.
- Assessments are open to scrutiny by external expertise.
- Using a system of appeal of assessment results.

- Encouraging the use of external examiners.
- Promoting student learning through measuring progress of student on predetermined check list in each discipline in addition to the formative exam. It includes many parameters such as attendance, preparation, interaction, engagement, coursework, quizzes ... etc.
- Ensuring continuous improvement in the programs of teaching and assessment to be clearly compatible with intended educational outcomes and met by the students.

Quiz exams

Formative exams

Mid-course theoretical exams (essay questions)

Final course theoretical exams (multiple-choice questions)

Final clinical exam :

OSCE

VIVA ( oral exam )

Short case exam

Slides exam

Long case exam



## 11. Faculty

### Faculty members

Academic Rank	Speciality		Special requirements/skills (if any)		Number of faculty	
	General	Subspeciality			Teaching staff	External Lecturer
Pediatric						
Professor		Pediatric		—	2	
Assistant professor		Pediatric		—	4	
Assistant professor		Pediatric	Cardiology	—	1	
Assistant professor		Pediatric	Endocrine	—	1	
Lecturer		Pediatric		—	2	
Lecturer / Specialist Doctor, Ministry of Health Staff		Pediatric		—		14
Lecturer / Specialist Doctor, Ministry of Health Staff		Pediatric	Nephrology	—		1
Lecturer / Specialist Doctor, Ministry of Health Staff		Pediatric	Neuromedicine	—		1
Surgery						
Professor		General surgery		—	2	

Lecturer	General surgery	—	1	
Professor	Urosurgery	—	5	
Professor	orthopedic	—	2	
Assistant professor	Orthopedics	—	4	
Professor	Plastic surgery	—	1	
Assistant professor	Plastic surgery	—	1	
Professor	Otorhinolaryngology	—	2	
Assistant professor	Otorhinolaryngology	—	1	
Professor	Pediatric surgery	—	1	
Assistant professor	Pediatric surgery	—	1	
Professor	Ophthalmology	—	1	
Assistant professor	Ophthalmology	—	1	
Lecturer	Ophthalmology	—	1	
Professor	Radiology	—	3	
Assistant professor	Cardiothoracic and Vascular surgery	—	1	
Lecturer	Anesthesia	—	1	

Lecturer / Specialist Doctor, Ministry of Health Staff	General surgery		—		6
Lecturer / Specialist Doctor, Ministry of Health Staff	Neurosurgery		—		2
Lecturer / Specialist Doctor, Ministry of Health Staff	Otorhinolaryngology		—		1
<b>Anatomy</b>					
Professor	M.B.CH. B	Clinical Anatomy	—	1	
Lecturer	M.B.CH. B	Human anatomy	—	1	
Assistant Lecturer	M.B.CH. B	Human anatomy	—	1	
Lecturer	M.B.CH. B	Embryology	—	1	
Professor	Biology	Cytology	—	2	
Assistant professor	Biology	Histology	—	3	
Lecturer	Biology	Histology	—	2	
Assistant professor	Vetirianian	Histology	—	1	
Assistant professor	Biology	Genetic	—	1	
Lecturer	Biology	Physiology		1	
<b>Community Medicine</b>					

Professor	Community Medicine		—	2	
Assistant professor	Community Medicine		—	1	
Assistant professor	Family Medicine		—	1	
Lecturer	Family Medicine		—	1	
Lecturer	Law		—	1	
Assistant Lecturer	Law		—	1	
Lecturer / Specialist Doctor, Ministry of Health Staff	Community Medicine		—		2
Lecturer / Specialist Doctor, Ministry of Health Staff	Family Medicine		—		1
<b>Pharmacology</b>					
Professor	M.B.CH. B	Pharmacology	—	1	
Assistant professor	M.B.CH. B	Pharmacology	—	2	
Lecturer	M.B.CH. B	Pharmacology	—	2	
Assistant Lecturer	M.B.CH. B	Pharmacology	—	1	
<b>Obstetric and Gyencology</b>					





Professor	Obestetrics and Gynecology		—	6	
Professor	Obestetrics and Gynecology	Infertility	—	1	
Assistant professor	Obestetrics and Gynecology		—	1	
Lecturer	Obestetrics and Gynecology		—	1	
Lecturer / Specialist Doctor, Ministry of Health Staff	Obestetrics and Gynecology		—		2
<b>Medicine</b>					
Professor	Internal Medicine		—	5	
Professor	Internal Medicine	Respiratory	—	1	
Professor	Internal Medicine	Rheumatology	—	1	
Assistant professor	Internal Medicine	Rheumatology	—	1	
Professor	Nephrology		—	1	
Professor	Internal Medicine		—	1	
Professor	Internal Medicine	Endocrine	—	1	

Assistant professor	Internal Medicine	Endocrine	—	2	
Assistant professor	Psychology		—	1	
Lecturer	Psychology		—	1	
Professor	Dermatology		—	1	
Assistant professor	Dermatology		—	2	
Assistant professor	Neuromedicine		—	1	
Assistant professor	Internal Medicine	Gastroenterology	—	1	
Assistant professor	Oncology		—	1	
Lecturer	Haematology		—	1	
Assistant professor	Internal Medicine	Cardiology	—	2	
Lecturer	Internal Medicine		—	1	
Assistant professor	Internal Medicine		—	1	
Lecturer / Specialist Doctor, Ministry of Health Staff	Dermatology		—		1
Lecturer / Specialist Doctor, Ministry of Health Staff	Internal Medicine	Endocrine	—		1
Lecturer / Specialist Doctor, Ministry of Health Staff	Haematology		—		1

Lecturer / Specialist Doctor, Ministry of Health Staff	Neuromedicine		—		5
Lecturer / Specialist Doctor, Ministry of Health Staff	Internal Medicine		—		6
Lecturer / Specialist Doctor, Ministry of Health Staff	Internal Medicine	Cardiology	—		2
<b>Microbiology</b>					
Professor	Microbiology	Bacteriology	—	3	
Professor	Microbiology	Biotechnology	—	1	
Professor	Microbiology	acterial B genetics	—	4	
Professor	Microbiology	Immunology	—	2	
Professor	Microbiology	Virology	—	2	
Assistant professor	Microbiology	Medical Microbiology	—	1	
Lecturer	Microbiology	Microbiology	—	1	
Lecturer	Microbiology	Fungi	—	1	
Lecturer	Microbiology	Molecular Bacteriology	—	1	
Professor	Biology	Parasitology	—	2	



Assistant professor	Biology	Immunology Parasitology	—	1	
<b>Chemistry and Biochemistry</b>					
Professor	Chemistry	Biochemistr y	—	2	
Professor	M.B.CH. B	Clinical Biochemistr y	—	2	
Professor	Veterinary medicine	Biochemistr y	—	1	
Professor	Chemistry	Biochemistr y	—	2	
Professor	Chemistry	Inorganic chemistry	—	1	
Assistant professor	Chemistry	Biochemistr y	—	4	
Lecturer	M.B.CH. B	Clinical Biochemistr y	—	1	
Assistant Lecturer	Chemistry	Biochemistr y	—	2	
<b>Physiology</b>					
Professor	M.B.CH. B	Medical physiology	—	5	
Assistant professor	M.B.CH. B	Medical physiology	—	5	
Lecturer	M.B.CH. B	Medical physiology	—	3	



Professor	Veterinary medicine	Medical physiology	—	1	
Assistant professor	Veterinary medicine	Medical physiology	—	1	
Assistant Lecturer	Veterinary medicine	Medical physiology	—	1	
Assistant professor	Biology	Medical physiology	—	1	
Assistant Lecturer	Biology	Medical physiology	—	1	
Professor	Physic	Medical physics	—	1	
Assistant professor	Physic	Medical physics	—	1	
Assistant Lecturer	Physic	Medical physics	—	1	
Lecturer	Computer	Information technology	—	1	
Assistant Lecturer	Computer	Information technology	—	4	
<b>Pathology</b>					
Professor	Pathology	Histopathology	—	2	
Assistant professor	Pathology	Histopathology	—	4	
Lecturer	Pathology	Histopathology	—	3	



		gy			
Professor	Pathology	Haematology	—	1	
Assistant professor	Pathology	Haematology	—	3	
Lecturer	Pathology	Haematology	—	2	



## Professional development

### Development of new faculty members

Introducing new faculty members to the university's rules and regulations and providing them, through workshops and orientation, with the tools necessary to succeed in academic work.

### Professional development for faculty members

To develop and improve the skills of teachers and faculty members

- A. Provide continuous training opportunities for teachers and faculty members to improve their teaching, communication and technical skills by organizing workshops, training courses, seminars and conferences to provide these opportunities.
- B. Encourage teachers and faculty members to communicate and cooperate with each other. Working sessions and forums can be organized to discuss ideas and exchange experiences and successful experiments.
- C. Provide mechanisms to evaluate the performance of faculty members on a regular basis through the annual performance evaluation conducted by the Quality Assurance and University Performance Division in addition to student questionnaires and colleagues' comments in areas that need improvement.
- D. Encourage faculty members to research and develop in their specialized fields and provide the necessary financial, technical and library resources to support research and publish the results in scientific journals.
- E. Encourage faculty members to use technology in teaching and communicating with students. Training and support can be provided to use available technological tools such as electronic learning management systems.

## 12. Acceptance Criteria

Within the central criteria for acceptance

## 13. The most important references about the program

Ministry of higher education and scientific research

## 14. Program development plan

- A. Building new buildings and expanding existing college buildings to meet the requirements of the educational process.
- B. Preparing a strategy for the college's needs for faculty members for the next ten years.
- C. Developing and expanding continuing education programs.
- D. Providing modern educational technologies and expanding their scope of use in teaching.
- E. Following up on the professional and academic development of faculty members and providing the necessary care for new faculty members.
- F. Developing an annual plan to update the skills lab and provide it with the necessary equipment to accommodate the increase in the number of students and provide alternatives or methods similar to clinical training in teaching hospitals.
- G. Developing the educational skills of faculty members.
- H. Evaluating and assessing the performance of faculty members.
- I. Monitoring the educational program through permanent committees such as the Monitoring and Evaluation Committee and the Examination Quality Assurance Committee.
- J. Preparing discussion groups with students.
- K. Seeking feedback from students, graduates, institutions and workplaces on the effectiveness of graduates.
- L. Developing relationships with institutions and employers and implementing joint projects with them.

## Program Skills Outline

				Required program Learning outcomes																				
Year/Level	Course Code	Course Name	Basic or optional	Knowledge					Skills							Ethics								
				A	B	C	D	E	A	B	C	D	E	F	G	A	B	C	D	E	F	G	H	
Year 1 / Course 1	MeANi100001	Human anatomy	Basic	*													*							
	MeMPi100002	Medical physics	Basic	*																				
	MeMTi100003	Medical terminology	Basic	*													*	*						
	MeCSi100004	Computer science	Basic	*												*								
				A	B	C	D	E	A	B	C	D	E	F	G	A	B	C	D	E	F	G	H	
Year 1 / Course 2	MeBCi100005	Biochemistry	Basic	*						*					*		*	*						
	MeANi100006	Human anatomy	Basic	*													*							
	MeHri100007	Human rights	Basic																					
	MeMBi100008	Medical biology	Basic	*																				
	MePHi100009	Physiology	Basic	*																				
				A	B	C	D	E	A	B	C	D	E	F	G	A	B	C	D	E	F	G	H	
Year 2 / Course 1	MeANi100001	Human anatomy	Basic	*													*							
	MeHLi100002	Histology	Basic	*						*							*							
	MeCBi100003	Crimes of Baath regime in Iraq	Basic																					
	MePHi200004	Physiology	Basic	*						*					*		*							
	MeBCi200005	Biochemistry	Basic	*						*					*		*							
				A	B	C	D	E	A	B	C	D	E	F	G	A	B	C	D	E	F	G	H	







Course 1	MeMTi400002	Medical ethics	Basic	*							*					*	*	*	*	*	*	*	*	*
	MeCOi400003	Community medicine	Basic	*		*	*	*	*	*	*			*	*	*	*							
	MeSEi400004	Surgery	Basic	*			*	*	*	*	*	*	*	*	*	*	*	*	*	*				
	MeGPi400005	Pathology	Basic	*			*		*					*		*								
	MeFMi400006	Forensic medicine	Basic		*	*											*	*			*			
				A	B	C	D	E	A	B	C	D	E	F	G	A	B	C	D	E	F	G	H	
Year 4 / Course 2	MeCSii400007	Medicine	Basic	*			*	*	*	*	*	*	*			*								
	MeGPii400008	Pathology	Basic	*			*		*							*								
	MeOBii400009	Obstetric	Basic	*			*	*	*	*	*	*	*	*	*	*	*	*	*	*				
	MeCOii400010	Community medicine	Basic	*		*	*	*	*	*	*	*	*	*	*	*	*	*	*	*				
	MeSEii400011	Surgery	Basic	*			*	*	*	*	*	*	*	*	*	*	*	*	*	*				
				A	B	C	D	E	A	B	C	D	E	F	G	A	B	C	D	E	F	G	H	
Year 5 / Course 1	MeSEi500001	Surgery (Orthopedic)	Basic	*			*	*	*	*	*	*	*	*	*	*	*	*	*	*				
	MeRAi500002	Radiology	Basic	*			*		*	*	*					*								
	MeGYi500003	Gynecology	Basic	*			*	*	*	*	*	*	*	*	*	*	*	*	*	*				
	MePEi500004	Pediatrics	Basic	*					*		*		*	*	*	*	*	*						
	MeOPi500005	Ophthalmology	Basic	*			*		*	*	*					*								
	MeMDi500006	Medicine	Basic	*			*	*	*	*	*	*	*	*	*	*	*	*	*	*				
				A	B	C	D	E	A	B	C	D	E	F	G	A	B	C	D	E	F	G	H	
Year 5 / Course 2	MeSEii500007	Surgery minor surgical specialties	Basic	*			*	*	*	*	*	*	*	*	*	*	*	*	*	*				
	MeENii500008	ENT	Basic	*			*		*	*	*	*	*	*	*	*	*	*	*	*				

