## **PROGRAM REPORT**



## The special Program (MMSP)





## Program Report

University	Menoufia								
Faculty	Medicine								
A. Basic Information		<u>I</u>							
Program title:		M.M.	B.Ch Cr	edit ho	urs (5+2)	Progra	m		
Program type:		Single	9			0			
Department:		All fa	culty dep	partmei	nts				
Coordinator:		Prof.	Dr. Zein	ab Kas	emy				
External evaluator:		Prof.	Dr. Mon	a Ghal	y				
Academic year		2022-	2023						
B- Statistical Information	on								
No. of students Starting th	e program.	29							
Ratio of students attending year to those of last year	10	Not a	pplicable	e					
No. and percentage of	<b>.</b> .	Excellent		Very good		Good		Pass	
students passing in each	Level	No	%	No	%	No	%	No	%
level:	First	11	38%	4	14%	6	21%	0	0%
	Second	6	50%	3	25%	1	17%	0	0%
	Third	4	57%	0	0%	1	14%	0	0%
	Fourth	4	80%	0	0%	0	0%	0	0%
	Fifth	4	80%	0	0%	1	20%	0	0%
No. of students completing the program	No	5							
and as a percentage of those who started	%	17.2%							
	Grade	Excellent		Very	good	Good	ł	Pass	
Grading of successful students:	No	3		1		1		0	
students:	%	60%		20%		20%		0	
5C- Professional Inform	nation								
1 –Academic standards	National Academic Reference Standards 2017								
Achievement of program	Module				Key Competencies/Objectives				
Objectives	Foundation 1			4.1, 4.3, 4.5, 4.6, 4.8					
	Foundation 2			4.1, 4.2, 4.5, 5.6,5.8					
	Foundation 3			4.5, 4.7, 4.8					
	Foundation 4			4.5, 4.8					
	Vertical Integration 1			1.8, 1.9, 1.10, 2.1, 5.1, 5.2					
	Musculoskeletal 1			4.1, 4.2, 4.5, 4.6, 4.8					
	Musculoskeletal 2			4.1, 4.5, 4.6, 4.7, 4.8					
	Blood and Lymphatics			4.1, 4.2, 4.5, 4.6, 4.7, 4.8					
	Medical Professionalism and Communication skills			3.1, 3.3, 3.7, 3.8, 3.9, 5.1, 5.2, 5.3, 5.4, 5.5, 5.6, 5.7, 5.10, 5.11, 5.12					





Vertical Integration 2	1.8, 1.9, 1.10, 2.1, 5.1, 5.2
Cardiovascular System	4.1, 4.2, 4.5, 4.6, 4.7, 4.8
Respiratory System	4.1, 4.2, 4.5, 4.6, 4.7, 4.8
Nutrition	2.3, 4.2, 4.7, 4.8
EBM, Basics of medical research and	1.9, 6.8, 6.9. 6.10
biostatistics	. , ,
Vertical Integration 3	1.8, 1.9, 1.10, 2.1, 5.1, 5.2
Gastrointestinal System	4.1, 4.2, 4.5, 4.6, 4.7, 4.8
Renal and Urinary System	4.1, 4.2, 4.5, 4.6, 4.7, 4.8
Reproductive System and Breast	4.1, 4.5, 4.6, 4.7, 4.8
Vertical Integration 4	1.8, 1.9, 1.10, 2.1, 5.1, 5.2
Endocrine	4.1, 4.2, 4.3, 4.5, 4.6, 4.7, 4.8
CNS & Special senses (1)	4.1, 4.5, 4.7, 4.8
CNS & Special senses (2)	4.1, 4.2, 4.5, 4.6, 4.8
Basic Life support	1.15
Vertical Integration 5	1.8, 1.9, 1.10, 2.1, 5.1, 5.2
Basic clinical examination	1.1, 1.2, 1.4, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12,
	1.13, 1.14, 1.15
Dermatology	1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12,
	1.13, 1.14, 1.15
Community medicine	2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7
Primary health care and elderly care	1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12, 1.13, 1.14, 1.15, 2.7, 4.3, 4.5
Child health	1.13, 1.14, 1.15, 2.7, 4.3, 4.5 1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12,
	1.13, 1.14, 1.15
Investigations	1.2, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12, 1.13,
Ŭ	1.14, 1.15
Oncology	1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12,
	1.13, 1.14, 1.15, 1.16
Clinical psychology	1.1, 1.2, 1.3, 1.5, 1.7, 1.8, 1.13
Vertical Integration 6	1.8, 1.9, 1.10, 2.1, 5.1, 5.2
Heart and chest diseases	1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12,
Endopringlagy and Droast	1.13, 1.14, 1.15 1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12,
Endocrinology and Breast	1.1, 1.2, 1.4, 1.5, 1.0, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12, 1.13, 1.14, 1.15
Hematology and lymphatics	1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12,
	1.13, 1.14, 1.15
Gynecology	1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12,
	1.13, 1.14, 1.15
Patient safety and infection control	1.12, 2.9
Vertical Integration 7	1.8, 1.9, 1.10, 2.1, 5.1, 5.2
Renal and Urinary diseases and	1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12,
andrology	1.13, 1.14, 1.15
Obstetrics and Family Medicine	1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12,
	1.13, 1.14, 1.15





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	Gastroenterology, Hepatology, and	1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12,				
	infectious diseases	1.13, 1.14, 1.15				
	Vertical Integration 8	1.8, 1.9, 1.10, 2.1, 5.1, 5.2				
	Psychiatry and neurology	1.1, 1.2, 1.3, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11,				
		1.12, 1.13, 1.14, 1.15				
	Ear, Nose, and Throat	1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12,				
	1.13, 1.14, 1.15					
	Pediatric and Plastic surgery	1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12,				
	Pediatric and Plastic surgery         1.1, 1.2, 1.4, 1.3, 1.0, 1.7, 1.8, 1.9, 1.10, 1.11, 1           1.13, 1.14, 1.15           Ophthalmology           1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1					
	opinition opi	1.13, 1.14, 1.15				
	Ethical and legal issues in medical	3.2, 3.5,3.6,3.8				
	practice	512, 513,510,510				
	•	1 9 1 0 1 10 21 51 52				
	Vertical Integration 9	1.8, 1.9, 1.10, 2.1, 5.1, 5.2				
	Emergency and critical care	1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12,				
		1.13, 1.14, 1.15				
	Vascular surgery	1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12,				
		1.13, 1.14, 1.15				
	Orthopedics and rheumatology	1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12, 1.13, 1.14, 1.15				
	Forensic Medicine and toxicology	1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12,				
	Torensie Medienie and toxicology	1.13, 1.14, 1.15				
	Vertical Integration 10	1.8, 1.9, 1.10, 2.1, 5.1, 5.2				
Commentary						
Commentary	The program learning outcomes are clearly stated, appropriately coded, derived from the program aims, adequately fulfilled by the program courses, covering the minimum					
	requirements in accordance to the competency areas of the NARS- Medicine competency					
	framework, and coping with recent advances in the field of specialty					
2. Achievement of						
		n the preclinical phase achieve the aims of the				
program aims	program by providing the students with the basic sciences needed for the					
	profession of general practitioner.					
	• The modules of the program in the clinical phase achieve the program aims by					
	supplying the students with the basic knowledge, skills and attitude needed for					
	an efficient general practitioner.					
	• The modules in which community medicine and family medicine share offer					
	the field training that reinforces the principles of community service among the					
	graduates.					
	• There modules providing the graduate with communication, research skills with principles of basic life support, infection control, patient safety, ethical					
	and legal issues.					
3. Assessment methods	• No marks allocated for oral exam, which alleviate the subjective character of					
	<ul> <li>the exam.</li> <li>Student evaluation is done all through the year in different ways as quizzes and assignments.</li> <li>Extended use of OSPE and OSCE examination to offer more objective</li> </ul>					
	• Extended use of OSPE and assessment in many department	5				

Menourita Faculty of Medicine Accordina	MASP (5+2)
	<ul> <li>Improvement of the announcement of the results of periodical exams sufficient time before the exam</li> <li>The increasing use of single best answered questions making the assessment more objective. Also, there is increased focus on testing applied knowledge rather than recall in written examinations.</li> <li>The presence of a blueprint for each module to guide the preparation of the exam.</li> </ul>
4. Student achievement	<ul> <li>The range of success in all levels of the program is fair &amp; adequate (more than 90%) indicating good student achievement especially in the clinical years.</li> <li>Modules of high achievement were in the clinical phase that could be due to students" maturity helping them to understand what is required from them and they became well trained to the methods of assessment which are compatible with the method of teaching.</li> </ul>
	Quality of Learning Opportunities
5. Quality of teaching and learning	<ul> <li>A good percentage of students concluded that the teaching program helped them.</li> <li><u>Points of Strength:</u></li> <li>The presence of well-balanced timetables for lectures and practical or clinical sessions.</li> </ul>
	<ul> <li>Small numbers of students allow better illustrations and communications with the staff, also better demonstration in the practical and clinical sessions.</li> <li>The presence of self-learning in different courses.</li> <li>Focusing on communication skills and health systems</li> </ul>
	<ul> <li>Focusing on communication skins and nearth systems</li> <li>The introduction of tutorial in the teaching methos</li> <li>Continuous training of stuff members on teaching and assessment methods by the center of medical education</li> <li>Points of Weakness:</li> </ul>
	<ul> <li>Repetition of some topics among different courses</li> <li>Lack of International partnerships and limited cooperation protocols with third parties.</li> </ul>
6. Effectiveness of student support systems	<ul> <li>A. <u>Financial Support:</u> A student with financial problems can divide the total amount of the tuition expenses into installments throughout the year, provided that all expenses are paid by the end of the year.</li> <li>B. <u>Academic support:</u></li> </ul>
	At the beginning of every academic year, the faculty makes a student meeting awareness for the new student in the form of orientation course for one week, through which the dean, vice deans, staff members and the old student in the faculty offer pastoral support to the new students and a guide student handbook has been given to them.
	<ul> <li>The students were divided into small groups under supervision of staff members for academic support.</li> <li>C. <u>Support for outstanding students:</u> Achievement awards for outstanding students in various domains including academic, athletic, and social achievements.</li> </ul>





Menoufia Faculty of Medicine Accredited					
	The department handbooks of different modules were provided freely for				
	outstanding students to enhance their academic achievement.				
	D. <u>Support for at risk students</u>				
	There is a policy for early detection and helping the students who are at risk or				
	failure by using the academic support system.				
	E. Facilities and Services for disabled student:				
	As the faculty of medicine is a practical faculty the opportunities to the disabled				
	student to entrance it is very small, so there is no clear policy to those types of				
	students.				
	F. Student Activities, accommodations and health Services:				
	Many activities in the faculty of Medicine such as sports, culture arts and social				
	events are shared by many students. Students getting grades at least good and those				
	who live out of Shebin El-Kom city are only permitted to get a place in the				
	Menoufia University Student Hostel.				
	Medical Support to students is available at the Student Hospital, which located in				
	the east of the same city & also student's clinic for medical, social & psychological				
	support.				
	Points of weakness				
	Transfer of students from the special program to the general program It had been				
	approved during the Corona period so that there is no financial burden on families,				
	especially with the weak financial situation during this period.				
7. Learning resources					
a. No. and ratio of	No. of staff in 2022/2023= 110				
department members	No. of assistants $= 110$				
and their assistants to	No. of staff and assistant $=220$				
students.	No. of students= 144				
	Ratio of Staff /students= $0.76:1$				
	Ratio of staff and assistant / students = <b>1.5:1</b>				
b. Matching of faculty	The faculty member's specialization and program needs are properly matched. The				
members' specialization	staff of preclinical stage represent 49.5% of the total staff members although they				
to program needs.	are responsible for about 50.5% of teaching hours.				
-	The Youth Care and Welfare Office provides the faculty handbook for the new				
adequacy of program	students. It contains all essential information of the departments, programs				
handbook	(admission, progression, completion), student activities and the enabled facilities				
	& another quality handbook prepared by the quality assurance unit.				
d. Adequacy of library	There is a large library the faculty which serves staff, postgraduate and				
facilities.	undergraduate students. The library is located on the 4th floor in the faculty of				
	medicine with an area of $350 \text{ m}^2$ .				
	The library has 2 halls for the belongings of the library including references,				
	periodical, theses, The library has 15 (fifteen) tables, 150 (one hundred and fifty)				
	seats for interior reading. There is a treasure unit on the left of the entrance of the				
	library where personal belongings are saved with a photocopy center for				
	everything in the library.				





Menaufia Faculty of Medicine Accredited					
	All content of the library is current, sufficient for all students and suitable for the program requirements except the periodicals. Work in the library is from 9 a.m. to 2 p.m. The library staff are adequate in number and efficient. The rules of the library are flexible and appropriate of for facilitating borrowing.				
e. Adequacy of		e different equipment & laboratories wh	*		
laboratories		central lab available at the 7 <sup>th</sup> floor			
	performe	ed. There are twenty qualified technic	icians. The laboratories are no		
	available	to students for self-learning.			
f. Adequacy of computer	There ar	e no computer labs available for stud	ent use for digital activities an		
facilities	internet a	access. However, there is a large assess	ment and measurement hall at th		
	fourth fl	oor containing 270 computer devices of	connected to a server at the fift		
	floor. Th	is hall is frequently used for electronic	exams.		
g. Adequacy of	Provided	by two departments which are commun	nity medicine and family medicin		
field/practical training	in some	modules. The achieved field stud	y is matched to the program		
resources	specifica	tions.			
h. Adequacy of any other					
program needs:	The fa	aculty contains 5 museums for self-lear	rning in the following specialties		
	anatomy	, pathology, parasitology & forensic 1	nedicine, but the number of th		
	specimen in them are not sufficient.				
		Description of different facilities in	the Faculty of Medicine:		
	Fac	cilities	Number of unites		
	Small Lecture halls 5				
	Conference Halls 1				
	Student Laboratories 14				
	Research Laboratories 10				
	Dis	secting room	1		
	Ce	ntral Computer Laboratory	2		
	Μι	Iseum	5		
	Ski	ll Lab	1		
8. Quality management					
a. Availability of regular evaluation and revision system for the program	The faculty council specified a list of standards for selection of internal end external evaluation of the program with selection of Prof. Dr. Wafaa Zahran as an internal evaluator and Prof. Dr. Mona Ghaly as an external evaluator for the program				
	<u> </u>				

additionsand modificationsof the faculty.c. Staff development requirementsThe staff needs regular training on teaching and assessment methods10. Progress of previous year's action planAction IdentifiedPerson ResponsibleProgress of action, stat completed and any rea for non-completionNot ApplicableNot ApplicableNot ApplicableNot ApplicableModification of the program Bylaws to meet the requirements of the students and staff members.Vice dean for Student Affairs.July 202311. Action planModification of the students and staff members.Modification of the students and staffSeptember 2023	Manadia Facely of Materia Accession			MUDIFIA Magazi MIN SP (S+2)	
c.       Effectiveness of Faculty and University laws and regulations for progression and completion       The university and faculty laws and regulations are satisfactory regar progression and completion.         d. Effectiveness of program external evaluation system:       i - External evaluators       The report of the external evaluator will be discussed in faculty council to make corrective actions         ii - Students       Questionnaires for the students are made to assess opinions about the program and its courses and are analyz make corrective actions.         iii. Other stakeholders:       and private hospitals and representatives of ministry of h and syndicate of doctors are made on regular bases to a their opinion regarding the program and the graduates.         e. Department response to student and external evaluations       The faculty has responded to the comments of the students and external evalua by attempts to increase the clinical training and improve the communication a their opinion regarding the program and the graduates.         9. Proposals for program       Updating for the undergraduate 5+2 program specification was approved by council of the faculty 8/2023         b. Courses, deletions and additions and modifications       Rearrangement of the preclinical and clinical modules to match the updated by of the faculty.         10. Progress of previous year's action plan       Action Identified Not Applicable       Person Responsible Completion date         11. Action plan       Action Identified program Bylaws to meet the requirements of the students and staff       Person Responsible Not Applicable       Completion date	b. Effectiveness of the	The reports of the in	nternal and external evaluator	are discussed in the quality	
c.       Effectiveness of Faculty and University laws and regulations for progression and completion       The university and faculty laws and regulations are satisfactory regal progression and completion.         d. Effectiveness of program external evaluation system:       i- External evaluators       The report of the external evaluator will be discussed in faculty council to make corrective actions         iii. Other stakeholders:       iii. Other stakeholders:       The faculty with stakeholders including directors of governm and private hospitals and representatives of ministry of h and syndicate of doctors are made on regular bases to a their opinion regarding the program and the graduates.         e. Department response to student and external evaluations       The faculty has responded to the comments of the students and external evalua by attempts to increase the clinical training and improve the communication a by attempts to increase the clinical training and improve the communication a by attempts to increase the clinical modules to match the updated by of the faculty.         9. Program evaluations       Rearrangement of the preclinical and clinical modules to match the updated by of the faculty.         c. Staff development       The staff needs regular training on teaching and assessment methods         10. Progress of previous year's action plan       Action Identified       Person Responsible       Progress of action, stat completion date         11. Action plan       Modification of the students and staff members.       Not Applicable       Not Applicable         11. Action plan       Modification of the students and	system	assurance unit counci	il, faculty council and corrective	e actions are made based on	
Faculty and University laws and regulations for progression and completion       progression and completion.         d. Effectiveness of program external evaluation system:       i - External evaluators       The report of the external evaluator will be discussed in evaluators         ii External evaluation system:       i - External evaluators       The report of the external evaluator will be discussed in evaluation system:         iii. Other stakeholders:       iii. Other stakeholders:       Meeting with stakeholders including directors of governm and private hospitals and representatives of ministry of h and syndicate of doctors are made on regular bases to a their opinion regarding the program and the graduates.         e. Department response to student and external evaluations       The faculty has responded to the comments of the students and external evalua by attempts to increase the clinical training and improve the communication a evaluations         9. Proposals for program development       The faculty 8/2023         a. Program structure (credit-hours)       Vipdating for the undergraduate 5+2 program specification was approved b council of the faculty 8/2023         b. Courses, deletions and additions       Rearrangement of the preclinical and clinical modules to match the updated by of the faculty.         10. Progress of previous year's action plan       Action Identified       Person Responsible       Progress of action, stat completion date         11. Action plan       Modification of the students and staff members.       Vice dean for Student program Bylaws to meet the requirements of th		these reports regardin	g the program.		
laws and regulations for progression and completion       Image: Completion of the statemal evaluation system:       Image: Completion of the statemal evaluator will be discussed in faculty council to make corrective actions.         d. Effectiveness of program external evaluation system:       i- External evaluators       The report of the external evaluator will be discussed in faculty council to make corrective actions.         uii- Students       Questionnaires for the students are made to assess opinions about the program and its courses and are analyz make corrective actions.         uii. Other       Meeting with stakeholders including directors of governm and private hospitals and representatives of ministry of h and syndicate of doctors are made on regular bases to a their opinion regarding the program and the graduates.         e. Department response to student and external evaluations       The faculty has responded to the comments of the students and external evaluations         9. Proposals for program development       A.         a. Program structure (credit-hours)       Updating for the undergraduate 5+2 program specification was approved by council of the faculty 8/2023         b. Courses, deletions and additions       Rearrangement of the preclinical and clinical modules to match the updated by of the faculty.         nodifications       The staff needs regular training on teaching and assessment methods         c. Staff development requirements       Not Applicable       Not Applicable       Not Applicable         Not Applicable       Not Applicable       Not Applicab	c. Effectiveness of	The university and	faculty laws and regulations	are satisfactory regarding	
progressionand completiond. Effectiveness of program external evaluation system:i- External evaluatorsThe report of the external evaluator will be discussed in faculty council to make corrective actionsevaluation system:ii- StudentsQuestionnaires for the students are made to assess opinions about the program and its courses and are analyz make corrective actions.iii. Other stakeholders:Iii. Other stakeholders:Meeting with stakeholders including directors of governm and private hospitals and representatives of ministry of h and syndicate of doctors are made on regular bases to a their opinion regarding the program and the graduates.e. Department response to student and external evaluationsThe faculty has responded to the comments of the students and external evalua by attempts to increase the clinical training and improve the communication s council of the faculty 8/20239. Proposals for program developmentRearrangement of the preclinical and clinical modules to match the updated by council of the faculty.a. Staff development requirementsThe staff needs regular training on teaching and assessment methods10. Progress of previous year's action planAction Identified Modification of the students and staff members.Person Responsible Action Student Affairs.11. Action planNot Applicable Modification of the students and staff members.Not Applicable Person responsibleCompletion date11. Action planModification of the students and staff members.Vice dean for Student Affairs.July 2023		progression and comp	pletion.		
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d. Effectiveness of program external evaluation system:       i- External evaluators       The report of the external evaluator will be discussed in faculty council to make corrective actions         ii- Students       Questionnaires for the students are made to assess opinions about the program and its courses and are analyz make corrective actions.         iii. Other stakeholders:       iii. Other stakeholders:       Meeting with stakeholders including directors of governm and private hospitals and representatives of ministry of h and syndicate of doctors are made on regular bases to a their opinion regarding the program and the graduates.         e. Department response to student and external evaluations       The faculty has responded to the comments of the students and external evalua by attempts to increase the clinical training and improve the communication a their opinion regarding the program specification was approved by council of the faculty 8/2023         9. Proposals for program development       Rearrangement of the preclinical and clinical modules to match the updated by of the faculty.         a. Progress of previous year's action plan       Rearrangement of the preclinical and clinical modules to match the updated by of the faculty.         10. Progress of previous year's action plan       Action Identified Not Applicable       Person Responsible Not Applicable       Progress of action, stat completion date         11. Action plan       Modification of the students and staff members.       Vice dean for Student Affairs.       July 2023					
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		meet the new bylaws.			
July 2024				July 2024	
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Accredited			
	Application of actual practical training decreasing the	under supervision of vice	
	dependance on data show		July 2024
	Introduction of Student Portfolio in different modules	Program Coordinator	
	Specification of field training	Community and family Medicine Department	July 2024
	The transfer to the		
	general program has been suspended since the current year	Vice dean for Student Affairs.	