

## برنامج

ماجستير طب الأسرة وصحة المجتمع  
كلية الطب-جامعة قناة السويس



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## كلمة رئيس قسم طب الأسرة

إن منظومة التعليم الطبي والخدمات الصحية في مصر ومعظم بلدان العالم تتغير سريعا في الوقت الحالي طبقا للدلائل العلمية وتوصيات منظمة الصحة العالمية. فهناك تحول من اعتماد النظم الصحية على المستشفيات والتي ثبت أنها باهظة التكلفة مع قلة العائد على الحالة الصحية والوقاية من الأمراض وتحسن نوعية الحياة للمجتمع ككل وذلك إلى الاعتماد على الرعاية الصحية الأولية ومنظومة طب الأسرة التي تعطي اهتماما أكثر بالتنمية الصحية والوقاية والاكتشاف المبكر للأمراض وتضع أسس حق المواطن في إتاحة منظومة للرعاية الصحية الأسرية الشاملة والمستمرة آخذة في الاعتبار البعد النفسي والمجتمعي للصحة والمرض. لذلك كان هناك احتياج قومي وعالمي لتخريج أعداد كبيرة من الأطباء المتخصصين في طب الأسرة لتلبية هذا التحول في فلسفة منظومتنا الرعاية الصحية والتعليم الطبي.

إن لائحة معظم برامج الدراسات العليا في مصر والدول العربية في هذا التخصص تقف الآن عاجزة عن تلبية هذا المطلب القومي والعالمي كما أنها تحتاج إلى الكثير من التطوير لكي تتماشى مع العملية التعليمية التطور الهائل الذي حدث في هذا التخصص ، لذلك كان هناك الحاجة الماسة لاستحداث برامج جديدة متطورة في تخصص طب الأسرة تتيح لعدد كبير من الأطباء الالتحاق بهذا التخصص.

لقد تم تصميم هذا البرنامج الجديد ليلبي احتياجات العديد من الأطباء في الدول العربية الذين يرغبون في مواصلة دراساتهم العليا في تخصص طب الأسرة ويجدون صعوبة في الالتحاق ببرامج الدراسات العليا المحلية. وهذا البرنامج معتمد من المجلس الأعلى للجامعات المصرية. ويتيح البرنامج فرص الإشراف على التدريب وإجراء الامتحانات بالدول العربية في الأماكن التي يعتمدها المجلس الأكاديمي للبرنامج طبقا لاتفاقات تتم مع تلك الدول أو مراكز تدريبية معتمدة بها. كما تتم الدراسة في البرنامج بنظام الساعات المعتمدة التي تتيح مرونة في التطبيق للملتحقين بالبرنامج كما تتيح بعض الدراسات الاختيارية طبقا لمتطلبات العمل.

أد مصلح عبد الرحمن اسماعيل

رئيس قسم طب الأسرة

كلية الطب- جامعة قناة السويس

## نبذه مختصره

عن اعضاء قسم طب الأسره بكلية طب الأسره- جامعه قناه السويس

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### **Professor Mosleh Abdul Rhman Ismail**

MD- Fam.Med.(SCU), MSc.-Fam.Med.(SCU)

He is the current head of Family Medicine Department-Suez Canal University. He worked in UAE as consultant Family Medicine. His main interest is in the area of chronic diseases, mental health and Complementary /Alternative Medicine (CAM). He has several national /international publications in mental health in primary health care, prescribing and quality of provided care to diabetic patients in family practice. He is editor in chief of Egyptian Family Medicine Journal (EFMJ). He is assessor in the Egyptian board of family medicine exam. He is a member in training committee of Arab Board of family medicine. He is an assessor in both Egyptian and Arab boards.



### **Professor Maged Sayed Khattab**

MRCGP (UK), MSc. Medical Educ.(USA), MD-Fam.Med. (SCU)

He worked in several Arab countries as consultant of family medicine in both health sectors and universities. His main interests are in the areas of quality of care, medical education, and chronic diseases. He has several national and international publications in care of chronic diseases in family practice, quality of care, maternal and child health care..etc. He is an assessor in board exam. accredited by Royal College-UK (MRCGP-Int.) He is member of the "Center of Research Development in medical education –CRD"-WHO collaborating center.



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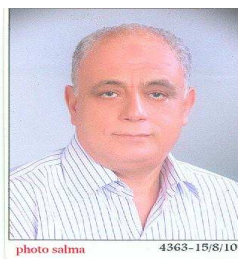
MRCGP(UK), MSc. Clinical Epidemiology (Australia), MD-Fam. Med.(SCU)  
 He worked in Saudi Arabia as consultant of family medicine in both health sector and King Khalid University. He was nominated and acted as head of clinical epidemiology unit (SCU) for four years. He is a member of the council and examination committee of the Egyptian board of family medicine as well as board exam assessor. He is a member of the advisory committee for MRCGP (INT. Egypt). His main interests are in mental health and geriatric health care in family practice. He has several national and international publications in mental health in family practice, prescribing ..etc. He is one of the authors of a practical family medicine book.



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مدينة الإسماعيلية  
(مدينة السحر والجمال)

## أهداف البرنامج

- ١- تلبية الاحتياج المحلى والعربي من القوى البشرية الصحية اللازمة لبرامج الإصلاح الصحي والتي تستلزم تخريج أعداد كبيرة من أطباء في تخصص طب الأسرة للعمل في مراكز ووحدات طب الأسرة ومنظومة التأمين الصحي الشامل المعتمد على منظومة طب الأسرة .
- ٢- مساهمة الجامعة في زيادة فاعلية وكفاءة النظم الصحية المعتمدة على الرعاية الصحية الأولية ومنظومة طب الأسرة بتدريب وتأهيل الكوادر الصحية اللازمة لذلك
- ٣- الاستخدام الأمثل للخبرات المتوفرة والمتراكمة بجامعة قناة السويس على مدى أكثر من ثلاثين عاما في تخصص طب الأسرة
- ٤- تطوير التعليم الطبي في تخصص طب الأسرة طبقا للمعايير الدولية ليصبح مؤهلا للاعتماد .
- ٥- إتاحة التعليم الطبي لعدد أكبر من الأطباء لكي يتخصصوا في مجال طب الأسرة من خلال إنشاء منظومة جديدة لتعليم هذا التخصص بنظام الساعات المعتمدة
- ٦- توسيع قاعدة الممارسة الطبية المعتمدة على أسس الجودة والتفكير الناقد والأدلة العلمية والعمل الجماعي من خلال الفريق الطبي



مدينة الإسماعيلية  
(مدينة السحر والجمال)

### رؤيتنا:

رؤيتنا أن نكون مركزا رائدا ومتميزا على مستوى العالم في تعليم وتدريب القوى البشرية الصحية في تخصص طب الأسرة طبقا للمستويات الدولية وأن نساعد على الارتقاء الدائم بهذا التخصص

### رسالتنا:

تصميم برامج متطورة ومتميزة في تدريب وتعليم مقررات طب الأسرة وإتاحتها وتسهيل الالتحاق بها لأعداد كبيرة من الأطباء لتلبية المطلب القومي والعربي في هذا التخصص وإجراء البحوث الرائدة في هذا المجال للتطوير المهني والخدمي والتعليمي

### فلسفتنا وقيمنا :

وضع وتأكيد أسس الممارسة الطبية المبنية على الفاعلية والكفاءة و البراهين العلمية والتعلم الذاتي والتفكير الناقد وإتباع أسلوب حل المشاكل والعمل من خلال الفريق الطبي والتحسين المستمر لجودة الأداء واحترام حقوق المريض وتأكيد الدور القيادي للطبيب في تنمية المجتمع ككل.



مدينة الإسماعيلية  
(مدينة السحر والجمال)



## القدرات المطلوبة ببرنامج ماجستير طب السرر وصحه المجتمع

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يؤهل هذا البرنامج الطالب الملتحق به لاكتساب المعلومات والمهارات والسلوكيات التي تمكنه من تقديم رعاية صحية أولية شاملة ومستمرة بنظام طب الأسرة والمجتمع من خلال القدرات الآتية :

- ١- القدرة على تشخيص وعلاج الأمراض الشائعة والحادة والطارئة والتشخيص المبكر والتحويل المناسب للحالات الخطيرة
- ٢- القدرة على تخطيط وتنفيذ وتقييم البرامج الوقائية وبرامج وأنشطة تنمية صحة الفرد والأسرة والمجتمع
- ٣- مهارة الإدارة الصحية ليتمكن الطالب من قيادة الفريق الصحي والتعاون الكامل مع القطاعات الأخرى وحسن استخدام الإمكانيات المتاحة وأن يتقن عملية التسجيل الصحي والإحصاء
- ٤- القدرة على التفكير الناقد والتعلم الذاتي المستمر



مدينة الإسماعيلية  
(مدينة السحر والجمال)

## المتطلبات الأكاديمية واللوائح المنظمة لبرنامج ماجستير طب الأسرة وصحة المجتمع

### ١ - شروط القيد:

يشترط لقيد الطالب بالبرنامج الآتي:

- ١- أن يكون حاصلا على درجة البكالوريوس فى الطب والجراحة من إحدى جامعات جمهورية مصر العربية أو ما يعادلها من معهد علمي آخر معترف به من المجلس الأعلى للجامعات
- ٢- أن يكون قد أنهى السنة التدريبية ( الأمتياز ) أو ما يعادلها.
- ٣- ان يقدم الطالب اقرارا كتابيا بعدم قيده للدراسات العليا بجامعة اخرى فى نفس التخصص وفى ذات الوقت
- ٤- أن يكون قد عمل الطالب لمدة اثنتى عشر شهرا في إحدى وحدات أو مراكز طب الأسرة
- ٥- ان يستوفى الطالب الشروط الأخرى التى يقررها القسم العلمى ( ان وجدت )
- ٦- ان يقوم بسداد الرسوم الدراسية المقررة فى المواعيد المحدده

### ٢ - مواعيد القيد لدرجة الماجستير وبدء الدراسة :

يكون التقدم للقيد لدرجة الماجستير مرتين خلال العام على دورين كما يلى :

الدور الأول : فى شهر سبتمبر ( فصل الخريف ) على ان تبدأ الدراسة فى شهر اكتوبر من كل عام

الدور الثانى : فى شهر فبراير ( فصل الربيع ) على أن تبدأ الدراسة فى شهر مارس من كل عام

يتم الإعلان عن قبول ملفات القيد بالدراسات العليا خلال النصف الأول من أغسطس بالنسبة للدور الأول ( فصل الخريف ) وخلال النصف الأول من شهر يناير بالنسبة للدور الثانى ( فصل الربيع ) .



### ٣- قواعد الانتظام في الدراسة :

- يجب أن يلتزم جميع المسجلين في البرنامج بالقواعد التالية :-
- ١-٣ يتم دفع رسوم التسجيل والخدمات التعليمية عند بدء التسجيل. ويحدد مجلس إدارة البرنامج الرسوم المطلوبة للتسجيل والخدمات التعليمية. وعلى الطلاب أن يحددوا المقررات المعتمدة الراغبين في دراستها في بداية كل فصل دراسي حتى يتمكنوا من استيفاء متطلبات الحصول على الدرجة العلمية.
- ٢-٣ أي طالب لا يسدد الرسوم الدراسية كاملة للمقررات المعتمدة التي يختارها لا يسمح له باستكمال الدراسة. وإذا كانت هناك أي رسوم دراسية لازالت غير مسددة عند دخول امتحان نهاية كل مقرر فإن الدرجة تحجب ولا يتم إصدار شهادة الدبلوم أو الماجستير إلا عند تسديد الرسوم الدراسية كاملة.
- ٣-٣ على الطالب أن يخطر إدارة الكلية بأي تغيير في عنوان مراسلته.

### ٤- الغاء القيد:

- يلغى قيد الطالب في الأحوال التالية :-
- انتهاء المدة القانونية والاستثنائية المنصوص عليها باللائحة للحصول على الدرجة
  - عدم سداد الرسوم الدراسية
  - اذا ثبت ان المستندات المتقدمة بها عند التسجيل غير صحيحة
  - اذا أخل بالمثل والتقاليد الجامعية وحسن السير والسلوك

### ٥- مدة الدراسة ومواعيدها :

- مدة الدراسة لنيل درجة الماجستير سنتان على الأقل بحد اقصى خمس سنوات وتنقسم السنة الأكاديمية الى فصلين دراسيين مدة كل منهما ١٥ أسبوع ينتهى كل فصل بامتحان وذلك طبقا لما هو وارد بجدول المقررات الدراسية الملحق بهذه اللائحة
- يجوز لمجلس الكلية في الظروف الاستثنائية التى يقدرها المجلس ان يرخص للطالب سنة أخرى وأخيرة ويلغى بعدها القيد اذا لم يحصل على الدرجة
  - فى حاله ايقاف القيد لا تحتسب مدة الأيقاف من مدة التسجيل على الا تزيد مدة الأيقاف عن عامين

## ٦- نظام الدراسة والنقاط المعتمدة لنيل درجة الماجستير:

تعتمد الدراسة الأكاديمية للبرنامج على نظام النقاط المعتمدة للتدريس والتدريب ويتم التدريب الإكلينيكي في أماكن معتمدة من المجلس الأكاديمي للبرنامج. أجمالى متطلبات الحصول على الدرجة ١٢٠ نقطة معتمدة وتشمل :-

### ■ الفصل الدراسى الأول : ٣٢ نقطة معتمدة ويشمل المقررات التالية :

- ١- مقدمة فى طب الأسرة  
Introduction to Family Medicine
- ٢- الرعاية الصحية للأسرة والمجتمع  
Family and Community Health Care
- ٣- الرعاية الصحية للبالغين فى طب الأسرة  
Adult Health Care in Family Medicine

### ■ الفصل الدراسى الثانى : ٣٢ نقطة معتمدة ويشمل المقررات التالية :

- ١- الرعاية الصحية للأطفال والمراهقين فى طب الأسرة  
Children and Adolescent Health Care in Family Medicine
- ٢- رعاية الأصابات والطوارئ فى المجتمع  
Emergency and Injuries Care in the Community
- ٣- العلوم السلوكية والأخلاقيات فى طب الأسرة  
Behavioral Science and Medical Ethics in Family Medicine

### ■ الفصل الدراسى الثالث : ٣٦ نقطة معتمدة ويشمل ٤ مقررات يختار الطالب ٣ مقررات منها :

- ١- الرعاية الصحية للمرأة فى طب الأسرة  
Woman Health Care in Family Medicine
- ٢- الرعاية الصحية للمسنين فى طب الأسرة  
Geriatric Health Care in Family Practice
- ٣- الصحة النفسية فى طب الأسرة  
Mental Health Care in Family practice
- ٤- إدارة الجودة فى طب الأسرة  
Quality Management in Family practice

### ■ الفصل الدراسى الرابع : ويخصص للمشروع البحثى : ٢٠ نقطة معتمدة

## ٧- شروط الحصول على درجة الماجستير:

- استيفاء النقاط المعتمدة في الفصول الدراسية
- النجاح في ثلاث فصول دراسية بالتتابع
- قبول المشروع البحثي بقرار من اللجنة العلمية المشكله لمناقشتها
- النجاح في أمتحان نهاية البرنامج

## ٨- المشرف الأكاديمي:

يعين لكل طالب عضو هيئة تدريس كمشرف أكاديمي و ذلك لمساعدة الطالب في التأقلم مع نظام البرنامج و يقوم هؤلاء المشرفون بالإشراف علي برنامج الدراسة للطلاب و ملاحظة تقدمه و متابعة أدائه كجزء من العملية التعليمية . وعلي الطلاب أن يحصلوا علي موافقة المشرف الأكاديمي المخصص لهم في اختيار برنامج الدراسة قبل التسجيل في المقررات في كل فصل دراسي

## ٩- تخطيط وتطوير المقررات المعتمدة:

يشرف المجلس الأكاديمي للبرنامج على عملية تخطيط وتطوير واعتماد المقررات ومراجعتها سنويا بما يتمشى مع معايير الجودة والمستويات العالمية للممارسات المثلى في عملية التعليم والتدريب في تخصص طب الأسرة ويجوز في ذلك الشأن الاستعانة بأساتذة وخبراء محليين أو عالميين في التعليم الطبي والمناهج والتدريب والتخصصات الأخرى التي تتكامل مع تخصص طب الأسرة .

## ١٠- الإشراف علي تدريس المقررات وطرق التدريس:

يقوم أعضاء هيئة تدريس من أساتذة أو أستاذة مساعدون من قسم طب الأسرة بكلية الطب بجامعة قناة السويس والمختارون للإشراف الأكاديمي للبرنامج طبقا للمعايير القومية بتدريس المقررات الدراسية المعتمدة للبرنامج .وتعتمد طرق التدريس أساسا على تسهيل عملية التعلم للطلاب واستخدام تقنيه المعلومات المتاحة علي الشبكة العنكبوتية للتواصل بين الطالب واعضاء هيئه التدريس المشاركون بالبرنامج. وكذا يتم استخدام اسلوب حل المشاكلواعطاء مهام تعليميه وتكامل العلوم السلوكية والإكلينيكية والوقائية ودراسة الحالات و الطب المبني على البراهين العلمية والتفكير الناقد والتعلم الذاتي والمشاركه بفعاليه كاستراتيجيه اساسيه فى العمليه التعليميه.

## ١١- التدريب الإكلينيكي :

يتم التدريب الإكلينيكي من خلال مدرب إكلينيكي معتمد وفي مراكز ووحدات طب أسرة و وحدات رعاية صحية أولية يعتمدها المجلس الأكاديمي للبرنامج. ويجب ان يقضى مايعادل ١٥٠ ساعة اضافيه (٥٠ساعة / فصل دراسي) من التدريب الأكينيكي فى مراكز طب الأسرة التابعة لقسم طب الأسرة بجامعة قناة السويس وتحت اشراف اعضاء القسم بالاضافه للفترة التدريبية التي يقضيها فى مركزه التدريبي. ينبغي ان يعد الطالب ملف الأنجاز(البورتفوليو) ويتم تقييمه واعطاء التغذية المرتجعه من خلال المشرف الأكاديمي للطالب لكل فصل دراسي .

## ١٢- المشروع البحثي للماجستير:

يقوم كل طالب من الطلاب باختيار وإجراء مشروع بحثي مصغر يعتمده المجلس الأكاديمي للبرنامج. ويكون ذلك تحت إشراف أعضاء هيئة التدريس. ويجوز أن تكون تلك المشاريع في صورة دراسة مرجعية أو بحثية ولا تخصص درجات للمشروع البحثي.

## ١٣- نظام التقويم:

### أولا : التقويم المستمر أثناء الدراسة :

يتم تقويم كل طالب في كل مقرر خلال كل فصل دراسي من خلال الأنشطة الدراسية وأعمال السنة وتقدر بنسبة ٦٠% من الدرجة الكلية للمقرر مشتمله على المهام التعليمية ودراسة الحالات والتقارير والمناقشات أو أى وسائل أخرى لتقييم مستوى الطالب ويجب على الطالب ان ينجز نسبة ٧٥% من المهام التعليمية الخاصة بالمقرر بنسبة ٧٥% كحد ادنى مع اتمام كل الساعات التدريبية المطلوبة لكي يكون ناجحا فى أعمال السنة لاي مقرر دراسي.

## ثانياً التقويم النهائي فى نهاية كل فصل دراسى

يعقد امتحان فى نهاية كل فصل دراسى من الفصول الثلاثة الأولى وتخصص له نسبة ٤٠ % من الدرجة الكلية للمقرر ويجب على الطالب ان يحصل على نسبة ٥٠ % فى الأختبار التحريرى و ٦٠ % من مجموع بنود التقويم للفصل الدراسى كحد أدنى لى يكون ناجحاً. فى حالة عدم اجتياز الطالب الأمتحان يقوم بإعادة الأمتحان ويكون اقصى تقدير يحصل عليه الطالب ٦٠ % من الدرجة المخصصة لهذا الفصل الدراسى.

## ثالثاً : التقويم النهائي

يعقد أختبار تحريرى شامل فى نهاية البرنامج ( نهاية الفصل الدراسى الرابع ) فى كل المواد التى تم دراستها وكذلك يعقد أختبار عملى أكلينيكى ويخصص للتقويم النهائى ٢٥ % من اجمال الدرجة المخصصة للبرنامج ويجب على الطالب أن يحصل على نسبة ٥٠ % فى الأختبار التحريرى و ٦٠ % فى جميع بنود التقويم النهائى بحد أدنى لى يكون ناجحاً. فى حالة عدم اجتياز الطالب الأمتحان يقوم بإعادة الأمتحان ويكون اقصى تقدير يحصل عليه الطالب ٦٠ % من الدرجة المخصصة للتقويم النهائى. تطلق فرص التقدم الفعلى للأمتحانات لىين انتهاء المدة القانونية المحددة للأستمرار فى القيد لدرجة الماجستير. يحتسب التقدير النهائى للدرجة الممنوحة على أساس تراكمى لدرجات المقررات المعتمدة للبرنامج .

## ١٤ - تقديرات النجاح والرسوب :

تحتسب تقديرات النجاح والرسوب فى أمتحانات الماجستير على الوجه التالى

التقدير	النسبة المئوية	التقدير بالحروف
ممتاز	٨٥ % فأكثر	A
جيد جداً	من ٧٥ % الى أقل من ٨٥ %	B
جيد	من ٦٥ % الى أقل من ٧٥ %	C
مقبول	من ٦٠ % الى أقل من ٦٥ %	D
راسب	أقل من ٦٠ %	F

## ١٥ - التحويل من وإلى البرنامج:

يجوز للطالب التحويل من وإلى البرامج محل هذه اللائحة من البرامج والمقررات التي يعتمدها المجلس الأكاديمي للبرنامج والتي تطرحها كليات أو مؤسسات أخرى بنفس النظام بشرط عدم نقل أكثر من ثلثي النقاط المعتمدة بعد عمل مقاصة للمواد التي تم دراستها .



مدينة الإسماعيلية  
(مدينة السحر والجمال)

## الملحقات



**ملحق (١)**  
**المقررات ببرنامج ماجستير طب الأسرة وصحة المجتمع وفقا للفصول الدراسيه والنقاط المعتمدة**

المقررات الدراسية	عدد النقاط المعتمدة	الكود
الفصل الدراسي الأول	٣	٥ FMMC10
	٣	٥ FMMC11
	٤	١٢ FMMC12
الفصل الدراسي الثاني	٤	١٢ FMMC13
	٢	٦ FMMC14
	٢	٦ FMMC15
الفصل الدراسي الثالث	٣	٩ FMMC16
	٣	٩ FMMC17
	٣	٩ FMMC18
	٣	٩ FMMC19
الفصل الدراسي الرابع	٢٠	
الأجمالي	١٢٠	



## ملحق (٢)

### نظام التقييم ببرنامج ماجستير طب الأسرة وصحة المجتمع

مجموع الدرجات	التقييم			المقرارات الدارسية	
	عملية وأكلنيكي	التحريرى	اعمال السنة		
	الدرجة	الدرجة	الدرجة		
٤٨٠	---	١٩٢	امتحان تحريرى شامل فى المواد التى تم دراستها فى الفصل الدراسى الأول	مقدمة طب الأسرة	
				الرعاية الصحية للأسرة والمجتمع	
				الرعاية الصحية للبالغين فى طب الأسرة	
٤٨٠	---	١٩٢	امتحان تحريرى شامل فى المواد التى تم دراستها فى الفصل الدراسى الثانى	الرعاية الصحية للأطفال والمراهقين فى طب الأسرة	
				رعاية الأصابات والطوارئ فى المجتمع	
				العلوم السلوكية والأخلاقيات فى طب الأسرة	
٥٤٠	---	٢١٦	امتحان تحريرى شامل فى المواد التى تم دراستها فى الفصل الدراسى الثالث	الرعاية الصحية للمرأة فى طب الأسرة	
				الرعاية الصحية للمسنين فى طب الأسرة	
				الصحة النفسية فى طب الأسرة	
				إدارة الجودة فى طب الأسرة	
٥٠٠	٤٠٠	١٠٠	امتحان تحريرى شامل فى نهاية البرنامج فى جميع المواد التى دراستها	الفصل الدراسى الرابع	
٢٠٠٠	٤٠٠	٧٠٠		٩٠٠	الأجمالى

**A. Basic Information**

1. Program Title: Master in Family Medicine and Community Health (Credit Points)
2. Program type: Single ☒ Double ☐ Multiple ☐
3. Departments: Family Medicine
4. Coordinator: Prof. Mosleh Abdulrhman Ismail
- 5- Last date of program specifications approval: The bylaws of the MSc program in Family medicine in the Faculty of Medicine, Suez Canal University were approved by the Supreme Council of Universities in 2015.
6. External evaluator(s): Prof. Samir Mohamed Wasef
7. Date of revision approval of the program: 2018
- 8- Number of credit points for this program (degree): 120 CP

**Professional Information**

**1-Programme aims:**

The aim of Master program in family medicine and community health is to graduate competent family physician able to provide primary, integrated and continuous health and medical care, which is personal, holistic and comprehensive in concepts, focus on individuals, families and communities where they live and work demonstrating the appropriate attitude of Continuous Professional Development and Evidence Based Practice. Also, adequately and appropriately demonstrate the appropriate management and leadership styles at a level of PHC facility.

**2. Intended learning outcomes (ILOs)**

**a. Knowledge and understanding:**

The learning outcomes are competences expected from the graduate at the end of the program. The first three competences are related to the primary health consultation. The remaining competences are going beyond the consulting room to other domains.

- c.1. Primary care management
- c.2. Person-centered care
- c.3. Specific problem-solving skills
- c.4. Comprehensive approach
- c.5. Community orientation
- c.6. Holistic approach

**1. Primary care management**

- a.1. Describe the diagnostic criteria of the different patient's problems presented in primary health care (acute/chronic/ serious/not serious/ undifferentiated).
- a.2. Outline the EBM Management Guidelines for the different patient's problems presented in primary health care (acute/chronic/ serious/not serious/ undifferentiated).
- a.3. Describe the principles of rational drug prescribing in Family Practice.
- a.4. Identify the basic tools of family physician (consultation, medical records, referral. effective teamwork,).

- a.5. Identify the appropriate clinical reasoning styles in consultation in Family Practice.
- a.6. Identify and recognize the current health system/reform in Egypt.
- a.7. Identify EBM preventive Guidelines required for the different age groups of the practice population
- a.8. Define the limitations and the indications of referral for patients attending Family Practice.
- a.9. Identify the process of health information and how make use quarterly and annual practice report.
- a.10. Describe the basic research knowledge required for conducting applied research in PHC.
- a.11. Outline the principles of Ethics regulating the daily practice of family physician with the practice population

## **2 – Person-centered care**

- a.12. Describe the doctor-patient relationship and communication skills with respect for the patient's autonomy.
- a.13. Describe the different models of consultation and make use the most appropriate one.
- a.14. Identify the advantages of person-centered approach in dealing with patients and their problems, in the context of patient's circumstances.
- a.15. Discuss the dimensions of continuity of care.

## **3. Specific problem-solving skills**

- a.16. Identify the correlation between specific decision-making processes to the prevalence and incidence of illness in the community.
- a.17. Describe the different clinical reasoning styles used in family practice and make use them appropriately.
- a.18. Discuss the time as diagnostic/therapeutic tool and tolerate uncertainty on solving patient problem.

## **4. A comprehensive approach**

- a.19. Realize importance of managing multiple complaints simultaneously for both acute and chronic health problems.
- a.20. Recognize importance of integrating the preventive care along the curative one on managing a patient in family practice setting
- a.21. Describe the different dimensions of preventive care (primordial, primary, secondary and tertiary care) on applying the preventive care.
- a.22. Describe the structure and function of the family
- a.23. Describe different tools to assess the family
- a.24. Describe role of the GP/FP in health promotion activities in the community.

## **5. Community orientation**

- a.25. Describe the requirements of community diagnosis and the equilibrium between the individual and community need on one side and the available resource on the other side.
- a.26. Identify and prioritize the health problems in need to be tackled through applied research.
- a.27. Describe the relation of poverty on a local community's health.
- a.28. Correlate the healthcare system and its economic limitations.

- a.29. Discuss role of intersectoral collaboration in health care.
- a.30. Outline importance of practice- and community-based information in the quality assurance of each doctor's practice.

#### **6. A holistic approach**

- a.31. Make use bio-psycho-social models, taking into account cultural and existential dimensions.
- a.32. Discuss the ideas, concerns and expectations of the patient with a given health problem

#### **b. Intellectual skills**

By the end of this course the student should be able to:-

- b.1. Demonstrate fluency in communication and clinical reasoning during consultation with patients in these different age groups.
- b.2. Recognize the educational needs and demonstrate fluency in practicing self directed learning.
- b.3. Demonstrate interest in Evidence Based Practice.
- b.4. Realize limitation and cope with uncertainty in Family Practice.
- b.5. Demonstrate understanding of the financial and legal frameworks in which health care is given.
- b.6. Demonstrate interest in practicing self directed learning.
- b.7. Recognize the need to perform self appraisal

#### **c. Professional & practical skills:**

By the end of this course the student should be able to:-

- c.1. Conduct successful consultation using appropriate consultation skills.
- c.2. Conduct counseling successfully for different age groups.
- c.3. Apply different tools of consultation efficiently.
- c.4. Apply the clinical reasoning skills appropriately.
- c.5. Apply the EB practice guidelines in manage the common health problems (acute/chronic/serious /not serious/).
- c.6. Perform the rational use of drug on prescribing to pregnant lady.
- c.7. Conduct evidence based screening activities for different age groups.
- c.8. Interpret results of all diagnostic and therapeutic medical and invasive procedures required for patients in PHC.
- c.9. Perform auditing of the provided care/conduct practice activity analysis (Annual Report in his/her training center)
- c.10. Manage the common ethical dilemma in Family Practice
- c.11. Conduct the required procedures required in the course specification.

#### **d. General and transferable skills:**

- d.1. Work effectively within a team.
- d.2. Use computers/Internet efficiently.
- d.3. Present information clearly in written, electronic and oral forms
- d.4. Apply the principles of ethics appropriately
- d.5. Communicate ideas and arguments effectively.
- d.6. Apply the principles of scientific evidence in daily practice
- d.7. Recognize and cope with uncertainty.

### 3- Academic Standards

3a- External references for standards (Benchmarks)

- The European Definition of General Practice / Family Medicine. Wonca Europe 2011 Edition. 2011.
- An Introduction to Competency-based Residency Education”: 2006 ACGME. A product of the ACGME Outcome Project, 2006.

3b -Comparison of Provision to External Reference

- Facilities Required for Teaching and Learning
  - Family Practice Centers
  - Suez Canal University hospital Outpatient Clinics.
  - Data show, Computer and Internet facility.
  - Family Medicine Me and college library.

### 4- Curriculum Structure and Contents

4. A- Programmed duration: 2 academic years

4. b - No. of hours per week: 30 contact hours

- Lectures: 5/week
- Clinical training in Family Centers/ Hospital: 25/week

### 5. Program courses:

#### 5.1- Semester (1)/First Academic Year of the Master program

A. Compulsory courses

Code No.	Course Title	No. of weeks	Credit points	Program ILOs Covered (By No.)
FMMC10	Introduction to Family Medicine	4	8	All
FMMC11	Family and Community Health Care	4	8	All
FMMC12	Adult Health Care in Family Medicine	8	16	All
Total		16	32	

#### 5.2- Semester (2)/First Academic Year of the Master program

A. Compulsory courses

Code No.	Course Title	No. of weeks	Credit points	Program ILOs Covered (By No.)
FMMC13	Children and Adolescents Health Care in Family Medicine	8	16	All
FMMC14	Emergency and Injuries Care in Family Medicine	4	8	All
FMMC15	Behavioral Sciences and Medical Ethics in Family Medicine	4	8	All
Total		16	32	

### 5.3- Semester (3)/Second Academic Year of the Master program

#### B. Elective courses

Code No.	Course Title	No. of weeks	Credit* Points	Program ILOs Covered (By No.)
FMMC16	Woman Health Care in Family Medicine	6	12	All
FMMC17	Geriatric Health Care in Family Medicine	6	12	All
FMMC18	Mental Health Care in Family Medicine	6	12	All
FMMC19	Quality Management in Family Medicine	6	12	All
Total		18 **	36*	

\*Total required credit points from elective courses = 36 credit points

\*\*Total required weeks elective courses = 18 weeks

### 5.4- Semester (4)/Second Academic Year of the Master program

#### Research activities (Essay/Thesis)

Faculty senior and junior supervisors from the staff members are nominated by the department council to prepare a proposal of the thesis protocol after the selection of a subject that is derived from the research plan of the department. The research protocol will be prepared by the candidate included all the required items as addressed in requirements of research committee of the faculty.

The agreed protocol by supervisors must be approved by staff-members attending research conference (seminar) and from the department council. The approved research protocol will be delivered to the research committee. The final approvals of the research protocol are then issued by the committee of post graduate studies, the Faculty and University Council to be registered.

N.B. Thesis represents 20 credit points not included in the total mark for master degree.

#### C- Optional courses – number required: None

### 6- Program Admission Requirements

6.1 Bachelor of Medicine from Egyptian universities /Equivalent certificate Accredited from Egyptian Supreme universities council

6.2 Training in internship has been achieved successfully

6.3 Training in primary health care for one year

### 7- 4-Teaching and Learning Methods

4.1- Interactive Lectures (webinar,...)

4.2- Portfolio Presentation/tutorial

4.3- Supervised training in FPCs/Hospital

4.4- Weekly assignment with constructive feedback

4.5- Self directed Learning (EBM case studies, library, web,...)

## 8- Regulations for Progression and Program Completion

The assessment of the Master Program is done at different levels:-

### A- Periodic assessment

The weight of score of this examination is 60% of the total score of the course. It includes active participations in the educational activities during semester (replying on the tasks/assignment, achieving the requirements of portfolio and giving constructive feedback, satisfying requirements of clinical training,..). It is pre-requisite to finish at least 75% of the related tasks with 75% performance in a given course.

### B- Assessment at the end of the semesters

The weight of score of this examination is 40% of the total score. It is a pre-requisite to achieve at least 60% of all items of examination and 50% in the written examination. The written examination includes: MEQs; MCQ and short essay to assess recall, analysis and interpretation of knowledge.

### C- Assessment at the end of the program (Final assessment)

The weight of score of this examination is 25% of the total score. The examination includes:-

- Written examination (100 Marks): It includes MEQs; MCQ and short essay to assess recall, analysis and interpretation of knowledge. It is a pre-requisite to achieve at least 60% of all items of examination and 50% in the written examination.
- Clinical examination (400 Marks): It includes consultations on real patients and OSCE station to assess clinical competences.

Courses		Evaluation			Total Marks
		Periodic Ass. (Marks)	Written Ex. (Marks)	Clinical Ex. (Marks)	Total Marks
First Semester	▪ Introduction to Family Medicine	288	192	-----	480
	▪ Family and Community Health Care				
	▪ Adult Health Care in Family Medicine				
Second Semester	▪ Children and adolescent Health care in Family Medicine	288	192	-----	480
	▪ Emergency and Injuries Care in the Community				
	▪ Behavioral sciences and Medical ethics in Family Medicine				
Third Semester	▪ Woman Health Care in Family Medicine	324	216	-----	540
	▪ Geriatric Health Care in Family Medicine				
	▪ Mental Health Care in Family Medicine				
	▪ Quality Management in Family Medicine				
Fourth Semester	Research activities	----	100	400	500
Total Marks		900	700	400	2000

**D- Approved Research study is pre-requisite**  
**9. Evaluation of program indented learning outcomes**

Evaluator	Tool	Sam ple
1- Senior students	Questionnaires	
2- Alumni	Questionnaires	
3- Stakeholders (Employers)	Interviews	
4-External Evaluator(s) (External Examiner(s))	Attending exam. (using checklist and/or rating scale)	
5- Other		



مدينة الإسماعيلية  
(مدينة السحر والجمال)



**ملحق (٤)**  
**توصيف المقررات الإجبارية ببرنامج ماجستير طب الأسرة وصحة المجتمع**  
**١ - مقرر مقدمة في طب الأسرة**

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**A- Basic Information**

1. Program(s) in which the course is given: Master of Family Medicine and Community Health
2. Major or Minor element of course: Major
3. Department offering the programs: Family Medicine Department
4. Department offering the course: Family Medicine Department
5. Academic year / Level: Post Graduate Studies (1<sup>st</sup> semester- MSc)
6. Date of specification approval: the bylaws of the master program in Family Medicine in the Faculty of Medicine, Suez Canal University were approved by the Supreme Council of Universities in 2015.
7. Date of specification revision approval : 2018
8. Title: Introduction to Family Medicine
9. Code: FMMC10
10. Credit points: 8 points
  - Interactive Lecture/Portfolio presentations: 20 Hrs
  - Family Practice/ Training/Self Directed education: 180 Hrs
  - Total: 200 Hrs

**B- Professional Information**

**1 – Overall Aims of Course**

At the end of the course of introduction to Family Medicine and Community Health, student/trainee should be able demonstrate fluency in essential competence to provide primary, integrated and continuous health and medical care to customers, families and communities where they live and work. Also, the student/trainee should be family oriented and evidence-based oriented in providing such high quality care in different domains (preventive, curative, rehabilitative and palliative). The student/trainee should be acquainted with the management and leadership skills in leading the team effectively.

**2 – Intended Learning Outcomes of Course (ILOs)**

**a.1. Knowledge and Understanding:**

By the end of this course the trainee should be to:-

- a.1. Recognize the principle of family medicine and its relation to PHC
- a.2. Identify and recognize role of family medicine in the reformed health system
- a.3. Identify the basic tools of Family physician (consultation, medical records, referral. effective teamwork,)
- a.4. Describe the role of Family physician in health and disease
- a.5. Identify the peculiarity of Family Practice settings comparable with hospital setting
- a.6. Recognize the process of health information and how make use quarterly and annual practice report.

- a.7. Describe the different models of consultation
- a.8. Describe the doctor-patient relationship and communication skills
- a.9. Identify appropriate models of behavioral modification to be offered to such population.
- a.10. Describe the principles of nutritional counseling for different age groups in health and disease
- a.11. Identify basic information for counseling in Family medicine
- a.12. Determine the basic knowledge for leading a team effectively
- a.13. Define the limitations and the indications of referral for patients attending Family Practice.
- a.14. Identify the appropriate clinical reasoning styles in consultation in Family Practice
- a.15. Describe Evidence-Based screening activities

**a.2. Intellectual Skills**

- b.1. Demonstrate fluency in communication and clinical reasoning during consultation with patients in these different age groups.
- b.2. Recognize the educational needs and demonstrate fluency in practicing self directed learning.
- b.3. Demonstrate interest in Evidence Based Practice.
- b.4. Recognize limitation and cope with uncertainty in FP.

**c- Professional and Practical Skills**

By the end of this course the student should be able to:-

- c.1. Conduct successful consultation using appropriate consultation skills.
- c.2. Conduct family assessment appropriately
- c.3. Make use the appropriate clinical reasoning styles appropriately in daily practice
- c.4. Counsel successfully for different age groups in Family Practice for important issues including nutritional counseling.
- c.5. Use referral system efficiently
- c.6. Make use of medical records efficiently.
- c.7. Conduct evidence based screening activities.
- c.8. Conduct practice activity analysis (Annual Report in his/her training center)

**d- General and Transferable Skills**

- d.1. Present information clearly in written, electronic and oral forms.
- d.2. Manage time and resources and set priorities.
- d.3. Work effectively within a team.
- d.4. Motivate team members towards more outstanding performance
- d.5. Communicate effectively with individuals regardless of their social, cultural or ethnic backgrounds, or their disabilities.
- d.6. Use computers/Internet efficiently.

### 3- Contents

Topics	Total No. of hours (200 Hrs)	Interactive Lectures/ Portfolio presentations (20 Hrs)	Family Practice Training / Self Directed Education (180 Hrs)
<ul style="list-style-type: none"> <li>Principles of family Medicine</li> <li>Job description of FP</li> <li>Characteristics of reformed health system</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Family functions</li> <li>Impact of the family on disease</li> <li>Impact of the disease on the family</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Clinical Reasoning in Family Practice</li> <li>Communication skills&amp; Doctor-Pt relationship</li> <li>Consultation models</li> <li>Counseling in FP</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Referral system</li> <li>EBM preventive care in Family Medicine</li> <li>Medical records /Health Information system</li> <li>Effective team work</li> <li>Introduction to EBM</li> </ul>	50	5	45

### 4-Teaching and Learning Methods

- 4.1- Interactive Lectures (webinar,...)
- 4.2- Portfolio Presentation/tutorial
- 4.3- learning through observation (One to one teaching) in FPCs/Hospital
- 4.4- Role play
- 4.5- Self directed Learning (EBM case studies, library, web, journal club..)

### 5- Student Assessment Methods

- 5.1 Written exams: MEQs; MCQ and short essay to assess recall, analysis & interpretation of knowledge
- 5.2 Portfolio assessment

#### Schedule of Assessments

- Assessment at the end of the course:
  - Portfolio is a prerequisite to set for end of the course Examination
- Assessment at the end of Master program
  - Satisfactory performance is a prerequisite to set for final Examination of the program.

## **6- List of References**

### **6.1- - Essential Books (Text Books)**

- Practice Guidelines for Family Physicians (MOHP).
- Oxford Text book of Primary medical care
- Oxford Text book of General practice
- General Practice. John Murtagh
- Essential of Family Medicine. Sloane PD, Slatt LM, Curtis P
- Blueprint in Family Medicine. Lipsky MS, king MS

### **6.4- Periodicals, Web Sites, etc**

- British Medical Journal
- American Journal of Family Physician
- CDC Center for Disease Control and Prevention

## **7- Facilities Required for Teaching and Learning**

- Family Practice Centers,
- Internal Medicine/Psychiatry/ Dermatology outpatient clinics
- Data show & Computer/ Internet
- FM and college library.

#### ملحق (٤)

### توصيف المقررات الإجبارية ببرنامج ماجستير طب الأسرة وصحة المجتمع ٢- مقرر الرعاية الصحية للأسرة والمجتمع

#### A. Basic Information

1. Program(s) in which the course is given: Master of Family Medicine and Community Health
2. Major or Minor element of course: Major
3. Department offering the programs: Family Medicine Department
4. Department offering the course: Family Medicine Department
5. Academic year / Level: Post Graduate Studies (1<sup>st</sup> semester- MSc)
6. Date of specification approval: the bylaws of the master program in Family Medicine in the Faculty of Medicine, Suez Canal University were approved by the Supreme Council of Universities in 2015.
7. Date of specification revision approval : 2018
8. Title: Family and Community Health Care
9. Code: FMMC11
10. Credit points: 8 points
  - Interactive Lecture/Portfolio presentations: 20 Hrs
  - Family Practice/ Training/Self Directed education: 180 Hrs
  - Total: 200 Hrs

#### B- Professional Information

##### 1 – Overall Aims of Course

At the end of the course of Family Medicine and Community Medicine, student/trainee should be able demonstrate fluency in essential competence to provide primary, integrated and continuous health and medical care to customers, families and communities where they live and work. Also, the student/trainee should be family oriented and evidence-based oriented in providing such high quality care in different domains (preventive, curative, rehabilitative and palliative). The student/trainee should be acquainted with the management and leadership skills in leading the team effectively.

##### 2 – Intended Learning Outcomes of Course (ILOs)

###### a- Knowledge and Understanding:

By the end of this course the trainee should be to:-

- a.1. Describe principles and components of PHC and its relation to Family Medicine
- a.2. Describe role of PHC team-members in the process of patient care
- a.3. Outline steps of managing team conflict in Family Practice
- a.4. Describe the principles of Quality and auditing in Family practice.
- a.5. Identify the requirements of community diagnosis
- a.6. Discuss principles of epidemiology of the community health problems
- a.7. Describe the concepts of health and illness.
- a.8. Describe the burden of illness at the different levels(individual, family, community)
- a.9. Describe steps of investigating an outbreak
- a.10. Outline causes of environmental health problems
- a.11. Outline causes of occupational health problems

- a.12. Describe different types of research studies
- a.13. Outline the statistical package used in data management in a given research study
- a.14. Outline the different statistical tests used in data management of a research study
- a.15. Describe methods/forms of data presentation

**b- Intellectual Skills**

- b.1. Demonstrate interest in applying principles of epidemiology in daily practice
- b.2. Demonstrate interest in using the appropriate statistical analysis in applied research
- b.3. Realize the change of the pattern of morbidity as a result of epidemiological transition
- b.4. Realize importance of environmental/occupational health
- b.5. Recognize the educational needs and demonstrate fluency in practicing self directed learning.
- b.6. Demonstrate interest in Evidence Based Practice.
- b.7. Recognize limitation and cope with uncertainty in Family Practice.

**c- Professional and Practical Skills**

By the end of this course the student should be able to:-

- c.1. Perform auditing of the provided care.
- c.2. Conduct community diagnosis
- c.3. Conduct a research study applying the basics of research methodology
- c.4. Apply principles of epidemiology in the daily activities- Family Practice
- c.5. Make use of statistical soft package in data management of a given research
- c.6. Apply the appropriate statistical tests on statistical analysis of a given research study
- c.7. Manage a team conflict at the level of the practice
- c.8. Apply the evidence based steps in the daily practice
- c.9. Critically appraise a research studies (therapy/diagnosis/..)

**d- General and Transferable Skills**

- d.1. Present information clearly in written, electronic and oral forms.
- d.2. Manage time and resources and set priorities.
- d.3. Work effectively within a team.
- d.4. Manage team conflict appropriately
- d.5. Communicate effectively with individuals regardless of their social, cultural or ethnic backgrounds, or their disabilities.
- d.6. Use computers/Internet efficiently.

### 3- Contents

Topic	Total No. of hours (200 Hrs)	Interactive Lectures/ Portfolio presentations (20 Hrs)	Family Practice/Hospital Training /Self Directed Education (180 Hrs)
<ul style="list-style-type: none"> <li>Community diagnosis/Prioritization of community health problems</li> <li>Principles of epidemiology of community health problems</li> <li>Disease determinants/Investigating an outbreak</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Steps of practice of EBM in Family Practice</li> <li>Asking answerable clinical question</li> <li>Searching for answering a question(Hierarchy of evidence)t</li> <li>Critical Appraisal of research paper (therapy/diagnosis,..)</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Different types of research studies</li> <li>Make use of soft statistical package in data entry</li> <li>Descriptive/Analytic statistics</li> <li>Make use of soft statistical package in data management</li> <li>Presentation of data in appropriate form</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Introduction to Quality /Auditing in Family Practice</li> <li>Approach to managing a team conflict</li> <li>Causes of Environmental/ Occupational Health Problems</li> </ul>	50	5	45

### 4-Teaching and Learning Methods

- 4.1- Interactive Lectures (webinar,...)
- 4.2- Portfolio Presentation/tutorial
- 4.3- learning through observation (One to one teaching) in FPCs/Hospital
- 4.4- Role play
- 4.5- Self directed Learning (EBM case studies, library, web, journal club..)

## **5- Student Assessment Methods**

5.1 Written exams: MEQs; MCQ and short essay to assess recall, analysis & interpretation of knowledge

5.2 Portfolio assessment

### **Schedule of Assessments**

- Assessment at the end of the course:  
Portfolio is a prerequisite to set for end of the course Examination
- Assessment at the end of Master program  
Satisfactory performance is a prerequisite to set for final examination of program.

## **6- List of References**

6.1- Essential Books (Text Books)

- Practice Guidelines for Family Physicians.(MOHP-Egypt)
- Text book of Primary medical care
- Oxford Text book of General practice
- General Practice. John Murtagh
- Essential of Family Medicine. Sloane PD, Slatt LM, Curtis P
- Blueprint in Family Medicine. Lipsky MS, king MS

6.2- Periodicals, Web Sites, etc

- British Medical Journal
- American Journal of Family Physician
- CDC Center for Disease Control and Prevention

## **7- Facilities Required for Teaching and Learning**

- Family Practice Centers,
- Internal Medicine/Psychiatry/ Dermatology outpatient clinics
- Data show & Computer/ Internet
- FM and college library.



#### ملحق (٤)

توصيف المقررات الإجبارية ببرنامج ماجستير طب الأسرة وصحة المجتمع  
٣- مقرر الرعاية الصحية للبالغين في طب الأسرة

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#### A- Basic Information

1. Program(s) in which the course is given: Master of Family Medicine and Community Health
2. Major or Minor element of course: Major
3. Department offering the programs: Family Medicine Department
4. Department offering the course: Family Medicine Department
5. Academic year / Level: Post Graduate Studies (1<sup>st</sup> semester- MSc)
6. Date of specification approval: the bylaws of the master program in Family Medicine in the Faculty of Medicine, Suez Canal University were approved by the Supreme Council of Universities in 2015.
7. Date of specification revision approval : 2018
8. Title: Adult Health Care in Family Medicine
9. Code: FMMC12
10. Credit points: 16 points
  - Interactive Lecture/Portfolio presentations: 40 Hrs
  - Family Practice/ Training/Self Directed education: 360 Hrs
  - Total: 400 Hrs

#### B- Professional Information

##### 1- Overall Aims of Course

At the end of the course of adult health care, student/trainee should be able to demonstrate the essential competence to provide primary, integrated and continuous health and medical care to adult individuals. Also, the student/trainee should be evidence-based oriented in providing such high quality care in different domains (preventive, curative, rehabilitative and palliative).

##### 2- Intended Learning Outcomes of Course (ILOs)

###### a - Knowledge and Understanding:

By the end of this course the trainee should be to:-

- a.1. Describe diagnostic criteria of common and important health problems among adult population.
- a.2. Identify the burden of illness at the level of individual, family and community.
- a.3. Identify the ideas, concern and expectations of the patients with chronic illness.
- a.4. Recognize the different models of breaking a bad news competently.
- a.5. Describe diagnostic criteria of common and important health problems among adult patients.
- a.6. Determine the basic investigations for diagnosis of the common health problems in this age group.
- a.7. Describe management principles of common and important health problems among adult patients.
- a.8. Describe role of EBM-CAM in management of common and important problems.
- a.9. Describe basics of normal and abnormal ECG.
- a.10. Describe basics of normal and abnormal x-ray.

- a.11. Describe basics of normal and abnormal pulmonary function and other laboratory tests.
- a.12. Identify the models of care for patients with chronic illness.
- a.13. Define the limitations and the indications of referral for adult patients attending Family Practice.
- a.14. Define role of family physician in disabled and handicapped patients.
- a.15. Identify appropriate models of behavioral modification to be offered to such population.
- a.16. Recognize Evidence-Based screening activities to such age group.
- a.17. Recognize the principles of auditing of the provided care to such age group.

**b- Intellectual Skills**

- b.1. Demonstrate fluency in clinical reasoning during consultation with patients in this age group.
- b.2. Apply evidence based medicine in daily clinical practice appropriately.

**c- Professional and Practical Skills**

By the end of this course the student should be able to:-

- c.1. Demonstrate proper conduct of interview with adults using appropriate consultation model and communication skills to gather information effectively from adults regarding the presenting problem.
- c.2. Counsel effectively regarding issues related to this age group.
- c.3. Utilize medical records efficiently.
- c.4. Perform Ex. Of vital signs and physical examination of chest, heart, abdomen, central nervous system, musculoskeletal system, skin and other parts of the body, and distinguish between normal and abnormal findings.
- c.5. Manage the common health problems among adult population using Evidence- based guidelines.
- c.6. Implement EBM –CAM as a treatment modality for common and important health problems
- c.7. Interpret E.C.G.
- c.8. Interpret all diagnostic and laboratory tests.
- c.9. Interpret the findings of X-Rays.
- c.10. Conduct evidence based screening activities for adults.
- c.11. Perform auditing of the provided care for such age group.
- c.12. Conduct appropriate procedures/interventions to aid in management of common/important conditions in adult presenting to Family Practice.
- c.13. Conduct appropriate diagnostic /laboratory test to aid in diagnosis of common/important conditions in adult presenting to Family Practice.
- c.14. Conduct appropriate health education regarding of common health problems among adults.

**d- General and Transferable Skills**

- d.1. Present information clearly in written, electronic and oral forms.
- d.2. Manage time and resources and set priorities.
- d.3. Apply the principles of scientific research and use simple statistical methods.
- d.4. Work effectively within a team.
- d.5. Use computers/Internet efficiently.

### 3- Contents

Topics	Total No. of hours-400Hrs	Interactive Lectures/ Portfolio presentations (40 Hrs)	Family Practice/Hospital Training / Self Directed Education (360 Hrs)
<ul style="list-style-type: none"> <li>Evidence-based health maintenance protocols</li> <li>Screening of common cancers in Family Practice</li> <li>Nutrition principles and counseling in chronic diseases</li> <li>Life style modifications and change of behavior (working model-Smoking/Obesity).</li> <li>Auditing of chronic illness programs in Family Practice</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to Pt with chronic illnesses</li> <li>Approach to Pt with Diabetes M</li> <li>Approach to Pt with B. Asthma</li> <li>Approach to Pt with Chronic Bronchitis/Emphysema</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to Pt with Hypertension.</li> <li>Approach to Pt with Dyslipdemia</li> <li>Approach to Pt with Ischemic Heart D</li> <li>Approach to Pt with Dyrrhythmia/ECG Interpretation</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to Pt with Dyspepsia</li> <li>Approach to Pt with IBS</li> <li>Approach to Pt with Hepatitis</li> <li>Approach to Pt with Parasitic Infestation</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to Pt with Back pain</li> <li>Approach to Pt with Joint pains</li> <li>Approach to Pt with Headache/Neck pain</li> <li>Approach to Pt with Heel pain</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to Pt with Anemia</li> <li>Approach to Pt with Thyroid Diseases-Hyperthyroidism</li> <li>Approach to Pt with Thyroid Diseases-Hypothyroidism</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to Pt with Fever of unknown origin</li> <li>Approach to Pt with TB</li> <li>Approach to Pt with Connective tissue diseases</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to pt with Skin infection (Bacterial/Viral/Fungus /..)</li> <li>Approach to pt with Allergic skin diseases</li> <li>Approach to pt with Acne Vulgaris</li> <li>Approach to pt with Eczema/Psoriasis.</li> <li>Approach to pt with Vitiligo</li> <li>Approach to pt with Nappy rash</li> <li>Skin manifestation in systemic diseases</li> </ul>	50	5	45

#### **4-Teaching and Learning Methods**

- 4.1- Interactive Lectures (webinar,...)
- 4.2- Portfolio Presentation/tutorial
- 4.3- learning through observation (One to one teaching) in FPCs/Hospital
- 4.4- Role play
- 4.5- Self directed Learning (EBM case studies, library, web, journal club..)

#### **5- Student Assessment Methods**

- 5.1 Written exams: MEQs; MCQ and short essay to assess recall, analysis & interpretation of knowledge
- 5.2 Portfolio assessment

##### **Schedule of Assessments**

- Assessment at the end of the course:
  - Portfolio is a prerequisite to set for end of the course Examination
- Assessment at the end of Master program
  - Satisfactory performance is a prerequisite to set for final examination of the program.

#### **6- List of References**

- 6.1- Essential Books (Text Books)
  - Practice Guidelines for Family Physicians(MOHP)
  - Oxford Text book of Primary medical care
  - Oxford Text book of General practice
  - General Practice. John Murtagh
  - Essential of Family Medicine. Sloane PD, Slatt LM, Curtis P
  - Blueprint in Family Medicine. Lipsky MS, king MS
- 6.2- Periodicals, Web Sites, etc
  - British Medical Journal
  - American Journal of Family Physician

#### **7- Facilities Required for Teaching and Learning**

- Family Practice Centers
- Internal Medicine/Psychiatry/ Dermatology outpatient clinics
- Data show & Computer/ Internet
- Library of FM department/Faculty

## ملحق (٤)

توصيف المقررات الإجبارية ببرنامج ماجستير طب الأسرة وصحة المجتمع  
٤- مقرر الرعاية الصحية للأطفال والمراهقين في طب الأسرة

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### A. Basic Information:

1. Program(s) in which the course is given: Master of Family Medicine and Community Health
2. Major or Minor element of course: Major
3. Department offering the programs: Family Medicine Department
4. Department offering the course: Family Medicine Department
5. Academic year / Level: Post Graduate Studies (2<sup>nd</sup> semester- MSc)
6. Date of specification approval: the bylaws of the master program in Family Medicine in the Faculty of Medicine, Suez Canal University were approved by the Supreme Council of Universities in 2015.
7. Date of specification revision approval : 2018
8. Title: Children and adolescents Health Care in Family Medicine
9. Code: FMMC13
10. Credit points: 16 points
  - Interactive Lecture/Portfolio presentations: 40 Hrs
  - Family Practice/ Training/Self Directed education: 360 Hrs
  - Total: 400 Hrs

### B- Professional Information

#### 1 – Overall Aims of Course

At the end of the course of children and adolescent health care, student/trainee should be able demonstrate fluency in providing primary, integrated and continuous health and medical care to children. Also, the student/trainee should be evidence-based oriented in providing such high quality care in different domains (preventive, curative, rehabilitative and palliative) to such pediatric practice population. The student/trainee should be able to improve the child health care continuously.

#### 2 – Intended Learning Outcomes of Course (ILOs)

##### a- Knowledge and Understanding:

By the end of this course the student should be able to:

- a.1. Define different indicators of Child Health including the following:-
  - Under-five child mortality, with the proportion of newborn deaths
  - Children under five who are stunted
  - Exclusive breastfeeding for six months (0–5 months)
  - Three doses of combined diphtheria-tetanus- pertussis (DTP3) immunization coverage (12–23 months)
- a.2. Compare the current national child health indicators versus international ones
- a.3. Describe factors affecting child in health and disease

- a.4. Interpret findings related to assessment of physical, intellectual, emotional and social development of children at different age groups
- a.5. Describe diagnostic criteria of common and important child health problems.
- a.6. Describe management principles of common and important child health problems.
- a.7. Describe role of EBM-CAM in management of common and important child health problems
- a.8. List modifiable infectious diseases among children at a national level.
- a.9. Explain preventive and control measures for common infectious diseases in children.
- a.10. Describe basic preventive measures in children eg. Injuries, Breastfeeding, Healthy diet and exercise for children and adolescents, Social and emotional wellbeing, vaccination, smoking counseling, avoiding of drug abuse and alcohol according to international protocols
- a.11. Describe components of national compulsory vaccination program including (vaccines, doses, sites, contraindications, side effects and management of defaulters)
- a.12. Recognize the role of family physician and primary health care team in identifying and utilizing community agencies for child care particularly children with special needs
- a.13. Recognize the role of family physician in early detection and prevention of child abuse \ child labor.

#### **b- Intellectual**

- b.1. Utilize appropriate clinical reasoning principles during consultation with children\ adolescents and their parents.
- b.2. Apply evidence based medicine in daily clinical practice appropriately.

#### **c- Practical and professional Skills**

- c.1. Conduct an interview with parent(s) and their children or adolescents using appropriate consultation model
- c.2. Utilize child health records efficiently to monitor child growth, development, immunization and feeding.
- c.3. Apply problem-based approach to common presentations in children/adolescents (Vomiting, diarrhea, cough, ear pain, fever, sore throat, pallor, developmental delay, infantile colic, abdominal pain, 'failure to thrive' and growth disorders, and symptoms of behavioral disorders)
- c.4. Use communication skills to gather information effectively from mothers and child/adolescent regarding the presenting problems.
- c.5. Conduct proper clinical examinations to aid in diagnosis of common/important conditions in children/adolescents presenting to Family Practice
- c.6. Perform required investigations incrementally to aid in diagnosis of common/important conditions in children/adolescents presenting to Family Practice

- c.7. Interpret different investigations results in children/adolescents presenting to Family Practice
- c.8. Prescribe appropriately for common and important pediatric conditions emphasizing on rational prescribing
- c.9. Conduct appropriate procedures/interventions to aid in management of common/important conditions in children/adolescents presenting to Family Practice
- c.10. Conduct appropriate health education regarding common child/adolescent health problems.
- c.11. Provide appropriate follow up care for child/adolescent.
- c.12. Counsel effectively regarding child/ adolescent issues.
- c.13. Coordinate care through proper referral to pediatricians and other appropriate specialists, leading to effective and appropriate care provision, taking an advocacy position for the patient or family when needed.
- c.14. Conduct periodic health maintenance activities for children and adolescents utilizing basic clinical skills.
- c.15. Perform the appropriate services to children with learning disabilities and handicapped children.
- c.16. Apply clinical assessment -in a timely manner- to children and adolescents with emergency conditions
- c.17. Implement evidence based treatment in health problems among children/ adolescents.
- c.18. Implement EBM –CAM as a treatment modality for health problems among children/ adolescents.
- c.19. Perform auditing of primary health care activities related to children/adolescents

**d- General and Transferable Skills**

- d.1. Present information clearly in written, electronic and oral forms
- d.2. Work effectively within a team.
- d.3. Recognize self educational needs and practice self directed learning.
- d.4. Demonstrate interest in Evidence Based in daily practice.
- d.5. Recognize and cope with uncertainty.

### 3- Contents

Topics	Total No. of hours (400 Hrs)	Interactive Lectures/ Portfolio presentations (40 Hrs)	Family Practice /Hospitals Training /Self Directed Education (360 Hrs)
<ul style="list-style-type: none"> <li>Child health status in Egypt- Comparing of MDGs goals, targets and indicators to current situation.</li> <li>Evidenced-based health maintenance protocol for children and adolescents in different stages of life</li> <li>Vaccination Program-up to date/Injury prevention</li> <li>Neonatal assessment</li> <li>Child health care program/auditing of child health program</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Assessment of growth and development of child in different stages of life.(developmental mile stones)</li> <li>Tools to assess growth and development of children</li> <li>Assessment of achieving puberty for both male and female adolescents</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Effective breast feeding process</li> <li>Feeding difficulties and problems (assessment/management)</li> <li>Nutritional problems among children/adolescents (eg. obesity,...)</li> <li>Nutritional counseling of lady for Breast feeding</li> <li>Nutritional assessment in children /adolescents</li> <li>Nutritional counseling of children and adolescents</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>IMCI program (aim, objectives, and components)</li> <li>Approach to a child with Cough / Difficult Breathing</li> <li>Approach to a child with Throat problem</li> <li>Approach to a child with Ear pain/discharge</li> <li>Approach to a child with diarrhea</li> <li>Common notifiable (infectious) diseases in children</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Common dermatological problems in Children (acute /chronic)</li> <li>Approach to a child with Fever and Rash</li> <li>Oral manifestations of childhood illnesses</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to child/adolescent with chronic illness</li> <li>Approach to child/adolescent with DM</li> <li>Approach to child with bronchial asthma</li> <li>Approach to a child with special needs</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to child /adolescent with emergencies</li> <li>Approach to child with Convulsions</li> <li>Cardiopulmonary resuscitation in children</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Emotional /Behavioral Disorder among children (An over view)</li> <li>Approach to a child with Recurrent Abdominal Pain</li> <li>Approach to a child with Enuresis</li> <li>Approach to a child with Failure to thrive due to non-organic causes/Food Refusal</li> </ul>	50	5	45



#### **4-Teaching and Learning Methods**

- 4.1- Interactive Lectures (webinar,...)
- 4.2- Portfolio Presentation/tutorial
- 4.3- learning through observation (One to one teaching) in FPCs/Hospital
- 4.4- Role play
- 4.5- Self directed Learning (EBM case studies, library, web, journal club..)

#### **5- Student Assessment Methods**

- 5.1 Written exams: MEQs; MCQ and short essay to assess recall, analysis & interpretation of knowledge
- 5.2 Portfolio assessment

#### **Schedule of Assessments**

- Assessment at the end of the course:  
Portfolio is a prerequisite to set for end of the course Examination
- Assessment at the end of Master program  
Satisfactory performance is a prerequisite to set for final examination of the program.

#### **6- List of References**

- 6.1- Essential Books (Text Books)
  - Taylor
  - First Aid
  - Swanson FM
  - Pretest Pediatric
  - Oxford textbook of primary medical care
- 6.2- Periodicals, Web Sites, etc
  - World health organization (WHO)
  - British Medical Journal
  - American Journal of Family Physician
  - CDC Center for Disease Control and Prevention

#### **7- Facilities Required for Teaching and Learning**

- Family Practice Centers,
- Internal Medicine/Psychiatry/ Dermatology outpatient clinics
- Data show & Computer/ Internet
- FM and college library.

#### ملحق (٤)

توصيف المقررات الإجبارية ببرنامج ماجستير طب الأسرة وصحة المجتمع  
٥- مقرر رعاية الأصابات والطوارئ في المجتمع

#### A. Basic Information

1. Program(s) in which the course is given: Master of Family Medicine and Community Health
2. Major or Minor element of course: Major
3. Department offering the programs: Family Medicine Department
4. Department offering the course: Family Medicine Department
5. Academic year / Level: Post Graduate Studies (2<sup>nd</sup> semester- MSc)
6. Date of specification approval: the bylaws of the master program in Family Medicine in the Faculty of Medicine, Suez Canal University were approved by the Supreme Council of Universities in 2015.
7. Date of specification revision approval : 2018
8. Title: Emergency and Injuries Care in the community
9. Code: FMMC15
10. Credit points: 8 points
  - Interactive Lecture/Portfolio presentations: 20 Hrs
  - Family Practice/ Training/Self Directed education: 180 Hrs
  - Total: 200 Hrs

#### B- Professional information

##### 1- Aims of the course:

At the end of the course, the trainee will be able to provide quality care for individuals, families and community in common surgical and emergency problems. He/she also will be able to integrate update evidence-base medicine in his/her practice for management of common medical and surgical emergencies.

##### 2- Intended learning outcomes (ILOs)

###### a. Knowledge and Understanding

By the end of this course the trainee should be to:-

- a.1. Describe a preoperative assessment including; recognizing the appropriate surgical candidates, surgical risk assessment, comorbid diseases, antibiotic prophylaxis and patient preparation.
- a.2. Describe a routine postoperative care and its complications.
- a.3. Recognize the role of family physician and primary health care team in management of common / important medical and surgical emergencies (eg. ENT and ophthalmic problems,...) in Family Practice.
- a.4. Identify any red flags necessitating immediate referral to emergency department
- a.5. Explain the rationale of recommended tests and procedures needed for diagnosis of the common / important medical and surgical emergencies (eg. ENT and ophthalmic problems,...) in Family Practice.
- a.6. Interpret findings related to comprehensive assessment of common / important medical and surgical emergencies (eg. ENT and ophthalmic problems,...) in Family Practice.
- a.7. Discuss the differential diagnosis of the common / important medical and surgical emergencies (eg. ENT and ophthalmic problems,...) in Family Practice.

- a.8. Describe the diagnostic criteria of common / important medical and surgical emergencies (eg. ENT and ophthalmic problems,...) in Family Practice.
- a.9. Explain the update evidence-base management modalities of common / important medical and surgical emergencies (eg. ENT and ophthalmic problems,...) in Family Practice.
- a.10. Identify appropriate antidotes of poisonous or toxic substances.

#### **b. Intellectual Skills**

By the end of this course the student/trainee should be able to:-

- b.1. Utilize appropriate clinical reasoning principles during consultation with patients regarding common / important medical and surgical emergencies (eg. ENT and ophthalmic problems,...) in Family Practice.
- b.2. Recognize his or her practice limitations and seek consultation with other health care providers when necessary to provide optimal care.
- b.3. Apply evidence based medicine in daily clinical practice appropriately.

#### **c. Professional and Practical Skills**

By the end of this course the student/trainee should be able to:-

- c.1. Perform preoperative assessment in family practice (Surgical risk evaluation, physical assessment, radiographic assessment, noninvasive diagnostic procedures and Invasive diagnostic procedures).
- c.2. Conduct postoperative care (suture removal, dressing changes, and drain removal)
- c.3. Conduct successful consultation with the patient, patient's family and caregivers in surgical interface.
- c.4. Conduct physical examination to aid in diagnosis of common / important medical and surgical emergencies (eg. ENT and ophthalmic problems,...) in Family Practice.
- c.5. Perform recommended evidence-based screening activities in surgery.
- c.6. Interpret the findings of the diagnostic procedures.
- c.7. Develop updated evidence-based management plans with his/her clients for the common / important medical and surgical emergencies (eg. ENT and ophthalmic problems,...) in Family Practice.
- c.8. Implement updated evidence-based management plans with the clients for the common surgical and emergency problems in Family Practice.
- c.9. Perform appropriate procedures/interventions to aid in management of common / important medical and surgical emergencies (eg. ENT and ophthalmic problems,...) in Family Practice.
- c.10. Conduct counseling regarding organ donations, and end-of-life issues. Conduct effective communication and referral to the surgeon consultant about the patient's symptoms, physical findings, test results and proposed plan of care.

#### **d. General and Transferable Skills**

- d.1. Teach effectively and act as a mentor to others.
- d.2. Manage time and resources and set priorities.
- d.3. Work effectively within a team.
- d.4. Manage team conflict appropriately
- d.5. Use computers/Internet efficiently.
- d.6. Present information clearly in written, electronic and oral forms
- d.7. Manage information effectively to improve quality of care.
- d.8. Communicate ideas and arguments effectively;
- d.9. Apply the principles of ethics appropriately

### 3- Contents

Topics	Total No. of hours (200 Hrs)	Interactive Lectures/ Portfolio presentations (20 Hrs)	Family Practice Hospital Training / Self Directed Education (180 Hrs)
<ul style="list-style-type: none"> <li>Preoperative Evaluation/Postoperative Care</li> <li>Approach to patient with breast problems</li> <li>Approach to patient with neck lumps</li> <li>Approach to patient with Abdominal Wall Hernias</li> <li>Approach to patient with Acute Abdomen</li> <li>Approach to patient with Upper Gastrointestinal bleeding</li> <li>Approach to patient with lower Gastrointestinal Bleeding</li> <li>Approach to patient with generalized Lymphadenopathy</li> <li>Approach to patient with Scrotal Pain, Masses, and Swelling</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Emergency care (Definitions, principles of management of the emergency call, emergencies in adult and elders, burns, bites and stings and vital emergency skills)</li> <li>Approach to the unconscious patient</li> <li>Approach to the Patient With Major/multiple trauma</li> <li>Approach to patient soft tissue injuries (Elbow, Wrist, and Hand)</li> <li>Approach to soft tissue injuries (Foot and Ankle)</li> <li>Approach to patient with other sporting injuries</li> <li>Approach to patient with syncope attack</li> <li>Approach to patient with Stroke and transient ischemic attacks</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to patient exposed to toxins/poisons</li> <li>Approach to patient with Common skin wounds and foreign bodies</li> <li>The doctor's bag and other emergency equipment</li> <li>Approach to patient with Impaired Hearing impairment</li> <li>Approach to patient with Epistaxis</li> <li>Approach to the Patient With Otitis Media and Otitis Externa</li> <li>Approach to the Patient With Sinusitis</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to the Patient With Glaucoma (Open-Angle Glaucoma)</li> <li>Approach to the Patient With Red Eye</li> <li>Approach to the Patient With Impaired Vision</li> <li>Approach to the Patient With Eye Pain</li> <li>Approach to the Patient With Dry Eyes</li> <li>Approach to the Patient With Common Visual Disturbances: Flashing Lights, Floaters, and Other Transient Phenomena</li> <li>Approach to the Patient With Exophthalmos</li> <li>Approach to the Patient With Excessive Tearing</li> <li>Approach to the Patient With Age-Related Macular Degeneration</li> <li>Approach to the Patient With Cataracts</li> <li>Approach to the Patient With Diabetic Retinopathy</li> <li>Approach to patient with error of refraction</li> </ul>	50	5	45

#### **4-Teaching and Learning Methods**

- 4.1- Interactive Lectures (webinar,...)
- 4.2- Portfolio Presentation/tutorial
- 4.3- learning through observation (One to one teaching) in FPCs/Hospital
- 4.4- Assignment
- 4.5- Self directed Learning (EBM case studies, library, web, journal club..)

#### **5- Student Assessment Methods**

- 5.1 Written exams: MEQs; MCQ and short essay to assess recall, analysis & interpretation of knowledge
- 5.2 Portfolio assessment

##### **Schedule of Assessments**

- Assessment at the end of the course:  
Portfolio is a prerequisite to set for end of the course Examination
- Assessment at the end of Master program  
Satisfactory performance is a prerequisite to set for final examination of the program.

#### **6- List of References**

- 6.1- Essential Books (Text Books)
  - Taylor
  - First Aid
  - Swanson FM
  - Pretest Pediatric
  - Oxford textbook of primary medical care
- 6.2- Periodicals, Web Sites, etc
  - World health organization (WHO)
  - British Medical Journal
  - American Journal of Family Physician
  - CDC Center for Disease Control and Prevention

#### **7- Facilities Required for Teaching and Learning**

Family Practice Centers,  
Surgery clinics  
Data show & Computer/ Internet  
FM and college library.

#### ملحق (٤)

توصيف المقررات الإجبارية ببرنامج ماجستير طب الأسرة وصحة المجتمع  
٦- مقرر العلوم السلوكية والأخلاقيات في طب الأسرة

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#### A. Basic Information

1. Program(s) in which the course is given: Master of Family Medicine and Community Health
2. Major or Minor element of course: Major
3. Department offering the programs: Family Medicine Department
4. Department offering the course: Family Medicine Department
5. Academic year / Level: Post Graduate Studies (2<sup>nd</sup> semester- MSc)
6. Date of specification approval: the bylaws of the master program in Family Medicine in the Faculty of Medicine, Suez Canal University were approved by the Supreme Council of Universities in 2015.
7. Date of specification revision approval : 2018
8. Title: Behavioral Sciences and Medical Ethics in Family Medicine
9. Code: FMMC15
10. Credit points: 8 points
  - Interactive Lecture/Portfolio presentations: 20 Hrs
  - Family Practice/ Training/Self Directed education: 180 Hrs
  - Total: 200 Hrs

#### B- Professional information

##### 1- Aims of the course:

At the end of the course, the trainee will be able to provide quality care for individuals, families and community in common behavioral and ethical problems. He/she also will be able to integrate update evidence-base medicine in his/her practice for management of behavioral and ethical problems.

##### 2- Intended learning outcomes (ILOs)

###### a. Knowledge and Understanding

By the end of this course the trainee should be to:-

- a.1. Describe the basics of human behavior
- a.2. Describe the common behaviors in the interpersonal relationships
- a.3. Recognize the common behaviors presented to the family physician in daily practice.
- a.4. Discuss various models that describe the behavior between doctors and patients.
- a.5. Discuss models of behavioral modification
- a.6.
- a.7. Outline the interrelation between stress and practicing medicine and overcoming professional burnout
- a.8. Discuss the illness behavior and its applications on common presentations of patient problem in family practice
- a.9. Identify the required communications skills required for handling difficult consultations in Family Practice
- a.10. Discuss role of family physician in breaking bad news
- a.11. Discuss role of patient and family in coping with difficulties including bad news
- a.12. Explain the principles of professionalism and Ethics in Family Practice.
- a.13. Discuss conditions of breaching confidentiality of the patient

- a.14. Discuss basics of taking informed consent from a patient and when it becomes invalid
- a.15. Describe basics of code of, rules and regulations of medical profession including rights/responsibilities of physician and patient
- a.16. Identify ethical dilemmas and describe steps to solve them.
- a.17. Discuss the available pharmacological interventions for smoking cessation and obesity

#### **b. Intellectual Skills**

By the end of this course the student/trainee should be able to:-

- b.1. Utilize appropriate clinical reasoning principles during consultation with patients regarding surgical, emergency, ENT and ophthalmic problems.
- b.2. Recognize his or her practice limitations and seek consultation with other health care providers when necessary to provide optimal care.

#### **c. Professional and Practical Skills**

By the end of this course the student/trainee should be able to:-

- c.1. Perform difficult consultation fluently using the appropriate communication skills for different age groups and different circumstances in Family Practice
- c.2. Utilize appropriate communication skills to determine patient's perceptions, stage of change and barriers to change.
- c.3. Apply the different models of behavior modification in common and important conditions in Family Medicine such as (smoking cessation, obesity and adherence)
- c.4. Provide tailored message to individual patient in order to modify his behavior according to his stage of change.
- c.5. Apply the basics of professionalism and ethics in daily practice

#### **d. General and Transferable Skills**

- d.1. Teach effectively and act as a mentor to others.
- d.2. Manage time and resources and set priorities.
- d.3. Work effectively within a team.
- d.4. Manage team conflict appropriately
- d.5. Use computers/Internet efficiently.
- d.6. Present information clearly in written, electronic and oral forms
- d.7. Manage information effectively to improve quality of care.
- d.8. Communicate ideas and arguments effectively;
- d.9. Apply the principles of ethics appropriately
- d.10. Apply the principles of scientific evidence in daily practice
- d.11. Recognize and cope with uncertainty.

### 3- Contents

Topics	Total No. of hours (200 Hrs)	Interactive Lectures / Portfolio presentations (20 Hrs)	Family Practice Hospital Training / Self Directed Education (180 Hrs)
<ul style="list-style-type: none"> <li>▪ Basics of human behavior</li> <li>▪ Common behaviors in the interpersonal relationships</li> <li>▪ Common behaviors presented to the family physician in daily practice.</li> <li>▪ Models that describe the behavior between doctors and patients.</li> <li>▪ Advanced Interpersonal Communication skills required for handling difficult consultations in Family Practice</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>▪ Role of family physician in breaking bad news</li> <li>▪ Role of patient and family in coping with difficulties including bad news</li> <li>▪ Models of behavioral modification</li> <li>▪ Illness behavior and its applications on common presentations of patient problems in family practice</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>▪ Interrelation between stress and practicing medicine</li> <li>▪ How do you overcome professional burnout? Proposed interventions</li> <li>▪ Principles of professionalism and Ethics in Family Practice.</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>▪ Basics of taking informed consent from a patient and when it becomes invalid</li> <li>▪ When do you breach confidentiality of the patient?</li> <li>▪ Basics of code of, rules and regulations of medical profession including rights/responsibilities of physician and patient</li> <li>▪ Ethical dilemmas in Family Practice and steps to solve them.</li> </ul>	50	5	45



#### **4-Teaching and Learning Methods**

- 4.1- Interactive Lectures (webinar,...)
- 4.2- Portfolio Presentation/tutorial
- 4.3- learning through observation (One to one teaching) in FPCs/Hospital
- 4.4- Role play
- 4.5- Self directed Learning (EBM case studies, library, web, journal club..)

#### **5- Student Assessment Methods**

- 5.1 Written exams: MEQs; MCQ and short essay to assess recall, analysis & interpretation of knowledge
- 5.2 Portfolio assessment

##### **Schedule of Assessments**

- Assessment at the end of the course:  
Portfolio is a prerequisite to set for end of the course Examination
- Assessment at the end of Master program  
Satisfactory performance is a prerequisite to set for final examination of the program.

#### **6- List of References**

- 6.1- Essential Books (Text Books)
  - Taylor
  - First Aid
  - Swanson FM
  - Pretest Pediatric
  - Oxford textbook of primary medical care
- 6.2- Periodicals, Web Sites, etc
  - World health organization (WHO)
  - British Medical Journal
  - American Journal of Family Physician
  - CDC Center for Disease Control and Prevention

#### **7- Facilities Required for Teaching and Learning**

Family Practice Centers,  
Surgery clinics  
Data show & Computer/ Internet  
FM and college library.

## ملحق (٥)

### توصيف المقررات الاختيارية ببرنامج ماجستير طب الأسرة وصحة المجتمع ١- مقرر الرعاية الصحية للمرأة في طب الأسرة

#### A- Basic Information

1. Program(s) in which the course is given: Master of Family Medicine and Community Health
2. Major or Minor element of course: Major
3. Department offering the programs: Family Medicine Department
4. Department offering the course: Family Medicine Department
5. Academic year / Level: Post Graduate Studies (3<sup>rd</sup> semester- MSc)
6. Date of specification approval: the bylaws of the master program in Family Medicine in the Faculty of Medicine, Suez Canal University were approved by the Supreme Council of Universities in 2015.
7. Date of specification revision approval : 2018
8. Title: Woman Health care in Family Medicine
9. Code: FMMC16
10. Credit points: 12 points
  - Interactive Lecture/Portfolio presentations: 30 Hrs
  - Family Practice/ Training/Self Directed education: 270 Hrs
  - Total: 300 Hrs

#### B- Professional Information

##### 1- Overall Aims of Course

At the end of the course of woman health care, student/trainee should be able to demonstrate the essential competence to provide primary, integrated, continuous health and medical care to woman. Also, the student/trainee should be evidence-based oriented in providing such high quality care in different domains ( promotive, preventive, and curative).

##### 2- Intended Learning Outcomes of Course (ILOs)

###### a - Knowledge and Understanding:

By the end of this course the trainee should be to:-

- a.1. Describe the components of safe-motherhood program
- a.2. Describe the current situation of women health (safe motherhood/Millennium Developmental Goals-MDG) in Egypt/worldwide
- a.3. Discuss the epidemiology of common cancers.
- a.4. Describe components of peri-natal care (Preconception, Ante-natal, Post-Natal care)
- a.5. Describe evidence based ante-natal care

- a.6. Describe EBM preventive measures in women (Screening/counseling,..)
- a.7. Discuss diagnostic criteria of common and important health problems among women.
- a.8. Interpret the basic investigations for diagnosis of the common health problems in women.
- a.9. Describe management principles of common and important health problems.
- a.10. Describe role of EBM-CAM in management of common and important problems
- a.11. Identify the high risk pregnancy
- a.12. Discuss Assessment of fetal well-being
- a.13. Describe the current evidence regarding the use of ultrasound during pregnancy
- a.14. Describe the current immunization schedule during pregnancy
- a.15. Discuss health education items required for pregnant women
- a.16. Describe nutritional requirements during pregnancy and lactation
- a.17. Identify levels of evidence of safe prescribing during pregnancy and lactation
- a.18. Identify indications of referral of health problems encountered during pregnancy
- a.19. Describe different contraceptive methods
- a.20. Discuss the appropriate therapy for problems encountered with contraceptive methods

#### **b- Intellectual Skills**

- b.1. Demonstrate fluency in clinical reasoning during consultation with patients in this group.
- b.2. Demonstrate interest in applying EBM in daily practice with women

#### **c- Professional and Practical Skills**

By the end of this course the student should be able to:-

- c.1. Conduct an interview with women using appropriate consultation models
- c.2. Use communication skills to gather information effectively and explore ICE from women regarding the presenting problem.
- c.3. Utilize health records efficiently for women attending FP
- c.4. Conduct proper clinical examinations to aid in diagnosis of common health problems in women.

- c.5. Use investigations appropriately to aid in diagnosis of common health problems among women.
- c.6. Perform ultrasound for pregnant lady
- c.7. Interpret results of different investigations
- c.8. Implement EBM guidelines for management of common health problems among women.
- c.9. Implement EBM –CAM as a treatment modality for common and important health problems
- c.10. Apply rational prescribing for the common health problems among women.
- c.11. Conduct appropriate procedures/interventions to aid in management of common health problems among women.
- c.12. Conduct appropriate health education regarding the common health problems among women.
- c.13. Provide appropriate follow up care for women presented with health problems among women in Family Practice
- c.14. Coordinate care through proper referral to obstetricians/gynecologists
- c.15. Conduct EBM health maintenance activities for women utilizing basic clinical skills.
- c.16. Apply clinical assessment -in a timely manner- to women with emergency conditions
- c.17. Counsel effectively regarding family planning issues, nutrition, Sexually Transmitted Infection (STI) among women.
- c.18. Apply evidences from scientific studies related to their patients' health problems.
- c.19. Manage the common ethical dilemma among women appropriately
- c.20. Perform auditing of primary health care activities related to children/adolescents

#### **d- General and Transferable Skills**

- d.1. Present information clearly in written, electronic and oral forms.
- d.2. Manage time and resources and set priorities.
- d.3. Work effectively within a team.
- d.4. Use computers/Internet efficiently.

### 3- Contents

Topics	No.of hours (300 Hrs)	Interactive Lecture/ Portfolio Presentation(30 Hrs)	Family Practice/ Hospital /self directed education (270Hrs)
<ul style="list-style-type: none"> <li>Health profile of Women (Indices)</li> <li>EBM Preventive Care to women</li> <li>Preconception counseling</li> <li>Evidence based perinatal care</li> <li>Minor complaints of pregnancy</li> <li>Rhesus problems</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to a women with Gestational Hypertension</li> <li>Approach to a women with Gestational Diabetes Mellitus</li> <li>Approach to a women with Anemia during pregnancy</li> <li>Approach to a women with UTI during pregnancy</li> <li>Approach to a women with Asthma during pregnancy</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to a women with Congenital infections (TORCH)</li> <li>Approach to a women with Bleeding in early pregnancy</li> <li>Approach to a women with Bleeding in late pregnancy</li> <li>Approach to a women with PMROM</li> <li>Approach to a women in a labor in PHC</li> <li>Evidence Based Postpartum care</li> <li>Approach to a women with puerperal sepsis</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to a women with Vaginitis, cervicitis, PID</li> <li>Approach to a women with STDs</li> <li>Approach to a women with Abnormal uterine bleeding</li> <li>Approach to a women with Amenorrhea</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to a women with Pelvic pain (dysmenorrhea, PMTS...)</li> <li>Approach to a women with Uterine prolapsed</li> <li>Approach to a women with Urinary incontinence</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to a women with Family planning</li> <li>Approach to infertile couple</li> <li>Approach to a women with Galactorrhea</li> <li>Approach to a women with PCOS</li> <li>Approach to a women with Menopause</li> <li>Approach to a women with Osteoporosis</li> <li>EBM cancer screening among women</li> </ul>	50	5	45

#### **4-Teaching and Learning Methods**

- 4.1- Interactive Lectures (webinar,...)
- 4.2- Portfolio Presentation/tutorial
- 4.3- learning through observation (One to one teaching) in FPCs/Hospital
- 4.4- Role play
- 4.5- Self directed Learning (EBM case studies, library, web, journal club..)

#### **5- Student Assessment Methods**

- 5.1 Written exams: MEQs; MCQ and short essay to assess recall, analysis & interpretation of knowledge
- 5.2 Portfolio assessment

##### **Schedule of Assessments**

- Assessment at the end of the course:  
Portfolio is a prerequisite to set for end of the course Examination.
- Assessment at the end of Master program  
Satisfactory performance is a prerequisite to set for final examination of the program.

#### **6- List of References**

##### **6.1- Recommended Books**

1. General Practice. John Murtagh
2. Swanson, family medicine
3. Current , family medicine diagnosis & treatment
4. Taylor's manual of family medicine
5. Dimensions of Community Health, Boston Burr Ridge Dubuque.
6. Short Textbook of preventive and social Medicine. Prentice-Hall International Inc.
7. Epidemiology in medical practice, 5th edition. Churchill Livingstone. New York, London and Tokyo.
8. Oxford textbook of general practice
9. Textbook of primary care.

##### **6.2. Web Sites**

- The Centers for Disease Control and Prevention  
<http://www.cdc.gov/reproductivehealth/MaternalInfantHealth>
- Association of Maternal & Child Health Programs  
<http://www.amchp.org>
- The American College of Obstetricians and Gynecologists  
<http://www.acog.org>
- National Guideline Clearinghouse  
<http://www.guideline.gov/index.aspx>
- The Centers for Disease Control and Prevention  
<http://www.cdc.gov/women/>
- [www.aafp.org](http://www.aafp.org)
- [www.medescape.com](http://www.medescape.com)
- [www.bmj.com](http://www.bmj.com)

## ملحق (٥)

### توصيف المقررات الاختيارية ببرنامج ماجستير طب الأسرة وصحة المجتمع ٢- مقرر الرعاية الصحية للمسنين في طب الأسرة

#### A- Basic Information

1. Program in which the course is given: Master of Family Medicine and Community Health
2. Major or Minor element of course: Major
3. Department offering the program: Family Medicine Department
4. Department offering the course: Family Medicine Department
5. Academic year / Level: Post Graduate Studies (3<sup>rd</sup> semester- MSc)
6. Date of specification approval: the bylaws of the master program in Family Medicine in the Faculty of Medicine, Suez Canal University were approved by the Supreme Council of Universities in 2015.
7. Date of specification revision approval : 2018
8. Title: Geriatric Health Care in Family Medicine
9. Code: FMMC17
10. Credit points: 12 points
  - Interactive Lecture/Portfolio presentations: 30 Hrs
  - Family Practice/ Training/Self Directed education: 270 Hrs
  - Total: 300 Hrs

#### B- Professional Information

##### 1- Overall Aims of Course

At the end of the course, health care, student/trainee should be able to demonstrate the essential competence to provide primary, integrated and continuous health and medical care to elderly individuals. Also, the student/trainee should be evidence-based oriented in providing such high quality care in different domains (preventive, curative, rehabilitative and palliative).

##### 2- Intended Learning Outcomes of Course (ILOs)

###### a - Knowledge and Understanding:

By the end of this course the trainee should be to:-

- a.1. Describe diagnostic criteria of common and important health problems among elderly population.
- a.2. Identify the burden of illness at the level of individual, family and community.
- a.3. Identify the ideas, concern and expectations of the elderly patients with chronic illness.
- a.4. Recognize the different models of breaking a bad news competently.
- a.5. Describe diagnostic criteria of common and important health problems among elderly patients.
- a.6. Determine the basic investigations for diagnosis of the common health problems in this age group.
- a.7. Describe management principles of common and important health problems among elderly patients.
- a.8. Define the limitations and the indications of referral for elderly patients attending Family Practice.
- a.9. Define role of family physician in disabled and handicapped patients.
- a.10. Identify appropriate models of behavioral modification to be offered to such population.

- a.11. Recognize Evidence-Based screening activities to such age group.
- a.12. Recognize the principles of auditing of the provided care to such age group.

**b- Intellectual Skills**

- b.1. Demonstrate fluency in clinical reasoning during consultation with patients in this age group.
- b.2. Apply evidence based medicine in daily clinical practice appropriately.

**c- Professional and Practical Skills**

By the end of this course the student should be able to:-

- c.1. Demonstrate proper conduct of interview with elderly using appropriate consultation model and communication skills to gather information effectively from elderly regarding the presenting problem.
- c.2. Counsel effectively regarding issues related to this age group.
- c.3. Utilize medical records efficiently.
- c.4. Perform physical examination of chest, heart, abdomen, central nervous system, musculoskeletal system, skin and other parts of the body, and distinguish between normal and abnormal findings.
- c.5. Manage the common health problems (physical and mental) among elderly population using Evidence- based guidelines.
- c.6. Perform geriatric assessment for elderly patients.
- c.7. Interpret E.C.G.
- c.8. Interpret pulmonary function tests.
- c.9. Interpret the findings of X-Rays.
- c.10. Conduct evidence based screening activities for elderly individuals.
- c.11. Perform auditing of the provided care for such age group.
- c.12. Conduct appropriate procedures/interventions to aid in management of common/important conditions among elderly presenting to Family Practice.

**d- General and Transferable Skills**

- d.5. Present information clearly in written, electronic and oral forms.
- d.6. Manage time and resources and set priorities.
- d.7. Apply the principles of scientific research and use simple statistical methods.
- d.8. Work effectively within a team.
- d.9. Use computers/Internet efficiently.



### 3- Contents

Topics	Total No. of hours (300 Hrs)	Interactive Lectures/ Portfolio presentation (30 Hrs)	Family Practice/Hospital Training /Self Directed Education (270Hrs)
<ul style="list-style-type: none"> <li>Health promotion and disease prevention for elderly</li> <li>Health and social services for elderly</li> <li>Assessment of an elderly patient</li> <li>Common geriatric health problems</li> <li>Fall among elderly population- How do you prevent?</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to an elderly Pt with dementia</li> <li>Approach to an elderly patient with depression</li> <li>Approach to an elderly Pt with Parkinsonism</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to an elderly Pt with TIA</li> <li>Approach to an elderly Pt stroke</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to an elderly patient with constipation</li> <li>Approach to an elderly Approach to an elderly Pt with BPH</li> <li>Approach to an elderly Approach to an elderly Pt with urinary incontinence</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to an elderly Approach to an elder Pt with osteoporosis</li> <li>Care of an elderly patient with terminal illness</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Basics of prescribing for elderly</li> <li>Poly pharmacy among elderly patients- How do you overcome?</li> <li>How do you improve drug adherence among elderly patients</li> <li>Elder abuse</li> </ul>	50	5	45

### 4-Teaching and Learning Methods

- 4.1- Interactive Lectures (webinar,...)
- 4.2- Portfolio Presentation/tutorial
- 4.3- learning through observation (One to one teaching) in FPCs/Hospital
- 4.4- Role play
- 4.5- Self directed Learning (EBM case studies, library, web, journal club..)

### 5- Student Assessment Methods

- 5.1 Written exams: MEQs; MCQ and short essay to assess recall, analysis & interpretation of knowledge
- 5.2 Portfolio assessment

### **Schedule of Assessments**

- Assessment at the end of the course:  
Portfolio is a prerequisite to set for end of the course Examination
- Assessment at the end of Master program  
Satisfactory performance is a prerequisite to set for final Examination of the program.

### **6- List of References**

#### 6.1- Essential Books (Text Books)

- Practice Guidelines for Family Physicians(MOHP)
- Oxford Text book of Primary medical care
- Oxford Text book of General practice
- General Practice. John Murtagh
- Essential of Family Medicine. Sloane PD, Slatt LM, Curtis P
- Blueprint in Family Medicine. Lipsky MS, king MS

#### 6.2- Periodicals, Web Sites, etc

- British Medical Journal
- American Journal of Family Physician

### **7- Facilities Required for Teaching and Learning**

- Family Practice Centers
- Internal Medicine/Psychiatry/ Dermatology outpatient clinics
- Data show & Computer/ Internet
- Library of FM department/Faculty

## ملحق (٥)

### توصيف المقررات الاختيارية ببرنامج ماجستير طب الأسرة وصحة المجتمع ٣- مقرر الصحة النفسية في طب الأسرة

#### A- Basic Information

1. Program in which the course is given: Master of Family Medicine and Community Health
2. Major or Minor element of course: Major
3. Department offering the program: Family Medicine Department
4. Department offering the course: Family Medicine Department
5. Academic year / Level: Post Graduate Studies (3<sup>rd</sup> semester- MSc)
6. Date of specification approval: the bylaws of the master program in Family Medicine in the Faculty of Medicine, Suez Canal University were approved by the Supreme Council of Universities in 2015.
7. Date of specification revision approval : 2018
8. Title: Mental Health Care in Family Medicine
9. Code: FMMC18
10. Credit points: 12 points
  - Interactive Lecture/Portfolio presentations: 30 Hrs
  - Family Practice/ Training/Self Directed education: 270 Hrs
  - Total: 300 Hrs

#### B- Professional Information

##### 1- Overall Aims of Course

At the end of the course, student/trainee should be able to demonstrate the essential competence to provide primary, integrated and continuous care to a given patient. Also, the student/trainee should be evidence-based oriented in providing such high quality care in different domains (preventive, curative, rehabilitative and palliative).

##### 2- Intended Learning Outcomes of Course (ILOs)

###### a - Knowledge and Understanding:

By the end of this course the trainee should be to:-

- a.1. Discuss the epidemiology of mental disorders in different age groups
- a.2. Identify the burden of mental disorders at the level of individual, family and community.
- a.3. Describe diagnostic criteria of common and important metal disorders regardless gender and age groups.
- a.4. Recognize the appropriate approach for breaking a bad news (mental disorders).
- a.5. Describe diagnostic criteria of common and important health mental disorder regardless gender and age groups.
- a.6. Describe management principles/ treatment modalities of common and important mental disorders for different age groups.
- a.7. Describe role of EBM-CAM in management of common and important problems
- a.8. Discuss basics of prescribing of drug used in mental disorders in different age groups.
- a.9. Identify the role of herbal medicine in management of mental disorders regardless gender and age groups (evidence based).
- a.10. Define the limitations and the indications of referral for different mental disorders.

- a.11. Recognize the existing health services in the community that help in the management of patients with mental disorders regardless gender and age groups
- a.12. Recognize Evidence-Based screening activities of mental disorders regardless gender and age groups.

**b- Intellectual Skills**

- b.3. Demonstrate fluency in clinical reasoning during consultation with patients in this age group.
- b.4. Apply evidence based medicine in daily clinical practice appropriately.

**c- Professional and Practical Skills**

By the end of this course the student should be able to:-

- c.15. Perform a consultation using appropriate communication skills to gather information required for diagnosing common and important mental disorders in different age groups
- c.16. Elicit cultural and family perspective on mental health diagnosis and treatment.
- c.17. Perform the needed physical examination to rule in/rule out the organic/physical disorders.
- c.18. Perform the process of breaking of bad news(mental disorders) appropriately.
- c.19. Manage the common and important mental disorders in different age groups using Evidence- based guidelines.
- c.20. Implement EBM–CAM as a treatment modality for common and important health problems
- c.21. Prescribe soundly for patients with common and important mental disorders applying the basics of rational prescribing.
- c.22. Perform the appropriate referral of patient with mental disorders in Family Practice.
- c.23. Make use of the existing health services in the community to help in the management of patients with mental disorders.
- c.24. Conduct evidence based screening activities of mental disorders for different age groups.

**d- General and Transferable Skills**

- d.10. Present information clearly in written, electronic and oral forms.
- d.11. Manage time and resources and set priorities.
- d.12. Apply the principles of scientific research and use simple statistical methods.
- d.13. Work effectively within a team.
- d.14. Use computers/Internet efficiently.

### 3- Contents

Topics	Total No. of hours (300Hrs)	Interactive Lectures/ Portfolio presentation(30 Hrs)	Family Practice/ Hospital Training /Self Directed Education (270 Hrs)
<ul style="list-style-type: none"> <li>Approach to patient with mental disorder (An overview)</li> <li>Preventive issues related to mental disorders–EBM view</li> <li>Approach to pt with Mood disorders(Major depressive D., Dysthymia, and Bipolar D)</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to patient with personality disorders</li> <li>Approach to pt with Anxiety disorders(Panic attack, Phobias, OCD, Post-traumatic SD, Dissociative Disorders)</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to pt with Somatoform disorders (Somatization, Hypochondriasis,..)</li> <li>Approach to pt with Eating disorders (Anorexia nervosa /Bulimia nervosa)</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to pt with Sleep disorders</li> <li>Approach to pt with Substance-related disorders</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to patient with sexual disorders</li> <li>Approach to pt with Schizophrenia</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>Approach to women with mental disorders over different stage of reproductive life</li> <li>Emotional and behavioral disorders in children/adolescents (Depression, autism,.....)</li> </ul>	50	5	45

#### 4-Teaching and Learning Methods

- 4.1- Interactive Lectures (webinar,...)
- 4.2- Portfolio Presentation/tutorial
- 4.3- learning through observation (One to one teaching) in FPCs/Hospital
- 4.4- Role play
- 4.5- Self directed Learning (EBM case studies, library, web, journal club..)

#### 5- Student Assessment Methods

- 5.1 Written exams: MEQs; MCQ and short essay to assess recall, analysis & interpretation of knowledge
- 5.2 Portfolio assessment

### **Schedule of Assessments**

- Assessment at the end of the course:  
Portfolio is a prerequisite to set for end of the course Examination
- Assessment at the end of Master program  
Satisfactory performance is a prerequisite to set for final examination of the program.

### **6- List of References**

#### 6.1- Essential Books (Text Books)

- Practice Guidelines for Family Physicians(MOHP)
- Oxford Text book of Primary medical care
- Oxford Text book of General practice
- General Practice. John Murtagh
- Essential of Family Medicine. Sloane PD, Slatt LM, Curtis P
- Blueprint in Family Medicine. Lipsky MS, king MS

#### 6.2- Periodicals, Web Sites, etc

- British Medical Journal
- American Journal of Family Physician

### **7- Facilities Required for Teaching and Learning**

- Family Practice Centers
- Internal Medicine/Psychiatry/ Dermatology outpatient clinics
- Data show & Computer/ Internet
- Library of FM department/Faculty

## ملحق (٥)

### توصيف المقررات الاختيارية ببرنامج ماجستير طب الأسرة وصحة المجتمع ٤- مقرر ادارة الجودة في طب الأسرة

#### A. Basic Information

1. Program in which the course is given: Master of Family Medicine and Community Health
2. Major or Minor element of course: Major
3. Department offering the program: Family Medicine Department
4. Department offering the course: Family Medicine Department
5. Academic year / Level: Post Graduate Studies (3<sup>rd</sup> semester- MSc)
6. Date of specification approval: the bylaws of the master program in Family Medicine in the Faculty of Medicine, Suez Canal University were approved by the Supreme Council of Universities in 2015.
7. Date of specification revision approval : 2018
8. Title: Quality Management in Family Medicine
9. Code: FMMC19
10. Credit points: 12 points
  - Interactive Lecture/Portfolio presentations: 30 Hrs
  - Family Practice/ Training/Self Directed education: 270 Hrs
  - Total: 300 Hrs

#### B- Professional Information

##### 1- Overall aims of course

At the end of the course, student/trainee should be able to demonstrate fluency in providing evidence based primary, integrated and continuous health and medical care to clients/patients attending family practice setting. The student/trainee also, should be able to achieve clients/patient satisfaction at the level of practice by applying continuous quality improvement tools.

##### 2- Intended learning outcomes (ILOs)

###### a) Knowledge and understanding

By the end of Family and Community course, the trainee should be able to:-

- a.1. Describe the differences between leadership and management
- a.2. Explain the four functions of management & the four leadership practices
- a.3. Discuss different leadership styles and leading a team effectively
- a.4. Discuss the principles of motivating a team members
- a.5. Describe approach for managing a team conflict
- a.6. Explain the concept of organizational mission and vision and the purpose of mission and vision statements
- a.7. Describe the role of SWOT analysis in strategy formulation and explain the major approaches to such analysis
- a.8. Outline the process of strategy implementation
- a.9. Explain the importance of organization charts
- a.10. Describe steps of successful change process
- a.11. Describe principles of quality in health care.
- a.12. Describe dimensions of quality in health care.
- a.13. Describe tools of quality in health care.
- a.14. Describe CQI in Family Practice
- a.15. Define basic requirements for quality improvement.
- a.16. Identify the criteria of choosing quality improvement projects
- a.17. Demonstrate comprehension of principles of customer oriented care.

- a.18. Demonstrate understanding of data management to improve quality of care offered at family practice setting.
- a.19. Demonstrate familiarity with possible systems failures associated with quality problems.
- a.20. Demonstrate the ability to determine barriers to change management.
- a.21. Demonstrate the ability to early detect, assess and evaluate causes of external client satisfaction.
- a.22. Demonstrate familiarity with dimensions of internal clients need
- a.23. Describe the principles of Risk management(patient safety/infection control) in Family Practice

**b) Intellectual skills**

- b.1. Demonstrate fluency in clinical reasoning and handling difficult consultations.
- b.2. Apply evidence based medicine in daily clinical practice appropriately.
- b.3. Applying appropriate leadership style and leading a team effectively
- b.4. Demonstrate fluency in applying CQI and patient safety in practice

**c) Professional and practical skills**

- c.1. Analyze the annual and periodical report critically
- c.2. Use different tools (job description, task analysis, strategic plans, performance Appraisal) to appropriately assess training needs
- c.3. Analyze root causes of a given current situation
- c.4. Conduct task environment scan and analysis of opportunities and threats
- c.5. Create and communicate a mission and vision for one of FPCs
- c.6. Develop a value statement for a FPCs
- c.7. Conduct a SWOT analysis
- c.8. Analyze the possible causes of conflict and use effective strategies to resolve it
- c.9. Analyze data, reports and trends for more effective planning as well as controlling
- c.10. Develop a business plan for one of the family practice centers
- c.11. Apply leadership practices to a challenge chosen by team
- c.12. Use challenge model to reach a desired outcome using a well designed action plan
- c.13. Assess and manage change
- c.14. Build an effective teamwork with technical expertise and leadership skills.
- c.15. Manage time and people effectively.
- c.16. Use common quality tools such as (flowchart, Pareto diagram, fishbone and prioritization matrix).
- c.17. Conduct appropriate patient satisfaction surveys.
- c.18. Conduct an assessment of internal clients needs.
- c.19. Develop key performance indicators that detect,
- c.20. Implement the principles of risk management (Patient safety/infection control) in daily practice.



**d) General and Transferable Skills:**

- d.1. Present information clearly in written, electronic and oral forms
- d.2. Make use appropriately to different sources for obtaining required data in community diagnosis.
- d.3. Manage time and resources and set priorities.
- d.4. Apply the principles of scientific research and use simple statistical methods.
- d.5. Work effectively within a team.
- d.6. Use computers/Internet efficiently.

**2- Contents**

<b>Topic</b>	<b>Total No. of hours (300 Hrs)</b>	<b>Interactive Lectures/ Portfolio presentation (30 Hrs)</b>	<b>Family Practice Training /Self Directed Education (270 Hrs)</b>
<ul style="list-style-type: none"> <li>▪ Principles and tools of quality</li> <li>▪ Total Quality Management in health care</li> <li>▪ Quality tools</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>▪ Accreditation</li> <li>▪ Performance indicators</li> <li>▪ Policies and procedures</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>▪ Quality improvement in health care</li> <li>▪ Describe the principles of risk management (infection control and patient safety) in Family Practice</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>▪ leadership and management</li> <li>▪ leadership styles</li> <li>▪ Leading a team effectively</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>▪ Principles of managing a team conflict</li> <li>▪ Change management</li> </ul>	50	5	45
<ul style="list-style-type: none"> <li>▪ Strategic and operational planning</li> <li>▪ Developing mission and vision statement</li> <li>▪ SWOT analysis</li> </ul>	50	5	45

**4-Teaching and Learning Methods**

- 4.1- Interactive Lectures (webinar,...)
- 4.2- Portfolio Presentation/tutorial
- 4.3- learning through observation (One to one teaching) in FPCs/Hospital
- 4.4- Role play
- 4.5- Self directed Learning (EBM case studies, library, web, journal club..)

## **5- Student Assessment Methods**

5.1 Written exams: MEQs; MCQ and short essay to assess recall, analysis & interpretation of knowledge

5.2 Portfolio assessment

### **Schedule of Assessments**

- Assessment at the end of the course:  
Portfolio is a prerequisite to set for end of the course Examination
- Assessment at the end of Master program  
Satisfactory performance is a prerequisite to set for final examination of program.

## **6- List of References**

### **6-1-Recommended Books**

1. Dimensions of Community Health, Boston Burr Ridge Dubuque.
2. Short Textbook of preventive and social Medicine. Prentice-Hall International Inc.
3. Epidemiology in medical practice, 5th edition. Churchill Livingstone. New York, London and Tokyo.
4. Oxford textbook of general practice

### **6-2- Recommended Web Sites**

- 1-American academy of family physicians
- 2-American Journal of Epidemiology
- 3-British Journal of Epidemiology and Community Health
- 4-WWW. CDC and WHO sites

## **7- Facilities Required for Teaching and Learning**

- Family Practice Centers
- Internal Medicine/Psychiatry/ Dermatology outpatient clinics
- Data show & Computer/ Internet
- Library of FM department/Faculty

