



## MedEdu Tabuk



**Weekly Newsletter of the Department of Medical Education, Faculty of Medicine,  
University of Tabuk**  
**March 13, 2017. Volume 1; Issue 17.**

### **Editor's Corner- Dr. Tanveer**

From this week, we will have a new section titled "**Academic Affairs Arrangement**". It will contain exams that are scheduled to be held and modules that will begin in the current week. It will help us get an idea on the teaching activities of the Faculty. Prof. Magdy ElShamy will kindly maintain this section. MedEdu Tabuk appreciates you continuous support and looks forward to publishing your contributions in "Faculty Development Program" and "Reader's corner".

### **Activity**

#### **Monthly Research Seminar**

**Time and Date: 12:00 noon. Thursday, 16<sup>th</sup> of March, 2017**

**Meeting Room: Staff's activity hall in the 2<sup>nd</sup> floor opposite the Dean's office**

#### **Meeting Agenda:**

1. Allergic Rhinitis and Immunotherapy. Dr. Shakil Akhtar Ansari, Ear, Nose Throat Consultant and Head of the ENT Dept. King Khalid Hospital, Tabuk
2. Perception of 4<sup>th</sup> Year Students on Student Mentorship Program. Dr. Tanveer Raza. ENT and Head, Medical Education Department, University of Tabuk



#### **New Section Academic Affairs Arrangement- Prof. Magdy ElShamy**

#### **For Female Section:**

**Medicine & Subspecialties:** Final Exam on Sunday (12<sup>th</sup>) & Clinical exams from Monday (13<sup>th</sup>) to Thursday (16<sup>th</sup>)

**Pediatrics:** Final Exam on Sunday (12<sup>th</sup>) & OSCE on Wednesday (15<sup>th</sup>)

**Reproductive System Module:** OSPE on Thursday (16<sup>th</sup>)

#### **For Male Section:**

**Obstetrics &Gynecology:** Final Exam on Sunday (12<sup>th</sup>) and OSCE on Wednesday (15<sup>th</sup>)

**Surgery &Subspecialties:** Final Exam on Monday (13<sup>th</sup>) and OSCE on Thursday (16<sup>th</sup>)

**Reproductive System Module:** OSPE on Thursday (16<sup>th</sup>)

**Computer Skills and Applications:** First Mid Exam for preparatory year on Wednesday (15<sup>th</sup>) for group (22) and on Thursday (16<sup>th</sup>) for Group (21)

## Faculty Development Program

### Hidden Curriculum- Dr. Ahmad AbdulAzeem Abdullah

Hidden curriculum is the implicit learning that is conveyed to the students through the attitudes and behaviours that flourish in and dominate the culture and the organizational setup of an institution. Teachers play an important role in the process and hidden messages are sent to the students through the way in which we teach and assess them and how do we address priorities and concerns in the learning environment. Examples of hidden curriculum learning processes include; adoption of professional identity, learning of good doctoring, acceptance of hierarchy and change in the ethical integrity of learners; role modelling is crucial here. There is a need to expose and dissect the hidden curriculum in order to correct wrong unintended messages and build on the good ones. **For further reading, please refer to PDF attachment.**

## Reader's Corner

### Informed Consent- New England Journal of Medicine

This multipart review published in the New England Journal of Medicine (NEJM) provides an overview of innovative approaches to improving and expanding the informed consent process for researchers and participants, along with short essays covering specific areas of innovation. The topics are (i) The Changing Face of Informed Consent; (ii) Electronic Informed Consent and Internet-Based Trials; (iii) Mobile Health Research — App-Based Trials and Informed Consent; (iv) Video Informed Consent. **For further reading, please refer to PDF attachment.**

### Knowledge Refreshment- Dr. Abdullah A Alwakeel

A 15-year-old girl is brought to the physician because of a 3-week history of excessive thirst and voiding excessive amounts of urine. She shows no signs of kidney damage, and she is not taking any medications. Physical examination shows no abnormalities. She undergoes an 8- hour water deprivation test. She is also given 5 units of ADH (vasopressin), subcutaneously. Under both conditions, she continues to produce large volumes of dilute urine.

Her symptoms are most likely due to a relative lack of which of the following proteins from the apical membranes of collecting duct epithelial cells?

- (A) Aquaporin
- (B) Epithelial Na<sup>+</sup> channel
- (C) Na<sup>+</sup>—K<sup>+</sup> ATPase
- (D) Na<sup>+</sup>—K<sup>+</sup>—2Cl<sup>−</sup> cotransporter
- (E) Urea transporter

**Correct answer for previous question is (C) Lymphocytic infiltration. This patient most likely has Hashimoto's thyroiditis.**

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