

Student guide

M5- 2023-2024

First term

- Contents:

- 1-Guide lines (why P.B.L. “Problem Based Learning”) added to integrated system in October 6 university faculty of medicine (what the student & tutor will do this term) , (modules in this term & their general objectives)
- 2-Schedule for lectures , practicals , cases (small group teaching) , skill lab , & exams
- 3-Rubrics for grading assignments and presentations
- 4-Portfolio items
- 5-Cases with objectives

- PBL Philosophy:

In a world where available information is growing exponentially, we believe that the most important thing a student needs to know is how to learn. So the main learning goals of the PBL are a framework for looking at concepts, skills, and abilities and help guide the creation of personalized student curriculum. PBL offers unique environments where students can flourish as individuals within a community of learners.

- PBL Process:

The core of the PBL process is the tutorials that will be held once weekly beside the practical sessions and the interactive lectures. In each tutorial there will be a case scenario that is delivered to the students, where they collaborate together through the seven jumps process to point out the possible problems present in the case and to find out the intended learning objectives need to be known through this case. In the second tutorial, they will discuss the objectives of the case after self study, and a new case will be delivered. In PBL process the role for lectures aim at clarification of complicated areas of information or to integrate different areas of information. Practical sessions and clinical skill lab are included as educational activities in BPL. They act as tools for the students to gain the needed psychomotor skills and to attain the professional attitude and behavior.

- Student role:

The student is the center of the learning process in PBL. Students will depend on themselves in finding out the learning objectives by brain storming in the case study session. Then they will go home and study and search in the texts for the information of the objectives they got. Then the following session they should try to present the information they gazed and summarized to their students in an easy palatable way. In PBL the students have to work hard, prepare themselves well for every tutorial group meeting, collaborate with their colleagues and practice team work. They also will have their reflection about the process, their colleagues and the tutor.

- Tutors role:

- The tutor will work as a facilitator more than traditional teacher who delivers all the information to the students. Tutors role is to stimulate and motivate the students to learn and to search for the information and knowledge. During the case they will guide the students and redirect them towards the intended learning objectives. The tutors share in the assessment process. Moreover, the tutor together with the students has the responsibility of setting the roles of the tutorial session.

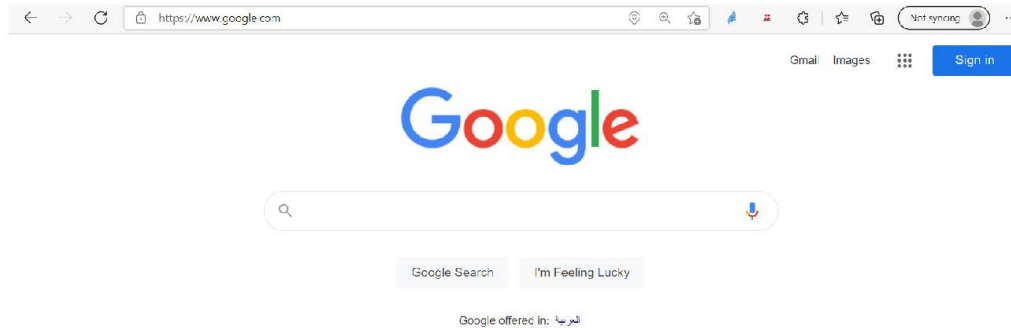
- The tutor will receive guide information for the objectives in each case from the departments at least one week before the case is to be discussed, he should read them and then in the discussion of the case he should see if the students had fulfilled all the needed items so as to approve their work or they need to search more for certain items and get them so as to complete their work completely or they got more or un needed items they should discard them. By the end of the cases of the module students will have their hand out covering all items needed in the objectives they searched for
- All staff members should have their official mails done by the beginning of the academic year so as good communication may be applicable and to facilitate uploading of their lectures every Wednesday of each week
- Concerning the module (URS) which is the beginning module for M5 the academic year 2022-2023.
- In each session one of the students will be the reader (the one who reads the case) and another one will be the writer (the one who writes the objectives on the board after brain storming of the students with the tutor and collect them after that)
- In session (1) (week 1)
 - One case will be read by the students
 - They make brain storming with each other and with the tutor to get the objectives the case is talking about. They will go home to search for them and make presentation about them the coming session.
 - Weeks for reading of the cases and discussion of the objectives are written above each case.
 - The presentation have certain rubrics the tutor try that the students stick more and more to them each presentation then at the last presentation of the module they will have certain mark among their portfolio total mark about:
 - The presentation they showed along the module and their share in the discussions and preparation of the work needed (see professional behavior sheet included) (the mark is given by the tutor)
 - After they finish the presentation in each session they will read the following case and brain storm to get the objectives that they will go home to prepare them as presentation in the coming case session and so on all the sessions
 - If the case is long its presentation by the students may take two weeks not one week to ensure that the students presented the objectives in the case in a good way
- All students are to make their Emails in the first week so as to be able to have the on line information uploaded weekly concerning the following:
 - Lectures
 - Videos
 - Presentation done by their colleagues
 - On line exams formative and summative

- Scoring Rubric for Presentations:

Category	Scoring Criteria	Total Points	Score
Organization (15 %)	Were the main ideas presented in a clear manner?	5	
	Information is presented in a logical sequence.	5	
	Presentation appropriately cites requisite number of references.	5	
Content (45 %)	- The Introduction is attention-getting, - It lays out the problem well, - It establishes a framework for the rest of the presentation.	5	
	Technical terms are well-defined in language that is appropriate for the target audience.	5	
	The Presentation contains accurate information.	10	
	The material included is relevant to the overall message/purpose.	10	
	Appropriate amount of material is prepared, and the points made reflect well their relative importance.	10	
	There is an obvious conclusion summarizing the presentation.	5	
Presentation (40 %)	Speaker maintains good eye contact with the audience and is appropriately animated (e.g., gestures, moving around, etc.).	5	
	Speaker uses a clear, audible voice.	5	
	Delivery is poised, controlled, and smooth.	5	
	Good language skills and pronunciation are used.	5	
	Visual aids are well prepared, informative, effective, and not distracting.	5	
	Length of presentation is within the assigned time limits.	5	
	Information was well communicated.	10	
Score %	Total Points	100%	

Steps to register on the Moodle e-learning website for Faculty of Medicine

1. Open any browser e.g. Chrome, Firefox, Edge, Safari

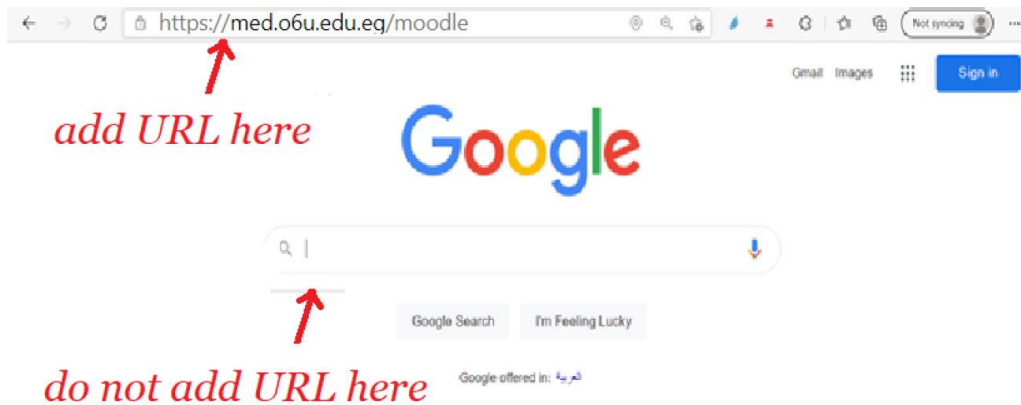


2. Then copy & paste this address in the URL box

<https://med.o6u.edu.eg/moodle>

N.B.

- It is https & not http
- There is no www in the address



3. Press "Enter" Key

o6u-med English (en) You are not logged in. (Log in)

جامعة أكتوبر
October 6 University Egypt

الهيكل الإداري لجامعة 6 أكتوبر- كلية الطب

رئيس مجلس الأمناء

الأستاذ الدكتور أحمد زكي بدر

4. Click on "log in" in the upper right corner of the screen.

جامعة أكتوبر
October 6 University Egypt

Username

Password

☐ Remember username

Log in


Forgotten your username or password?

Cookies must be enabled in your browser ?

Some courses may allow guest access

Log in as a guest

5. Write your ID number twice: in the “Username” & in the “Password” here is an example:



جامعة ٦ أكتوبر
October 6 University Egypt

20022792

.....

☐ Remember username

Log in

Forgotten your username or password?

Cookies must be enabled in your browser ?

Some courses may allow guest access

Log in as a guest

6. Then click on “Log in” below. You will be asked to change your Password:

You must change your password to proceed. ×

Change password

Username 20022792

The password must have at least 8 characters, at least 1 digit(s), at least 1 lower case letter(s), at least 1 upper case letter(s), at least 1 non-alphanumeric character(s) such as as *, -, or #

Current password ⓘ

New password ⓘ

New password (again) ⓘ

Save changes

There are required fields in this form marked ⓘ .

The new password must have at least 8 characters, at least 1 digit(s), at least 1 lower case letter(s), at least 1 upper case letter(s), at least 1 non-alphanumeric character(s) such as as *, -, or #

Very Important: DO NOT FORGET THE NEW PASSWORD

How to enroll yourself in a Module?

Some modules need an “enrolment key” to enter it for the first time. Ask you teacher for this key.

Enrolment options

 Pediatrics-5

Teacher: Manar Aref

Teacher: Eman Sharaf

▼ Self enrolment (Student)

Enrolment key

Enrol me

Professional Behavior of student in the case checklist

Students Name:

Date:

End of module (Summative):

Module title:

Student's Signature :.....

Tutor's Name:.....

Criteria	Scale: 1 and 2 is unsatisfactory, 3, 4 and 5 is satisfactory performance					Comments
<u>Preparation:</u> Is well prepared with relevant information, uses a variety of references and summarizes key points	1	2	3	4	5	
<u>Critical thinking:</u> Identifies problem, analyzes problem, suggests possible reasons for the problem, helps group to formulate learning objectives	1	2	3	4	5	
<u>Participation:</u> Participates actively, talks on turn and listens attentively to others	1	2	3	4	5	
<u>Communication Skill & Group Skills:</u> Respects tutor and colleagues, communicates well uses appropriate language, accepts feedback and responds appropriately. Contributes to group learning, shares information with others, demonstrates sensitivity to views and feeling of others, takes on assigned tasks willingly	1	2	3	4	5	
<u>Presentation skills:</u> Presents the information relevant to the learning objective of the case, explains clearly the reasoning process with regard to solving the problem	1	2	3	4	5	
	SATISFACTORY					UNSATISFACTORY

-The students portfolio (October 6 university - faculty of medicine - 2020 - 2021):

- Each student should go through one of the following links to make his google e-portfolio where he (she) will put the progression he will achieve in each module WEEK BY WEEK and e will send the link to the tutor to revise it. PAPER WORK OR CD OR E-MAIL ARE NOT ACCEPTED.

- Links to make e-portfolio using google sites

https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&cad=rja&uact=8&ved=2ahUKEwi9xOnhrYDzAhVERkEAHb_0DCgQFnoECC0QAQ&url=https%3A%2F%2Fwww.montclair.edu%2Fmedia%2Fmontclair.edu%2Foit%2Fdocumentation%2Fportfolios%2FGoogle-Sites-ePortfolio-3-13-PF-Final.pdf&usg=AOvVaw2PTNDhBjsWkTV75RJGCoen

https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&cad=rja&uact=8&ved=2ahUKEwi9xOnhrYDzAhVERkEAHb_0DCgQFnoECC8QAQ&url=https%3A%2F%2Fshakeuplearning.com%2Fblog%2Fhow-to-create-powerful-student-eportfolios-with-google-sites%2F&usg=AOvVaw0koWnu2boD4ufVDvE_jtdo

- The student portfolio should contain the followings:

- The student binder for the portfolio should contain the followings:

- Binder should contain the names of the group of the students, and contact information (telephone , - emails) , their leader and names and emails of their tutor (s),

- Binder of portfolio may be either in papers or electronic.

- Students should submit their proposal (protocol) of the manuscript or how to accomplish the manuscript before end of term to have the marks of the portfolio

- Students should make an assignment about (Artificial intelligence and medicine) and submit it either as power point or as a you tube channel before end of term to have the marks of the portfolio

- Students should collect the presentations the group will do along the sessions of the cases and put them in the binder of the portfolio.

- Any community medical work the student completed under supervision of a staff presenting the followings:

- Name of staff & position
- Date
- Site
- Results
- Obstacles

- Conferences attended by him if present

- Visits done to clinical departments to see relevant experiments if present.

- PORTFOLIO SHOULD BE SUBMITTED IN FULL BY end of term

- Portfolio scoring (Rubrics for evaluating portfolios):

- Each student should be rated as one of the followings :

- Outstanding & he will be given 95% to 100% of the portfolio mark
- Acceptable & he will be given 70% to 75% of the portfolio mark
- Marginal & he will be given 60% to 65% of the portfolio mark
- Unacceptable & he will be given less than 60% of the portfolio mark

1- Paragraph that summarizes his learning experience and contain the followings in short:

- Resume of him
- Impact made by the education on him
- His present strengths
- His present weakness
- Future suggestions & goals

2- Any community medical work the student completed under supervision of a staff presenting the followings:

- Name of staff & position
- Date
- Site
- Results
- Obstacles

3- His cases , objectives he got by brain storming , presentations done by him , (power point)

4- Medical pics & posters done by him or his group if present

5- Web page , or brochure constructed by him or his group if present

6- Conferences attended by him if present

7- Visits done to clinical departments to see relevant experiments studied

8- Two to three education events attended by him

9- Two to three meetings with educational or clinical supervisors

10- Get started with scopus

1,2,3 SHOULD BE FORMED IN THE URINARY MODULE

3,4,5,6 SHOULD BE FORMED IN THE GIT MODULE

3,7,8,9,10 SHOULD BE FORMED IN THE OBSTETRICS MODULE

BONUS MARKS ADDED TO THE PORTFOLIO MARK ONLY IF NEEDED

- If any student shared in a paper with any of the staff
- If any student constructed cases on sectra table
- If any student shared the activities of the quality unit
- If any student shared in the electronic evaluations

- Portfolio scoring (Rubrics for evaluating portfolios):



- Each student should be rated as one of the followings :

- Out standing & he will be given 95% to 100% of the portfolio mark
- Acceptable & he will be given 70% to 75% of the portfolio mark
- Marginal & he will be given 60% to 65% of the portfolio mark
- Unacceptable & he will be given less than 60% of the portfolio mark

FIFTH YEAR	Mid module	Continuous assessment	End module	OSPE	OSCE
OBSTETRICS	27 marks electronic	10 marks total 1.5 attendance sections 1.5 attendance cases 4 presentation 3 portfolio	50 marks total 40 MCQ 10 SAQs electronic	38 marks total -slides electronic	OSCE
GIT SM502	50 marks electronic	10 marks total 1.5 attendance small groups 1.5 attendance cases 4 presentation 3 portfolio	80 marks total 70 MCQ 10 SAQs electronic	60 marks total -slides electronic	OSCE
URINARY SM503	27 marks electronic	10 marks total 1.5 attendance sections 1.5 attendance cases 4 presentation 3 portfolio	50 marks total 40 MCQ 10 SAQs electronic	38 marks total -slides electronic	OSCE

Cases for the fifth year students (first term 2023-2024)

Urinary module

lower urinary tract infection

Case 1 A: Red week 1 and discussed week 2

Male, 65 years old, diabetic for 10 years, taking oral hypoglycemics, and hypertensive for 25 years, taking beta blockers. The patient has been diagnosed with CKD for three years with a baseline creatinine level of 1.8 g/dl

The patient presented to the emergency room with abdominal pain, diarrhoea, and anuria

On physical examination, the patient was awake, alert, and oriented to time, place, and person; BP 90/50, HR 100/min, Temp 38.5C; decreased skin turgor; and loss of elasticity. The left lower limb was swollen, hot, red, and tender; the sole of the foot was contaminated with a diabetic ulcer

The abdomen exhibits epigastric tenderness, but all other findings are normal. The chest examination was normal, and the heart reveals a mild, blowing systolic murmur at the heart's apex

HB 6,2 g/dl, Plt 245000, TLC 8.5, creatinine 2,6 g/dl, and urea 225 g/dl are the results of the investigation. Na 128 meq/L, K 4.9 meq/L, CRP 157, albumin 3.5 g; liver enzymes and bilirubin normal.

- 1- What is the most probable diagnosis?
- 2- What is the next step to reach the diagnosis?
- 3- What is the suggested line of management?

Case 2: Red week 2 and discussed week 3

Hematuria

A 68-year-old man diabetic and hypertensive under medications presents with microscopic hematuria.

- What are questions of the medical and surgical history should be asked?
- What are the clinical examination (general and local)?
- What are the investigations should be done?
- What are the D.D of hematuria?
- What are the recommended treatment?

Objectives: to discuss and study the following items

Case2 Non-Alcoholic Fatty Liver Disease. Read week 9 and discuss week 10,11,12

A 37-year-old morbidly obese, previously diagnosed diabetic male was discovered to have an echogenic liver during an abdominal ultrasound for hematuria. He has no discomfort in the right upper quadrant. He consumes alcohol infrequently and does not take his diabetes medications regularly. In addition to hepatomegaly, his physical examination revealed pathological obesity with a body mass index of 42 kg/m² and morbid obesity. The results of a blood test reveal slightly elevated aminotransferase levels, significantly elevated blood sugar levels, and HbA1c levels of 14.

- What is the provisional diagnosis?
- What are the usual clinical features of such a condition?
- What are the different causes for this condition?
- What are the diagnostic tools for this condition?
- What are the treatment options for this condition?

Objectives;

Obstetrics module :

Case 1: GIT disorder (liver)

Red week 3 and discussed week 4,5.

Acute Fatty liver in pregnancy

- ✓ A 23-year-old G1P0 presents with a 3-day history of malaise, anorexia, nausea, and vomiting. Her first trimester sonography reveals she is 34 weeks pregnant. Her pregnancy has thus far been uncomplicated. She denies a past of medical issues and operations.
- ✓
- ✓ On physical examination, the patient has jaundice symptoms. Temperature: 98.9 degrees Fahrenheit; blood pressure: 120/78 mm Hg; pulse: 105 beats per minute; respiratory rate: 18 breaths per minute; lungs: clear; heart rhythm: regular. HR: 99 beats per minute with a systolic ejection murmur of grade 2/4. The fundal height is 33 cm, and there is no guarding or recurrence in the epigastric tenderness. The extremities lack edoema and tenderness. The foetal heart rate trace demonstrates a baseline of 150



seconds, moderate variability, positive accelerations, and no decelerations. On the tocodynamometer, irregular contractions are detected every 10 to 25 minutes, although the patient is unaware of them. On digital examination, her cervix appears closed and long. The ultrasound performed at the bedside reveals foetal biometry consistent with 34 weeks, an anterior placenta, and normal amniotic fluid.

✓

✓ During the evaluation, the patient vomited three times. Antiemetics and intravenous fluids with potassium are administered. The results of the laboratory are as follows: Hct 33%, WBC $19 \times 10^3/L$, platelet count $127,000/mm^3$, AST 482 IU/L, ALT 402 IU/L, conjugated bilirubin 5.2 mg/dL, total bilirubin 6.0 mg/dL, LDH 302, serum creatinine 1.1 mg/dL, serum glucose 51 mg/dL, K^+ 3.0 mEq/L. Amylase, lipase, ammonia, uric acid, and coagulation tests are normal. Urine analysis is notable only for specific gravity of 1.03 and large ketones, but is negative otherwise. What is the differential diagnosis?

✓ What is the most likely diagnosis?

✓ What are the maternal risks associated with this diagnosis?

✓ What are the foetal risks associated with this diagnosis?

Objectives

Case 2: Red week 7 and discussed week 8

Renal disorders (cases)

Pyelonephritis with pregnancy

✓ A 20-year-old G1 PO woman is hospitalised for acute pyelonephritis at 29 weeks of gestation. She does not have a history of pyelonephritis. Since 48 hours ago, she has been receiving ampicillin and gentamicin infusions. She is experiencing severe difficulty of breath. Her heart rate is 100 beats per minute (bpm), her respiratory rate is 45 beats per minute and laboured, and her blood pressure is 120/70 mm Hg. The right costovertebral angle is tender. The examination of her abdomen reveals no masses or tenderness. The foetal heart tones range between 140 and 150 beats per minute. The culture of urine revealed ampicillin-sensitive *Escherichia coli*. What is the most likely diagnosis?

Objectives