



Nov 13, 2019  
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# MedEdu Tabuk

## Weekly Newsletter

Faculty of Medicine, University of Tabuk

*"All praise is due to Allah who bestows His favors and bounties upon His servants abundantly"*

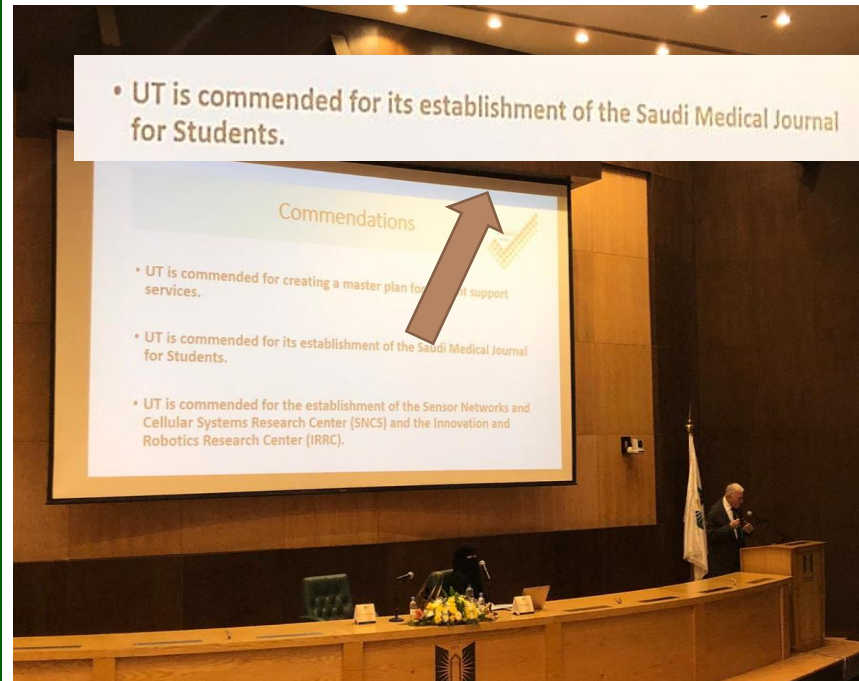


Past Issues



SMJS

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- UT is commended for its establishment of the Saudi Medical Journal for Students.

### Commendations

- UT is commended for creating a master plan for student support services.
- UT is commended for its establishment of the Saudi Medical Journal for Students.
- UT is commended for the establishment of the Sensor Networks and Cellular Systems Research Center (SNCS) and the Innovation and Robotics Research Center (IRRC).

**Message from the  
Editor-in-Chief- Dr.  
Tanveer Raza**

**NCAAA and praise for  
SMJS**

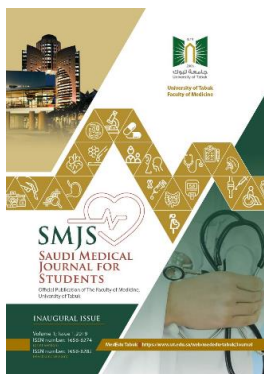
The Saudi Medical Journal for Students (SMJS) was highly commended following the Institutional Accreditation Visit



from the National Centre for Academic Accreditation And Assessment. The team praised the Faculty of Medicine for taking this pioneering initiative of involving students in the publication process.

On behalf of SMJS we would like to express our sincere gratitude to the Dean of Medicine, Dr. Marai M. Alamri for his support. We are also grateful to the Deans of our partner faculties, without whose support things would not have been possible. Thanks to our Faculty Board of Editors of SMJS for their hard work. SMJS has developed due to the dedication and sincerity of our dynamic Student Editorial Team and the students of University of Tabuk, who are the real patrons of the journal.

### **Saudi Medical Journal for Students (SMJS), Faculty of Medicine Editorial board members (2019-2020)**



(alphabetically)

Dr. Abdullah Alatawi

Dr. Abdullah Alhwetti

Dr. Albaraa Altowijri

Dr. Badr Alsayed

Dr. Elham Albalawi

Dr. Hyder Mirghani

Dr. Khalid Alhazmi

Prof. Magdy Shamy

Dr. Marai M. Alamri (Chairman,  
University Advisory Board, SMJS)

Dr. Roua Khan

Dr. Salah Alaghamdi

Dr. Shamina Begum

Prof. Shereen Ibrahim

Dr. Tanveer Raza (Editor-in-Chief)

Dr. Thomas Thaniyath

Dr. Zubair Hayat

## Meeting of the Saudi Medical Journal for Students (SMJS), Faculty of Medicine Editorial board members (2019-2020)

**Dr. Tanveer Raza**

Editor-in-Chief, SMJS

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The first meeting of the **Saudi Medical Journal for Students (SMJS)** editorial board members (2019-2020) of the Faculty of Medicine, University of Tabuk was held on the 5<sup>th</sup> of November, 2019 at the meeting room of the Editorial office of SMJS. The meeting was chaired by the Chairman of the University Advisory Board of SMJS and the Dean of Medicine, **Dr. Marai M. Alamri**. The Editorial Board members were informed about the praise received by SMJS from the accreditation team visiting the University. The team commended the scope of the journal in involving the students in the Editorial process. Recruitment of student editors from the Faculty of Medicine, upcoming issue of SMJS and expansion of the SMJS editorial office were also discussed.



## Behavioral Checklist Graduates: Reflections and Future Directions

### Speaker:

#### Dr. Badr Alsayed

Consultant Pulmonologist

Assistant Professor of Internal Medicine,  
University of Tabuk

Head of Internal Medicine, King Fahad Specialist  
Hospital, Tabuk

Email: [balsayed@ut.edu.sa](mailto:balsayed@ut.edu.sa)

Weekly Academic Activity  
November 6<sup>th</sup>, 2019



Playing a role model in clinical setting is indispensable for learners of health-related fields. Understanding of theoretical background of our teaching activities is critical to graduate professionally competent healthcare providers.



During the titled talk, I discussed practical aspects of the Behavioral; Cognitive; and Social Learning Theory. Achieving mastery level in clinical and cognitive skills is attainable by bedside teaching, simulation, morning meeting, and other activities belong to both domains (i.e. Skills and Knowledge). In contrast, professionalism and team dynamics are primarily gained by engaging the learners in real-life clinical environments. The main message of the "**Behavioral Checklist Graduates**" talk, "Urging educators and academics for real clinical involvement in our local teaching hospitals to contribute in delivering patient-care as well as to improve communication and professionalism among our graduates of health-related colleges at the University of Tabuk".



## THE PEER REVIEW PROCESS IN INTERNATIONAL JOURNALS

### Dr. Sawsan Zaitone

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Faculty of Pharmacy

University of Tabuk

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To a large extent in the field of academia, successful publication improves opportunities for academic funding and promotion whilst enhancing scientific and scholarly achievement and reputation. For a submitted manuscript, reviewers read the article thoroughly and then suggest either to be accepted as is, rejected, or—most frequently—revised and improved before it is published.

All researchers meet peer review during their careers; either as authors submitting their research to a scientific journal for possible publication or as a reviewer asked by a journal editor to afford scientific criticisms on a manuscript. Although it is a key practice in the scientific procedure, the aspect of peer review is rarely taught in international universities and may be a daunting duty for some scientists. In comparison to conducting scientific research and writing manuscripts, reviewing someone else's work may seem a relatively easy task. Hence, an effective review is a distinctive skill that needs effort and time to be gained.

After a research work passes peer review process and is accepted for publication, scientists will be confident that this study has met the scientific standards, and that the findings are reliable.

There are three main types of peer review used by journals that should be clearly identified in the invitation letter sent to the reviewers and the journal guidelines to reviewers. If, a reviewer is not sure about the type of peer review, he/she can check the journal's website or otherwise contact the journal editorial board.

First type is "*Closed peer review*" where the authors' identity is clear to the reviewer however, the authors are not aware about the reviewers' identities.

Second type is "*the double-blind peer review*" where the identity of both the authors and the reviewer is not clear for each other.

The third type is "*the open peer review*" where the identity of authors and reviewers is clear for each other. In some open peer review journals, the reports submitted by the reviewers are published alongside the article.

Some of the issues that peer reviewers may find during revising of a manuscript include possible misconduct or statistical analysis of data that raise queries about the results and conclusion. Comments on the novelty and significance of a manuscript, and if it will

interest the journal's audience, are mostly beneficial in helping the editor to make a decision on the submitted papers.

Finally, serving as a peer reviewer in specialized or multidisciplinary international journals appears good on a scientist's CV as it highlights that he/she is recognized and trusted globally and by other scientists.

## References

1. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5510206/>
2. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1084042/>
3. <https://www.springer.com/gp/authors-editors/authorandreviewertutorials/submitting-to-a-journal-and-peer-review/peer-review-process/10534962>
4. <https://www.springer.com/authors/manuscript+guidelines?SGWID=0-40162-6-849421-0>

## DR MOHAMMAD SHAWIR AS AN EXAMINER FOR THE MRCS EXAMINATION

### Dr. Mohammed Shawir

Department of Surgery

Faculty of Medicine, University of Tabuk

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The **MRCS** (Membership of the Royal Colleges of Surgeons) **examination** is a crucial milestone in a surgical career; it determines whether a surgical trainee possesses the correct knowledge, skills and attributes to complete basic training and to progress to higher levels of specialist surgical training (RCSEd). The Court of Examiners of the College of Surgeons in Ireland has (RCSI) invited Dr Mohammad Shawir, to examine for the diet of the MRCS Part B OSCE taking place in RCSI Bahrain in November 2019. There were 80 candidates who were examined as post graduate doctors over two full days of examination.

It is an international recognition to the expertise of the Faculty of University of Tabuk. Dr. Shawir took the opportunity to invite informally Mr Eamon Mackle and Mr. Peter ,( International experts in OSCE & MCQs ), to deliver a workshop in our college about these academic issues.

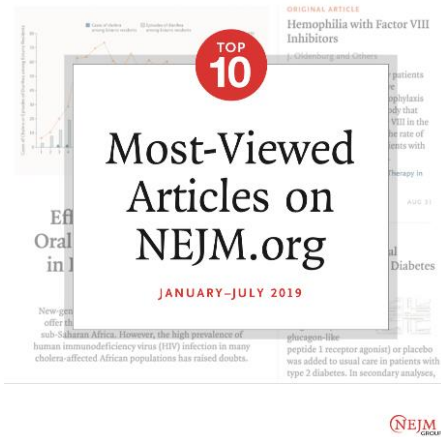
## TOP 10 MOST VIEWED ARTICLES ON NEJM FROM JANUARY TO JULY 2019

### Ahmed Hamoud Alanazi

6th year medical student

Faculty of medicine

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### ARTICLE NUMBER 1

Canagliflozin and Renal Outcomes in Type 2 Diabetes and Nephropathy

#### Conclusions

In patients with type 2 diabetes and kidney disease, the risk of kidney failure and cardiovascular events was lower in the canagliflozin group than in the placebo group at a median follow-up of 2.62 years.

**Read full article at NEJM:** <https://www.nejm.org/doi/full/10.1056/NEJMoa1811744>

### ARTICLE NUMBER 2

Antithrombotic Therapy after Acute Coronary Syndrome or PCI in Atrial Fibrillation

#### Conclusions

In patients with atrial fibrillation and a recent acute coronary syndrome or PCI treated with a P2Y12 inhibitor, an antithrombotic regimen that included apixaban, without aspirin, resulted in less bleeding and fewer hospitalizations without significant differences in the incidence of ischemic events than regimens that included a vitamin K antagonist, aspirin, or both.

**Read full article at NEJM:** <https://www.nejm.org/doi/full/10.1056/NEJMoa1817083>

### ARTICLE NUMBER 3

**Images in clinical medicine:** Disseminated Cysticercosis

**Read full article at NEJM:** <https://www.nejm.org/doi/full/10.1056/NEJMicm1810953>

### ARTICLE NUMBER 4

**Perspective:** Hypertension Hot Potato — Anatomy of the Angiotensin-Receptor Blocker Recalls

**Read full article at NEJM:** <https://www.nejm.org/doi/full/10.1056/NEJMp1901657>

### ARTICLE NUMBER 5

Empagliflozin, Cardiovascular Outcomes, and Mortality in Type 2 Diabetes

#### Conclusions

Patients with type 2 diabetes at high risk for cardiovascular events who received empagliflozin, as compared with placebo, had a lower rate of the primary composite cardiovascular outcome and of death from any cause when the study drug was added to standard care.

**Read full article at NEJM:** <https://www.nejm.org/doi/full/10.1056/NEJMoa1504720>

### ARTICLE NUMBER 6

Transcatheter Aortic-Valve Replacement with a Balloon-Expandable Valve in Low-Risk Patients

#### Conclusions

Among patients with severe aortic stenosis who were at low surgical risk, the rate of the composite of death, stroke, or hospitalization at 1 year was significantly lower with TAVR than with surgery.

**Read full article at NEJM:** <https://www.nejm.org/doi/full/10.1056/NEJMoa1814052>

### ARTICLE NUMBER 7

A Randomized Trial of E-Cigarettes versus Nicotine-Replacement Therapy

#### Conclusions

E-cigarettes were more effective for smoking cessation than nicotine-replacement therapy, when both products were accompanied by behavioral support.



**Read full article at NEJM:** <https://www.nejm.org/doi/full/10.1056/NEJMoa1808779>

## ARTICLE NUMBER 8

Early or Delayed Cardioversion in Recent-Onset Atrial Fibrillation

### Conclusions

In patients presenting to the emergency department with recent-onset, symptomatic atrial fibrillation, a wait-and-see approach was noninferior to early cardioversion in achieving a return to sinus rhythm at 4 weeks.

**Read full article at NEJM:** <https://www.nejm.org/doi/full/10.1056/NEJMoa1900353>

## ARTICLE NUMBER 9

**Review Article:** Aspiration Pneumonia

**Read full article at NEJM:** <https://www.nejm.org/doi/full/10.1056/NEJMra1714562>

## ARTICLE NUMBER 10

Apixaban to Prevent Venous Thromboembolism in Patients with Cancer

### Conclusions

Apixaban therapy resulted in a significantly lower rate of venous thromboembolism than did placebo among intermediate-to-high-risk ambulatory patients with cancer who were starting chemotherapy. The rate of major bleeding episodes was higher with apixaban than with placebo

**Read full article at NEJM:** <https://www.nejm.org/doi/full/10.1056/NEJMoa1814468>

## CRITICAL THINKING SNIPPET

**Q. For a student, a patient is an example to be learned or a problem to be solved ?**

“For a student the patient is an example to be learned until he/she start their clinical life and visit hospital then the patient becomes both an example and a problem at the same time for the student”

Laila Abdullah Alanazi, Student ID: 351003167

Faculty of Medicine, University of Tabuk

## GREEN URINE

### Rabab Talal Aljayani

5<sup>th</sup> Year, Faculty of Medicine

University of Tabuk

Email: 361004193@stu.ut.edu.sa

Normal urine color ranges from pale yellow to deep amber the result of a pigment called urochrome and how diluted or concentrated the urine is. Changes in the color of the urine can be an indicator of an underlying pathologic and physiologic condition. The greenish color can be especially associated with familial benign hypercalcemia a rare genetic disorder. It is sometimes called blue diaper syndrome because children with the disorder have blue urine. Green urine sometimes occurs during urinary tract infections caused by pseudomonas bacteria. Medications such as amitriptyline, indomethacin, and propofol can also cause the greenish-blue color of urine. Methylene blue is a dye which is used by both biologists and chemists to see bacteria, which are otherwise not visible with the naked eye as they are colorless. Methylene blue is also used as a medication against cyanide poisoning, which leads to methemoglobinemia.

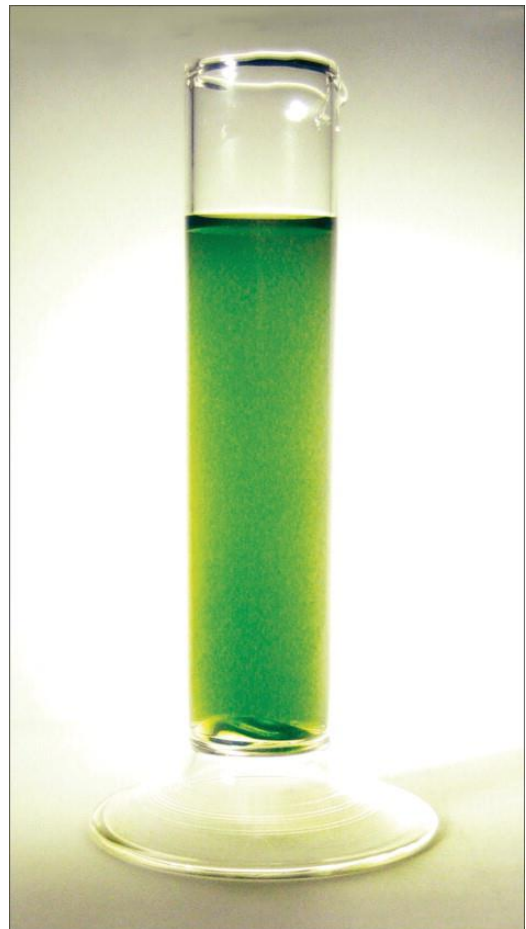


Figure 1: Green urine. Dr Philippe Leclercq, MD, Catherine Loly, MD, Pierre Delanaye, MD, Christophe Garweg, MD, Bernard Lambermont, MD. The Lancet. Volume 373, Issue 9673, (April 2009)

### How do these medications turn urine green?

This is usually caused by blue pigment mixing with the natural yellow color of urine to turn it green or bluish-green. In many cases, the blue color is caused by something called a phenol group in the chemical structure of the drug. It is broken down in the body to produce blue pigments in the urine, which look green when mixed with naturally-present yellow pigments known as urochrome.