



Dec 26, 2018
Volume 3; Issue 12



MedEdu Tabuk

Weekly Newsletter

Faculty of Medicine, University of Tabuk

STUDENT STUDY SECTION - Dr. Tanveer Raza

This week we introduce a new section titled **Student Study Section**. In this section, students describe in their words a clinical examination procedure. An expert faculty will review each procedure.



The overall goal is to have all students improve their ability to communicate clinical procedures and allow their peers to obtain a different perspective.

Phone: 0537251324
Email:
mededutabuk@ut.edu.sa



جامعة تبوك
University of Tabuk
وكالة الجامعة
للتطوير والجودة

رؤية الجامعة:

"جامعة متميزة تعليمياً وبحثياً
مساهمة في خدمة المجتمع"

رسالة الجامعة:

"تقديم تعليم جامعي متميز لتخريج كوادر بشرية مؤهلة
بالمعرفة والقدرات والمهارات لتلبية حاجات المجتمع
والمشاريع التنموية بتبوك وفق بيئة تعليمية إدارية
متميزة داعمة للبحوث الإبداعية"

القيم:

إضافة إلى الالتزام بالقيم الإسلامية لدينا الإسلامي
الحنيف نلتزم الجامعة بالقيم التالية:

- الجودة والتميز.
- الولاء والانتماء.
- العمل بروح الفريق الواحد.
- الأمانة والاحترام.
- الابتكار.
- القيادة وتحمل المسؤولية.
- الشفافية والمساءلة.
- المسؤولية الاجتماعية.

University Vision:

A distinguished university
in education, research, and
community service.

University Mission:

To offer a distinguished university education that
prepares university graduates with the knowledge,
capabilities, and skills needed by the community
and developmental projects in the Tabuk region
within an exceptional education and administrative
environment that promotes innovative research.

Values:

In addition to adherence to core Islamic values, the
university is also committed to the following values:

- Quality and Distinction.
- Loyalty and Affiliation.
- Teamwork.
- Integrity and Respect.
- Creativity and Innovation.
- Leadership and Responsibility.
- Transparency and Accountability.
- Social Responsibility.

الخطة الاستراتيجية الثانية للجامعة ١٤٣٩ - ١٤٤٣

Second Strategic Plan 2018-2022

2006

www.ut.edu.sa

ORIENTATION OF SIMMULATION LAB, Faculty of Medicine

Dr. Tanveer Raza
Faculty of Medicine



COLLEGE OF MEDICINE CELEBRATION OF SAUDI HOME HEALTHCARE SERVICE DAY

By: Pharmacist/ Azizah Abdullah M. Al-Harbi

Master of Health Services Manage and Hospitals

Supervisor of Student Activities

Medicine College



The College of Medicine female student section at University of Tabuk, under the sponsorship of Vice Dean of the College of Medicine, and organization and supervision by the student activity supervisor **Pharmacist/ Azizah Al-Harbi**, and the participation of the female students of the College of Medicine, have established a celebration of Saudi day for home healthcare, and that was on the Thursday corresponding to (13/12/2018) at 10am in the morning at the college building.



The celebration aimed to bring awareness to the Home Healthcare Service Program, which is a program that will provide medical healthcare through continuous and comprehensive follow up to patients (a specified segment) in a cyclical duration at their residents by a medical trained group through constant and continuous cooperation with the health treatment in concern, and to prepare a generation with initiative for volunteer work, in particularly in the field of healthcare. The celebration included two sections: section one is about the program to acknowledge the medical girl students of the introduced services, and its importance to the patients and the health system, and the role of the health staff (physician, nurse, and natural treatment specialist, and

psychological social specialist) in the service, and what the standards of receiving this service are, as well as the provision of publications about the Home Healthcare service program. The second section was a cultural program focused on caring of chronic diseases at home, in order to clarify the simple medical procedures that help in controlling some chronic disease health situations such as blood pressure, and diabetes.

Among the most important things that received the appreciation of the attendance was the presentation of a poster explaining statistics from the Ministry of Health that introduced the service in 1430H. The statistics showed the total number of patients who benefited from the service in the Tabuk region, which reached (420) patient. In addition to that, the Home Healthcare program conducted (30,121) home visits during the month of August 2018, through (295) medical teams, at a rate of (1,369) daily visits. The statistics also showed that this service has been implemented in (208) hospitals throughout all the regions and municipalities in Saudi Arabia. The program currently services around (29,354) patients, and during the same month the program accepted (868) new patients. (<https://www.spa.gov.sa/1814129>)



The program also included presentations of a video and images to explain the positive effect of the Home Healthcare program on patients, and its significant effect on their quality of life.

EXAM INVIGILATION, FACULTY OF MEDICINE

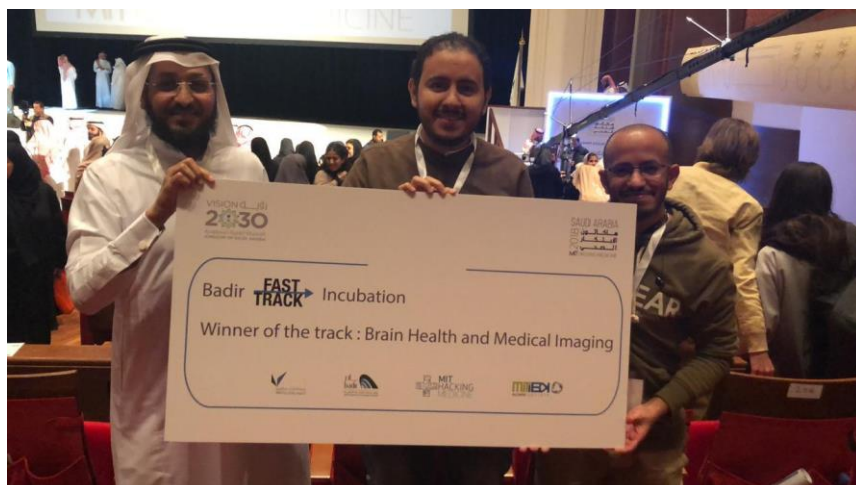
Dr. Zubair M. Hayat, Dr. Mohd. Ahmed Mesaik

Date	Module	Invigilators	Exam Supervisors	Time	Venue
26/12/2018	Lab Medicine MED407	Dr. Abdulmoneim Saleh Dr. Ahmad Fallata Dr. Abdalla Basnawi	Dr. Ayman Faisal	10:00 AM- 12:00 PM	Computer Exam rooms/PBL rooms
27/12/2018	Obgynae	1. Dr. Fahad Idrees 2. Adil Alatwi	Dr. Yazan Khasawna	10:00 AM- 11:00 PM	Computer Exam rooms/PBL rooms
27/12/2018	Obgynae (OSPE)	1. Dr. M. Shaikh 2. Nahid Alawnah	Dr. Yazan Khasawna	12:00 Noon- 12:30 PM	Contact the module ccordinator)

NURSING DEPARTMENT, FAMS, UNIVERSITY OF TABUK



We congratulate Dr. Zayed Alsharari, assistant professor in Clinical Nutrition at Applied of Medical Sciences, University of Tabuk for his successful as a first winner in the first "Saudi Hacking Health 2018" in Kingdom of Saudi Arabia. Dr. Zayed Alsharari was part of team work achieved a first winner in track of Brain Health and Medical Imaging at "Saudi Hacking Health 2018" in cooperation with MIT Hacking Medicine and the King Abdulaziz City for Science, and Technology (KACST) and Badir program.



MIT Hacking Medicine and KACST were having in Riyadh the largest healthcare hackathons in the world! This event was during three days workshops in the last weekend, the brainstorm and build innovative solutions with hundreds of like-minded engineers, clinicians, designers, developers and business people were involved. Within our ten themes, there is sure to be a healthcare challenge for everyone!





GENETIC VARIABILITY IN MIRNA-146A GENE AND SUSCEPTIBILITY TO LUNG CANCER: A CASE-CONTROL STUDY

Jamsheed Javid and Abu-Duhier F M

Prince Fahd Bin Sultan Research Chair
Department of Medical Lab Technology
Faculty of Applied Medical Sciences



Genetic variability in miRNA 146a such as rs2910164C>G has a significant influence on the expression and secondary structures of the miRNA 146a. Currently, very limited evidences are available to associate the miRNA 146a (rs2910164C>G) polymorphism and susceptibility to lung cancer. In the present study, we aimed to find out the association of miRNA 146a (rs2910164C>G) polymorphism with the susceptibility to develop lung cancer. Present case-control study included histopathologically confirmed lung cancer patients (n=80) and healthy controls (n=80). Genotyping of miRNA-146a (rs2910164C>G) polymorphism was done by allele specific PCR technique. It was observed that there was a statistically significant difference in the frequency of miR-146a (rs2910164 GG, CG and CC) genotypes between lung cancer patients and healthy controls ($p=0.0097$). Among the two groups, homozygous miR-146a CC genotype was overrepresented by lung cancer patients than healthy controls (40 % vs. 18.75% respectively). Compared to miR-146a GG genotype, odds ratios of 4.3 (95%CI=1.24-14.69, $p=0.036$) was observed for the homozygous miR-146a CC genotypes. In addition, it was observed that all the lung cancer stages (I to IV) and histological grades (Grades 1 to 3) represented higher miR-146a C allele frequency. Squamous cell carcinoma patients represented much higher frequency of miR-146a C allele than adenocarcinoma patients (SCC=0.78 & ADC= 0.63). In conclusion, it was observed that the genetic variability in miRNA-146a gene may be associated with the susceptibility to lung cancer disease.

ACADEMIC AFFAIRS ARRANGEMENT FOR FACULTY OF MEDICINE

Prof Magdy M. ElShamy
Faculty of Medicine



This Week:

For Female Section:

- **Pediatrics Module:** 5th Year, Mid Module Exam on Thursday, 27/12/2018
- **Laboratory Medicine Module:** 4th Year, Final Module Exam, on Wednesday 26/12/2018
- **Community Medicine Module:** 4th Year Announcing the Results of the Final Module Exam
- **Respiratory System Module:** 3rd Year, Announcing the Results of the Final Module Exam
- **Mid Year Vacation for All Students:** Starts on Thursday, 27/12/2018 after finishing teaching activities and the return will be on Sunday 6/1/2019

For Male Section:

- **Obstetrics & Gynecology Module:** 5th Year, Mid Module Exam on Thursday, 27/12/2018
- **Laboratory Medicine Module:** 4th Year, Final Module Exam, on Wednesday 26/12/2018
- **Community Medicine Module:** 4th Year Announcing the Results of the Final Module Exam
- **Respiratory System Module:** 3rd Year, Announcing the Results of the Final Module Exam
- **Mid Year Vacation for All Students:** Starts on Thursday, 27/12/2018 after finishing teaching activities and the return will be on Sunday 6/1/2019

FIRST CLINICAL RESEARCH TRAINING WORKSHOP, FACULTY OF MEDICINE

Prof Mohamed Ali Seyed
Faculty of Medicine

Venue: Faculty of Medicine, University of Tabuk, Female section

Date: Wednesday, December 26, 2018

Time: 8:00 am- 4:00 pm

STUDENT STUDY SECTION: HOW TO INTERPRET CHEST X-RAY ?

Abdullah M. Zahi

6th year Student

Faculty of Medicine, University of Tabuk



Reviewed by Dr. Ahmed Banjar, Faculty of Medicine, University of Tabuk

Interpreting Chest X-ray (CXR) is one of the most common investigations that you will face at the hospital , so mastering CXR is very important for a medical student or even later in postgraduate life.

Tips to simplify the approach to chest radiographs :

- 1- Check the Patient's **name**, medical file **number** and the **date**.
- 2- **Indication** of the study.
- 3- Is this posterior-anterior (**PA**), Anterior-posterior (**AP**) or **Lateral Erect** or **supine**? (You can't comment on the heart if it is AP view).

Quality of the image: Inspiration (visible 8-10 posterior ribs), **Penetration** (thoracic spine should be visible through cardiac shadow) and **Rotation** (clavicles on level of spinous process and the spinous process appears to lie equidistant from the medial end of each clavicle on the frontal chest radiograph).

It does not matter which system you use, as long as you look at everything on the image. So, use whichever system works for you, but be sure to look at everything. "Looking at everything," by the way, includes looking at all of the views available in a given study, not just everything on *one* view. (Do not forget that lateral chest radiograph in a two-view study of the chest)

One of the common approach is **ABCDE** approach:

- **Airway**: trachea central or deviated? Angle at Carina should be < 90 degrees.
- **Bones**: Count ribs (6 anterior and 10 posterior), check all bones for lucency/opacity and check vertebral bodies.
- **Cardiac**: Size of heart (< 50% of thorax in PA), Silhouette sign (loss of the border between cardiac shadow and lung field) and size of the mediastinum.
- **Diaphragm**: Left higher than right? Air under diaphragm? , Gastric bubble present? and presence of costo-phrenic or cardio-phrenic angles.
- **Equal lung fields**: Left and right fields the same? Any opacities or lucencies apparent?

Reference:- Learning Radiology-RECOGNIZING THE BASICS 3rd EDITION - William Herring

❖ Radiographs courtesy of Dr. Amir Mohamed :



Figure 1: Normal Chest X-ray
(Females)



Figure 1: Left upper Lobe
Tuberculosis and collapse



Figure 2: Right Pneumothorax and
chest tube inserted



Figure 4: Accentuated prominent
bronchovascular markings

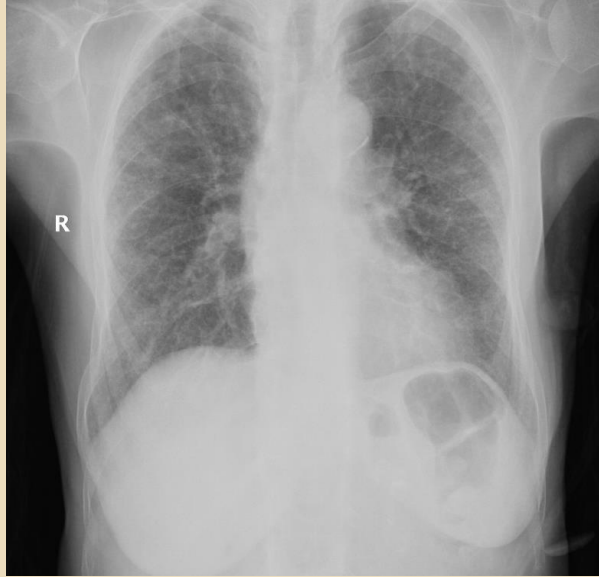


Figure 5: Pulmonary Fibrosis

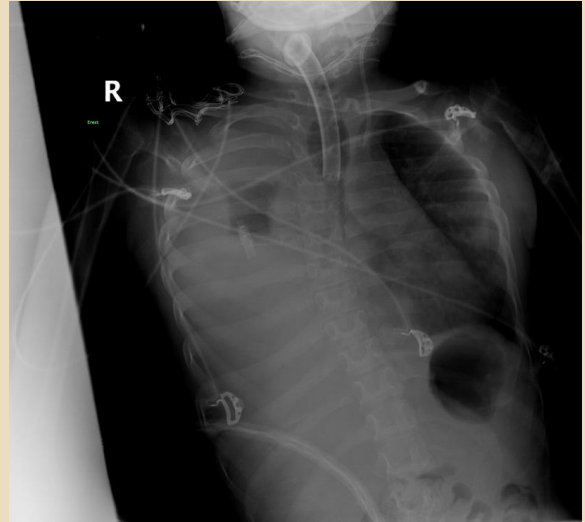


Figure 6: Right Pleural effusion, Tracheostomy, Nasogastric tube inserted and also ECG electrodes in place .

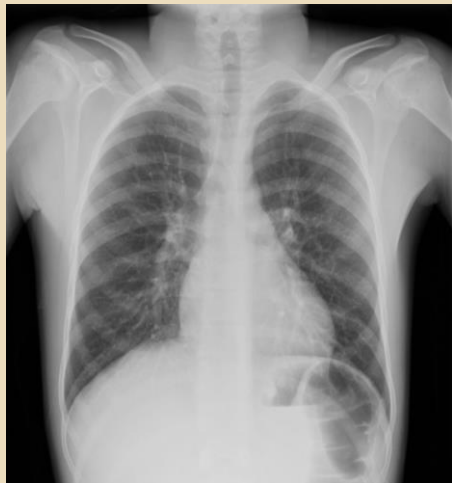


Figure 7: Normal CXR with prominent bronchovascular markings and this occur when patient exposed to smoking so clinical evidence of disease is needed to be valuable

For submissions
Editorial Office, Faculty of Medicine, University of Tabuk. Email:
mededutabuk@ut.edu.sa

Also, for Faculty of Applied Medical Science, University of Tabuk (eosman@ut.edu.sa)

And Faculty of Pharmacy, University of Tabuk (pchettiar@ut.edu.sa)