

Department of Pediatrics



Forward

The department of pediatrics of Thi-Qar College of Medicine was established in 2005. The first undergraduate group studied pediatrics was in 2007. The main office of the department is located in Bint Al-Huda Maternity and Children Teaching Hospital. This hospital includes 200 pediatrics beds including general pediatrics, neonatal unit, emergency unit, rehabilitation unit, thalassemia center, and the outpatient's department. The department is responsible for teaching pediatrics during the fourth, fifth and sixth years of study in the college.

The department's objectives

1. To provide the scientific background necessary for an understanding of the systems, which are appropriate as an introduction to clinical training.
2. To introduce the implication of dysfunction of the system in terms of the individuals and their physical and social environment. The students will, by the end of a year, have an adequate knowledge and understanding of a range of common diseases related to systems in term of underlying dysfunction, the ways in which they present the environmental and social factors which contribute to them and their diagnosis, prevention and treatment.
3. To explain the importance of each system in relation to other systems.
4. To be able to take history and examine the children with specific considerations for each age group (neonate, infancy, toddler, school age and adolescence).

5. To be able to take and record various parameters of growth and comparing it with standard normal values, and give simple reasons about any differences and shift from standard recordings.
6. Able to search literatures about at least 10 cases they see during their practice and discuss those particular cases with the tutor.
7. Formulate a thought plan to how to manage pediatric patients and reasoning for investigations.

The Teaching Staff:

no	Name	Degree	Scientific degree	Specialty	Interest
1	Razaq Jamil. Al-Rubae	C.A.B.P	professor.	Pediatrics	Nephrology
2	Ali Jern Hassoun	F.I.C.M.S	professor	Pediatrics	Cardiology
3	Moayayd Naji Ajeed	F.I.C.M.S	professor.	Pediatrics	Gastroenterology
4	Ameen Turki Atia	C.A.B.P	Assist professor.	Pediatrics	Neonatology
5	Adnan Muhan Bohan	C.A.B.P	Assist professor.	Pediatrics	Respiratory
6	Tariq Khudhair .Hussien	C.A.B.P	Assist professor.	Pediatrics	Neurology
7	Ghada Mansoor	F.I.C.M.S	Assist professor.	Pediatrics	General pediatrics
8	Raid Kareem	F.I.C.M.S	Assist professor	Pediatrics	Endocrinology
9	Rua Hameed	F.I.C.M.S	Lecturer	Pediatrics	Nutrition

Teaching Programs (Syllabus):

Fourth year:

Material	Theoretical hours	Practical hours	No. of units
Pediatrics	30	120	6

A) Theoretical learning:

Lecture Topics	Hours
Introductory lecture	1
Health statistics	1
Pediatric epidemiology	1
Preventive pediatric and vaccinations	5
Growth and development	5
Feeding and nutrition	5

Malnutrition disorders	2
Common viral infections	5
Bacterial infections	5

B) Practical learning:

Include two hours daily for five days a week for 12 weeks training in Bint Al-Huda MCTH. The clinical training hours are 120 hours. The training introduces the students in small groups to the bed side in the wards to be familiar with the hospital environments and to begin to approach problem-oriented history taking. The staff members are responsible for supervising students through the hours of clinical teaching.

Fifth year:

Material	Theoretical hours	Practical hours	No. of Units
Pediatrics	60	60	6

A) Theoretical learning:

Lecture Topics	Hours
Neonatology	12
Cardiovascular system	6
Respiratory system	5
Gastrointestinal system	5
Renal system	4
Nervous system	5
Endocrine system	3
Hematology and Oncology	6
Bacterial and parasitic infections	6
Behavioral disorders	2
Clinical Genetics	2
Rheumatology	2
Toxicology	2

B) Clinical training:

The training hours are 30. The students attend pediatrics wards 5 days a week for 3 weeks. The clinical training reinforces what was achieved in the fourth year by obtaining a full history from patients, it also initiates the students to perform and record physical examination of the major systems and to begin to intergrades the information from the history and examination to formulate a sensible diagnosis

Sixth year:

Materials	Theoretical hours	Practical hours	No. of units
Pediatrics	40 tutorials	360	12

A) Theoretical teaching:

The lectures are in the form of tutorials. The total hours of tutorials are 40. The tutorial is held every day. The following list of topics is distributed at the beginning of training period covering wide areas of pediatrics and pediatric emergencies.

Sixth year tutorials:

1. Proper baby care.
2. Neonatal hyperbilirubinemia.
3. Neonatal respiratory problems.
4. Failure to thrive.
5. Malabsorption.
6. Febrile convulsions.
7. Chronic cough.
8. A child with murmur.
9. Short stature.
10. Management of diabetic ketoacidosis.
11. Recurrent abdominal pain.
12. Congenital infections.
13. Chronic diarrhea.
14. Behavioral disorders.
15. Mental retardation.
16. Cerebral palsy.
17. Neonatal sepsis.
18. Joints pain.
19. Chronic cough.
20. Headache.
21. Child abuse.
22. Prenatal diagnosis and treatment.
23. Heart failure.
24. Renal failure.
25. Comatose child.
26. Bleeding tendency.
27. Ambiguous genitalia.
28. Surgical pediatric emergencies.
29. Medical pediatric emergencies.
30. Common chromosomal syndromes.
31. Proteinuria and nephritic syndrome.
32. Fluid and electrolytes therapy.
33. Approach to child with pallor.
34. Pyrexia of Unknown Origin.
35. Blood and blood products transfusion.
36. Child with lymphadenopathy.
37. Accidental poisoning.
38. Floppy baby.
39. Approach to infant with cyanosis.
40. Approach to child with hamaturia.

B) Clinical training:

The students are divided into small groups, who spend ten weeks training in the pediatric wards. The students will come in close contact with child patients and will be looked up as members of the ward team rather than as students who attend for instructions without any professional states.

The student's duties are to obtain a comprehensive problem-based history, perform complete physical examinations, follow their patients daily, perform some procedures, present and discuss the case with a tutor. In addition to the ward teaching, there's clinical teaching in the primary health care centers (2 weeks), this is to give the students experience in dealing with the common pediatric problems in the community and to master the programs of primary health care (ARI, CDD, and promotion of breast feeding). The staff at all levels act to give guidance and information to demonstrate methods of clinical examinations and pediatric techniques and to discuss problems.

Each student should keep a book (log book) in which he records 10 cases during his training period. Every case record should include history, physical examination, investigations, diagnosis, treatment and progress of the patient.

General clinical learning objectives:

The student will be expected:

- To be familiar with hospital environments.
- To be able to begin to approach problem-oriented history taking and to develop the skills in talking to patients in a professional role in hospital.
- To perform and record physical examination of the major systems.
- To appreciate some investigations that patients undergo.
- To begin to integrate the information from the history and examination and to formulate a sensible diagnosis.
- To be familiar with outpatient department setting and common pediatric problems seen in the outpatient and the ways of dealing with them within the limited time available in an outpatient setting.
- To obtain comprehensive problem-based history.
- To perform complete physical examination.
- To demonstrate competence, at the level of a beginning hospital house officer, in assessing and managing the investigations and treatment of patients with various clinical problems.
- To demonstrate an awareness of the limitations of his/her competency by seeking advice and consultations when appropriate.
- To demonstrate the ability to write clear, concise and meaningful medical records which provide a vehicle for effective communications between members of health team.

All sixth-year students should know the following techniques:

1. Examining babies and children of different age groups (including the use of different growth charts).
2. Infants feeding and general care.
3. Temperature recording and interpretations.

4. Taking blood pressure at all ages using different sizes of cuffs.
5. Urine analysis, methods of collection and indications.
6. Blood specimen, methods of collections.
7. Injections; subcutaneous (S.C), intramuscular (I.M), intravenous (I.V) and intradermal.
8. Giving medications to different age groups including nebulizer.
9. Blood grouping.
10. Gastric lavage.
11. Nasogastric feedings.
12. Emesis for accidental poisoning.
13. Intravenous infusions, scalp veins.
14. Lumbar puncture; indications and contraindications.
15. Ophthalmoscopy.
16. Spirometry and peak expiratory flow rate.
17. Indirect laryngoscopy.
18. General stool examination and for occult blood, stool pH and reducing substances.
19. Gram stain, acid-fast bacilli stain and blood film stain techniques.
20. Basic and advanced life support and resuscitations.
21. Electrocardiography.

All of the sixth-year students should have observed the following procedures and able to describe them, list their indications, contraindications and expected results and complications:

1. Liver biopsy.
2. Pleural biopsy.
3. Renal biopsy.
4. Peritoneal aspiration.
5. G.I.T. endoscopy.
6. Bone marrow aspiration.

All the sixth-year students should be able to interpret the following investigations:

1. Common ECG abnormalities.
2. Routine pulmonary function tests.
3. Common blood picture abnormalities.
4. Blood gases reports.
5. Common biochemical abnormalities.

Assessments and Examinations:

A) Daily assessment during clinical teaching, there's a mark for each student after finishing the clinical course.

B) Final examination:

1. Written examination; which include:
 - i. Multiple choice questions paper (MCQs).
 - ii. A short assay questions paper.
 - iii. Case problems paper.
2. Clinical examination; which include:
 - i. Objective Structure Clinical Examination (OSCE).
 - ii. Long case examination.
- iii. Slides show examination.

Published articles by teaching staff of pediatrics department:

no	name of researcher	title of published article	Journal	Vol.	no.	date	pages
1	Ahmed Abdel Kadhim Nasser + Talib Hassan Ali + Moayad Naji Majid	Detection of hemoglobinopathies in hypochromic, microcytic and sickle cell blood films of patient by hemoglobin electrophoresis	Thi-Qar Medical Journal (TQMJ):	5	1	2011	139-149
2	Ahmed Abdul-Kadhim Nasser + supporter Naji Majid + Francesco Costanzo	Effect of BRCA1 after UV-B irradiation in cell cycle progression between human melanoma cell lines determined by flow cytometry.	Thi-Qar medical journal.	5	1	2011	11-Jan
3	Ahmed Abdul-Kadhim Nasser + supporter Naji Majid and another	Effect of BRCA1 in cell cycle progression in human melanoma cell lines after UVB-irradiation.....	Thi Qar Medical Journal.	5	1	2011	11-Jan
4	Jawad Faliyh Hassan + Adnan AlRekapi	The Incidence (Extent) of Crystalluria, following Co-Trimoxazole or Trimethoprim Administration in Children with (4-10) years old age in Bint Al- Huda teaching hospital in Thi-Qar	Thi-Qar Medical Journal (TQMJ):	7	1	2013	77-85
5	Raid Kareem Dehiol	The epidemiology of acute childhood and adolescent poisoning in Thi-Qar governorate (2013-2015)	Thi-Qar Medical Journal (TQMJ):	14	2	2017	13-Jan
6	Raid Kareem Dehiol + Ghada Mansour Aboud	Factors associated with uncontrolled type 1 Diabetes Mellitus in children and adolescents in Thi-Qar 2016-2017	Thi-Qar Medical Journal (TQMJ):				144-159
7	Razaq Jamil Hathyia	Intestinal parasites among primary school children in Thi-Qar.	Thi-Qar medical journal.	2	1	2008	63-68
8	Razaq Jamil Hathyia	Specificity and sensitivity of signs and symptoms of acute bacterial meningitis.	Thi-Qar medical journal.	3	1	2009	101-110
9	Razaq Jamil Hathyia	Management of umbilical granuloma.	Thi-Qar medical journal.	4	4	2010	82-87
10	Tariq Hussain Khudair	Prevalence and related risk factors for Giardia Lamblia infections among children with acute diarrhea in Thi-Qar, southern Iraq.	Thi-Qar medical journal.	4	4	2010	68-74
11	Tariq Hussain	Pattern of feeding in children in Thi-	Thi-Qar medical	5	1	2011	80-85

no	name of researcher	title of published article	Journal	Vol.	no.	date	pages
	Khudair	Qar governorate.	journal.				
12	Tariq Hussein Khudair Adnan Muhsin Muhammad, Makarim Bohan	Urinary tract infections and neonatal jaundice.	Thi-Qar medical journal.	4	4	2010	88-93
13	Adnan Mohsen Bohan	Meconium aspiration syndrome, Risk factors.	Thi-Qar medical journal.	4	4	2010	75-81
14	Ali Jarn Hassoun	Prevalence of rotavirus gastroenteritis in children of Thi-Qar Governorate.	Thi-Qar medical journal.	3	1	2009	88-100
15	Ali Jarn Hassoun	Hepatitis C infection among thalassaemic children in Thi-Qar Governorate.	Thi-Qar medical journal.	4	1	2010	114-120
16	Ali Jarn Hassoun-Khalibes Akhlufa Wardam - Razak Jamil Hve	Intussusception in children; Comparative study, clinical and radiological diagnosis	Thi-Qar medical journal.	1		2007	13-22
17	Ali Jarn Hassoun	Prevalence of hepatitis C Viral Infections among Thalassaemic Patients in Thi -Qar Governorate	Thi-Qar Medical Journal (TQMJ):	15	1	2018	114-121
18	Ali Jarn Hassoun	Time trends and determinants of infant mortality in Thi-Qar 2016-2017	Thi-Qar Medical Journal (TQMJ):	14	2	2017	143-158
19	Ali Jarn Hassoun + Heba Abdel Azim	Assessment of Quality of Life for Patient with Thalassaemia at Thalassaemia Center in Thi-Qar Pronince	Thi-Qar Medical Journal (TQMJ):	10	2	2015	13-Jan
20	Ali Abed Sadoon + Ali Jarn Hassoun +	Seroprevalence and Determinants of Helicobacter Pylori among Primary Health Care Centers Attendants in AL-Nassiryia City at 2017	Journal of Global Pharma Technology	10	3	2018	736-745
21	Ali Abed Sadoon + Imran sugar + supporter Naji Majid	Prevalence of childhood enuresis in Nasiriyah city-Thi-Qar Governorate.	The medical journal of Basrah University.	27	1	2009	42-45
22	Ali Nayef Asi-Muslim Qandil Kazem- Razak Jamil Fadel Hveh-angry	management of umbilical granuloma	Thiqar Medical Journal	4	4	2010	82-87
23	Ghada Mansour Aaad	Extent of Overweight and Obesity among Children Aged (6-60) months in Al-Nasiriya at 2015-2016	Thi-Qar Medical Journal (TQMJ):	15	1	2018	58-72
24	Ghada Mansour Aaad + Raed Karim Dhaol	Types and Determinants of Congenital Anomalies among Newborns in Bint Al-Huda Teaching Hospital in Thi-Qar Governorate at 2015-2017	Journal of Global Pharma Technology	10	3	2018	746-753
25	Mushtaq blessing + supporter Naji	breast feeding as a protective factor against otitis media in thi-qar	Kufa Med.Journal	14	1	2011	309-317

no	name of researcher	title of published article	Journal	Vol.	no.	date	pages
	Majid + Ali Abd al-Saadoun						
26	Mushtaq blessing + supporter Naji Majid + Ali Abd al-Saadoun	Breast feeding as protective factor against otitis media in Thi Qar	Kufa medical journal	14	1	2011	309-307
27	Moayed Naji Majeed	Clinical and epiomological aspects of congenital heart diseases among children attending maternity and childhood teaching hospital in Thi-Qar.	Kufa medical journal.	9	2	2006	61-66
28	Moayed Naji Majeed	Age at Menarche of school girls in Najaf city-Iraq.	Thi-Qar medical journal	1	2	2007	23-31
29	Moayed Naji Majeed	A study of factors affecting incidence of diarrheal diseases in children under 5 years of age.	Thi-Qar medical journal	2	1	2008	1--7
30	Moayed Naji Majeed	Albendazole versus metronidazol for the treatment of giardiasis in children.	Journal of Thi-Qar University.	1	3	2006	2--8
31	Moayed Naji Majeed	factors influencing breast feeding patterns in thi- qar governorate	The medical journal of Basrah University.	3	1	2009	25-32
32	Hiba Abdul Atheem Abdul Ameer + Ahmed Abdul-Kadhim Nasser + Muayad Naji Majid	status of lipid peroxidation by products; malondialdehyde and uric acid in diabetes mellitus (types 2) and rheumatoid arthritis (a comparative study)	Thi-Qar Medical Journal (TQMJ):	5	3	2011	7-Jan
33	Raed Karim Dhaol ,et al	Level of IgE and Leukotriene – B4 in Chronic Tonsillitis Bacterial Infection	INTERNATIONAL JOURNAL OF PHARMACEUTICAL RESEARCH				



