





**Quality Assurance Unit** 

# **Medical Undergraduate Program specifications**

# A. Basic information

**Program title:** Bachelor's degree of medicine and surgery (M.B.B.CH) Faculty of Medicine – Minia University

**Program type:** Single program.

**Program duration:** 6 years (to be reevaluated every 6 years).

**University:** Minia

Faculty: Faculty of Medicine

**Departments: sixteen (16)**departments including:

- 1- Human anatomy and embryology
- 2- Medical Physiology
- 3-Histology and cell biology
- 4- Medical Biochemistry
- 5- Pathology
- 6- Medical Pharmacology
- 7-Medical Microbiology and Immunology
- 8-Medical Parasitology







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- 9- Forensic & Clinical Toxicology
- 10- Public health and Community
- 11-Ophthalmology
- 12- Otorhinolaryngology
- 13- Internal Medicine (including chest, Neurology, psychiatry, Cardiology, Rheumatology, Dermatology, Clinical pathology, Tropical, Diagnostic radiology)
- 14-Pediatrics
- 15- Obstetrics and Gynecology

16-General Surgery (including Urology, Orthopedic surgery, Cardiothoracic surgery, Vascular surgery, Neurosurgery, Plastic surgery, Anesthesia )

Dean of the faculty: Prof. Hossam Eldeen Shawky.

Vice dean for education and student affairs: Prof. Ehab Refaat

Coordinator: Prof. Ehab Refaat

**Internal evaluator: Prof. Noha Anwar** 

External evaluators: Prof. Salwa Bakr Mohamed







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# Date of program specifications approval: Decision number (446) June 18, 2007.N.B.It has been

Agreed upon that the program will be reviewed & updated every 6 years.

Minor modifications have been made according to the new by law on 20<sup>th</sup> March 2012 decision number (111). Modified 19/3/2018 decision number (100/3) according to the dependent NARS 2009

Modifying undergraduate program depending on the report of formal visit (from 17-19 April 2018) at 17/9/2018 Modifying undergraduate program at 20/9/2021 decision number (340/9) depending on the external and internal revision.

Last modifications done on 20/3/2023 depending on the report of the last visit on (6-7/6/2022) and the external and internal revision.

# **B.**Professional information

# 1- Program aims:

Upon successful completion of the program, the graduate should be able to:

- 1.1. a. Understands normal health, provide primary health care.
- 1.1. b. Manage common health problems in the society.
- 1.2. Value the importance of a good doctor/ patient relationships, and how to deal with his colleague, seniors and patients ethically.
- 1.3. Use rules of medical ethics.
- 1.4. Show appropriate communication, clinical and practical skills.







- 1.5. Show good respectable attitudes and professionalism.
- 1.6. Present life-long learning in order to keep earning knowledge.
- 1.7. Collaborate in post- graduate field.
- 1.8. Design research studies and develop basic administrative capabilities.
- 1.9. Recognize his/her role as a part of health care system, respecting its hierarchy and rules and using his managerial and leadership skills to add value to the system.
- 1.10. Contribute to the development and empowerment of his/ her community.
- N.B (1.9,1.10 were added after study of gap analysis between program and NARS2017)

National Academic Reference Standards (2009)	Faculty of Medicine, Minia University Program		
Attributes of the Graduate of Medical Medicine     The Medical graduate must:	1. Program Aims		
1.1. Work to maintain normal health, provide primary health care and deal with common health problems in the society.	<ul><li>1.1. a. Keep normal health, provide primary health care.</li><li>1.1.b. Manage common health problems in the society.</li></ul>		
1.2.Be aware of the importance of a good doctor/ patient relationship, and work to establish and maintain it.	1.2. Value the importance of a good doctor/ patient relationships, and how to deal with his colleague, seniors and patients ethically.		
1.3.Follow rules of medical ethics	1.3. Observe rules of medical ethics.		
1.4.Demonstrate appropriate communication, clinical and practical skills.	1.4. Develop appropriate communication, clinical and practical skills.		
. 1.5.Show appropriate attitudes and professionalism.	<ol> <li>Deal by good respectable attitudes and professionalism.</li> </ol>		







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Maintain life-long learning in order to keep earning
knowledge.
Engage in post- graduate field.
Make research studies and develop basic
ninistrative capabilities.

# 2. Intended Learning Outcomes (ILOs)

# A. Knowledge and Understanding:

# Graduates should demonstrate knowledge and understanding of:

- **A.1.** Normal human body:
  - **A.1.1.** Describe Normal structure and function of human body (as anintact organ) and of each of its major systems at molecular, cellular, biochemical & organ levels.
  - **A.1.2.** Outline Molecular, biochemical, and cellular mechanisms whichare important in maintaining the body homeostasis.
  - **A.1.3.** Recognize normal growth and development of human bodyincluding main developmental changes and the effect of growth, development and aging on the individual & his/her family.
  - **A.1.4**. Identify basics of normal and abnormal behaviors.

## A.2.

**A.2.1.**Discuss altered growth, development, structure and function of the body and its major systems that are seen in various diseases and conditions.







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- **A.2.2.** Identify principles of genetics and their role in health and disease, as well as basics of gene therapy and genetic counseling.
- **A.3.**Recognize common and life-threatening illnesses affecting the body and each of its major organ systems, presenting throughout the age spectrum, and their incidence, etiology, risk factors, natural history, pathogenesis, clinical features, differential diagnosis, and complications.
- **A.4.** Describe principles of management strategies of common and life-threatening diseases including:
  - **A.4.1.** Pharmacological basis of drugs including drug effects, pharmaco-kinetics, dosage, drug-drug interactions, and adverse reactions.
  - **A.4.2.** Non-invasive and invasive available interventions.
  - **A.4.3.** Basic pre- and post-operative care.
  - A.4.4. Pain relief and palliative care
  - **A.4.5.**list common diagnostic investigations e.g., laboratory, radiological and pathological (stressing on their role in management plans).
- A.5.Identify principles of Population Health and Health Systems, including:
  - **A.5.1.** The determinants of health, principles of disease prevention and early detection of common community health problems.
  - A.5.2. Epidemiological principles of demography and biological variability
  - A.5.3. Principles of disease surveillance and screening
  - A.5.4. Control of communicable diseases and health promotion.







- **A.5.5.** Population-based approaches to health care services and their role in improving medical practice **A.5.6.** Indications, Advantages & disadvantages of various management strategies
- A.6. Recognize basics of ethics, medico-legal aspects, malpractice, and common medical errors
- **A.7.**Identify disability, its impact on community and principles of management (including rehabilitation, institutional and community care).
- A.8. Retrieve basics of biostatistics
- A.9. Categorize principles of prevention and management of locally endemic diseases (stressing on infective hepatitis, schistosomiasis, and tuberculosis).
- A.10.Mention medical and surgical acute illnesses and emergencies.
- **A.11**. Categorize principles and proper management of traumatic conditions (stressing on severely and polytraumatized cases).
- A.12. Gather the principles of toxicology.
- A.13. Categorize principles of research methodology and critical evaluation of evidence.
- A.14. Mention basic computer knowledge (needed to support literature retrieval and learning).
- **A.15.** Demonstrate proficiently in English language (needed for learning and communication).
- A.16.Identify vulnerable individuals that may be suffering from abuse or neglect and state proper actions to







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safeguard their welfare

# **B. Intellectual Skills:**

- **B.1.** Integrate basic anatomical, pathological, biochemical and physiological facts with clinical data.
- **B.2.** Reason deductively in solving clinical problems:
  - **B.2.1**. Diagnose, evaluate, and prioritize problems.
  - **B.2.2.** Interpret, order, and analyze information objectively, recognizing its limitations.
- **B.3.**Reconstruct the results of history, physical, pathological and laboratory test findings into a meaningful diagnostic formulation. (Solving the clinical problem and formulating differential diagnosis).
- **B.4.**Judge, analysis and critical problem solving and seek out information.
- **B.5.**(Plan) Construct appropriate management strategies (both diagnostic and therapeutic) for patients with common diseases, both acute and chronic, including medical, psychiatric, and surgical conditions.
- **B.6.** Design an initial appropriate course of management for stabilization of patients with serious illnesses.
- B.7. Categorize factors that place individuals at risk for disease or injury, to determine strategies for







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appropriate response.

- **B.8.** Interpret, analyze, and synthesize relevant and current data from literature, using information technologies and library resources, to help solve a clinical problem based on evidence (Evidence-Based Medicine).
- **B.9.**Cope with uncertainty by:
  - **B.9.1**. Acceptance that uncertainty is unavoidable in the practice of medicine.
  - **B.9.2.** Selection proper cognitive strategies to deal with uncertainty when it arises.
- **B.10.** Demonstrate insight into research and scientific method through:
  - **B.10.1.** Formulation of research questions those are pertinent to medicine.
  - **B.10.2.**Recognition of the importance of precision in collecting, analyzing, and interpreting medical data.
  - **B.11.** Discuss the role of nutrition and physical activity in health.
  - **B.12.** Recognize conflict of interest and steps needed to manage the conflict.

## C. Practical and Professional skills:

# C.1. Practical Skills:

**C.1.1.** Demonstrate practical skills in basic medical sciences.

# **C.2. Clinical Skills:**

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# - Clinical Skills & Competencies acquired during the undergraduate years:

- **C.2.1.** Write a structured, patient centered history.
- C.2.2. Executing full physical examination appropriate to the age, gender, acute and chronic clinical conditions, and culturally sensitive.
- **C.2.3**.Examine mental state of the patient.
- C.2.4. Formulate a management plan for common diseases.
- C.2.5. calculate drug dosage based on patient's weight, age and health condition.
- C.2.6. Choose safe prescribe safe lines of treatment.
- C.2.7. Perform required laboratory work as an integral part of their practical training in some preclinical departments.
- C.2.8. show, careful use and handle instruments, devices, microscopes, etc.
- Procedures and Technical skills acquired during undergraduate and house officer training:
- **C.2.9.** Perform venipuncture and collect blood samples.
- C.2.10. Guide how to insert a cannula properly into suitable veins.
- C.2.11.Proceed intramuscular, subcutaneous, and intravenous injections.
- C.2.12. Perform suturing of superficial wounds.
- C.2.13. Demonstrate competency in cardiopulmonary resuscitation and basic life-support.
- **C.2.14.** Organize compulsory childhood vaccines.
- **C.2.15.** Perform basic bedside laboratory tests.
- C.2.16. make and interpret ECG.
- **C.2.17.** Supply basic oxygen therapy.







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- **C.2.18.** Supply a nebulizer for administration of inhalation therapy.
- C.2.19. Insert a nasogastric tube.
- C.2.20. Fix bladder catheterization.
- C.2.21. Make procedure of normal labor.
- C.2.22 Adopt and perform suitable measures for infection control.
- C.2.23 Provide care for specific groups including pregnant women ,newborn and infants, adolescent, and the elderly.

# C.3. Professional Attitude and Behavioral skills:

# ☐ Graduates should be able to:

- **C.3.1.** Design an empathic and holistic approach to the patients and their problems.
- C.3.2. Apply the code of ethics to respect patients' rights and involve them and /or their caretakers in management decisions.
- C.3.3. Treat with respect and understanding the different cultural believes and values in the community they serve.
- C.3.4.Recognize the important role played by the other health care professions inpatients management.
- C.3.5. Be aware and understand the national code of ethics.
- C.3.6. Council patient suffering from complicated terminal illness.
- C.3.7. Ensure confidentiality and privacy for patient information.
- C.3.8. Treat all patients equally, avoid stigmatizing any category regardless to believes, culture and behaviors.
- C.3.9. Demonstrate, respect, and work cooperatively with other health care professional for effective patient management.







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- C.3.10.Be willing to share in all types of inter-professional activities including collaborative and shared learning.
- C.3.11. Ensure the cost effectiveness of management.
- C.3.12.Refer patients to appropriate health facility at the appropriate stage
- C.3.13. Apply fundamental knowledge and health economics to ensure the effectiveness and the health care system.

# **C.4 Communication skills**

Graduates as well as house-officer should be able to

- C.4.1.Deal clearly, sensitively, and effectively with patient and their relatives, and colleagues from a variety of health, social care and professions.
- C.4.2.Treat all individuals equally regardless of their social, cultural, or ethnic backgrounds, or their disabilities.
- **C.4.3.** Manipulate with situations where communication is difficult including bad news.
- **C.4.4.**Show compassion to the patients and their relatives in situations of stress and grief.
- C.4.5. Respect patients and their relatives, Superiors, colleagues, and any other members of health profession.

# D. General, and Transferable:

- ☐ Graduates at graduation will be able to:
  - D.1. Present the principles of lifelong learning and how to earn knowledge.
  - **D.2.** Use computers efficiently.
  - **D.3.** Assist, manage, and manipulate information, including electronically.

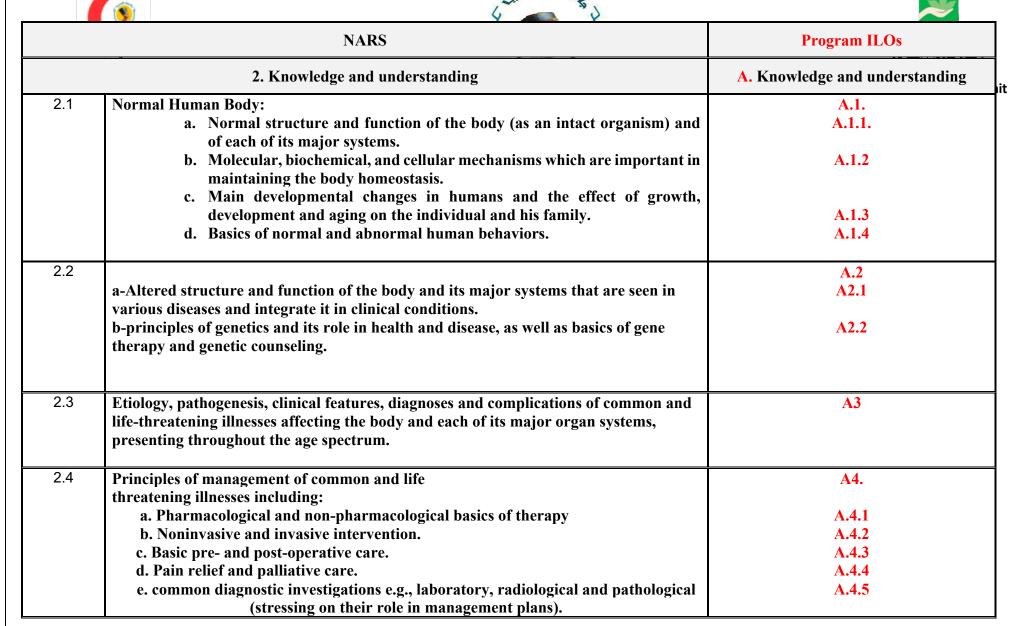
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- **D.4.**Organize and present information clearly in written, electronic, and oral forms.
- **D.5.**Communicate ideas and arguments effectively.
- **D.6.**Effectivelymanages time and resources and set priorities.
- **D.7.**Work and cooperate effectively within a team.
- **D.8.** Adjust and produce an effective leader of health team at primary care level, in planning, supervising & monitoring the services of health professionals in health team.
- **D.9.** Analyze and use numerical data (Use simple statistical methods).
- $\Box$  Graduates at the end of the house officer year will be able:
  - **D.10.** Support Evidence Based Medicine in management decisions.
  - **D.11.**Cooperate with the health care team.
  - D.12.Seek to solve problems related to patients, work management, and among colleagues.
  - **D.13.** Follow a changing work environment.
  - **D.14.**Support safety and infection control measures during practice.
  - **D.15.** Justify work and that using constructive feedback.
  - **D.16.** Recognize own personal and professional limits and seek help from colleagues and supervision when necessary.
  - **D.17.** Document clinical encounters in an accurate, complete ,timely and accessible manner ,in compliance with regulatory and legal requirements.



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رؤية الكلية: تحقيق الريادة على المستوي المحلي وترتيب عالمي متقدم في التعليم والبحث الطبي وتقديم الرعاية الصحية المتكاملة للمجتمع

رسالة الكلية: اعداد طبيبا قادرا على المنافسة في سوق العمل محليا ودوليا وباحثا قادرا على الابتكار وتقديم رعاية صحية مجتمعية تحقق اهداف التنمية المستدامة لرؤية مصر ٢٠٣٠ من خلال تقديم برامج تعليمية مطورة وتهيئة بيئة رقمية تحقق معايير الجودة والاعتماد







#### وحدة ضمان الجودة

## **Quality Assurance Unit**

2.5	Population Health and Health Systems:	A5
	a. The determinants of health, principles of disease prevention and early detection of common community health problems.	A.5.1
	b. Epidemiological principles of demography and biological	A.5.2
	variability	A.5.3
	c. Principles of disease surveillance and screening.	A.5.4
	d. Communicable disease control and health promotion.	A.5.5
	e. Population-based approaches to health care services and their role	
	in improving medical practice.	A.5.6
	f. Indications, Advantages & disadvantages of various management strategies	
2.6	Basics of ethics, medico legal aspects of health	A.6
	problems, malpractice, and common medical errors.	
2.7	Nature of disability, its impact on community and principles of management (including rehabilitation, institutional and community care).	<b>A.7</b>
2.8	Basics of biostatistics	A.8
2.9	Principles of prevention and management of locally endemic diseases (stressing on infective hepatitis, schistosomiasis, and tuberculosis).	A.9
2.10	Medical and surgical acute illnesses and emergencies.	A.10
2.11	Principles and management of traumatic conditions (stressing on severely and polytraumatized cases).	A.11
2.12	Principles of toxicology.	A.12

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#### وحدة ضمان الجودة

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2.13	Principles of research methodology and critical evaluation of evidence.	A.13
2.14	Basic computer knowledge (needed to support literature retrieval and learning).	A.14
2.15	Proficiently English language (needed for learning and communication).	A.15
3	3- Intellectual Skills	<b>B</b> Program Intellectual Skills
3.1	. Integrate basic biomedical science with clinical care.	B1
3.2	. Reason deductively in solving clinical problems: - a- Recognize, define and prioritize problems.	B2 B2.1
	- b- Interpret, analyze, and evaluate information objectively, recognizing its limitations.	B2.2
3.3	Use personal judgment for analytical and critical problem solving and seek out information.	B4
3.4	Integrate the results of history, physical and laboratory test findings into a meaningful diagnostic formulation.	В3
3.5	. Construct appropriate management strategies for patients with common diseases, both acute and chronic, including medical, psychiatric, and surgical conditions.	B5
3.6	Design an initial course of management for stabilization of patients with serious illnesses.	B.6
3.7	. Classify factors that place individuals at risk for disease or injury, to determine strategies for appropriate response.	B7







#### وحدة ضمان الجودة

3.8	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).	B.8
3.9	Recognize and cope with uncertainty by:	B.9
	a. Accepting that uncertainty is unavoidable in the practice ofmedicine.	B.9.1
	<b>b</b> Using appropriate cognitive strategies to deal with uncertaintywhen it arises.	B.9.2
3.10	Involvement into research and scientific methods through:	B10
	a. Formulation of research questions that is pertinent to medicine.	
	b. Recognition of the importance of precision in	B10.1
	collecting, analyzing and interpreting medical data.	740.4
		B10.2
4	4-Practical and Clinical	C- Practical and Professional
	Graduate should acquire the following practical as well as Clinical	
	skills and competencies during the undergraduate years	
4.1	Demonstrate basic sciences practical skills relevant to future practice.	C1.1







4.2 Clinical Skills & Competencies acquired during the undergraduate years:	C.2
4.2.1. Take and record a structured, patient centered history.	C2.1
4.2.2.Perform full physical examination of patients with acute and chronic clinical	C2.2
conditions appropriate to the age, gender, acute and chronic clinical conditions while being culturally sensitive.	
4.2.3. Assess the mental state of the patient.	C2.3
4.2.4. Formulate a management plan for common diseases and acute emergencies.	C2.4
4.2.5. Write safe prescriptions of different types of drugs.	C.2.5,C.2.6
based on patient's weight, age and health condition	
4.2.6.Perform required laboratory work as an integral part of their practical training	C.2.7
in some pre-clinical departments.	
4.2.7.careful use & handling of instruments, devices, microscopes, etc.	
	C.2.8
NARs	Program
Procedures and technical skills acquired under appropriate supervision during	
undergraduate and house officer training:	
4.2.8. Perform venipuncture and collect blood samples.	C.2.9
4.2.9. Insert a cannula into peripheral veins.	C.2.10
4.2.10. Give intramuscular, subcutaneous, intradermal, and intravenous injections.	C.2.11
4.2.11. Perform suturing of superficial wounds.	C.2.12
4.2.12. Demonstrate competency in cardiopulmonary resuscitation and basic life-	C.2.13
support.	







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	4.2.13. Administer compulsory childhood vaccines.	C.2.14
	4.2.14. Perform and interpret basic bedside laboratory tests.	C.2.15
	4.2.15. Perform and interpret ECG.	C.2.16
	4.2.16. Administer basic oxygen therapy.	C.2.17
	4.2.17. Perform and interpret basic respiratory function tests.	C.2.17
	4.2.18. Use a nebulizer for administration of inhalation therapy.	C.2.18
	4.2.19. Insert a nasogastric tube.	C.2.19
	4.2.20. Perform bladder catheterization.	C.2.20
	4.2.21. Perform procedure of normal labor.	C.2.21
	4.2.22. Adopt suitable measures for infection control.	C.2.22
4.3	NARS	C3 Program
	Professional Attitude and Behavioral Skills:	







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4.3.1Adopt an empathic and holistic approach to the patients and their problems.	C3.1
4.3.2Respect patients' rights and involve them and /or their caretakers in	C3.2
management decisions.	
4.3.3.Understand and respect the different cultural beliefs and values in the	C3.3
community they serve.	
4.3.4Recognize the important role played by other health care professions in patients'	C3.4
management.	
4.3.5Be aware of and understand the national code of ethics issued by the Egyptian	C3.5
Medical Syndicate.	
4.3.6Counsel patients and families suffering from different conditions.	C3.6
House Officers should be able, under appropriate supervision,	
to:	
4.3.7. Ensure confidentiality and privacy of patients' information.	C3.7
4.3.8. Treat all patients equally, and avoid stigmatizing any category regardless of	C3.8
believes, culture, and behaviors.	
4.3.9. Demonstrate respect and work cooperatively with other health care professions	C3.9
for effective patient management.	
4.3.10. Be willing to share in all types of inter-professional activities including	C3.10
collaborative and shared learning.	25.10
COLUMN CLAUSE CO	
4.3.11. Ensure the cost effectiveness of health care management.	C3.11







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4.4	NARS Communication skills:	C4 Program Communication skills:
	4.4.1.Communicate clearly, sensitively and effectively with patients and their relatives, and colleagues from a variety of health and social care professions.	C4.1
	4.4.2.Communicate effectively with individuals regardless of their social, cultural, ethnic backgrounds, or their disabilities. 4.4.3.Cope with situations where communication is difficult including breaking bad	C4.2
	news. 4.4.4.Show compassion to the patients and their relatives in situations of stress and grief.	C4.3
	4.4.5.Honor and respect patients and their relatives, superiors, colleagues and any other member of the health profession.	C4.4
		C4.5
5	5.NARS  General and Transferable Skills	D Program General and Transferable Skills
5.1	Be prepared for the lifelong learning needs of the medical profession.	D1
5.2	Use information and communication technology effectively. in the field of medical practice.	D2
5.3	Retrieve, manage, and manipulate information by all means, including electronic means.	D3

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.4	Present information clearly in written, electronic and oral forms.	D4
.5	Communicate ideas and arguments effectively.	<b>D</b> 5
.6	Work effectively within a team.	<b>D7</b>
.7	Analyze and use numerical data including the use of simple statistical methods).	D8
.8	House Officers should be able to:	
	A. Use Evidence Based Medicine in management decisions.	<b>D9</b>
	B. Effectively manage time and resources and set priorities.	<b>D6</b>
	C. Work efficiently within the health care team and as an effective team leader.	D10
	D. Solve problems related to patients, work management, and among colleagues.	D11
	E. Cope with a changing work environment.	D12
	F. Apply safety and infection control measures during practice.	D13
	G. Evaluate their work and that of others using constructive feedback.	D14







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# 3. Academic standards:

Faculty of Medicine, Minia university adopted the National Academic Reference Standards (NARS/2009) prepared by the National Authority for Quality Assurance and Accreditation of Education (NAQAAE). The program was modified according to (NARS/2017) after making and reviewing gap analysis (gap analysis is enclosed)

These standards represent the minimum academic quality requirements which the government regards as appropriate and reasonable to protect the interests of the students, the reputation of individual faculties, and the community as a whole.







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# 4. Curriculum structure and contents:

A- Program duration: 6 years plus a house officer year

**B- Program structure:** 

Percentage of courses forming the different components of the academic structure of the program:

**Total number of Hours: lecture 2320** 

Practical 2455

**Total 4775** 

**A-** Basic science: 2100/4775=44 %

Language Science: 30/4775 = 0.6 %

Behavioral science: 60/4775 = 1.3%

Computer science: 60 /4775=1.3%

**B-** Clinical sciences: 2505/4775 = 52.4%

Field Training= 20 /4775=0.4%

1-Basic science stage: 3 years.

2- Clinical stage: 3 years.







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**C-Total number of hours per week:** 36 hours

1- Lectures: 18 hours per week

2- Lab. Training / Clinical small group teaching: 18 hours per week

**D-** All courses are compulsory.

Credit hours is not currently applicable for undergraduate medical education.

# 5. Program courses:

Program courses and regulations for program completion:







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# 1 - First year: Duration: 30 weeks

Code	Course	Hours per week		Total	ILOs Program covered	
	title	Lab	Lectur	Hours		
			e			
AN 111	Anatomy and Embryology	4	4	240	A.1.1, A.1.3, A.2, A.3, B.1,C.1.8, D.1.4, D.1.5, D.1.6, D.1.7	
HS 112	Histology and cell biology	2	2	120	A.1.1, A.2, A.5.1, C.1.8, D.1.4, D.1.5, D.1.6, D.1.7	
PY 113	Human Physiology	2	5	210	A.1.1,A.1.2,A.2,B.1,C.1.8,D.1.4,D.1.5,D.1.6,D.1.7,	
BC 114	Medical Biochemistry	2/3 alterative	2	135	A.1.1,A.1.2,A.2,A.3,A.5.1, A.7,B.1,C.1.7,C.1.8,C.1.15,D.1.4,D.1.5,D.1.6,D.1.7	
EN 115	English language	-	1	30	A.16, D.1.5, D.1.6,D.1.7	
CO 116	Computer sciences	1	1	60	A.14, D.1.2, D.1.3, D.1.4, D.1.5, D.1.6, D.1.7	







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2- Second Year: Duration: 30 weeks

Code	Course title	Hours per week		se title Hours per week Total		Total	ILO Program covered
		Lab	lecture	Hours			
AN211	Anatomy and	4	4	240	A.1.1, A.1.3, A.2, A.3,		
	Embryology				B.1,C.1.8, D.1.4,		
					D.1.5, D.1.6, D.1.7		
HS212	Histology and cell biology	2	2	120	A.1.1, A.2, A.5.1, C.1.8,		
					D.1.4, D.1.5, D.1.6, D.1.7		
PY213		2	5	210	A.1.1,A.1.2,A.2,B.1,C.1.8,		
	Human Physiology				D.1.4,D.1.5,D.1.6,D.1.7,		
BC214		2	3	135	A.1.1,A.1.2,A.2,A.5.1, A.7,		
					B.1,C.1.7,C.1.8,C.1.15,D.1.4		
	Medical Biochemistry				, D.1.5,D.1.6,D.1.7		
PS215		-	1	30	C.2.2,C.2.3,C.2.4,C.2.5,C.2.		
					6,C.2.7,C.2.8,C.2.9C.2.10,D.		
	Behavioral science and				1.1D.1.5,D.1.6,D.1.7,D.1.12,		
	Ethics				D.2.1,D.2.2,D.2.3,D.2.4,D.2.5		

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## **Quality Assurance Unit**

Code	Course title	Hours per week		Total Hours	II O Duo mana a coma d		
	Course title	Lab	Lectur e		ILO Program covered		
PA 311	Pathology	4	4	240	A.2,A.3,A.4,A.5.1,A.5.4,A.7, B.1, C.1.7, C.1.8,D.1.5, D.1.4,D.1.6,D.1.7,		
FA 312	Medical pharmacology	2	4	180	A.2, A.5.4, A.6.1, A.6.2, A.6.4, C.1.5, C.1.6, C.1.8, D.1.4, D.1.5, D.1.6, D.1.7		
MB 313	Medical Microbiology and immunology	2	3	150	A.2, A.3, A.4,A.5.1,A.5.4,A.5.6,A.6.2,A.7, A. 10, C.1.7,C.1.8,C.1.9,C.1.15,C.1.22,C.2.9,C.2.10,D.1.4, D.1.5, D.1.6, D.1.7		
PR 314	Medical parasitology	2	2	120	A.2, A.4, A.5.1, A.5.4, A.5.6, A.6.2, A.7,		

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## **Quality Assurance Unit**

					C.1.7,C.1.8,C.1.15,D.1. D.1.5,D.1.6,D.1.7
PS 315	Psychology	1	1	30	A.2, A.3, A.4, A.5.1,A.5.2, A.5.3, A.5.4,A.5.5, A.5.6, A.6.2, A.8,A.9, A.10, A.11, A.14,B.9.1,B.9.2, B.10.1,B.10.2, C.1.4, C.1.7,C.1.14, C.1.22, C.2.3,C.2.9, C.2.10, D.1.1,D.1.3, D.1.4, D.1.5,D.1.6, D.1.7, D.1.8,D.1.9, D.1.10, D.1.11,D.1.12, D.1.13, D.1.14,D.2.1, D.2.2, D.2.3,D.2.4, D.2.5

3- Third Year: Duration: 30 weeks





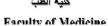


**Quality Assurance Unit** 

# 4- Fourth Year: Duration: 32 weeks.

		Hours per week		Total weeks for	Program ILO covered	
Code	Code Course title Clin		Lectures	clinical		
		rounds/lab		rounds		
CM414	Community Medicine	2	4	-64 hours clinical + 2 weeks field training	A.2.1, A.3, A.4.5,A.5.2,A.5.1, A.5.6,A.5.5,A.5.4, A.5.3,A.5.7,B.4,B.7,B.8,B.9.1, B.10.1,B.10.2,B.11 C.2.22, C.2.23,C.3.3,C.3.10,C.3.12,C.13.,D.1 ,D.3,D.4,D.5,D.6,D.7,D.8,D.9,D.11,D.12, D.13,D.14, D.16, D. 17.	









## **Quality Assurance Unit**

FT413	Forensic Medicine & toxicology	2 (lab)	3	64 hours clinical + 2 weeks clinical training	A.1.1,A.1.3,A.2.2,A.2.3,A.4.4,A.6,A.7,A.8,A.16 B.2.1, B.2.2, B.3,B.4, B.5, B.6,B.7,B.8,B.9.1,B.9.2,B.10.1,B.10.2,B.12 C.3.1,C.3.2,C.3.3,C.3.4,C.3.5,C.3.6, C.3.7,C.3.8,C.3.9,C3.10,C.4.1,C.4.2,C.4.3, C.4.4,C.4.5, D.1, D.3,D.4,D.5,D.6, D.7, D.9, D.11, D.12,D.13,D.14
OO411	ophthalmology	18	3	8	A.1.1,A.2.1,A.2.2,A.3,A.4.1,A.4.2,A.4.3, A.4.4,A.4.6,A.4.7,A.7,A.8, B.1,B.2.1,B.2.2,B.3,B.4,B.5,B.6,B.7,B.8, B.9.1,B.10.1,B.10.2 C.2.1,C.2.4,C.2.6,C.2.11,C.2.15,C.3.4,C.3.6, C.3.7,C.3.9,C.3.10,C.3.11,C.4.1,C.4.2,C.4.3, C.4.4,C.4.5,D.1,D.3,D.4,D.5,D.6,D.7, D.9,D.11,D.12,D.13,D.14
EN412	E.N.T	16	2	4	,A.2, A.4, A.5.1, A.5.4, A.5.6 ,A.6.2, A.6.3, A.7, A.8, A.11 ,B.1, B.2, B.2.1, B.2.2, B.3, B.4 ,B.5, B.6, B.7, B.8, B.9.1, B.9.2 ,C.1.1, C.1.2, C.1.3, C.1.4, C.1.5 ,C.1.6, C.1.8, C.1.9, C.1.10 ,C.2.1C.1.22, C.1.19, C.1.11, ,C.2.9, C.2.10, D.1.1 C.2.6, ,D.1.4, D.1.5, D.1.6 D.1.3, ,D.1.11D.1.10, D.1.9, D.1.7, ,D.2.1D.1.14,D.1.13,D.1.12,

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رؤية الكلية: تحقيق الريادة على المستوي المحلي وترتيب عالمي متقدم في التعليم والبحث الطبي وتقديم الرعاية الصحية المتكاملة للمجتمع

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وحدة ضمان الجودة

		,D.2.2, D.2.3, D.2.4, D.2.5







**Quality Assurance Unit** 

5-Fifth year: 36 weeks Duration







## **Quality Assurance Unit**

Code	Course title	Hours p	er week	Total weeks	program ILO covered.
		Clinical rounds	Lectures	for clinical rounds	
GM511	Internal medicine	15	6	24	
	&Its				,A.2, A.3, A.4, A.5.1, A.5.4
	specialties				,A.5.5, A.5.6, A.6.2, A.6.4, A.7
					,A.8, A.10, A.11, B.1, B.2
					,B.2.1, B.2.2, B.3, B.4, B.5, B.6
					,B.7, B.8, B.9.1, B.9.2, C.1.1
					,C.1.2, C.1.3, C.1.4, C.1.5
					,C.1.6, C.1.7, C.1.8, C.1.9
					,C.1.11,C.1.13, C.1.15C.1.10,
					,C.1.16, C.1.17, C.1.18, C.1.19
					,C.1.2C.2.6, C.2.9C.1.22,
					,D.1.1, D.1.3, D.1.4C.2.10,
					,D.1.5, D.1.6, D.1.7, D.1.9
					,D.1.10, D.1.11, D.1.12, D.1.13
					,D.2.3 D.2.2, D.2.1,D.1.14,
					A.1.3, A.1.4D.2.4, D.2.5
PE512	Pediatrics	18	3	12	,A.1.3, A.2, A.3, A.4, A.5.1
					,A.5.4, A.5.5, A.5.6, A.6.2, A.7
					,A.11, B.1, B.2, B.2.1, B.2.2
					,B.3, B.4, B.5, B.6, B.7, B.8

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		B11, C.1.1, B.9.1, B.9.2,
		,C.1.2,C2.23
		,C.1.3, C.1.4, C.1.5, C.1.6
		,C.1.8, C.1.9, C.1.10, C.1.11
		,C.1.14, C.1.17, C.1.18, C.1.19
		C.1.22, C.2.1, C.2.6, C2.23
		D.1.1, D.1.3, ,,C.2.9,C.2.10,
		D.1.7, ,D.1.4,D.1.5, D.1.6
		D.1.9,D.1.10, D.1.11, D.1.12,
		D.1.14, D.2.1, D.2.2, ,D.1.13
		D.2.4, D.2.5, D.2.3







## **Quality Assurance Unit**

# 6-Sixth year: Duration 36 weeks

	Course	Hours per week		Total weeks			
Code	title	Clinical rounds	Lectures	for clinical rounds	program ILO covered		
GS611	General surgery its & specialties	16	6	24	,A.2, A.4, A.5.1, A.5.4, A.5.6, A.6.2 ,A.6.3, A.6.4, A.7, A.8, A.11, A.12 ,B.1, B.2, B.2.1,B.2.2, B.3, B.4, B.5 ,B.6, B.7, B.8, B.9.1, B.9.2C.1.1 ,C.1.2, C.1.3, C.1.4, C.1.5, C.1.6 ,C.1.8, C.19, C.1.10, C.1.11,C.1.12 ,C.1.17, C.1.19, C.1.20, C.1.22, C.2.1 C.2.6, C.2.9, C.2.10, D.1.1, D.1.3,D.1.4, D.1.5, D.1.6, D.1.7 D.1.9, D.1.10,D.1.11,D.1.12,D.1.13,D.1.14 D.2.1, D.2.2, D.2.3, D.2.4,D.2.5		
GO 612	Obstetrics & Gynecology	18	3	12	,A.2, A.3, A.4, A.5.1, A.5.4, A.5.5 ,A.5.6, A.6.2, A.6.3, A.7, A.8, A.11 B.1, B.2, B.2.1, B.2.2, B.3, B.4, B.5 ,B.6, B.7, B.8, B.9.1, B.9.2, C.1.1 ,C.1.2, C.1.3, C.1.4, C.1.5, C.1.6 ,C.1.8, C.1.9, C.1.10, C.1.11,C.1.12 ,C.1.17, C.1.19, C.1.20, C.1.22, C.2.1,C2.23		

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**Quality Assurance Unit** 

,C.2.6, C.2.9, C.2.10, D.1.1, D.1.3
,D.1.4, D.1.5, D.1.6, D.1.7, D.1.9
,D.1.10, D.1.11, D.1.12, D.1.13
,D.2.1, D.2.2, D.2.3, D.2.4 D.1.14,D2.5

#### 6- Student teaching methods

## 6.1. Lecture (brain storming, interactive presentation, discussion)

- \*Mention ideas, thoughts, or other solutions that focus on a specific topic which Stimulates thought and creativity in group discussions.
- \* Verbal presentation of information by the teacher, in which presentation of content is supplemented with a variety of methods like interactions, visual aids, and instructional materials.

## 6.2. Practical (clinical /lab.) discuss practice

Discussion related to the learning objectives presented by a panel of individuals or content experts.

Method in which the teacher presents the steps necessary for the completion of a procedure or clinical task or activity A representation of a real or hypothetical patient management situation .

\*Opportunity for students to practice or apply (with models, simulated patients, or real patients) the content presented in theoretical sessions. The teacher explains procedures or routines, demonstrates tasks, models the correct performance of the skill, and observes and interacts with students while providing ongoing feedback

Learning situation outside the regular class room in which students travel to another environment under staff supervision.







**Quality Assurance Unit** 

## 6.3 Small group discussion

<u>Topic discussion</u> presented by experts and interactive discussion between students and teacher in which student share their thoughts, questions and ideas

Interactive process in which students share their ideas, thoughts, questions, and answers in a group setting with a facilitator.

## 6.4.Outpatient clinicandin patient ward (Bed side tutorial method).

Methods in which the teaching staff member presents the steps necessary for performing a procedure or clinical examination.

Students play out roles in a simulated situation that relates to one or more learning objectives. A representation of a real or hypothetical patient management situation).

## 6.5. Tutorial classes, case study and problem solving

Data presented by one or more student under supervision of a tutor.

Using realistic scenarios that focus on a specific topic, or problem. Students typically read, study, and react to the case study individually or in small groups

#### 6.6. Field visits







**Quality Assurance Unit** 

Learning situation outside the regular classroom, in which Students travel to another location in a or outside the facility to leave classroom.

## **6.7. Skill lab**

Allow chance for students to practice (with models, simulated patients, or real patients) the content presented in theoretical sessions. The teaching staff explains procedures, demonstrates tasks, models the correct performance of the skill, and observes and interacts with students while performing the procedures.

## 6.8Assignments

A tasks allocated to student or more as a part of course study.







**Quality Assurance Unit** 

# **Matrix between Teaching methods and Indented learning outcomes:**

<b>Teaching Methods</b>	Type of Learning objective/ILO
Lecture	Knowledge ILOS
	Intellectual skills
Practical (clinical /lab.) discuss	Knowledge ILOS
	Practical and professional skills
	Intellectual skills
Small group discussion	Knowledge ILOS
	Intellectual skills
	Practical and professional skills
	Communication skills
Outpatient clinic and in patient ward (Bed side tutorial method)	Practical and professional skills
Tutorial classes, case study and problem solving.	Intellectual skills
	General and transferrable skills
Field visits	Communication skills

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**Quality Assurance Unit** 

	General and transferrable skills
Skill lab	Practical and professional skills
	_
Assignments	Intellectual skills
	General and transferrable skills
Asynchronous learning available since 2020 at university platform	Knowledge ILOS
	Intellectual skills

## **7-Student assessment method:**

## 7.1 Written exams

An essay questions can be written on any subject, asking students to read and then answer questions to check their understanding of the reading, multiple-choice, true-false, matching, short-answer assessment items, and a brief case or situation is provided with information about a situation and several objective questions,

#### 7.2. Oral examination

Examiners discuss one or more students about what they know about specific topics or what about management plan \* in specific situations. This may take place in a classroom setting or when working with patients.







**Quality Assurance Unit** 

#### 7.3. Practical/Clinical examination

Students rotate through a series of stations Where they answer questions (orally or written), or perform tasks under observation which assess knowledge, skills, and attitudes.

## 7.4. Objective Structured Clinical Examination (OSCE)/ Objective Structured Practical Examination (OSPE)

A structured practical examination that can be used to assess knowledge, skills, and demonstrated attitudes. It is an approach to assessment that involves creating a series of stations through which students rotate and where they perform certain tasks.

#### **7.5.** Others

\*\* Drills, quizzes, and practice tests

Drills are verbal question and answer during a classroom or practical session to assess understanding and ideas expressions. Quizzes and practice tests are short type of written examinations and are designed to help and prepare students for a final assessment.

#### \*\*Direct observation

The assessor observes a student performing a skill. This may take place in a simulated situation (e.g. anatomic model) or with patients or during doing an experiment.

#### \*\*Clinical rounds







**Quality Assurance Unit** 

The teacher asks the students questions while rounding in the patient room

## \*\* Logbooks (casebooks)

list of skills or tasks that students should be able to perform. These tasks are derived from learning objectives for the course.

## \*\* Assignments

# Matrix between Student assessment and types of Indented learning outcomes

Student assessment	Type of Learning objective/ILO	0/0
Written exams	Knowledge ILOS	Midterm 20%
	Intellectual skills	Final 50%
Oral examination		
	Knowledge ILOS, Intellectual skills	30%
	Practical and professional skills	
Practical/ Clinical	Knowledge,	
examination	Intellectual skills,	30%
	Practical and	







#### **Quality Assurance Unit**

	General	
Objective Structured	Practical, intellectual,	30%
Clinical Examination	general	
(OSCE)/ Objective		
Structured Practical		
Examination (OSPE)		
Others:		
Drills, quizzes, and	Knowledge ILOS, Intellectual skills	
practice tests	Practical, intellectual, general	
Direct observation	Practical, intellectual, general	30%
Clinical rounds	Practical, intellectual, general	
Logbooks	Practical, intellectual, general	
(casebooks)		
Assignments		
Total		100%

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**Quality Assurance Unit** 

# 8. Program admission requirements:

## Requirements for enrollment to Faculty of Medicine, Minia University:

- a- Graduates that got the Egyptian General Secondary Certificate, (Scientific Section) or those equivalent certificates awarded by Arabic and Foreign Countries. Criteria of selection and acceptance for enrollment is principally organized and managed by "Universities' Admission Office, Ministry of Higher Education".
- b- The Courses in Biology, Physics and Chemistry must be included within the secondary education program
- c- Enrollment of students transferred from other faculties inside or outside Egypt is accepted according to the regulations of the Supreme Council of Higher Universities

# 9. Regulation for progression and completion:

Students at the Faculty of Medicine must pass a theoretical and practical education program for the 6 years. For the students to be transferred from one academic year to the next, he/she is required to have successfully passed in all subjects either in the exam of first or second turns, however, the student of the first grade may still be transferred if he/she has failed in not more than two basic medical subjects regardless the result of complementary subjects. Students "carrying" subjects from first year should re-sit for their "failed" subjects during the second academic year. Failed student (in more than 2 basic subjects) in the first and second exam turns for first grade he or she will stay for another year, if not pass theses failed subjects, he or she will be obligated to change the program. Failed student of the second grade will stay for another year if not pass he or she or she will be external student for one year. Once an "external" student succeeded in his/her examinations for first year, this will allow him/her transferred to the following year; he/she automatically becomes registered as "regular" student again.







**Quality Assurance Unit** 

To progress to the third year the students must pass all courses of the first and second years except complementary subjects. To path to the fourth year the student must pass all subjects if failed he or she will stay for another year if not pass he or she or she will be external student for 3 years. The student passes automatically to the fifth grade regardless the results and the same for sixth grade. To graduate the students must pass all medical courses and complementary courses.

\*

## **Internship/Pre-registration house officer year (PRHO):**

The students must spend twelve months rotating between different specialties Of Minia University Hospitals and/or other Ministry of health hospitals. They spend two months in each of pediatric, surgery, internal medicine, obstetrics and gynecology, emergency medicine, and anesthesia. They have the right to one specialty as elective to spend additional two months. All the activities of the students during this year are under supervision of their residents. The student should get a pass training certificate at the end of this year to a Bachelor degree of in medicine and surgery.

# 10. Program evaluation:

The institution has set a system for program evaluation:

Evaluator	Tool	Sample
1- Senior students	-Questionnaire -Interview	1-Sixth year students 2-House officers
2- Alumni	-Questionnaire	.1-Consultants of the medical syndicate
	-Interview	

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#### **Quality Assurance Unit**

		2-RepresentativeGovernmental and governmental institutions organizations 3-Postgraduate students 4-Fresh graduates
3- Stakeholders	-Questionnaire	Directors and heads of governmental and non- governmental hospitals organizations and institutions.
4-External Evaluator(s)	-Questionnaire	Peers and staff from other Faculties
-External Examiner(s)	-reports	
5-others	-Conference	All 4 categories mentioned previously







**Quality Assurance Unit** 

# Matrix of program aims and intended program's learning outcomes Faculty of Medicine, Minia University

	Program objectives	Educational	ILOs
1.1	Keep normal health, provide primary health care. manage common health problems in the society.	domain Performance skill	A.1,A.2,A.3,A.4,A.5,A.7,A.8,A.9,A.10,A.11,A.12,A.13,A.14 B.1,B.2,B.3,B.4,B.5,B.6,B.7,B.8,B.9,B.11 C.1,C.2.1,C.2.2,C.2.3,C.2.4,C.2.5,C.2.6,C.2.7,C.2.8,C.2.9,C.2.1 0,C.2.11,C.2.12,C.2.13,C.2.14,C.2.15,C.2.16,C.2.17,C.2.18,C.2. 19,C.2.20,C.2.21,C.2.22.C.3.6,C.3.11 D.9,D.11,D.12
1.2	Know the importance of a good doctor/patient relationship and how to deal with his colleague, seniors, and patients ethically.	Affective skill	A.6,C.2.2,C.2.3,c.3.1,c.3.2,c.3.3,C.3.4,C.3.5,C.3.6,C.3.7,C.3.8,C .3.9,C.4.1,C.4.2,C.4.3,C.4.4,C.4.5, D.5,D.7,D.10
1.3	observe rules of medical ethics	Cognitive	A.6 , B.12, C.3.2,c.3.3,C.3.5,C.3.7,C.3.8,C.3.9, C.4.1,C.4.2,C.4.3,C.4.4,C.4.5, D.7,D.10,
1.4	Develop appropriate communication, clinical and practical skills.	Performance skill	A.15,B.2,B.3,B.4,B.5,B.6,C.2.2,C.2.4,C.2.5,C.2.6,C.2.9,C.2.10,C .2.11,C.2.12,C.2.13,C.2.14,C.2.15,C.2.16,C.2.17,C.2.18,C.2.19, C.2.20,C.2.21,C.2.22,D.2,D.5,D.6,D.7,D.10,D.12,D.13

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#### **Quality Assurance Unit**

1.5	Deal by good respectable attitudes and professionalism.	Affective skills	B.2,B.3,B.4,B.5,B.6,B.8,C.2.1,C.2.3,c.3.2,c.3.3,C.3.4,C.3.7,C.3. 8, C.4.1,C.4.2,C.4.3,C.4.4,C.4.5, D.10,
1.6	Guide to life-long learning and how to earn knowledge.	Affective skill	A.14,A.15,B.8,C.1,C.2.4,C.2.8,C.2.9,C.2.10,C.2.11,C.2.12,C.2.1 3,C.2.14,C.2.15,C.2.16,C.2.17,C.2.18,C.2.19,C.2.20,C.2.21,C.2. 22,C.3.10 D.1,D.2,D.3,D.4,D.5,D.6,D.8,D.12,D.14
1.7	adapt in post- graduate field.	Affective skill	A.7,A.15,B.5,B.6,B.7,B.8,B.10.1,C.2.1,C.2.3,C.2.4,C.2.5,C.2.6, C.2.9,C.2.10,C.2.11,C.2.12,C.2.13,C.2.14,C.2.15,C.2.16,C.2.17, C.2.18,C.2.19,C.2.20,C.2.21,C.2.22,C.2.23,c.3.2,c.3.3,C.3.11,C 3.12,C3.13,D.11,D.16,D.17.
1.8	Make research studies and develop basic administrative capabilities.	Affective skill	A.8,A.13,A.15,B.8,B.10,C.1,C.2.7.D.13



Quality Assurance Unit

#### Medical Undergraduate Program specifications

#### A. Basic information

Program title: Bachelor's degree of medicine and surgery (M.B.B.CH) Faculty of Medicine - Minia University

Program type: Single program.

Program duration: 6 years (to be reevaluated every 6 years).

University: Minia

Faculty: Faculty of Medicine

Departments: sixteen (16)departments including:

- 1- Human anatomy and embryology
- 2- Medical Physiology
- 2- Medical Physiology
  3-Histology and cell biology
- 4- Medical Biochemistry
- 5- Pathology
- 6- Medical Pharmacology
- 7-Medical Microbiology and Immunology
- 8-Medical Parasitology

رسالة الكثيرة اعداد طبيبا قدرا على السنامية في سوق العمل مطبيا ودولها وباحثا قادرا على الابتكار ونغديم رعاية صحية مجتمعية تحقق اهداف اللتعية المستدامة لروية مصر ٢٠٣٠ من خلال تقديم برامج تعليمية مطورة