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Kingdom of Saudi Arabia  
MINISTRY OF HIGHER EDUCATION  
KING FAISAL UNIVERSITY  
**COLLEGE OF MEDICINE**



University of  
Groningen

King Faisal  
University



**Adoption of UoG Medical Curriculum**



**GMCA 2012**

**STUDENT HANDBOOK**

Second Edition February 2014

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## **IMPORTANT**

The contents of this handbook were compiled and organized from the existing rules and regulations of King Faisal University and guidelines of the Groningen Medical Curriculum Adoption (GMCA). This serves as the official guide aimed for the GMCA 2012 students. Any policy and order promulgated after the issue of this material shall be honored.

The College of Medicine has the sole right and authority to modify contents of this student guide.

It is advised that medical students, faculty members and staff of the College are knowledgeable of its contents.



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## Message from the President



The KING FAISAL UNIVERSITY is committed to academic excellence in the classroom, relevance in terms of its curricula; and caring, personal attention to its students. In the 14 years that the College of Medicine has been in existence, these have been vibrant goals of the College. Because of these, the college has produced physicians of global competency who have not only excelled in their practice within the Kingdom but abroad as well.

With the recent implementation of the Groningen Medical Curriculum Adoption (GMCA) programme, I am very confident that the College, under the capable Deanship of Dr. Waleed Albuali and his colleagues would far exceed its past achievements and records.

The College itself is composed of the very best faculty and staff, hired locally and internationally, experts in their fields of practice. It certainly boasts of state-of-the-art equipment and facilities to enhance medical education.

It is with great honour that I would like to personally welcome all of you to the college and I am very confident that you will be provided the academic tools, practical skills and opportunities you need in order to become excellent physicians in the near future. So, come and realize your dreams with us as we would consider it a great privilege to guide, nurture and transform you.

**DR. ABDUL AZIZ BIN JAMALUDDIN ALSAATI**  
University President

A handwritten signature in blue ink, consisting of a large, stylized 'A' followed by a series of loops and a final vertical stroke.



## Message from the Vice President for Academic Affairs



Greetings! It is my pleasure to once again welcome everyone to the College of Medicine. To our new students, you will face a new chapter in your life in which everything will be dependent on how much effort you are willing to give. It may not be easy but it will be worth all your sacrifices. To the second year students, I congratulate you for persevering and working out hard to reach the next level. Be excellent models to your new colleagues.

My dear faculty and staff, I thank you for supporting your Dean and the administration in this great undertaking. I humbly request you to be one of the pillars on the continuity of the GMCA program. May the second edition of your handbook be useful as ever for the benefit of every stakeholder in the college.

DR. BADR ABDULATIFF ALJOHAR  
Vice President for Academic Affairs

A handwritten signature in blue ink, which appears to be "Badr Aljohar". The signature is fluid and cursive, written over a light blue background.





## Message from the Dean



Welcome to a new year in the College of Medicine. I am excited to continue what we have started last year with you. Indeed, the inauguration of the GMCA program was full of trials, but we were able to contribute with our individual efforts to achieve a satisfying result. Yet, this is just the second step and several more shall be made in the near future.

Changes are inevitable but the improvements are attainable. With the help of this new edition of the Student Handbook, it is my wish that not only do we comply with what is required, but we also need to exceed the expectations of the whole student body, parents, College faculty and staff, the University and the community as a whole.

Everyone has an important role to play. I hope that each one will do his and her best to achieve this great goal with me.

DR. WALEED HAMED AL BUALI  
Dean, College of Medicine

A handwritten signature in blue ink, consisting of a stylized, cursive script that appears to be the name 'Waleed Hamed Al Buali'.



## Preface

The Groningen Medical Curriculum Adoption (GMCA) Unit through the honorable Dean Dr. Waleed Albuali would like to give our sincerest thanks to all of the faculty members and staff who contributed to this Student Handbook. Your efforts are well appreciated, be it in big or little things. Without your cooperation, this second edition of our handbook would not have been possible.

The inauguration of our program has been successful and I hope that you will still endure until we produce the product we have been aiming for. It is a privilege to be working with everyone in the College.

In order to complement the GMCA curriculum, this second edition contains modifications such as the following; a new format for easier browsing of contents, improved code of conduct for students, updated organogram and new student activities gallery.



DR. MAGDY HASSAN BALAHA  
GMCA Coordinator  
Manuscript Coordinator  
Revisions Editor

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## History of King Faisal University

King Faisal University was founded in 1975. It was originally composed of two campuses which were located in Dammam and Al-Hassa in the Eastern Province of Saudi Arabia. Its programs included Medicine, Administrative Science, Architecture, Agricultural Veterinary Sciences and Urban Planning.

Royal Decree No. A/18/1, dated 15/9/1430H, corresponding to 5/9/2009 declared that King Faisal University shall separate into two independent institutions: King Faisal University in Al-Hassa and Dammam University in Dammam with completion in 2010.

The university has educational and experimental farms in Al-Hassa and conducts advanced research in Agriculture and Animal Husbandry.





## History of the College of Medicine

The College of Medicine in Al-Hassa was established by Royal Decree No.7/B/15252 dated 18/11/1421H in Al-Hofuf.

A temporary College building has been established to accommodate 1,200 male and female medical students and it consists of three main buildings: The Central Building includes medical laboratories (Physiology, Biochemistry, Anatomy, Histology, Pathology, Pharmacology, Parasitology, Microbiology, Neuroscience, Clinical skills and Simulation laboratory). The Male and the Female Students' Buildings are gender separated complexes providing facilities for either students and staff. Both contain lecture halls, classrooms, library, administrative offices, faculty offices, and a computer laboratory.



## Innovations from GMCA 2012

With rapid development in global health, the College of Medicine has adopted a novel program to cope with the information explosion, the difficulties of traditional instructional strategies to cover current trends and to fulfill the community's medical needs. The new medical program is poised to face these challenges by producing self-learning, competent and professional physicians.

The newly established program is primarily based on Problem- Based Learning (PBL). Evidences from distinguished PBL institutions reported that this program enables students to become self-directed learners with improved clinical knowledge and skills, and has motivated students and graduates to become qualified researchers.

Reasons for change:

- Increased societal needs
- Change in educational theories and technology

Characteristics of a PBL graduate:

- Ethical practice
- Community oriented and compassionate
- Knowledgeable, self-directed learner and critical reader
- Interdisciplinary worker with team management skills
- Competent and skilled in patient management

## Goals of the GMCA 2012 Program

### Goal I:

A curriculum responsive to the needs and expectations of the Saudi community.

### Objectives:

1. To work with the community to attempt to meet societal needs.
2. To initiate and enhance collaboration between the College of Medicine, Ministry of Health, the private health sector and national social organizations to further serve the community.

### Goal II:

Prepare students for lifelong learning in the practice of medicine and adaptation to changes in medicine and health care.

### Objectives:

1. To motivate students to be acquainted with the required skills and to continue self-learning throughout their careers.
2. To provide students with leadership skills to work as members of a multi-disciplinary health care team.

## GMCA 2012 Overview

The program consists of three phases: Preparatory Year, Medical Program and Internship. The Preparatory Year concentrates on developing skills, knowledge and attitudes in preparation for the medical program. This requires a major focus not only in the English language but also in development of prerequisite scientific knowledge and skills. In the first three years of the medical program, all body systems, organs and diseases are covered in a modular form using the block system. Each block is concerned with a main domain of health, with each year containing four blocks. There are also two longitudinal domains: Knowledge Progress and Professional Development.

Early exposure to medical cases from Year One enables the medical student to focus scientific knowledge gained onto a clinical applied setting. During the next three years, the PBL approach is combined with lectures to augment the learning process. Besides PBL, research skills will be developed and practiced. Professional development is focused on developing expected physician's behavior in the outpatient clinics, primary health care centers and hospitals.

In the final two years, Clerkship rotations will be held in different clinical facilities such as hospitals, medical centers and primary health care centers. Case-based learning will be utilized besides the routine clinical work. The student will also assist in medical management. Research is furthermore emphasized during this period.

Internship year will be similar to other medical schools in the Kingdom of Saudi Arabia, with some modifications to include research activities.



## GMCA 2012 at a Glance

Year	Block	Block	Block	Block	Block	Block	Block	Block	Block
Year 1	Fundamentals of Medicine PT1 Islamic Faith	Infection and Immunity PT2	Circulation and Respiration PT3 Islamic Elective	Mind and Motion PT4					
	Motions and Senses PT5 Contemporary Issues	Emotion and Senses PT6	Dysregulation Chronic Disease I PT7 Islamic Elective	Dysregulation Chronic Disease II PT8					
Year 2	Oncology, Trauma-Orthopedics PT9 Elective 1	Acute Loss of Function PT10 Free 1	Life Cycle I PT11 Elective 2	Life Cycle II PT12 Forensic					
	Medicine 1 PT13 Elective 3	Surgery 1 PT14 Elective 4	Life Cycle III PT15 Elective 5	Movement PT16 Free 2					
Year 5	Medicine 2 PT17	Surgery 2 Community PT18 Emergency	ENT PT19	OPT RAD DER ANE ORT SOC PSY PT20					
	Medicine 2 mo	Surgery 2 mo	Gynecology 2 mo	Pediatric 2 mo	PHC 1 mo	Elective 1 mo	Research Module 2 mo		
Year 6	Skill/Clerkship	Clerkship	Internship	Knowledge & PT					PD & Global



Supporting Team / Reports Every Two (2) Weeks

Chairman	d	as	as	fw	fw	nj	fw	am	nj	as	am
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Year 1 & 2 committees	adc	fdc	asc	esc	erc	ssc	qac	slc	elc	stc	csc
-----------------------	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

Coordinator	mh	fk	mj	ws	af	as	ws	my	cl	ms	ak
-------------	----	----	----	----	----	----	----	----	----	----	----

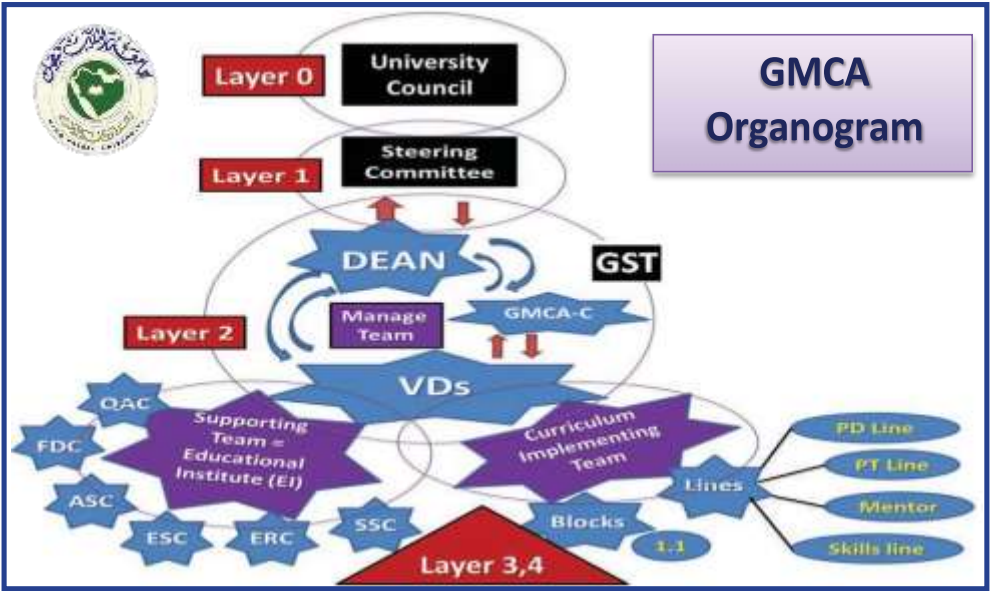
Members	colin	ajit	dalia	naboli	mosad	essam	gaber	hatem	imtiaaz	ayub	gaber
	manoj	murad sattar	amani	anila	feroze	feras	imran	seba	omyma	ibtisam	toukhy
	feroze	nabib	gosai	sediki	gihan	doaa	dalia	imtiaaz	maujid	talha	gihan
	naglaa				students	students	students				

**Legend: Committees**

**Legend: Saudi Committee Chairmen**

D : Dean Waleed Hamed Albuali  
AS : Dr. Abdulrahman Al Sultan  
FW : Dr. Fahd Al Wadaani  
NJ : Dr. Nadia Jadidi  
AM : Dr. Abdulrahman Al Mulhim  
HW : Dr. Hamed Al Wadaani  
OS : Dr. Ossama Al Saeed

ADC : Advisory Committee  
FDC : Faculty Development Committee  
ESC : Educational Support Committee  
ERC : Educational Research Committee  
SSC : Student Support Committee  
QAC : Quality Assurance Committee  
SLC : Skill Line Committee  
ELC : Ethics Line Committee  
STC : Statistics Committee  
CSC : Commucation Skills Committee



GMCA STEERING TEAM (GST)

Implementing Team / Reports Every Two (2) Weeks

as	fw	am	hw	fw	am	hw	as	os	os	hw	am	fw
b1.1c	b1.2c	b1.3c	b1.4c	pd 1c	mnc	ptc	pyc	b2.1c	b2.2c	b2.3c	b2.4c	pd 2c
mb	es	aa	sr	la	oz	eh	mn	sb	ht	hq	bg	jk
azza	sherine	gosai	toukhy	eglal	mosad	toukhy	oda	amani	seba	zahrar	surendra	shaji
gosai	ayub	amani	ajit	sayed	kamal	naushad	prakash	naushad	arif	ibtisam	ashor	essam
dalia	shahina	dalia	shahina	feroze	latifa	faten	anila	laiche	fouda	maujid	naglaa	ibtisam
students	students	students	students	students				students	students	students	students	students

**Legend: Committees**

- B 1.1c : Block 1.1 Committee
- B 1.2c : Block 1.2 Committee
- B 1.3c : Block 1.3 Committee
- B 1.4c : Block 1.4 Committee
- B 2.1c : Block 2.1 Committee
- B 2.2c : Block 2.2 Committee
- B 2.3c : Block 2.3 Committee

- PD 1C : Professional Development 1 Committee
- PD 2C : Professional Development 2 Committee
- PTC : Progress Test Committee
- PYC : Preparatory Year Committee
- MNC : Mentors Line Committee

B 2.4c : Block 2.4 Committee





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## **PART 1 GUIDING PRINCIPLES OF THE UNIVERSITY AND COLLEGE**

### **1.1 King Faisal University's Mission Statement**

#### **1.1.1 Vision**

Leading in community engagement through excellence in education, research and leadership.

#### **1.1.2 Mission**

To serve the community with excellent teaching and learning, relevant and respected research, lifelong learning opportunities, effective and efficient administration, leadership service and development, and community engagement for mutual enrichment.

#### **1.1.3 Goals**

1. Excellent teaching and learning.
2. Relevant and respected research.
3. Lifelong learning opportunities.
4. Effective and efficient administration.
5. Leadership service and development.
6. Community engagement for mutual enrichment.

### **1.2 College of Medicine Mission Statement**

#### **1.2.1 Vision**

To become a model in community engagement through excellence and international recognition in medical education, research and health care.

#### **1.2.2 Mission**

The College is committed to promote higher standards in medical education, health care, research and community health services.

To advance this mission, the college will:

1. Utilize innovative and modern methods to keep up higher standards in education,
2. Promote student-centered learning;
3. Foster life-long & self-directed learning and leadership skills;
4. Create a conducive environment for meaningful research relevant to local and international needs;
5. Keep liaisons with local, national and international institutions to promote and exchange knowledge.

### **1.2.3 Values**

1. Islamic Values
2. Excellence
3. Creativity
4. Compassion
5. Leadership
6. Responsiveness to community
7. Commitment to life-long learning
8. Integrity

### **1.2.4 Objectives**

1. Prepare qualified competent generations of medical practitioners equipped with adequate knowledge and skills necessary to lead the health team working in the Kingdom, to keep pace with the modern requirements and to meet the health challenges of the twenty-first century competently.
2. Expand health education in the region and provide high quality health services to the local community.
3. Strengthen the capacity for scientific research and

encourage the conduct of health research to reduce the risk of disease.

4. Focus on continuous medical education programs to enhance the knowledge, awareness and skills of workers in the health services .
5. Offer graduate programs in clinical specialties and basic medical sciences to prepare specialists to meet the needs of the Kingdom.
6. Leadership in reference to health education.
7. Build systems and overall quality standards in teaching and learning, training and development and in the provision of health services for the advancement of the general health situation in the country.

### **1.3 Code of Conduct for Students**

Students are expected to follow the Code of Conduct of the University. Failure to observe and involvement in a breach of discipline subjects a student to necessary actions.

#### **1.3.1 Classroom Rules and Regulations**

The rules and regulations provided below will be implemented to put order during classroom activities. Strict observance is required. Failure will result in disciplinary actions and penalties.

##### **1.3.1.1 Monitoring of Attendance**

The university strictly implements attendance monitoring. A student should attain at least an accumulated average of 75% mark of the total attendance per block, in order to take the final written examinations. Recording of attendance is a separate entity from the academic marks. The monitoring of attendance in the College includes the following: theme lectures, clinical exposures, practicals and workshops.

- 1.3.1.1.1 A student is considered absent if he/she arrives after the first 15 minutes for a fifty minute class, 30 minutes for a two hour class, and 45 minutes for a three hour class.
- 1.3.1.1.2 A student is considered late if he/she arrives between 1 - 14 minutes upon the start of class.
- 1.3.1.1.3 One absence will be calculated as 1 point while one late will be calculated as 0.5 point in the attendance record. All the points are collectively added to determine the overall percentage of attendance.
- 1.3.1.1.4 For the entire duration of the teaching session, students are not allowed to leave. Students who leave their classes earlier than the prescribed time will be marked absent.
- 1.3.1.1.5 Absences due to sickness will be considered excused if a medical certificate issued from an accredited clinic or hospital, is presented by the student upon returning to class.
- 1.3.1.1.6 Absences related to participation in academic/ extracurricular activities inside or outside the university are considered excused if a duly signed notification from the Dean and/or faculty member/s is presented at least three days prior to the date of absence, duly approved by the academic committee.
- 1.3.1.1.7 Instructor/s should be informed if a student cannot attend his/her class due to sickness through a sick call (either by the student, parent, guardian, and/or classmate) or a written/verbal notification from the student or parent/guardian.
- 1.3.1.1.8 Faculty members are expected to begin their classes promptly. Various unavoidable circumstances may cause them to be late or miss a class. In such cases the

following guidelines are observed:

- 131.181 For a fifty minute class, students must wait for fifteen minutes before leaving.
- 131.182 For a two hour class, students must wait for thirty minutes before leaving.
- 131.183 A student representative should inform the Block Coordinator about the failure of the teacher to arrive within the expected waiting period.

### **1.3.1.2 Subject Requirements**

- 1.3.1.2.1 Deadline for submission of subject, course, and Professional Development requirements is up to 3 days after the day of presentation.
- 1.3.1.2.2 Students who fail to submit subject requirements on time will have a deduction in the total score based on Block policies.

### **1.3.1.3 Uniforms and University Identification**

- 1.3.1.3.1 The required dress code is compulsory unless the student has a written permission from the authorized personnel. This should be presented on demand.
- 1.3.1.3.2 Every enrolled student should carry his/her Identification card (ID). Anyone caught using others or faked IDs or violate this rules will be penalized accordingly.

### **1.3.1.4 Student Rights and Other Concerns**

Students have the rights to quality education and equal opportunities. Studying hard and passing course requirements, abiding the rules and regulations of the university, observing the code of conduct and the teachings of Islam are expected from each student. Complaints, appeals and representation policies are

available through the University's Students Rights Manual.

### **1.3.1.5 Breach of Discipline and Disciplinary Action**

- 1.3.1.5.1 The Dean of the College is the Chairman of the Disciplinary Committee. He is responsible for the implementation of the disciplinary policies and decision making with regards to breach of the code of conduct among the students.
- 1.3.1.5.2 The penalties stated in this guidebook shall apply to all the students of the College of Medicine. Issues not covered in this booklet will be referred to the University Student Manual and Code of Discipline.
- 1.3.1.5.3 Smoking is strictly prohibited inside the University. Anyone violating this rule will face disciplinary action.

### **1.3.1.6 Eating and drinking**

- 1.3.1.6.1 Eating and drinking inside the auditorium and lecture halls is strictly prohibited. Students who have underlying health conditions and require to eat on a designated time, he/she may to eat or drink when necessary but should be responsible in putting the litter in the trash bins. He/she must present a medical abstract or medical certificate.
- 1.3.1.6.2 Students may to eat or drink before after class hours in the college canteen. They are to be responsible in putting the litter on the trash bins.

### **1.3.1.7 Professional Conduct**

Professional conduct is expected to be developed by medical students prior to becoming physicians. It generally includes participating attentively during lectures, making assignments at home and during self-directed learning, coming prepared and on time for class,

being polite to people, wearing the appropriate uniform and many more. On the other hand, unprofessional behavior inside the classrooms will be monitored.

#### 1.3.1.7.1 Unprofessional Behaviors

- 1.3.1.7.1.1 Tardiness: includes coming late in class, clinical exposures, practicals and workshops.
- 1.3.1.7.1.2 Inattentiveness: includes sleeping, playing, creating inappropriate noise, making assignments and others that are unrelated to the current activity.
- 1.3.1.7.1.3 Walking in and out of the activity halls.
- 1.3.1.7.1.4 No uniform or improper wearing of the uniform.
- 1.3.1.7.1.5 Use of mobile phones, computers, iPad© or other technological gadgets: Use of mobile phones, tablets, computers or other electronic devices is strictly prohibited during class hours. It should be turned off. If a student is expecting an important call, he/she should inform his/her teacher prior to the start of class.
- 1.3.1.7.1.6 Other issues to be decided in a case-to-case situation.

#### 1.3.1.7.2 Students who will be caught behaving unprofessionally, the following guidelines will be observed:

- 1.3.1.7.2.1 1st offense: Verbal reprimand from the teacher and the issuance of a violation slip.
- 1.3.1.7.2.2 2nd offense: Warning slip with written explanation to be made by the student and confiscation of gadget.





Above: Dr. Waleed Hamed Al Buali, Dean of the College

Below: Faculty Members and Students at the Auditorium





Above: (Second from Left) KFU President His Excellency Dr. Abdul Aziz Bin Jamaluddin Al Saati during his visit to the college.

Below: Dr. Al Saati interacts with medical students during presentation.



1.3.1.7.2.3 3rd offense: Warning slip with written explanation to be made by the student, confiscation of gadget, and incident report to be made by the teacher. Parents/guardians will also be informed about the incident.

1.3.1.7.2.3.4 All confiscated gadgets can be collected from the GMCA office.

1.3.1.7.3 Repeated acts will be endorsed to the College Board headed by the Dean, to take appropriate disciplinary actions provided in the University handbook.

1.3.1.7.4 Professional Development (PD) marks of violators will be deducted accordingly. Student will be given violation slips where they can also write their explanation. Violations of students are recorded, compiled and endorsed to the Block and Professional Development coordinators.

1.3.1.7.5 Warning will be given to all violators. It will be kept in the student's file accordingly.

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**PART 2 THE MEDICAL CURRICULUM 2012 (GMCA 2012)****2.1 General Provision**

These guidelines apply to the teaching and examination of the Bachelor of Medicine, Bachelor of Surgery (MBBS), herein referred to as 'the program'. The program is provided by the College of Medicine – King Faisal University; referred to as 'the College'. {Teaching and Examination Guidelines and Controls (TEGC) 2012, Art 1.1, 2012}

Definitions (TEGC, Art 1.2, 2012)

The following definitions apply to these guidelines:

**Student.** A person enrolled in the university for the purpose of taking course units and/or examinations leading to the conferral of a university degree.

**College Board.** It is responsible body similar to the Board of Examiners in Western Countries. Dean and Vice Deans constitute the Appeal Committee according to the KFU bylaws. Composed of the Dean, Vice Deans and Department Chairmen. It has many regulatory and supervising functions. It assigns the Block and Line Coordinators, Producers and Educationalists. It organizes and coordinates the overall plans of teaching and examinations.

**Block Coordinator.** Faculty member responsible for organization, running, and management of the block and supervising the final preparation and conduct of all tests (form and content).

**Line Coordinator.** Faculty member responsible for organization, running, and management of the line and supervising the final preparation and conduct of all tests (form and content).

**Producer.** Staff member responsible for all logistics related to the block.

**Educationalist.** Faculty member responsible for the educational

philosophy and revision of the block content. He also is responsible (with the examination committee) for the revision of the questions referred to him from the block coordinator and re-sending them to the Block Coordinator before final preparation.

**Examination.** An investigation of the acquired knowledge, understanding and skills of the student, as well as the assessment of the results of that investigation for the course unit in question (Block, Line or part of them).

**Practical Obligations.** Practical exercise in one or more of the following forms:

Taking part in a tutor group.

Taking part in a mentor group

Taking part in a group training students to function as a doctor (coaching group)

Taking part in a skills group

A written assignment or draft

Conducting research

Writing a report/thesis

Taking part in a field trip or excursion

Taking a clerkship

Taking part in workshops

Taking part in ordinary practical or lab session

Taking part in IT lab session

Practical Tests

**Semester.** Half of the academic year comprising 18 teaching weeks excluding any vacation, starting on and ending on a date to be determined by the Ministry Calendar Guidelines and announced by the University.

**Credit Unit.** One credit unit is the equivalent of 15 sessions (lecture; 1 contact hour, practical; 2 contact hours, workshop; 3 contact hours). Each contact hour is composed of 50 minutes.

**Study Workload.** Number of credit units per year must not exceed 36 according to the Saudi National Qualification Framework for Higher Education. The program has a study workload of 180 credit units (Saudi credit system). Hours of study include the typical contact hours and self-study hours.

**Self – Directed Learning (SDL).** Program guarantees the student self-learning as one of the main philosophies of the recent medical curricula. SDL represents a major part of the student's timetable. Nearly 1/3 of the total week time is for direct Teacher-Student contact while the remaining time is for SDL. The student will use this time in the library, laboratories, IT areas for reading, research, finding evidence, solving a problem or preparing assignments. Also, SDL is the main learning strategy for the Knowledge Development Line in preparation for the four yearly progress tests.

## 2.2 Aim of the Program (TEGC, Art 1.3, 2012)

The MBBS is the start of the training continuum for becoming a physician. The Learning Outcomes that a Saudi Physician must satisfy were set on the Saudi Meds competencies. All new medical colleges in KSA should ensure these competencies for their graduates. These competencies are similar to the recent competency frameworks adopted such as the GMC Tomorrow's Doctor Competencies in England, ACGME competencies and GMER-ME in USA, and CanMEDS in Canada. Groningen University from the Netherlands translated the CanMEDS competencies and incorporated them into seven competencies for the undergraduate medical students. This is the basis of the current program in the college.

## **2.3 Competencies Considered in the Program (TEGC, Art 1.4, 2012)**

### **2.3.1 Saudi Meds Competencies**

#### **2.3.1.1 Approach to Daily Practice.**

- 23.1.1.1 Utilization of the basic and clinical sciences in daily practice
- 23.1.1.2 Evidence – based medical practice
- 23.1.1.3 Teamwork and inter – professional collaboration
- 23.1.1.4 Leadership and management skills

#### **2.3.1.2 Doctor and Patient Care:**

- 23.1.2.1 The focused practice on patient’s safety and well-being.
- 23.1.2.2 Basic clinical procedures
- 23.1.2.3 Patient management, investigation and managing common medical problems, including acute and chronic problems
- 23.1.2.4 Management of life-threatening medical conditions
- 23.1.2.5 Patient education
- 23.1.2.6 Clinical reasoning, decision making and problem solving skills
- 23.1.2.7 Consideration of patient safety and error management
- 23.1.2.8 Applying bio-psycho-social approach in certain clinical encounters

#### **2.3.1.3 Doctor and the Community**

- 23.1.3.1 Undertaking of population healthcare/health system in Saudi Arabia

- 23.1.32 Orientation to health services/providers in the community
- 23.1.33 Health promotion and disease prevention in the community
- 23.1.34 Commitments to the social responsibility of the doctor and the medical colleges
- 23.1.35 Role as a health advocate

#### **2.3.1.4 Communication Skills:**

- 23.1.41 Physician's commitment to the demonstration of appropriate communication skills and behaviors with patients and their families, colleagues, other health professionals and the public.
- 23.1.42 Apply general principles of communication skills
- 23.1.43 Communication using different methods in different patients and clinical encounter
- 23.1.44 Breaking bad news

#### **2.3.1.5 Professionalism:**

- 23.1.51 Role of the physician and obligations towards the medical profession and colleagues.
- 23.1.52 Professional attitudes and behavior of doctors
- 23.1.53 Basic ethical principles and their application to medicine
- 23.1.54 Acceptance of different roles and responsibilities of a medical professional
- 23.1.55 Roles as a teacher
- 2.3.1.5.5 Quality focus practice (maintenance and development of quality)
- 2.3.1.5.6 Professional development, self–assessment and professional growth



### 2.3.1.6 Physician and Information Technology

2.3.1.6.1 Keep patient records

2.3.1.6.2 Access data sources

2.3.1.6.3 Application of medical informatics to the principles of health care

### 2.3.1.7 Doctor and Research

2.3.1.7.1 Introduction to medical research and appreciation of value of research in medical field

2.3.1.7.2 Conducting medical research

## 2.3.2 CanMEDS Competencies

**2.3.2.1 Medical Expert.** As medical experts, physicians integrate all of the CanMEDS roles, applying medical knowledge, clinical skills and professional attitudes in their provision of patient - centered care.

**2.3.2.2 Communicator.** As communicators, physicians effectively facilitate the doctor - patient relationship and the dynamic exchanges that occur before, during, and after the medical encounter.

**2.3.2.3 Collaborator.** As collaborators, physicians effectively work within a healthcare team to achieve optimal patient care.

**2.3.2.4 Health Advocate.** As health advocates, physicians responsibly use their expertise and influence to advance the health and well – being of individual patients, communities, and populations.

**2.3.2.5 Manager.** As managers, physicians are integral participants in healthcare organizations, organizing sustainable practices, making decisions about allocating resources, and contributing to the effectiveness of the healthcare system.

**2.3.2.6 Scholar.** As scholars, physicians demonstrate a lifelong commitment to reflective learning, as well

as the creation, dissemination, application and translation of medical knowledge.

**2.3.2.7 Professional.** As professionals, physicians are committed to the health and well – being of individuals and society through ethical practice, profession-led regulation, and high personal standards of behavior.

## 2.4 Competency Levels

These levels of competencies are adopted from UoG curriculum with some adaptations in competencies IV and V. At the end of the third year, students must have mastered all the competences up to level 1-C. In year 4, year 5 and internship year, other levels of competences (II – V) will be mastered.

### 2.4.1 Level I:

- A. Students have knowledge and understanding of those branches of science that are relevant to medicine.
- B. Students demonstrate in standardized situations that they have skills that are relevant to medicine.
- C. Students demonstrate that they possess the basic skills required for professional behavior.

### 2.4.2 Level II:

Students use integrated knowledge, skills, and professional behavior in an adequate approach to the issues of illness and health incorporated in this framework. They demonstrate such competency in context-rich training situations.

### 2.4.3 Level III:

Students adequately perform the professional activities defined in the physicians' competencies in purpose-designed training situations and/or in simulated professional situations.

#### **2.4.4 Level IV:**

Students adequately perform the professional activities defined in the physicians' competencies in authentic professional situations, having received prior case-specific instruction(s) and being intensively supervised by an experienced practitioner.

#### **2.4.5 Level V:**

Students adequately and independently perform the professional activities defined in the physicians' competencies. An experienced practitioner is immediately available on stand-by and always provides supervision after the event.

A. Students will perform under observation

B. Interns will independently perform with a stand-by supervisor

### **2.5 Academic Reference Standards and Benchmarks**

The newly adopted curriculum from University of Groningen (UoG) at the College of Medicine, KFU (GMCA 2012) will be based on both Groningen G2010 curriculum with its modified competencies and all the recent modifications mentioned in the Raamplan 2009 regarding applying the 7 CanMEDs roles. For this, GMCA 2012 competencies will be cross mapped with CanMEDS competency framework (Academic Reference Standards), Saudi Meds medical competencies and NCAAA domains of learning outcomes. The GMCA 2012 objectives will be benchmarked versus some of the Canadian Medical Schools; Toronto, and Manitoba (Benchmarks).

### **2.6 Academic Merits (TEGC, ART 1.6, 2012)**

2.6.1 The first 3 years of the program concentrates on the following academic merits:

2.6.1.1 The scientific backgrounds of the basic concepts needed to properly understand the structure and function of the human body and essentials of

clinical problems and cases.

2.6.1.1.1 Locating of information that is important to the profession, the ability to assess it and where necessary impart it to others.

2.6.1.1.2 Using and referring to subject-specific scientific knowledge in a wider context.

2.6.1.1.3 Acquiring a critical attitude towards the scientific knowledge on which medical interventions are based.

2.6.1.2 The principles of scientific methodology, biostatistics and epidemiology.

2.6.1.2.1 Mastering the general principles of hypothesis formation, methodologies (including those related to data collection) and concepts for those types of scientific research relevant to medicine.

2.6.1.2.2 Understanding the approach underlying scientific research.

262 The last 2 years of the program concentrates on the following academic merits:

2.6.2.1 The clinical picture and management options for different pathological conditions of the human body.

2.6.2.1.1 Referring to best evidence subject-specific literature.

2.6.2.1.2 Adopting a critical attitude towards the medical procedures or interventions.

2.6.2.1.3 Making decisions and selection of the suitable plan, utility or procedure.

2.6.2.2 The application of scientific methodology, biostatistics and epidemiology.

2.6.2.2.1 Starting specific data collection and concept formulation.

2.6.2.2.2 Discussing the findings in reference to the literature.

2.6.2.2.3 Concluding a research with final publication.

## **2.7 Program's Organization Structure (TEGC, Art 2.1, 2012)**

- 27.1 The program consists of 5 years after the preparatory year; followed by one year of internship which includes the research module.
- 27.2 The preparatory year must be successfully passed with a score of at least 3.5 out of 5 to be eligible to enroll at the College of Medicine. After joining the college, the credit of the preparatory year is nullified and will not added to the overall credits of the medical program.
- 27.3 For any course (Block or Unit) in the 5 academic years, passing means that the student had fulfilled the minimum grade requirements for all examinations of the modules and components of each course.
- 27.4 For each course, the scores of the students will be transformed into grades from A+ ( $\geq 95\%$ ) to F ( $< 60\%$ ). Based on these grades, the yearly GPA is calculated.
- 27.5 At the end of each semester and at the end of each year, the Banner System calculates the GPA as a separate entity for that semester or year, besides calculating the overall or summative GPA by considering the previous GPA. At the end of the fifth year, the Banner System calculates the overall student GPA.
- 27.6 Final overall assessment includes summation of the successfully passed courses (Blocks and Lines), elective courses and the obligatory university Islamic courses throughout the five academic years before joining the internship year.
- 27.7 Successfully passing all the requirements in all years grant students the right to the title of Bachelor of Medicine and Bachelor of Surgery (MBBS).

2.7.8 The internship year is conducted at the affiliated hospitals with some obligatory clinical rotations in Medicine, Surgery, Gynecology, Pediatrics and Family Medicine. Elective rotations are also present. The last 2 months of internship was composed of research module, where the intern will be affiliated to the College for preparation and presentation of his/her research project. The assessment of this internship year is either Passed or Failed. Passing this year is compulsory prerequisite for the Licensure for medical practice. All graduates must also pass the National Saudi License Exam (SLE) before being registered in any of the medical specialties to practice medicine.

## 2.8 GMCA 2012 Course Outline

Year	Semester	Course Title	Code	Units	Co-requisite
1	First Semester الفصل الاول	Block 1.1 Fundamentals of Medicine	1000101	6	
		Block 1.2 Infection and Immunity	1000102	6	1000101
		Islamic Faith		2	
		Knowledge Development I *	1000105	3	
	Second Semester الفصل الثاني	Block 1.3 Circulation and Respiration	1000103	6	1000101 1000102
		Block 1.4 Mind and Motion	1000104	6	1000103
		Islamic course (Elective)		2	
		Professional Development I *	1000106	5	
	Total			36	

\* This is a line course where teaching, training, learning and assessment are spread all over the year. For logistic reasons "Banner system", they were placed as semester courses. Half of the Credits will be covered per semester; hence the semester work load and credits are equal to 18 credit units.

Year	Semester	Course Title	Code	Units	Pre-requisite	Co-requisite
2	First Semester الفصل الأول	Block 2.1 Motion and Senses	1000201	6	1000101	
		Block 2.2 Emotion and Senses	1000202	6	1000102	1000201
		Contemporary Cultural Issues		2		
		Knowledge Development II *	1000205	3		1000105
		Block 2.3 Dysregulation and Chronic Diseases I	1000203	6	1000103	1000201 1000202
	Second Semester الفصل الثاني	Block 2.4 Dysregulation and Chronic Diseases II	1000204	6	1000104	1000203
		Islamic course (Elective)		2		
		Professional Development II *	1000206	5	1000106	
		Total		36		



Year	Semester	Course Title	Code	Units	Pre-requisite	Co-requisite
3	First Semester الفصل الاول	Block 3.1 Oncology, Trauma- Orthopedics	1000301	6	1000201	
		Block 3.2 Acute Loss of Function	1000302	6	1000202	1000301
		College Elective I **	1000308- 1000318	3		1000205
		Free Elective I [Outside College]	1000305	1		
		Knowledge Development III *		1		
		Block 3.3 Life Cycle I	1000303	6	1000203	1000301 1000302
	Block 3.4 Life Cycle II	1000304	6	1000204	1000303	
	Professional Development III *	1000306	5	1000106 1000206		
	College Elective II **	1000319- 1000329	1			
	Forensic Medicine	1000307	1			
	Total			36		

College Elective 1 **				College Elective 2 **			
First semester courses (each one unit)				Second semester courses (each one unit)			
#	Elective	Code	#	Elective	Code	#	Elective
1	Radiological Anatomy	1000308	1	Anatomy in Vivo	1000319		
2	Electron Microscopy & Cytology	1000309	2	Histochemistry	1000320		
3	Law and Medicine	1000310	3	Stem Cell Therapy	1000321		
4	Genetic Engineering	1000311	4	Inheritance	1000322		
5	Clinical Pathology	1000312	5	Clinical Parasitology	1000323		
6	Diagnostic Immunology	1000313	6	Nutrition	1000324		
7	Pharmaco-Dynamics and kinetics	1000314	7	Alternative Medicine	1000325		
8	Occupational Medicine	1000315	8	Biomedical Instrumentation	1000326		
9	Hospital Management	1000317	9	Cancer Registry	1000327		
10	Bioinformatics	1000316	10	Computer in Medicine	1000328		
11	المفاهيم الطبية	1000318	11	الطب النبوي	1000329		

Year	Semester	Course Title	Code	Units	Pre-requisite	Co-requisite	
4	First Semester الفصل الأول	Block & Clerkship 4.1 Internal Medicine 1	1000401	6	1000301,302,303,304		
		Block & Clerkship 4.2 Surgery 1	1000402	6	1000301,302,303,304	1000401	
		Knowledge Development IV*	1000405	3	1000305		
		College Elective III **	1000407- 1000416	1			
		College Elective IV **	1000417- 1000426	1			
		Block & Clerkship 4.3 Life cycle III	1000403	6	1000301,302,303,304	1000401 1000402	
	Second Semester الفصل الثاني	Block & Clerkship 4.4 Movement	1000404	6	1000301,302,303,304	1000403	
		Professional Development IV*	1000406	5	1000306		
		College Elective V **	1000427- 1000436	1			
		Free Elective I [Outside College]	1000400	1			
		<b>Total</b>			<b>36</b>		

#	Elective 3 **	Code	#	Elective 4 **	Code	#	Elective 5 **	Code
1	Plastic and bum	407	1	Nephrology	417	1	Optics	427
2	Vascular	408	2	Hematology & trans- fusion	418	2	STDs	428
3	Pediatric	409	3	Poisoning & abuse	419	3	Infertility	429
4	Organ Transplanta- tion	410	4	Tropical medicine	420	4	Andrology	430
5	Neurosurgery	411	5	Connective disor- ders	421	5	Neonatology & ICU	431
6	Cardiothoracic	412	6	Adult ICU	422	6	Medical counsel- ing	432
7	Endoscopy & lapa- roscopy	413	7	Geriatric medicine	423	7	Pediatric neuro- logy	433
8	Medical procedures	414	8	Coronary Care Unit	424	8	Pediatric Oncol- ogy	434
9	Sports medicine	415	9	Nuclear medicine	425	9	Neurophysiology	435
10	Trauma and life support	416	10	Ultrasonography	426	10	Cancer screen- ing	436

Year	Semester	Course Title	Code	Units	Pre-requisite	Co-requisite
5	First Semester الفصل الاول	Internal Medicine 2	1000501	4	All past years' courses	All courses in this semester
		Surgery 2	1000502	4	#	#
		Community health/PHC	1000503	4	#	#
		Emergency medicine / GP	1000504	4	#	#
		Knowledge Development V*	1000505	3		1000405
		ENT	1000507	1.5	#	#
		Ophthalmology	1000508	1.5	#	#
		Radiology	1000509	1.5		##
		Dermatology	1000510	1.5	#	#
	Second Semester الفصل الثانى	Anesthesia	1000511	1.5	#	#
		Orthopedics	1000512	1.5	#	##
		Social Medicine	1000513	1.5		#
		Psychiatry	1000514	1.5	#	#
		Professional Development V*	1000506	5	1000406	
	Total		36			

Internship Year		Research Project Conduct and Submission **	Elective	PHC	Pediatrics	Gynecology	Surgery	Medicine
Year	6	2 Month	1 M	1 M	2 M	2 M	2 M	2 M
		8 credits	4 credits	4 credits	8 credits	8 credits	8 credits	8 credits
At KFU or at any affiliated Hospital								
Obligatory at KFU								



## PART 3 ACADEMIC ASSESSMENTS AND POLICIES

### 3.1 Examinations and Assessments

- 3.1.1** Block 1.1 needs special care from all faculty members to refresh the students on the different modalities of assessment, or train them if they were not exposed to these during the Preparatory Year.
- 3.1.2** Passing of Block 1.1 is prerequisite for Block 2.1, which is a prerequisite for Block 3.1. The same situation occurs with other blocks (1.2, 1.3 and 1.4) See table.
- 3.1.3** During the first three years, failing in more than 12 credit units (out of 32, excluding Islamic courses) will prevent the student from promotion to the next year.
- 3.1.4** For admission to the fourth year, the student must pass all course units in the first three years.

Subject Course and Prerequisite Table	
Course	Prerequisite
Motion and Senses (2.1)	Fundamentals of Medicine (1.1)
Emotion and Senses (2.2)	Infection and Immunity (1.2)
Dysregulation & Chronic Diseases I (2.3)	Circulation and Hemostasis (1.3)
Dysregulation & Chronic Diseases II (2.4)	Mind and Motion (1.4)
Professional Development II (2.5)	Professional Development I (1.5)
Progress Test II (2.6)	Progress Test I (1.6)
Oncology, Trauma-Orthopedics ( 3.1)	Motion and Senses (2.1)
Acute Loss of Function (3.2)	Emotion and Senses (2.2)
Life Cycle I (3.3)	Dysregulation & Chronic Diseases I (2.3)
Life Cycle II (3.4)	Dysregulation & Chronic Diseases II (2.4)
Professional Development III (3.5)	Professional Development II (2.5)
Progress Test III (3.6)	Progress Test II (2.6)



## **3.2 Examination Regulations**

- 3.2.1** Students must not indulge in any behavior or conduct which may disturb other students or disrupt the smooth progress of the exam. Such behavior includes making unnecessary noise, looking everywhere, chatting and others. Students should strictly observe the seat plan in the examination room.
- 3.2.2** Students must obey the instructions of the examination invigilators. The invigilators are authorized to implement all regulations pertaining to the proper conduct of the examinations. Any student caught violating any exam regulation should write a letter of explanation addressed to the invigilator. The invigilator, likewise shall make an incident report, attach the student's letter and submit these to the Block coordinator for appropriate action and filing. If the act is repeated, the student will be subject to disciplinary action as provided for in the University Handbook.
- 3.2.3** Students are forbidden to take into the examination room any unauthorized books, manuscripts, notes, bags, cases or any materials which may be improperly used to obtain assistance in their work. All such materials, including handbags must be placed on a table outside the examination room.
- 3.2.4** Students are forbidden to take into the examination room electronic transmission devices such as mobile phones, tablets, PDAs etc., or any digital storage media such as flash drives, CDs, external hard discs etc.
- 3.2.5** Students must be at the venue of the examination at least 15 minutes before the exam commencement. However, a special examination may be arranged for the student who is not able to arrive on time upon the approval of the Block coordinator. Students who could not sit for their exam due illness or some other reasons, must present a medical certificate issued by the University clinic together with other supporting documents.

- 3.2.6** Before the commencement of the examination, the students must place their ID card on the right hand corner of the desk, for inspection by the invigilators.
- 3.2.7** Students must submit their examination paper before leaving the exam venue. Failure to submit within the time allotted will result in loss of marks for that examination.
- 3.2.8** A student should use either black or blue ink in writing his/her name, academic number and serial number on the answer sheet provided. Use of pencil is only for answers. Students should have their own pencil and eraser.
- 3.2.9** Answer sheets are checked by an optical reading machine, so students should avoid unnecessary marks and much pressure when changing an answer, as this may invalidate the answers on the whole sheet. Marking two answers on an item will automatically invalidate the item.
- 3.2.10** Students are permitted to use only personal non-programmable electronic calculators if required in an examination, provided they are silent in operation and have independent power supply.

### **3.3 The Marking Process**

#### **3.3.1 Marks distribution of the first three academic years**

##### **3.3.1.1 Written Exam**

- 3.3.1.1.1 The written part of the examination in the first 3 years represents 60% of the total marks (mid-block and final block). Quizzes may also be added to motivate students to study.
- 3.3.1.1.2 The written exam covers all the block study materials with strict consideration of the student study load and breadth and depth of the information during blueprinting of the exam.
- 3.3.1.1.3 The written exam is composed of both closed and open book questions and both of them are in the form of MCQ with two, three, four or

five options. The closed book exam questions represent around 60% of the total exam items. The open book exam questions represent around 40% of the exam items.

### **3312 Non-written Exam**

- 3.3.1.2.1 The non-written portion will represent 40% of the total mark. It includes marks for oral exam (10%), continuous assessments, small group presentations and consultations (10%) and marks for practical tests, workshop assignments or reports (20%).
- 3.3.1.2.2 In blocks having no oral exams, its 10% mark will be added to the marks for practical tests, assignments or reports which will be 30%.
- 3.3.1.2.3 Each segment of the non-written components has its own learning outcomes and its unique method of assessment (in training evaluation reports and assignments, workshop reports and practical testing using either OSATS or OSPE). Different assessment (examination) modalities are used with careful blueprinting versus the intended learning outcomes by the Block Coordinator, to ensure alignment of learning and assessment.
- 3.3.1.2.4 The non-written exam marks are distributed according to the student study load with accurate blueprinting of all non-written components.
- 3.3.1.2.5 Success in each part of the non-written components is mandatory to ensure student achievement of the related learning outcomes and ensure the overall course objectives.

### **3313 Re-Sit Examinations**

- 3.3.1.3.1 Re-sit chances maybe be given for all non-written components during the course time. In

these situations, the student will not be awarded more than 60% of the mark of that part.

3.3.1.3.2 Block 1.1 has 2 chances for a re-sit; once after finishing and the other is during the summer with other Block resit schedules.

3.3.1.3.2 Block re-sit exams include written examinations of all the block materials.

### **3314 Results**

3.3.1.4.1 Item analysis and student feedback will be considered after the exam in discussion with the experts for elimination of some questions. Correction for guessing is applied and the scores are recalculated using Cohen's formula.

3.3.1.4.2 All the results are announced as early as possible and considered as preliminary until the official endorsement of the Dean after application of the standard settings by the curriculum advisory committee.

3.3.1.4.3 Results of the re-sit are calculated in parallel to the original student cohort.

### **3.3.2 The Distribution and Conduct of Fourth and Fifth Year Marks**

**3321 The distribution of the fourth year marks is as follows:**

3.3.2.1.1 Continuous assessment (60%) will include:

3321.1.1 The practical skills Lab (20%) [Skills Lab Protocol using DOPS or OSATS].

3321.1.2 Clinical clerkship (40%) [Clerkship Protocol using multiple assessment methods as Mini-CEX, reports, presentation, log book].

3.3.2.1.2 Final Electronic Written MEQ (15%)

### 3.2.3.1.3 Final OSCE (25%)

#### **3322 The distribution of the fifth year marks is as follows:**

3.3.2.2.1 Continuous clinical assessment (60%) [Clerkship Protocol using multiple assessment methods as Mini-CEX, DOPS, OSATS, reports, presentation, log book]

3.3.2.2.2 Final OSCE (40 %)

#### **3.3.3 Notes**

3331 Failure in the clerkship continuous assessment means a major error in the clinical skills. This will prevent the student from attending the final exams and he will be considered as failed and he should re-register in the following year.

3332 Students failing to pass the clerkship final OSCE &/ or MEQ will be given a chance for resit in summer, and the final mark of that OSCE &/or MEQ will not exceed 60%.

3333 Any student who fails in any of the 4th year blocks (failed in the continuous assessment or failed in OSCE &/or MEQ resit), should re-register for this block before registering in 5th year courses with consideration to the number of maximum allowed credit units in KFU bylaws and respecting the fifth year prerequisites from the 4th year.

#### **3.3.4 Forms of Academic Assessment**

1. Closed Book Examination
2. Open Book Examination
3. Oral Examinations and Oral Presentations Coursework
4. E-Examination
5. Take Home Papers

6. Practical Examinations (Reports–OSPE) / (Practical/OSPE)
7. Exhibitions of Student’s Work
8. Group or Collaborative Work
9. Progress Test
10. Assignments
11. Research
12. Portfolio Assessment
13. Interviews with patients
14. Clerical Reports
15. Training Assessments
16. Quizzes
17. Others

### **3.4 Professional Development Obligations and its Examination**

**3.4.1** The Professional Development line (PD line) encompasses the Professionalism and Science modules in Year One. In the later years, the PD line will only concentrate on professionalism that encompasses many major competencies for the medical practitioner. One of these competencies is reflection.

**3.4.2** The components included in PD evaluation are professional behavior, evaluated by multiple sources including tutors, mentors, coaches, nurses, patients, disciplines and peers (multi source feedback or 360<sup>0</sup> feedback), self-reflection reports by the student, written assignments, ethics module workshops and assignments, interviews, reports. All will be compiled in a PD portfolio. Global Health issues in the form of workshops and its related assignments and reports are included in PD evaluation. Science module reports and presentation are also calculated.

**3.4.3** Mark distribution of PD line in first year will be divided

into Science 20% and Professionalism 80%: 10% Global Health, 10% Ethics, 20% PD behavioral forms with self-reflection from different snapshots in the blocks and lines and, 40% for the portfolio. In the succeeding years, all PD line marks will only be on professionalism with additional professional tasks in these years. Student attitude and attire will be one of the major criteria in PD behavioral assessment.

- 3.4.4** Two assessors will assess the portfolio according to its specific assessment protocol.
- 3.4.5** The Science module includes mentorship in the form of sessions and meetings to guide the student grasp the scientific research methodology basis and the research, which will be carried out by the students. The research report is conclusive of the mentorship activity (science) and will be primarily assessed by the mentor (60% of the mark). Assessment during report symposium (posters or presentation) represents 40% of the mark. Some parts of the research project will be assessed per group of involved students while other parts are assessed per individual student.
- 3.4.6** Consultation skills in the fourth year will be assessed by keeping a consultation logbook to show that they have gained experience in several situations (an emergency case, pediatric case, etc.) and this logbook is judged on the basis of its completeness and quality. After completing three or more clerkships, students may be assessed in an observed consulting-hour examination of a simulation patient.

### **3.5 Examination Irregularities and Plagiarism**

Students who are involved in examination irregularities and other forms thereof, likewise those involved in the issues of plagiarism are subjected to disciplinary actions of the University.

### **3.6 Academic Leave**

A student request to interrupt his/her studies should be supported by official documents. The College Board may grant exemption on a case-to-case basis.

### **3.7 Awards and Honors**

Students with outstanding Grade Point Average will be given recognition, appreciation and awards based on academic parameters.

### **3.8 Late Assessment**

Upon a student's request, he/she student may take an examination as supported with official documents and must satisfy obligations which corresponds to the requirements of the course.

### **3.9 Special Assessment for Students with Disabilities or Ill Health**

Students with performance disability will be given the opportunity to take examinations in a manner that will not discriminate against their individual disability. If necessary, the College Board will seek expert advice on this matter.

### **3.10 Academic Policies**

#### **3.10.1 Academic Insufficiency**

Academic insufficiency results from a failure of a student to meet the academic requirements and obligation of a course. Considerations may be given to make-up for the necessary requirements for as long as valid reasons and / or evidences will be produced. Otherwise, course failure, suspension or termination of study may be instituted. Should a student wish to appeal, he / she may refer to the provisions in the Student Rights manual.

#### **3.10.2 Repeat Study**

In cases of academic insufficiency, a repeat study may



be permitted. In considering the academic studies stay (the time period a student is required to finish his/her undergraduate studies) and frequency of academic insufficiency, if a student surpasses this required period of time or exceeds the number of allowable enrolments, a repeat study may no longer be permitted. Should a student wish to appeal, he / she may refer to the provisions in the Student Rights manual.

### **3.10.3. Termination of Study**

On the grounds of academic insufficiency, a student's registration may be terminated as determined by the current KFU Regulations. In such cases, the academic insufficiency must be deemed to be irrevocable. Should a student wish to appeal, he / she may refer to the provisions in the Student Rights manual.

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**PART 4****STUDENT SUPPORT AND SERVICES****4.1 Admission**

A prospective student must successfully pass the university comprehensive admission exam. Should the applicant be able to achieve the required mark for the College of Medicine, he/ she will undergo an interview and medical examinations. Upon passing the requirements, the applicant will be endorsed and admitted to the Preparatory Year. After passing such, the student gains admission to the College of Medicine. Grade computations will be from the admission to the college, while earned marks during the Preparatory year will be nullified.

**4.2 University Website and Banner System**

Academic information and announcements are available through the official university website.

**4.3 Student Academic Consultations and Tutorials**

For students with difficulties in their studies, a student support program is available for them through mentors and tutors from the members of the faculty.

**4.4 English Support System**

The English language is the medium of instruction used in the college. For students with difficulties, they may visit the English Language Center of the university.

**4.5 Library Services**

The College of Medicine has its own library. The academic resources such as books, and research journals are available as well as the computer services. Student can also borrow materials for take home and can access the central university library for additional resources.

**4.6 IT Services**

With the current technological advancements, KFU is pushing to assist students along these changes. The College has new

special Apple iMac® computers ready for research use at the IT center. Students are also provided with email addresses and usernames to access the wireless internet system within the whole vicinity of the University.

#### **4.7 Inappropriate Use of Services and Facilities**

Misuse of the university and college facilities are subject to disciplinary action based on the university's code of conduct.

#### **4.8 Field Experience Activities**

Academic learning in the college is supported by outside classroom activities. These includes community visits, outreach programs, field trips, internship duties, research activities and others. These programs are part of the new medical curriculum to assist the students in their learning needs.

#### **4.9 University Resources and Facilities**

The university is equipped with state of the art buildings, sport facilities and student friendly classrooms. Each room has its own LCD projectors, computers and audio systems. The simulation laboratories are complete with advanced training mannequins and instruments.

#### **4.10 Food Services**

Food and beverages for College students and staff may availed of at the College cafeteria. A University canteen is also available for more variety of food services.

#### **4.11 Medical Services**

A dedicated polyclinic is available within the University to cater to the medical needs of students and staff. Consultations and medicines are provided free-of-charge.

#### **4.12 Guidance and Counseling Unit**

This is a dedicated unit that assists students and staff with psychological or emotional concerns in an atmosphere of

confidentiality. It provides advice, guidance and assistance to students to take advantage of their own capacities and skills in discussing issues and problems during the academic phase of their lives. The unit also helps students understand their problems and find solutions to these by providing information and guiding scientific expertise obtained by social workers. KFU also provides a supportive environment that will assist students with mental health difficulties to realize their academic potential and meet course requirements. It also aims to facilitate and promote good mental health and well-being.

#### **4.13 Extra-curricular Activities for Students**

The College is equipped with sports facilities such as various table and board games. This enables students to have additional opportunities for learning thru social interaction, friendship and competition.

#### **4.14 Monitoring and Supervision of Research Students**

The students will be guided and supported by researchers and mentors in the conduct of their studies. They may also apply for research grants in the University.

#### **4.15 Procedure in the Event of the Death of a Student**

The College Board will be responsible for coordinating arrangements in the event of the death of a student during academic activities and must be notified immediately of such an event. It is essential that the Dean be provided any relevant information about the circumstances of the death, especially when the death appears to be by other means apart from natural causes or involves any kind of violence and whether the death took place on KFU premises or not.

#### **4.16 Prohibited Substance Use and Misuse**

Under the Saudi Law, it is prohibited to use addictive substances and the like. It should be clear that possession and use of these substances will be subjected to disciplinary actions.

### **4.17 Prayer Observance**

The College has its own specified place for prayer. Schedules of classes are arranged with breaks to accommodate the times of worship.

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**PART 5      ACADEMIC QUALITY REVIEW, MONITORING  
AND FEEDBACK****5.1 Student Questionnaires**

Surveys and student feedback monitoring are essential tools in the improvement of educational management. This enables the College to assess and evaluate its performance and student progress. Students are then required to respond honestly for the purposes thereof.

**5.1.1 Frequency**

All courses in the College will have at least one evaluation survey per semester alongside specialized research surveys.

**5.1.2 Assessment Scale**

Majority of the questionnaires will utilize the five point Likert Scale allowing the medical students to evaluate and state their level of agreement with the provisions and themes of the questions. Some will use specialized types to address specific data needs.

**5.1.3 Types of Survey**

Typical questionnaires are post examination feedback forms, research, performance evaluation and self evaluations and specialized research tools.

**5.1.4 Contents for Assessment**

5.1.4.1 Attendance

5.1.4.2 Course or Program Structure

5.1.4.3 Delivery and Style of Teaching

5.1.4.4 Educational Materials

5.1.4.5 Student Involvement

5.1.4.6 Student Workload and Feedback

5.1.4.7 Student Interest

5.1.4.8 Educational Support and Research

5.1.4.9 Student Comments and Suggestions

## **5.2 Student Feedback**

Student may share their feedback through formal written letters and have appointments with respective Faculty members of the College. Suggestion boxes will be available in the College.

## **5.3 Confidentiality**

Survey forms which requires personal information are kept in a safe and secure place. The faculty and department are responsible for the protection of data and therefore liable for any breach of confidentiality.

## **5.3 Staff-Student Consultative Committees**

Student concerns are addressed through staff-student consultations. Regular meetings between faculty coordinators and student representatives will be held to allow students to fully express their ideas in a well respected manner. The committee meetings will have a collaborated report based on agreed principles and points that will be raised and reported to the College Board.

## PART 6 THE COLLEGE PHOTO GALLERY

### College of Medicine Building



The Dean with Representatives from the Ministry of Health





## The Administration



**Dr. Waleed Hamed al Buali**  
Dean



**Dr. Abdulrahman al Sultan**  
vice Dean  
academic affairs



**Dr. Fahd al Wadaani**  
vice Dean  
graduate studies



**Dr. Nadia Hamed Ibrahim al Jaddi**  
vice Dean  
female students affairs



**Mr. ali aBo GaBer**

**Director**

**aDminiStration anD finance**

## College Auditorium



## College Library



## Lecture Hall



## Simulation Laboratory



## IT Research Centers



## Electron Microscope



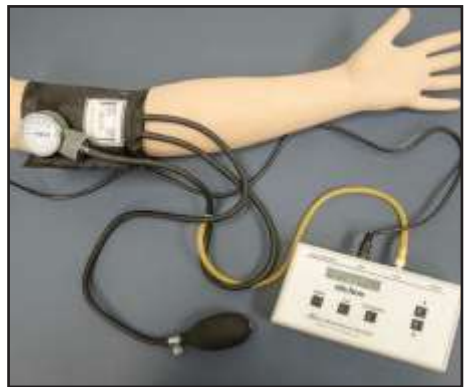
## Ultramicrotome



## Simulation Laboratory



## Skills Laboratory Equipment





## Anatomy Laboratory



## PBL Seminar Room



## PBL Room



## College Cafeteria



## Recreational Facilities in the College





## PART 7 STUDENT ACTIVITIES GALLERY

### The University President visits the college



**Dr. Abdul Aziz Bin Jamaluddin Al Saati**



## Meeting with Vice-President for Academic Affairs



The Dean with Students at the Open Day for Research



## The President and the Dean during the Open Day for Research



The Dean with the students



## Students During Spirometry Sessions



## Anatomy Practical Examination





## Students working in the Histology Laboratory



Laboratory Group Work



## Problem Based Learning Session



## Portfolio Interview



## Anatomy Class Demonstration



Students Examining Cadavers during Anatomy Class



## Communication Skills Workshop



## Basic Life Support - Choking Workshop



## Basic Life Support Demonstration



Cardio Pulmonary Resuscitation (CPR)



## Scientific Poster Presentation by Students



Research Presenter with the Panelists



## The GMCA Coordinator Presentation During the KFU President's visit



Students During Block Orientation and Theme Lecture



## Workshop Session



## Written Examination





## Part of the Recreational Activity in the College



Students Playing Ping-pong





## REFERENCES:

1. Teaching and Examination Guidelines and Controls (TEGC) 2012. Adoption of UoG Medical Curriculum GMCA 2012. College of Medicine, King Faisal University
2. King Faisal University website <http://www.kfu.edu.sa/en/pages/home.aspx>
3. Photo Credits: College of Medicine GMCA Unit.



CONFORME

I, \_\_\_\_\_,

with academic number \_\_\_\_\_,

am fully aware of the  
rules and regulations set by the College of Medicine.

I promise to abide with it and be responsible in all my actions at  
all times.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

Note: A separate form shall be signed by the student upon receiving this handbook.



This second edition was produced as a result of the ideas and efforts of Dr. Waleed Hamed Al Buali, Project Chairman and Dean of the College.

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This Student Handbook was approved by His Excellency, Dr. Abdul Aziz Bin Jamaluddin Alsaati, University President, His Excellency Dr. Badr Abdullatiff Aljohar, Vice President of Academic Affairs, and most honorable Dr. Waleed Hamed Al Buali, Dean of the College of Medicine.









**Kingdom of Saudi Arabia**  
**MINISTRY OF HIGHER EDUCATION**

**KING FAISAL UNIVERSITY**  
**college of medicine**

**Student Handbook**

