

Public health and community medicine

University: Menoufia

Faculty: Medicine

A-Administrative information

Module Title: Community medicine

Code: COM 3203

Department offering the Module Public health and community medicine

Program(s) on which the Module is given: Menoufia M.B.B.Ch Credit- hour Program (5+2)

Academic year: 3rd year

Semester: VI

Date of specification: 2018

Date of approval by Department Council: 2018

Date of approval by Faculty Council: 2018

Credit hours: 5 credit hours

Teaching hours:

Lecture:	Practical	Activities	Total:
30h	45h	90 h	165 h
B-Professional ir	nformation		

I. Overall Aim of Module:

To prepare a community-oriented physician capable of implementing preventive and control measures for common communicable diseases on the individual, family and community levels and within the primary health care (PHC) settings following MOHP policies and protocols.

II. <u>Objectives:</u>

- A- To develop a graduate who is aware about the potential emerging/ threatening diseases and who can act as the first line of defense and management.
- B- To prepare a community-oriented physician capable of anticipating and responding to community health needs within the primary health care (PHC) setting according to the policies, regulations and guidelines of the Ministry of Health and Population (MOHP).
- C- To develop a graduate who will apply the knowledge and skills learned, and is able to take leadership in motivating the community served.



III. <u>Learning outcomes of Module:</u>

Competency Area 2: The graduate as a health promoter
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Key Competency		Module ILOs
2.1	Identify epidemiology and screening of diseases, determinants of health and principles of health promotion.	 2.1.1.Implement a qualified management plan for dealing with a health problem and disease prevention. 2.1.2. Think and respond properly when solving public health problems, appropriately address different problems. 2.1.3. Cope with changing work environment. 2.1.4. Collaborate with his colleagues in a teamwork during field visits, class discussion, as well as solving problems. 2.1.5. Behave ethically with his teachers, colleagues as well as other personnel in the field.
2.2	Describe the principles of disease prevention, and empower communities, specific groups or	2.2.1. Describe the MOHP programs for prevention and control of the



	individuals by raising their		communicable and most prevailing
	awareness and building their		diseases in Egypt.
	capacity for participation.	2.2.2.	Describe the role of PHC physician
			in addressing local health problems,
			the prevention and control of
			vulnerable groups' health problems.
		2.2.3.	Define the screening tests pertinent
			to selected morbidity conditions and
			the at-risk approach in the
			application of screening tests.
		2.2.4.	Describe the different health
			education/communication strategies
			for use with clients, health care
			team, and the community.
		2.2.5.	Explain how different health related
			behaviors can have an impact on
		• • •	health and disease.
		2.2.6.	Assess and respond to individual
		227	and population health hazards.
		2.2.1.	themselves by improving
			descriptive capabilities and
			communication skills.
		2.2.8.	Demonstrate ethical relationship
			with faculty and staff members.
		2.2.9.	Develop attitudes that will
			maximize their educational
			experiences.
2.3	Identify the double burden of	2.3.1	Explain the ecological factors of
	major health threats in the		morbidity and mortality within
	community, mainly endemic		the concept of epidemiologic
	diseases, communicable and non-	222	and demographic transitions.
	communicable diseases.	2.3.2	Explain the basic terms and
			diagona anidemiala di diagona
			provention and control trials
			outbreak investigation and
			evaluation of screening tests
			evaluation of screening tests.
2.4	Recognize the epidemiology of	2.4.1	Identify trends in health ad disease
	newly emerged and re-emerging		including epidemiological causes of
	diseases, risk factors for their		high prevalence of certain



	appearance, pattern of their spread and their incidence rate.	 infections, causes of eradication, emerging or reemerging previous infections worldwide and in Egypt. 2.4.2 Define epidemiologic approaches of disease occurrence in communities: determinants, distribution and dynamics including prevention and control
2.5	Identify the major health threats in the community, including demographic, occupational and environmental risks, endemic diseases, communicable and non- communicable diseases.	 2.5.1. Define occupational hazards with their risk factors, prevention and control with element of occupational health program. 2.5.2. Identify the nature, health effects, and sources of environmental risks and Explain methods for monitoring the quality of water, food and air. 2.5.3. Describe principles of waste management in the community and in health care settings.
2.6	Recognize the economic, psychological, social, and cultural factors that interfere with wellbeing (mental and social health).	 2.6.1. Demonstrate respect to all patients irrespective of their socioeconomic levels, culture or religious beliefs and use language and other communication skills appropriate to the patient culture. 2.6.2. Interact and communicate sensitively, effectively, and professionally with persons from diverse cultural, socioeconomic, educational, and professional backgrounds, and with persons of all ages and lifestyle preferences.
2.7	Discuss the role of both nutrition & physical activity in health and therapeutic nutrition in early disease management.	 2.7.1. Define the basics of nutritional assessment and diet in health and different diseases with identification of nutritional public health problems. 2.7.2 Define malnutrition problems and Explain methods of assessment of nutritional status 2.7.3 Prescribe diet plans for selected disease conditions.



2.8	Provide care for specific groups	2.8.1	Define, assess, and understand the
	including pregnant women,		health status of populations,
	newborns and infants, adolescents		determinants of health and illness,
	and the elderly.		factors contributing to health
			promotion and disease prevention of
			priority non communicable and
			communicable diseases within the
			different health settings and for
			specific age groups, and factors
			influencing the use of health
			services.
		2.8.2	Define different MOHP policies,
			systems, programs, approved
			standards of practice and describe
			the specific health programs
			including, school health,
			occupational health, etc.

Competency Area 5: The graduate as a member of the health team and part of the health care system.

Key competency		Modul	e ILOs
5.8	Apply fundamental knowledge of health economics to ensure the efficiency and effectiveness of the	5.8.1.	Describe the quality cycles and its utilization in different public health settings.
	health care system.	5.8.2.	Identify the dimensions of quality in health care, and how to utilize appropriately quality concepts and processes for performance improvement.
		5.8.3.	Manage time and resources effectively.
		5.8.4.	Formulate policy for a given health issue.
		5.8.5.	Manage planning, implementation and evaluation of health care services,



5.8.6.	Utilize health care system in
	dealing appropriately with a specific
	community health problem.
5.8.7.	Design, implement and evaluate
	health services for both individuals
	and populations. use objective,
	measurable criteria such as
	epidemiological impact and cost
	effectiveness.
5.8.8.	Conduct, document and analyze a
	comprehensive situation analysis
	recognizing non biological factors
	that may influence disease causation/
	management, client's perception of
	health/ disease, access to care and
	adequately respond to these factors in
	the benefit of the client, patient&
	community.
	5.8.6. 5.8.7. 5.8.8.

IV. Module Contents:

Lectures:

Week 1		
Lectures	Teaching Hours	
Surveillance & screening	2 hours	
Public Health Administration	2 hours	
Quality assurance	2 hours	
Total	6 hours	
Practical sessions	Teaching Hours	
Natural history of the disease & epidemiological triad	1.5 hour	
Screening Problem solving	1.5 hour	
Infectious cycle	1.5 hour	
Food born infection: Problem solving	1.5 hour	
Viral hepatitis: Problem solving	1.5 hour	



Health education: Tutorial	1.5 hour
Total	9 hours
Week 2	
Lectures	Teaching Hours
Epidemiology of non-communicable diseases	2 hours
Basic nutrition+ Malnutrition	2 hours
STD+ Contact transmitted diseases	2 hours
Total	6 hours
Practical sessions	Teaching Hours
Hypertension & diabetes: problem solving	1.5 hour
Diet planning & nutritional assessment	1.5 hour
Outbreak investigation: Tutorial	1.5 hour
STD: Problem solving	1.5 hour
Nutritional anemia	1.5 hour
Diet therapy: Tutorial	1.5 hour
Total	9 hours
Week 3	
Lectures	Teaching Hours
Arthropod borne infection+ Parasitic infection	2 hours
Smoking & drug addiction	2 hours
Droplet infection	2 hours
Total	6 hours
Practical sessions	Teaching Hours
Emerging& re-emerging diseases	1.5 hour
Water sanitation scenario (field visit)	1.5 hour
Droplet: problem solving	1.5 hour



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Food sanitation- scenario (field visit)	1.5 hour
Tuberculin & widal test	1.5 hour
School health: tutorial	1.5 hour
Total	9 hours
Week 4	
Lectures	Teaching hours
Occupational-heath program+ Zoonotic diseases	2 hours
Water sanitation+ Food sanitation	2 hours
Air sanitation	2 hours
Total	6 hours
Practical sessions	Teaching hpurs
Evaluation of heat stress and strain	1.5 hour
Noise	1.5 hour
Formative exam	1.5 hour
Pulmonary function tests	1.5 hour
Factory visit scenario (field visit)	1.5 hour
Factory visit scenario (field visit)	1.5 hour
Total	9 hours
Week 5	
Lectures	Teaching hours
Pneumoconiosis	2 hours
Heat disorders+ Pressure disorders	2 hours
Heavy metals+ Radiation	2 hours
Total	6 hours
Practical sessions	Teaching hours
Revision	1.5 hour



Revision	1.5 hour
Revision	1.5 hour
SDL	1.5 hour
SDL	1.5 hour
SDL	1.5 hour
Total	9 hours

IV – Teaching and learning methods

Theoretical Teaching:

- 1- Interactive Lectures
- 2- Flipped Classroom
- 3- Team Based learning
- 4- Case Based Learning
- 5- Seminars
- 6- Tutorials

Practical / Clinical Teaching:

- 1- Practical Sessions/ Clinical rounds
- 2- Field visit

V- Student Assessment:

A. Attendance criteria:

The minimum acceptable attendance is 75%, otherwise students failing toreach that percentage will be prevented from attending the final examination.

B. Types of Assessment:

• **Formative:** This form of assessment is designed to help the students to identify areas for improvement. It includes a multiple choice questions, problems-solving exercises and independent learning activities in all subjects. These will be given during tutorial and practical sessions. The Answers are presented and discussed immediately with you after the assessment. The results will be made available to the students.



- **Summative** This type of assessment is used for judgment or decisions to be made about the Students^{seed} performance. It serves as:
 - **1.** Verification of achievement for the student satisfying requirement
 - 2. Motivation of the student to maintain or improve performance
 - 3. Certification of performance
 - 4. Grades

C. Summative Assessment Methods and Schedule:

Assessment Method	Percentage	Description	Timing
Regular Evaluation	30%	10% written at the end of and periodicals including problem solving, multiple choice questions, give reason, matching, extended matching, complete and compare. 20% Participation in the tutorials, TBL, Research	At the end of the module
Final practical exam	30%	OSPE Exam	At the end of the module
Final Written	40%	It Includes problem solving, multiple choice questions, givereason, matching, extended matching, complete and compare.	At the end of the semester

D- Weighing of Assessment:

Method of Assessment	Marks	Percentage
Final Written exam.	50	40%
Final Practical exam.	37.5	30%
Activities	37.5	30%

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Total	125	100%	Accri

E- Grading for by GPA System:

The Percentage	Symbol	Grade
> 85%	А	Excellent.
75-<85 %	В	Very Good
65 - < 75 %	C	Good.
60 - < 65 %	D	Passed.
< 60 %	F	Failed.
	W	Withdrawn

VI. List of references and resources:

1- Module notes: Book authorized by department.

2- Essential Books:

- Department book

- Text books

- Krieger, N. (2024). *Epidemiology and the people's health: theory and context*. Oxford University Press.
- Afzal S and Jalal S (2017), Textbook of Community Medicine and Public Health ,first edition , Pakistan.
- Aschengrau, A., & Seage, G. R. (2013). *Essentials of epidemiology in public health*. Jones & Bartlett Publishers.
- Detels, R., Beaglehole, R., Lansang, M. A., & Gulliford, M. (2011). *Oxford textbook of public health*. Oxford University Press.
- Maxcy-Rosenau (2010): Public health and preventive medicine, Prentice- Hall International Inc. 15th edition
- Park K. (2007) eighteenth edition: Environment and Health at Park's textbook of preventive and social medicine. Ms Banarsidas Bhanot. India.



- Bonita, R., Beaglehole, R., & Kjellström, T. (2006). *Basic epidemiology*. World Health Organization.
- Teutsch, S. M., & Churchill, R. E. (Eds.). (2000). *Principles and practice of public health surveillance*. Oxford University Press, USA.
- Churchill Livingstone (1998): Epidemiology in medical practice, 5th edition. New York, London and Tokyo.

- <u>Recommended web sites:</u>

- www.Medscape.com
- PubMed website
- WHO website
- CDC

VII- Facilities required for teaching and learning:

- 1- Faculty Lecture halls
- 2- Faculty library for textbooks & electronic library for web search.
- 3- Audiovisual aids as boards, data show and computers.
- 4- Clinical round teaching rooms.

Module Coordinator:

Name: Signature: Date:

Program Coordinator:

	Name:
	Signature:
Date:	