



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

Gastrointestinal Tract

GIT

Educational aims of the block

AIMS OF THE BLOCK:

The aims of this block are that students should be able to recognize common conditions affecting the gastro-intestinal, and be able to describe their investigation, treatment, prevention and management. In this block you will focus mainly on the care of patients who are under the care of Gastroenterologist and general surgeon. The patients will have a wide range of diseases not necessarily confined to one specialty. For example, you might encounter cases other than GIT as diabetic foot, scrotal masses, neck masses, and some gynaecological diseases in GIT wards and clinics. It is an opportunity to address these cases in conjunction with other GI cases as you might not find such cases in other blocks. Your main focus should be on consolidating your generic skills in history taking, examination, problem solving, patient management and communication skills. However, the expectation is that wherever a student is placed they will be able to achieve all the key learning outcomes for the whole block. You must actively seek out learning opportunities to meet these outcomes. This is your responsibility.

The curriculum was obtained from the college of medicine, university of Kufa, which similar to that from college of medicine in Leicester University and Buckingham University.

THE WORKBOOK:

The student should read the workbook thoroughly. Benefit from the structure of the block. Students have to remember well the timetable and your main group (either A or B), as well your subgroup, at the start of the block. The workbook cases will be group-discussed in the induction week. On the other hand, tasks ought to be completed individually without blue printing. You should deliver the workbook at the end of the block with all tasks 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:

Concurrently, you will be given a logbook with instructions and duties to fill in. By end of the block, you ought to deliver a completely filled logbook, with tasks, & procedural skills. 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

Attendance paper should be delivered to the block secretary at the end of each day of the block including the induction week. Each day, the whole group major two subgroups or minor five subgroups need to have signed (or stamped) their attendance THREE TIMES in the morning report, subgroup activity and the afternoon activity. Failure to accomplish this would result in prohibition from the final exam if it exceeded 10% without excuse and 15% with excuse

Module Outline

1. Identify the important alimentary causes of the following symptoms:
 - Acute and recurrent abdominal pain
 - Vomiting & Hematemesis
 - Dysphagia
 - Constipation & Diarrhea
 - Rectal bleeding
 - Abdominal distension
 - Jaundice
2. Take a detailed history considering physical, psychological and social aspects.
3. Elicit selectively normal and abnormal physical signs.
4. Use investigations selectively to confirm diagnosis.
 - Recognize radiological features of intra-peritoneal air, obstructed bowel and correct placement of nasogastric tubes
 - Request appropriately abdominal ultrasound and radiographs Interpret liver function tests
5. Formulate a management plan.

COMPETENCY CONTEXTS:

The above competencies should be expressed in the following contexts:

- Basic fluid management
- Electrolytes & acid-base changes in patients with GIT diseases
- Blood transfusion
- Benign & malignant oesophageal stricture
- Oesophageal varicies
- Peptic ulcer disease
- Gastro-oesophageal reflux disease
- Pre-hepatic, hepatic and post hepatic causes of jaundice
- Gall bladder disease
- Pancreatitis
- Bowel obstruction
- Malabsorption
- Inflammatory Bowel disease
- GI cancer
- Irritable bowel syndrome
- Groin and ventral hernias
- Anal and perianal diseases
- Stoma indications, care & complications

GENERAL LEARNING OUTCOMES

1. Demonstrate a basic understanding of the anatomy, physiology and pathophysiology of the GI system and its diseases.
2. Demonstrate the appropriate communication skills with patients with GI conditions.
3. Be able to use appropriate investigations in evaluating GI patients.
4. Be aware of the principles of treatment of GI conditions
5. Demonstrate strategies for keeping knowledge up to date.

SPECIFIC LEARNING OUTCOMES

1. Demonstrating ability to take appropriate history and examination.
2. Demonstrating an understanding of the concept of alarm symptoms.
3. Demonstrating ability to formulate a differential diagnosis.
4. Diagnosis and management of acute GI bleeding.
5. Diagnosis and management of severe acute diarrhoea.
6. Management of acute jaundice and acute liver failure.
7. Diagnosis and management of irritable bowel syndrome.
8. Diagnosis and management of ulcerative colitis and Crohn's disease.
9. Diagnosis and management of malabsorption
10. Diagnosis and management of chronic liver disease.
11. Understanding the role of liver transplantation.
12. Understanding the development of GI cancers and how this enables screening.
13. Carrying out a specific literature study

LEARNING ON WEB

A series of PowerPoint presentations and lectures will be available on the learning environment. You will be provided with separate copies of these. They are written by different consultants, surgeons and physicians. They cover important aspects of assessing gastrointestinal patients. The full program is available on the College website Moodle for you and includes more detailed references and case scenarios.

BLOCK INFRASTRUCTURE

INDUCTION PHASE

It involves 10 days for two weeks (Except Fridays & Saturdays):

8:00 am – 12:00 am: 4 lectures

12:00 pm – 12:30 pm: Break

12:30 pm – 2:00 pm: Small Group Discussion SGD with case study

CLINICAL COURSE

It starts from Monday of W2 till end of the block or Thursday of W6 where a formative assessment will be performed. Fridays and Saturdays are free days.

8:00 am – 11:00 pm: Morning Tour

11:00 pm – 11:30 pm: Break

11:30 pm – 2:00 pm: Afternoon activities

Assessment Method Summary*

<i>Type (Examination, Test, Coursework, Presentation, Practical, Other)</i>	<i>TD's Outcomes</i>	<i>Duration (e.g. 1 hour, 4,000 words)</i>	<i>Timing</i>
<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[†]</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.*

Secondary Learning Outcomes

In addition to meeting the outcomes described in Tomorrow's Doctors, at the completion of the unit students will be able to:

By the end of this module, you be able to:

- Discuss the concepts of 'self' and 'non self.'
 - Explain the processes involved in innate immunity, including:
 - The role of barriers
 - Cells of the innate immune system
 - The Role of complement
 - Explain the processes involved in adaptive immunity, including:
 - The molecules of the adaptive immune response
 - Presentation of antigens
 - Antibody and cell-mediated responses
 - Explain how the immune system may become compromised and the consequences of that compromise, including:
 - Inherited immune deficiencies.
 - Acquired immune deficiencies.
 - Immuno-suppression by drugs
 - Explain the different types of hypersensitivity reactions, and how, in principle they may be managed.
 - Explain the mechanisms and consequences of common autoimmune conditions.
 - Explain the role of the immune systems in the surveillance and prevention of malignancy, and the potential for immunotherapy in the management of malignancy.
- Explain the human blood group systems and the principles of ensuring compatibility of transfused blood and blood products.

- Explain the role of immuno-suppressive drugs in transplantation.
- Explain the clinically relevant features of the anatomy of the musculo-skeletal system
- Explain the clinically relevant anatomy of the cardiovascular and respiratory systems.
- Explain the clinically relevant anatomy of the abdomen & pelvis.
- Explain the clinically relevant anatomy of the peripheral nervous system and cranial nerves
- Apply understanding of the concepts in this unit to the diagnosis and management of patients who present with:
 - acute or recurrent chronic chest pain
 - anaemia
 - Acute productive cough
 - Haemoptysis
 - Haemorrhage
 - Sudden or progressive breathlessness
 - Abnormal swollen lymph nodes
 - Abnormal weight
 - Acute abdominal pain
 - Oedema
 - Acute joint pain
 - Fractures
 - Back pain & Sciatica
 - Impaired voiding
 - Pregnant
 - Fever
 - Numbness or tingling
- Apply understanding of the concepts in this unit, where relevant, to the diagnosis and management of patients who present with the remaining key presentations in the list defined in the 'Code of Practice for Assessment'

[Key Texts and/or Other Learning Materials](#)

The first half of the unit deals with the fundamentals of immunology. There are a variety of textbooks that you might consult:

For immunology:

"Immunology for Medical Students, 3e" Matthew Helbert FRCP FRCPATH PhD,

Or

"Basic immunology: Functions and disorders of the immune system, 5 e" Abass Lichtmann and Pillai

The second half of the unit considers clinical anatomy. You should use your usual anatomy texts and resources

This unit is packed with opportunities to gain feedback about your progress:

- Every session has case studies very similar to the form of questions in your summative assessments. If you complete these and compare your responses to the feedback provided after the sessions you will get a clear idea of your level of understanding.
- There will be formative tests held at the beginning of each group work sessions
- There is a formal formative assessment in week six

Please note: This specification provides a concise summary of the main features of the unit and the learning outcomes that a typical student might reasonably be expected to achieve and demonstrate if he/she takes full advantage of the learning opportunities that are provided. More detailed information on the learning outcomes, content and teaching, learning and assessment methods can be found in the support documents via Moodle. The accuracy of the information contained in this document is subject to ongoing review by the University of Buckingham and forms part of the Medical School's annual return

Document Version Information

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