



Republic of Iraq  
Ministry of Higher Education and Scientific Research  
University of Basrah  
Al-Zahraa College of Medicine



- Al-Zahraa College of Medicine
- Year 4

# Block Summary

## Cardiovascular and Respiratory (CRB)

### Educational aims of the block

#### THE WORKBOOK:

The Workbook Please read the workbook thoroughly. Benefit from the structure of the block. Remember well the time table and your main two groups (A & B), as well as your subgroup, at the start of the block. The workbook cases will be group-discussed. On the other hand, tasks ought to be completed individually or group-discussed without blue printing. You should deliver the workbook at end of block with all tasks are fulfilled. Failure to accomplish this will be reflected as bad performance and may be scored as unsatisfactory and you might be denied from entrance to the final exam.

### The Log Book

#### **THE LOGBOOK:**

Separately, you will be given a log book with instruction and duties to fill in. By end of the block, you ought to deliver a completely filled log book, with tasks, procedural skills, and case presentations. As in the workbook, failure to accomplish this will be reflected as bad performance and may be scored as unsatisfactory and you might be denied from entrance to the final exam.

### Attendance

A weekly attendance paper should be delivered to the block secretary at the end of each week of the block except the induction week. Each day, you need to have signed (or stamped) your attendance TWO TIMES in the subgroup activity and the afternoon activity. Consequently, 10 signed attendances should be presented by each student at end of each week. Failure to accomplish this will result in prohibition from the final exam if it exceeded 10% without excuse and 15% with excuse.

### Module Outline

## AIMS OF THE BLOCK:

The aim of this block is that students should be able to recognize common conditions affecting the cardiovascular and respiratory systems, and be able to describe their investigation, treatment and prevention.

### Learning outcomes for the block

At the end of this block students should be able to:

- demonstrate their ability to identify the important cardiovascular and respiratory causes for:
  - chest pain
  - breathlessness
  - syncope
  - palpitation
  - cough
  - sputum production
  - wheeze
  - haemoptysis
  - leg pain
  - oedema
- by taking a history considering physical, psychological and social aspects, using clinical reasoning to reach an appropriate provisional diagnosis.
- elicit selectively, normal and abnormal physical signs in the cardiovascular and respiratory systems to test diagnostic hypotheses.
- use investigations selectively to confirm diagnostic hypotheses including-  
interpretation of chest X rays and other relevant imaging-performing and interpreting an ECG-perform and interpret basic pulmonary functions tests, including use of a peak flow meter-interpret arterial blood gas analyses
  - recognize cardiac and peri-arrest arrhythmias and their initial management
  - formulate a management plan (including the use of medication), if necessary using information sources, appraise evidence and apply the conclusions, for the care of patients with common cardiovascular and respiratory diseases.
- use effective communication skills to:
  - give advice about cardiovascular risk factors
  - give advice about lifestyle changes including occupational factors to a patient who has

recently suffered a myocardial infarction

- explain the procedures of spirometry, bronchoscopy, coronary angiography, exercise testing and echocardiography.
- negotiate with a patient the pros and cons of taking anti-hypertensive Medication.
- inform sensitively a patient that he/she has an incurable lung disease.
- negotiate a smoking cessation plan with a patient.
- describe how primary and secondary preventative strategies may reduce the burden of cardiovascular and respiratory disease on society.
  - recognize the possibility of environmental and occupational factors in the causation of lung disease.

## Lectures of cardio-respiratory care

**Day 1** - Introduction: chest pain, dyspnoea , syncope , leg oedema , wheeze and haemoptysis (2 hrs)

- Hypertension: (2 hrs )

### Day 2

- Infective endocarditis and Rheumatic fever: ( 2 hrs )

- Ischemic heart disease: (2 hrs )

### Day 3

- Tachyarrhythmia: (2 hrs )

- Valvular heart disease: (2 hrs )

### Day 4

- Bradyarrhythmia: (2 hrs )

- Congenital heart disease: (2 hrs ) :

### Day 5

- Heart failure: ( 2 hr )

- Pericarditis and myocardial disease: ( 2 hrs )

### Day 6

- Heart diseases in pregnancy and surgery: ( 1 hr )

- Pulmonary embolism: ( 1 hr ) :

- Peripheral vascular disease: ( 1 hr )

- Disease of Aorta: ( 1 hr )

**Day 7**

- Pulmonary function test: ( 1 hr ) - Bronchiectasis : ( 1hr )
- Chronic obstructive pulmonary diseases : ( 2hrs )

Day 8- Pulmonary Tuberculosis ( 2 hr ) :

- Respiratory failure: (1 hr )
- Pneumonia: (1 hrs )

**Day 9**

- Asthma: (2 hrs )
- Pleural disease: ( 1 hr )
- Lung cancer (1 hr )

**Day 10**

- Interstitial lung disease: (2 hrs)
- Pulmonary hypertension: (1 hr)
- Adult respiratory distress syndrome: (1 hr ).

**Core procedural skills**

- Performing and reading ECGs
- Managing an ECG monitor
- Performing peak flow
- Administering a nebulizer

**Timetables**

As a guide, students are expected to:

**From Day 1 to day 8 (except Friday):**

8:00 am – 12:00 am : lectures

12:00 pm – 12:30 pm : rest

12:30 pm – 2:30 pm : small group and case study

From Day 11 to the end of the course (except Friday and Saturday)

8:00 am – 8:30 am

8:30 am – 10:00 am : groups distribution every week.

**1-C.C.U**

**2- medical ward**

**3- respiratory clinic & pulmonary function**

**4- cardiac center : cardiac clinic & Echo**

**5- TMT & Holter's study**

**6- cath. Lab.**

**10:00 am – 12:00 pm:**

**Clinical session of group A & B (Monday and Wednesday )**

**Seminar (Sunday and Tuesday )**

**Skill lab & emergency (Thursday )**

**12:30 pm – 2:30 pm: procedures and requirement and case report**

**Seminars**

- **Sunday: Acute cardiac emergencies.**
- **Tuesday: Cardiac Imaging and Chest Imaging.**
- **Sunday: Management and Palliative care in heart failure.**
- **Tuesday: ECG changes in IHD and arrhythmia.**
- **Sunday: Non-surgical intervention in cardiac diseases.**
- **Tuesday: Basic life support and advanced life support.**
- **Sunday: Blood gases.**
- **Tuesday: Respiratory emergencies.**
- **Sunday: Interstitial Disease.**
- **Tuesday: The pleura and mediastinal masses.**

**Assessment Method Summary\***

<b>Type</b> (Examination, Test, Coursework, Presentation, Practical, Other)	<b>TD's Outcomes</b>	<b>Duration</b> (e.g. 1 hour, 4,000 words)	<b>Timing</b>
<i>Written examinations (a combination of single best answer, constructed response or extending matching questions)</i>	Doctor as Scholar/Scientist	2x 2 hours	End of term 6.
<i>Objective Structured Clinical Examinations</i>	Doctor as a Scholar/Scientist Doctor as Practitioner	12 stations	End of term 6.
<i>E-portfolio<sup>†</sup></i>	Doctor as a Professional		Formative during phase I, summative at end of Phase II

*\*All learning outcomes described will be tested to a sufficient standard in Phase I to satisfy the requirements of an exit degree.*



## Document Version Information

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