

## Department of Family and Community Medicine

## What We Teach, How, and Why?

#### Preface

Quality of education at the university level is crucial to ensure that inputs are best used and processed to produce desirable outputs or outcomes. Transparency in work is one aspect of assuring quality.

In this report, we documented the teaching tasks endeavored by the Department at the undergraduate level (we have postgraduate studies in the Department of Family and Community Medicine/ Diploma of Family Medicine).

This report describes brief notes on the Department followed by a detailed illustration of the teaching courses for Fourth, Third, and first grades in our college, with the objectives for each course, the contents, the methods of assessing students, and the efforts made by the faculty to keep updated in terms scientific subjects and methods of assessment of students.

Head of dept. of Family & Community medicine Assist Prof, Dr. Muslim N. Saeed / October 2023

## Table of contents

Item	Page
TITLE PAGE, PREFACE	1
TABLE OF CONTENTS	2
Part One: The Department of Family and Community	3
Medicine	4
1.1. Definition	4
1.2. Department setting	5
1.3. Mission and objectives	5
1.4. Administration and faculty	6
Part Two: Community Medicine for 4th Year	10
2.1. Specific objectives	10
2.2. Syllabus	- 11
2.3. Teaching methods	12
2.4. Teaching staff for each part of the syllabus	13
2.5. Assessment	13
2.6. Books for 4th year	14
Part Three: Community Medicine for 3rd Year	14
Part Four: Quality Assurance	20
3.1. Regular administrative control	20
3.2. The National examinations	20
3.3. Students feedback	20
3.4. Faculty feedback	21
3.5. Beneficiaries view	21

## PART ONE

### The Department of Family and Community Medicine

### 1.1. Definition

The Department of Family and Community Medicine was established in the academic year 2004-2005.

The Department's main activities are:

- 1- Teaching undergraduate medical students, the principles and methods of epidemiology, medical statistics, public health nutrition, basic epidemiology, and control of communicable and non-communicable diseases. This is in addition to:
- 2- Teaching primary health care and Family Medicine concepts and practical programs in Iraq. Health care administration (planning management and evaluation techniques) as well as medical sociology and demography are also taught by the Department.
- 3- Teaching the principles of statistics and research methodology to postgraduate students in other departments.
- 4- Brief sessions are also given on topics related to health economics, health information, and utilization of health care services.
- 5- A short course is also arranged to tackle problems of environmental and occupational health.
- 6- Further, the faculty of the Department are involved in teaching Foundations of Medicine and Medical Ethics to medical students.
- 7- In addition to teaching, members of the Department are very active in research and advisory work to other departments and individual researchers in the College of Medicine and the health authorities in Thi-Qar. The research activities cover a variety of health domains such as measurement of population health, identification of risk factors, evaluation of health services performance, and medical ethics conduct.

### 1.2. Department setting

The Department of Family and Community Medicine is one of eleven academic departments operating in the Medical College, University of Thi-Qar.

Currently, it consists of one faculty member and three visitor lecturers. The policy and duties of the Department are the responsibility of the Department Council, which delegates part of its authority to the head of the Department.

Teaching and research tasks are discussed and approved by the Council, which also endorses the achievements of the Faculty. Students' performance and examination results are endorsed by the Council before they are submitted to the College administration.

From a structural point of view, the Department occupies an office on the second floor of the building of the College of Medicine. The Department Faculty makes use of all common lecture halls at the disposal of the College.

## 1.3. Vision, Mission, and Objectives

Vision:

To be national leaders in training family and Community medicine physicians and educating medical students to provide quality health care to families, individuals, and their communities.

The Department of Family and Community Medicine carries a fundamental message, encompassing efforts to cultivate the concepts, principles, and practices of Family and Community Medicine in philosophical, practical, and academic domains. It makes every effort to promote, protect, and restore population health, contributing to relevant teaching, research, and advisory work.

Specifically, the Department works to achieve the following objectives:

- 1. To actively contribute to qualifying doctors who can serve the interests of the population in promoting, protecting, and restoring health and rehabilitating the handicapped.
- 2. To strengthen research capacity both at the level of the Department work territory, the level of the College of Medicine, and at the level of the health care system.
- 3. To carry out and supervise research work that assists in supporting the first two objectives and to contribute to the solution of important public health problems
- 4. To provide advisory work to relevant local, national and international NGOs within the context of community medicine domains and following the Department objectives and national interests

- 5. To enhance, support, and evaluate the adoption of the family medicine model in Iraq
- 6. To enhance the provision of high-quality medical teaching and highquality health care with an emphasis on adequacy, effectiveness, efficiency, and scientific and technical excellence as important components of quality

#### 1.4. Administration and faculty

#### Head of the Department

Assist Prof, Dr. Muslim Nahi Saeed (Ph.D. Family Medicine)

#### The Teaching Faculty:

- 1. Visitor lecturer: Omran S Habib (MBChB, MSc, PhD in Community Medicine), Professor of epidemiology and health care.
- 2. Visitor lecturer: Duha Al-Ginzawy (Ph.D.) Family medicine.
- 3. Visitor lecturer: Saja Abdul-Khadim Hemmod (Ph.D.) Family medicine.

# Teaching staff (from other departments) collaborating with the Department of Family and Community Medicine

The Department has good collaborative links with other departments in the College and always seeks joint teaching and supervision, especially with postgraduate students of Family Medicine Diploma where Practical sessions, seminars, and lectures are performed by other departments for those post-graduate students.

#### PART TWO

#### Family & Community Medicine for 4th-year medical students

The bulk of the principles and methods of Family and Community Medicine are taught during the fourth year of the medical program. The 4<sup>th</sup> year course consists of 90 theoretical hours and 120 hours of practical classes, fieldwork, and PHC training.

## 2.1. Broad Objectives for undergraduate Family and Community medicine

The curriculum topics are designed to help trainees:

1. To acquire basic knowledge on the main components of Community and Family medicine interests.

- 2. To create doctors who can function effectively as basic doctors and physicians of first contact for the community in the primary care and family medicine setting, both in urban and rural areas of our country. This requires them to have the necessary knowledge, skills, attitudes, values, and responsiveness
- 3. To develop relevant competencies and skills in epidemiology and statistics to be able to measure and evaluate health and healthcare services, and control major health problems at the population level.
- 4. To develop basic principles of scientific research.
- 5. To develop an understanding of primary health care and Family Medicine as a strategy and service to the population
- 6. To contribute to the requirements of graduation of competent doctors to serve national, regional as well as local goals.
- 7. To be prepared for postgraduate training in the future
- 8. To be prepared to pursue self-learning towards continuing professional development.

#### 2.2. Specific objectives of the 4<sup>th</sup> year course

The course is designed to enable the student to:

- 1. Adopt the Family medicine approach and Biopsychosocial model to enhance population health.
- 2. Define communication and the doctor-patient relationship.
- 3. Interpret the distribution of disease in a population in terms of person, place, and time.
- 4. Adopt the concept of Evidence-based medicine in all subjects of study.
- 5. Describe the components of a rate, ratio, and proportion
- 6. List, define, and compute common rates used to measure fertility, morbidity, and mortality in the community
- 7. Define absolute risk, relative risk, and attributable risk. Interpret their use in epidemiological situations.
- 8. Understand the concept of MCH, and identify high-risk pregnancy, focusing on ANC and post-natal care.
- 9. Distinguish between association and causation and list causal criteria
- 10.Describe major epidemiological studies (cross-sectional, longitudinal, case-control, and cohort)

- 11.Make a simple design of an epidemiological study to describe the distribution of disease in the population and identify risk factors for a given disease, with a main focus on research methodology.
- 12.Analyze and interpret results obtained from relevant epidemiological studies
- 13.Define sensitivity, specificity, and predictive values and compute these measures given the necessary data
- 14.Define epidemic, endemic, and pandemic and list the steps of investigating and managing an epidemic of a communicable disease
- 15.Identify the major communicable diseases prevalent in Iraq and demonstrate the main epidemiological features, specific preventive measures, and control measures of them.
- 16.Describe the main epidemiological features, risk factors, and preventive measures of major non-communicable diseases (CHD, DM, Cancer, Accidents), in addition to their prevention, screening, and initial clinical assessment.
- 17.Appreciate the role of the primary health care approach in dealing with mental health
- 18.Recognize the principles of planning, management of evaluation of health care programs in a given setting.
- 19.List major risks associated with environmental exposures and describe the major effects of work on health
- 20.Recall major occupational diseases and list major groups of carcinogens with special reference to the situation in Iraq

### **2.3. Syllabus First Term** Total hours,

-Theory: 45

-Practical: 60

Topics	Hrs.
General epidemiology	
Introduction: concept of health and disease, definition of epidemiology, epidemiological uses and approaches	1
Epidemiological data: types, sources and limitations	1
Epidemiological measurements: rates, proportions and ratios	2
Descriptive epidemiology: person, place, and time	1
Descriptive epidemiological studies: Cross-sectional, Longitudinal, Case-control, Cohort, Interventional	2
The concepts of association, causation, risk	1
Analytical epidemiological studies	2
Screening and quality control of screening and diagnostic tests-clinical epidemiology	1
Designing epidemiological studies and research Methodology	3
The concept and investigation of epidemic	1
Sub-total	15

## **Table 2**: Epidemiology and control of communicable diseases (30 hrs)(Tutors: All)

Topics	Hrs
-DEFINITION OF TERMS	1
-INFECTIONS ACQUIRED THROUGH THE GASTROINTESTINAL TRACT:	7
Diarrheal diseases: the extent of the problem, causes, risk factors, and control	1
Comparative epidemiology of rotavirus, salmonella, cholera and shigellosis	1
Amoebiasis and shigellosis	1
Bacterial food poisoning	1
Poliomyelitis	1
Infections hepatitis A	1
Typhold and paratyphold fever	I
- INFECTIONS ACQUIRED THROUGH THE RESPIRATORY SYSTEM (AIR BORNE INFECTIONS):	9
Acute respiratory infection (ARI): extent, causes, risk factors and strategies of control of ARI	2
Exanthematous infection: Measles, GERMAN measles, chicken poxetc	2
Mouth and throat infection: Diphtheria, mumps, and tonsillitis	2
Whooping cough	1
Tuberculosis	1
Acute bacterial meningitis	1
- PERCUTANEOUS INFECTION: INFECTIONS ACQUIRED THROUGH TE SKIN	8
Insect bites: malaria, leishmaniasis, rickettsia	2
Abrasions: anthrax	1
Animal bites, rabies	1
Wounds: tetanus	1
Injections: hepatitis B, AIDS	1
Penetration: Schistosomiasis, hookworm	1
-SEXUALLY TRANSMITTED DISEASES	2
- ZOONOTIC INFECTIONS	2
- NOSOCOMIAL INFECTIONS AND TRAVELLER HEALTH	1
TOTAL	30

**The practical in the first term** consists of epidemiological desk exercises. These are quantitative practical classes handling specific epidemiological issues covering demographic, vital, and health topics. Fourth-year students are divided into subgroups of 15-25 students each. Faculty members supervise the groups in rotation. Exercises are designed to further development of knowledge and skills.

#### Second Term: Theory 45 hours Practical 60 hours

**Table 3**: Non-communicable diseases(Epidemiology, prevention,assessment, screening and referral): (8 hrs.)

Topics	Hrs.
CARDIOVASCULAR DISEASES	2
HYPERTENSION	1
DIABETES MELLITUS	2
Epidemiology of accidents	1
Epidemiology of mental health and geriatrics	2

#### Table 4: Maternal and child health care (10 hours).

Topics	HRS
Maternal Health 4 hours	
Introduction to MCH care	
Components of MCH care	1
Evaluation of MCH care	
Antenatal care-postnatal care	2
Vital statistics in MCH care	1
Health care for children 6 hours	
under-five clinics	1
growth monitoring	1
Immunization	
Development clinics	1
care for handicapped children	1
School health services: concept and plans 2	
total 10 hrs.	

#### Table 5: Environmental Health (3 hours)

Topics	Hrs
Definition of health and disease within the context of environment, and environmental health	
Basic activities of environmental health	1
Water: sources, quality, and related diseases	1
Air: sources of pollution, health effects, and control of air pollution	1

**Table 6**: Occupational Health (3 hours).

Topics	HRS
Definition of occupational health	
Objectives of occupational health services	4
Health hazards associated with work	1
Safety measures in occupation	
Selected occupational diseases	2

Table 7: Primary health care (PHC) and Family Medicine (15 hours)

Topics	Hrs.
Introduction, PHC, and Family Medicine	2
Definition, contents, and difficulties of PHC/ Supportive programs/ The five-star doctor	1
National PHC programs : EPI, CDD	2
National PHC programs: ARI, Breastfeeding	1
Evidence-based medicine	2
Communication	1
Doctor-patient relationship	2
Dealing with angry patients, breaking bad news	2
Principles of Critical Appraisal	2
TOTAL	15

#### Table 8: Healthcare administration (3 hours)

Topics	Hrs
Concept of administration	1
Planning of health care services	1
Evaluation of healthcare services	1

#### Second term: practical (60 hours)

These are based on field projects, which cover real health, and healthrelated problems through household surveys and institutional-based studies in which students use theoretical knowledge in designing, conducting, analyzing, and presentation of their results.

**Note**: Optional practicals may include visits to certain health-related industries and institutions.

#### 2.4. Teaching methods

The Department of Family and Community Medicine adopts a variety of teaching methods including:

- a. Lecture with elements of interactive teaching
- b. Small group discussions
- c. Small group desk exercises in epidemiology
- d. Students research projects including population-based surveys

All available means are used to demonstrate scientific material (blackboard, overhead projectors, data shows, group work, etc.)

U		
General epidemiology	15 hours	Assist Prof., Dr. Muslim N. Saeed
Epidemiology and control of - communicable diseases	30 hours	Assist Prof., Dr. Muslim N. Saeed/ Dr. Saja/ Dr. Duha
Epidemiology and control of non- communicable diseases	8 hours	Assist Prof., Dr. Muslim N. Saeed
Maternal and child health	10 hours	Dr. Saja A. Hemmod/ Dr. Duha Al-Ginzawy
Maternal and child health Primary health care, FM, and health care administration	10 hours 20 hours	Dr. Saja A. Hemmod/ Dr. Duha Al-Ginzawy Assist Prof., Dr. Muslim N. Saeed/ Dr. Saja A. Hemmod/ Dr. Duha Al-Ginzawy
Maternal and child health Primary health care, FM, and health care administration Environmental Health	10 hours 20 hours 3 hours	Dr. Saja A. Hemmod/ Dr. Duha Al-Ginzawy Assist Prof., Dr. Muslim N. Saeed/ Dr. Saja A. Hemmod/ Dr. Duha Al-Ginzawy Dr. Duha Al-Ginzawy
Maternal and child health Primary health care, FM, and health care administration Environmental Health Occupational health	10 hours 20 hours 3 hours 3 hours	Dr. Saja A. Hemmod/ Dr. Duha Al-Ginzawy Assist Prof., Dr. Muslim N. Saeed/ Dr. Saja A. Hemmod/ Dr. Duha Al-Ginzawy Dr. Duha Al-Ginzawy Dr. Saja A. Hemmod

#### 2.5. Teaching staff and responsibility in summary

#### 2.6. Assessment

Fourth-year students are critically assessed throughout the academic year with various methods

**First term**; continuous assessment based on discussions, desk exercises, short written examinations (quizzes), and presentations. The weight of the first term is 10% of the total 100 marks for the whole year.

**Mid-year** written examination with one paper containing at least four types of questions (short answer, MCQ, problems, matching, statement completion, etc). The weight for this examination is 20%.

The second term is based on small-group project works planned, conducted, and presented by students under faculty supervision. The weight for the project is 10% and students are marked based on their individual contribution and group performance in the whole project.

**The final examination** (60%) consists of a written part (50%) similar to the mid-year examination but covers all topics taught during the

academic year. This is supplemented by an oral interview (10% of the marks) of each student individually by a committee of 2-3 faculty members using a card system of questions.

A student is required to obtain at least 50% of the assigned marks to pass the year; otherwise, a re-sit examination is required in September. Failing in the re-sit examination entails the student to repeat the academic year.

#### 2.7. Books for fourth year

- 1. Epidemiology by Gordis
- 2. Preventive medicine by MACXY Rosenau
- 3. Control of communicable disease by Benensen
- 4. Short textbook of preventive medicine by LUCAS and Gilles
- 5. Introduction to community medicine: PART ONE: Basic Concepts and Methods in Epidemiology and Demography for Medical Students by Omran S Habib.

#### Part Three: Quality assurance

The curricula for the Iraqi medical colleges are centralized and developed through a series of activities. These are initiated by interdepartmental committees that draft curricula for specific subjects (e.g., biochemistry, medicine, ophthalmology, and medical statistics). These then are endorsed by the Deans Committee which submits the curricula to the Council of the Ministry of Higher Education and Scientific Research. The curricula are implemented for one complete cycle (six years) then they are revised. At the department level, an avenue of liberty of 15% is given for necessary addition, omission, or modification. The Department of Family and Community Medicine undertakes the following measures to ensure high quality in the structure, process of implementation, and verification of students' performance.

#### 4.1. Regular administrative control

Regularly and through the Department Council meetings, all teaching and assessment tasks are reviewed and any criticisms made are taken into consideration to reform the related process. Also at the end of each academic year, the whole academic year is evaluated regarding the completion of syllabi, assessment methods, types of questions, and students' performance. At the beginning of the academic year, a plan is discussed and endorsed including any innovations envisaged necessary.

#### 4.2. Students feedback

On some occasions, students were interviewed on the curriculum delivery process as a whole, examinations, and outcomes or specific components. Their response and comments were analyzed and taken into account in subsequent years. Students know clearly that the Department is one of the tough departments in teaching and assessment but they also recognize without any doubt that student assessment is very fair.

#### 4.3. Faculty feedback

This is a continuing activity by the Department's Faculty

#### 4.4. Beneficiaries' view

Based on postgraduate achievements in the posts they occupied after graduation and their verbal feedback after they attended local conferences, workshops, and other scientific activities, positive views are generally expressed.

#### **Syllabus**

Topics	Hours
First Term: Theory: 45	
Practical: 60	
General epidemiology (15 hours)	
Introduction: concept of health and disease, definition of	2
epidemiology, epidemiological uses and approaches	2
Epidemiological data: types, sources, and limitations	1
Epidemiological measurements: rates, proportions, and ratios	1
Descriptive epidemiology: person, place, and time	1
Descriptive epidemiological studies: Cross-sectional, Longitudinal,	2
Case-control, Cohort, Interventional	2
The concepts of association, causation, risk	1
Analytical epidemiological studies	2
Screening and quality control of screening and diagnostic tests-clinical	
epidemiology	I
Designing epidemiological studies & research methodology	3
The concept and investigation of epidemic	1
Epidemiology and control of communicable diseases (31 hrs)	
-DEFINITION OF TERMS	1
-INFECTIONS ACQUIRED THROUGH THE GASTROINTESTINAL TRACT:	7

Diarrhoeal diseases: extent of the problem, causes, risk factors, and control	1
Comparative epidemiology of rotavirus, salmonella, cholera and shigellosis	1
Amoebiasis and shigellosis	1
Bacterial food poisoning	1
Poliomvelitis	1
Infections henatitis A	1
Typhoid and paratyphoid fever	1
- INFECTIONS ACQUIRED THROUGH THE RESPIRATORY SYSTEM	•
(AIRBORNE INFECTIONS):	10
Acute respiratory infection (ARI): extent causes risk factors and	
strategies of control of ARI	2
Exanthematous infection: Measles GERMAN measles chicken pox etc	2
Mouth and throat infection: Diphtheria, mumps, and tonsillitis	2
Whooping cough	1
Tuberculosis	1
	1
Acute bacterial meningitis	1
- PERCUTANEOUS INFECTION: INFECTIONS ACQUIRED THROUGH THE	•
SKIN	8
Insect bites: malaria, leishmaniasis, rickettsia	2
Abrasions: anthrax	1
Animal bites, rabies	1
Wounds: tetanus	1
Injections: hepatitis B, AIDS	1
Penetration: Schistosomiasis, hookworm	1
-SEXUALLY TRANSMITTED DISEASES	2
- ZOONOTIC INFECTIONS	2
- NOSOCOMIAL INFECTIONS AND TRAVELLER HEALTH	1
Second Term: Theory 45 hours	
Practical 60 hours	
Epidemiology and control of non-communicable diseases (8 hrs.)	
CARDIOVASCULAR diseases	2
HYPERTENSION	1
DM	2
Epidemiology of accidents	1
Epidemiology of mental health and geriatrics	2
Maternal and child health care ( <mark>10</mark> hours)	
Maternal Health (5 hours)	
Introduction to MCH care	4
Components of MCH care	I
Evaluation of MCH care	
Antenatal and postnatal care	2
Vital statistics	1
Health care for children (5 hours)	

Growth monitoring	
	4
Immunization	
Development clinics	
Care for handicapped children 1	
School health services: concept and plans 2	
Environmental health (3 <mark>hours</mark> )	
Definition of health and disease within the context of environment,	
and environmental health 1	
Basic activities of environmental health	
Water: sources, quality and related diseases	
Air: sources of pollution, health effects, and control of air pollution	
Occupational health (3 hours)	
Definition of occupational health	
Objectives of occupational health services	
Health hazards associated with work	
Health hazards to the environment and community which result from	
Industrial activities	
Safety measures in occupation	,
Selected occupational diseases	
Primany health care (PHC) and Family Medicine (15 hours)	
Introduction	)
Definition contents and difficulties of PHC/ Supportive programs/ The 1	
five-star doctor	
National PHC programmes: EPL CDD 2	,
National PHC programmes: ARI, MCH, Breast feeding	•
Evidence-based medicine 2	
Communication 1	-
Doctor-patient relationship 2	
Dealing with angry patients, breaking bad news 2	)
Principles of Critical Appraisal 2	
Health care administration (3 hours)	
Concept of administration 1	
Planning of health care services 1	
Evaluation of healthcare services	

#### Topics

First Term: Theory: 45
General epidemiology (15 hours)
Epidemiology and control of communicable diseases (30 hours)
Second Term: Theory 45 hours
Epidemiology and control of non-communicable diseases (8 hrs.)
Maternal Health (5 hours)
Health care for children (3 hours)
School health services: concept and plans (2 hours)

Vital statistics in MCH care (1 hour)
Environmental health (3 <mark>hours</mark> )
Occupational health (3 hours)
Primary health care (PHC) and Family medicine (15 hours)
Health care administration (3 hours)

#### PART TWO

#### Community Medicine for 3rd-year medical students

#### 2.1. Broad objectives for undergraduate community medicine

The curriculum topics are designed to help trainees:

- 9. To acquire basic knowledge on the main components of community medicine interests
- 10.To develop relevant competencies and skills in epidemiology and statistics to be able to measure and evaluate health and health care services.
- 11.To develop abilities and competencies in the epidemiology and control of major health problems at population level
- 12. To develop basic principles of scientific research
- 13. To develop understanding of primary health care as strategy and services to the population
- 14.To contribute to the requirements of graduation of competent doctors to serve national, regional as well as local goals
- 15.To be prepared for postgraduate training in the future
- 16.To be prepared to pursue self-learning towards continuing professional development

#### 2.2. Specific Objectives of third year course

The course is designed to enable the student to:

- 1. Define statistics and list the main uses of statistics in medicine
- 2. List methods of data presentation and demonstrate the ability to present raw data in meaningful form
- 3. State the purpose of frequency distribution and cumulative frequency distribution in describing a set of biological measurements
- 4. Distinguish between normal frequency distribution and skewed distribution

- 5. Define the mean, mode, median, standard deviation, and standard error and compute each of them from grouped and ungrouped data
- 6. Use the standard error to compute a 95% confidence limit for a mean or a proportion
- 7. Distinguish between the standard deviation and the standard error and give examples of the use of each
- 8. Select and compute necessary calculations to explore the statistical significance of a comparative qualitative and quantitative set of data
- 9. Interpret statements of statistical significance concerning comparisons of means and frequencies and explain what is meant by statements such as (P<0.05)
- 10.Explain the main pathways of metabolism of major diet components
- 11.Define the requirements of major human nutrients
- 12.Explain the nutrient requirements of special groups (e.g. pregnant women)
- 13.Explain the interaction of infection and the nutritional status of an individual
- 14.List the main approaches to assess the nutritional status of the population
- 15.List and define major nutritional diseases

#### 2.3. Syllabus

The course consists of 30 theoretical hours and 30 practical hours. The details are shown in Table (1) below:

## Table (1): detailed topics of community medicine to third-year medical students

Term and main subject	Topics	Hrs
First Term:	Introduction to medical statistics	1
Medical Statistics	Summarization and presentation of data	2
	Measurement of central location	1
	Measurement of variability	1
	Introduction to sampling	1
	The normal distribution and its	1
	characteristics	
	The confidence interval and limit	1
	Tests of significance: the Z test,	4
	the t test, and the $X^2$ test	

	The concept of community diagnosis as an application of statistics in measuring population health	3
Sub-total		1
		5
Second Term:	Definition of relevant terms	1
Public Health Nutrition		
	Nutrient metabolism and requirements	3
	Nutrition and infection	1
	Nutrition of specific groups of population	2
	Nutritional surveys and assessment of	2
	nutritional status of population	
	Selected Nutritional diseases	3
	Diet therapy and nutritional rehabilitation	3
Sub-total		1
		5
Grand-total		3
		0

**Practical**: This consists of class-based desk exercise sessions, two hours each. The classes are run as one session per week for the 15 weeks during the first term. Students are divided into groups of 15-25 trainees. Each group is assigned a tutor from the Department faculty. Recently the tutors are rotating on groups to interchange expertise and experience and to reduce interpersonal variation in assessing the students.

No practical classes are organized during the second term but a demonstration exercise may be arranged.

#### 2.4. Teaching methods

The Department of Community Medicine adopts a variety of teaching methods including:

- e. Lecture with elements of interactive teaching
- f. Small group discussions
- g. Small group desk exercises in medical statistics
- h. All available means are used to demonstrate scientific material (whiteboard, data show digital projectors, computer withLCD screens group work etc.)

#### 2.5. Student assessment

The minimum requirement of a student to be transferred to fourth year is to achieve at least 50% of the total 100 marks assigned for the course.

The marks are distributed as follows:

- a. First term 10 marks based on daily continuous assessment using approved check list plus written short examinations (quizzes)
- b. Mid year written examination: 20 marks
- c. Second term 10 marks based on one written examination near the end of the term
- d. Final examinations (60 marks): The final examination consists of two parts; a comprehensive written examination using variety of questions (MCQ, matching, short answer questions, problems requiring mathematical calculations...etc)

Students who fail to attain the 50% cut-off mark are required to re-sit in September for comprehensive examinations similar to the final one (written and oral). Failing in the re-sit examination entails the student to repeat the academic year.

#### 2.6. Books

- 1. Medical statistics by Bradford Hill
- 2. Medical statistics by Daniel
- 3. Students are encouraged to use library and internet to further acquire knowledge from available resources

#### Foundations of Medicine for 1<sup>st</sup> year medical students

The bulk of the principles and methods of Community Medicine is taught during the fourth year of medical programme. The 4<sup>th</sup> year course consists of 95 theoretical hours and 120 hours of practical classes and fieldwork.

#### 2.1. Broad objectives for undergraduate community medicine

The curriculum topics are designed to help trainees:

- 17.To acquire basic knowledge on main components of community medicine interests
- 18.To develop relevant competencies and skills in epidemiology and statistics to be able to measure and evaluate health and health care services.
- 19.To develop abilities and competencies in the epidemiology and control of major health problems at population level
- 20. To develop basic principles of scientific research
- 21. To develop understanding of primary health care as strategy and services to the population

- 22.To contribute to the requirements of graduation of competent doctors to serve national, regional as well as local goals
- 23.To be prepared for postgraduate training in the future
- 24.To be prepared to pursue self-learning towards continuing professional development

#### 2.2. Specific Objectives of first-year course

The course is designed to enable the student to:

- 1. To understand the nature of medical practice in the pre-Islamic era(Mesopotamia, Egypt, ancient China, Greek, and Rome).
- 2. To define the concept of health and its dimensions, prevention, natural history of disease.
- 3. To define the concept of complementary and alternative medicine and the types of alternative practices.
- 4. To list and define the main areas which represent the focus of environmental health
- 5. To Explain what is meant by the word "communication" and identify the main elements in the communication process.
- 6. To introduce students to the basic principles of medical word building and the organization of the human body.
- 7. To identify and define the prefixes, suffixes, roots, and combining forms that form medical terms.
- 8. To associate medical terms with specific body systems and their structures, functions, and pathologies.
- 9. To recognize and interpret common medical abbreviations and acronyms.
- 10.To recognize diagnostic and therapeutic procedures and tests related to each body system.
- 11.To communicate effectively with health care professionals using oral and written skills.
- 12.To apply medical terminology to real-world scenarios and clinical cases.

#### 2.3. Syllabus

The course consists of 28 theoretical hours. The details are shown in Table (1) below:

# Table (1): detailed topics of community medicine to first year medical students

Term and main subject	Topics	Hrs
First Term:	Introduction to medical terminology	2
Medical	Cardiovascular system	2
Terminology	Respiratory system	2
	GI system	2
	Central Nervous system	2
	Urinary system	2
	Skin terms	2
	Endocrine system	1
Sub-total		15
Second Term: Foundations of	History of Medicine(pre-Islamic and Islamic era).	2
Medicine	Health Concepts and Promotion	1
	Definition of Health, Disease, Public Health	1
	Man and Environment	2
	Environmental Health; Relevance and Scope	2
	Alternative Medicine	2
	Medical Communication and Interviewing	2
	Library and Information Technology	1
Sub-total		13
Grand-total		28

#### 2.4. Teaching methods

The Department of Family and Community Medicine adopts a variety of teaching methods including:

- i. Lecture with elements of interactive teaching
- j. Small group discussions
- k. All available means are used to demonstrate scientific material (whiteboard, data show digital projectors, computer with LCD screens group work etc.)

#### 2.5. Student assessment

The minimum requirement of a student to be transferred to second year is to achieve at least 50% of the total 100 marks assigned for the course. The marks are distributed as follows:

- e. First term 10 marks based on daily continuous assessment using approved check list plus written short examinations (quizzes)
- f. Midyear written examination: 25 marks
- g. Second term 10 marks based on one written examination near the end of the term

h. Final examinations (55 marks): The final examination consists of a comprehensive written examination using variety of questions (MCQs, matching, short answer questions ...etc)

Students who fail to attain the 50% cut-off mark are required to re-sit in September for comprehensive examinations similar to the final one. Failing in the re-sit examination entails the student to repeat the academic year.