





The Master Program in Dermatology, Andrology and STDs Program Specifications







PROGRAM SPECIFICATION

A) Administrative Information

Program title	Postgraduate Master in Dermatology, Andrology and STDs
Code	DERM 515
Final award/degree	Master
Department (s)	Dermatology, Andrology and STDs
Teaching department	
Coordinator (s)	Prof. Ashraf Hassan Professor and Head of Department of Dermatology,
	Andrology and STDs, Mansoura University
	Prof. Samir Elhanbaly Professor of Dermatology, Andrology and STDs,
	Mansoura University
External evaluator (s)	
Date of approval by the	2023
department's council	
Date of last approval by	2023
the faculty council	







B) Professional Information

1) Program aims:

The Master degree in Dermatology, Andrology and STDs aims to:

- 1- Provide trainee dermatologists with an in-depth knowledge of the theory behind the practice of dermatology, andrology and STDs.
- 2- Assess candidates understanding and using the problem-based learning questions in each module.
- 3- Provide the candidate with practical skills which are required in their practice..
- 4-Qualify specialists in to be clinically independent and competent to manage different dermatologic diseases, and to be acknowledged as a role model for others to follow.
- 5- Extend the basics of scientific medical research and train researchers for team working skills in dermatology, andrology and STDs .

Academic Standards and benchmarks

This program is created and presented by the staff at the Department of Dermatology, Andrology and STDs at Mansoura University in partnership with different national and international Universities employing these standards and benchmarks:

- CanMEDS Physician Competency Framework 2015. The Royal College of Physicians and Surgeons of Canada;
- Professional Standards for medical, dental and veterinary educators 2014. Cardiff: Academy of Medical Educators;







2) Intended learning outcomes of course (ILOs):

At the end of the program, the candidate will be able to:

Competency Area 1: Medical Practitioner		
Enabling Key competencies	Program ILOs	
1.1 Practice medicine within their defined scope	of practice and expertise	
1.1.1 Demonstrate a commitment to high-quality care of their patients	1.1.1.1 Deliver high quality care to the patient according to the professional practice in Dermatology, Andrology and STDs.	
1.1.2 Apply knowledge of the clinical and	1.1.2.1 Embryological development of the skin.	
biomedical sciences relevant to their discipline	1.1.2.2 Anatomy and physiology of the skin and normal changes with aging.	
	1.1.2.3 Normal phases and mechanisms of wound healing.	
	1.1.2.4 Immune system function and dysfunction.	
	1.3.8. Physics of light and its interactions with skin with respect to therapeutic and natural light .	
	1.1.2.5 Microbiome of the skin in health and disease.	
	1.1.2.6 Microbiology of community- and hospital-acquired infections.	
	• 1.1.2.7 Histopathology of the skin in health and disease.	







- 1.1.2.8 Clinical features, including presenting signs and symptoms, morphologic features, natural history and prognosis, investigative approach and therapeutic management for skin disorders in the following categories:
 - 1.1.2.8.1 Disorders of hair, nails, mucous membranes, and other skin appendages.
 - 1.1.2.8.2 Genetic and developmental disorders
 - 1.1.2.8.3 latrogenic disorders, including adverse drug reactions
 - 1.1.2.8.4 Inflammatory and immunologic skin disorders
 - 1.1.2.8.5 Metabolic and nutritional disorders
 - 1.1.2.8.6 Neoplasms, proliferations, and cysts of the skin
 - 1.1.2.8.7 Occupational and other skin disorders provoked by external factors
 - 1.1.2.8.8 Sensory and psychological disorders
 - 1.1.2.8.9 Skin disorders in pregnancy, the neonatal period, and infancy
 - 1.1.2.8.10 kin infections and infestations
- 1.1.2.9 Skin manifestations of systemic diseases
- 1.1.2.10 Indications for, potential value and limitations of, and contraindications to the following investigations:
 - 1.1.2.10.1 Wood's lamp examination
 - 1.1.2.10.2 Dermoscopy
 - 1.1.2.10.3 Methods of testing for infections
 - 1.1.2.10.4 Minimal erythema dose testing
- 1.1.2.11 Pharmacologic principles of medications used in topical and systemic dermatologic therapy.
- 1.1.2.12 Principles of therapeutic interventions, including mechanism of action, indications for, contraindications to, as well as benefits and risks of: Cryotherapy ,Intralesional injections, Electrosurgery, Laser therapy and Phototherapy.







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	 1.1.2.13 Principles of dermatologic surgery . 1.1.2.14 Sex Determination, Differentiation, and Development. 1.1.2.15 Anatomy of male and female genital tract. 1.1.2.16 Control of Testicular Function and Secondary Characters 1.1.2.17 Pathogenic mechanisms of Sexual Disorders 1.1.2.18 Pathogenic mechanisms of Infertility. Perversions and Gender Identity Disorders 1.1.2.17 Physiology of Testicular Function and Sperm Maturation and Fertilization. 1.1.2.18 Diagnosis and treatment of sexual dysfunctions: Desire disorders, Arousal disorders including erectile dysfunction and priapism, Orgasmic disorders and Ejaculatory disorders. 1.1.2.19 Overview of sexually transmitted diseases . (STDs) management includig the following: 1.1.2.19.1 physical examination of the genital tract 1.1.2.19.3 Principles of laboratory diagnosis of STDs 1.1.2.19.3 Principles of treatment of sexually transmitted diseases.
1.1.3 Perform appropriately timed clinical assessments with recommendations that are presented in an organized manner	1.1.3.1 Perform clinical assessment correctly within appropriate time
1.1.4 Carry out professional duties in the face of	1.1.4.1 Stratify patients with dermatologic and andrologic emergencies according to urgent clinical
multiple, competing demands	presentation.







	while balancing multiple responsibilities.
1.1.5 Recognize and respond to the complexity,	• 1.1.5.1: Predict prognosis of the patient condition
uncertainty, and ambiguity inherent in medical	using the best dermatology and andrology evidence
	based information.
practice	• 1.1.5.2 Develop a plan for proper management
1.2 Perform a patient-centered clinical assessmen	t and establish a management plan
1.2.1 Prioritize issues to be addressed in a	• 1.2.1.1 Consider clinical urgency, feasibility,
patient encounter	availability of laboratory and operative resources,
patent encouncer	and patient comorbidities in determining priorities to be addressed during the current
	encounter or during future visits or with other
	health care practitioners .
1.2.2 Elicit a history, perform a physical exam,	1.2.2.1 Establish diagnostic strategy for patient
select appropriate investigations, and interpret	presenting with typical and atypical clinical features by appropriate use of history, clinical examination
	and investigation.
their results for the purpose of diagnosis and	• 1.2.2.2 Take a family history in patients with
management, disease prevention, and health	genetic disorders to identify the likely mode of inheritance of a trait
promotion	• 1.2.2.3 Perform an accurate skin or genital
	examination for diagnosis, and management
	• 1.2.2.4 Perform adequate general examination.
	• 1.2.2.5 Perform adequate scalp, hair and nail examination.
	• 1.2.2.6 Apply dermoscopic examination for skin
	and hair disorders.
	• 1.2.2.7 Perform adequate investigations according to the condition:
	1.2.2.7.1 Woods light examination of certain
	skin diseases. 1.2.2.7.2 Swabs and microbiological
	1.2.2.7.2 Swabs and microbiological examination.
	1.2.2.7.3 Skin biopsy and histopathological
	examination. 1.2.2.7.4 Semen analysis interpretation.
	1.2.2.7.5 Testicular ultrasound and doppler
	ultrasound.







	1.2.2.7.6 Rigi scan. 1.2.2.7.7 Intracavernosal injection (ICI), diagnostic and therapeutic.		
	 1.2.2.8 Demonstrate effective clinical problem solving and judgment to address patient problems, including interpreting available data and integrating information to generate differential diagnoses and management plans 1.2.2.9 Interpret results of clinical examination and investigation to reach provisional diagnosis 		
1.2.3 Establish goals of care in collaboration with patients and their families, which may	• 1.2.3.1: Discuss management plan with patients and their families and engaged them in choosing the best plan for patients.		
include slowing disease progression, treating symptoms, achieving cure, improving function,	 1.2.3.2 Recognize and respond to changes in patient's clinical status that indicate a need to reassess goals of care 		
and palliation	 1.2.3.3 Recognize when treatment plans are no longer effective and should be discontinued. 		
1.2.4 Establish a patient-centered management plan	1.2.4.1 Evaluate the dermatologic condition and make the appropriate plan for every case		
1.3 Plan and perform procedures and therapies for the purpose of assessment and/or management			
1.3.1 Determine the most appropriate procedures or therapies	1.3.1.1 select 1 st line management of dermatologic and andrologic cases according to patients presentations, describe indications, contraindications and risks for a given therapy or procedures.		
	• 1.3.1.2 Integrate all sources of information to develop a procedural or therapeutic plan that is safe, and patient-centered		
1.3.2 Obtain and document informed consent,	.3.2.1: Obtain and document informed consent,		
explaining the risks and benefits of, and the	explaining the risks and benefits of, and the		
rationale for, a proposed procedure or therapy	rationale for necessary intervention from patients		







	and their families.
	and their rainines.
1.3.3 Prioritize a procedure or therapy, taking	1.3.3.1 choosing the appropriate therapy or
into account clinical urgency and available	procedure for each casein dermatology or
resources	andrology clinic.
1.3.4 Perform a procedure in a skillful and safe	• 1.3.4.1 Perform a simple procedure without direct supervision.
manner, adapting to unanticipated findings or	
changing clinical circumstances	• 1.3.4.2 Perform common procedures in a skillful, and safe manner with minimal assistance
	• 1.3.4.3 Seek assistance as needed when unanticipated findings or complications are encountered
	• 1.3.4.4 Demonstrate effective, appropriate, and timely performance of diagnostic procedures relevant to dermatology and andrology: 1.3.4.4.1 Tzank smear 1.3.4.4.2 Dermoscopy 1.3.4.4.3 skin scraping and urethral swab for culture. 1.3.4.4.4 Biopsy (skin and testicular)
	• 1.3.4.5 Perform effective, appropriate, and timely performance of therapeutic procedures relevant to dermatology and andrology 1.3.4.5.1 cryosurgery 1.3.4.5.2 Electrosurgery.
	1.3.4.5.3 Ablative and nonablative laser
	1.3.4.5.4 Assisted reproductive techniques
1.4 Establish plans for ongoing care and, when ap	propriate, timely consultation
1.4.1 Implement a patient-centered care plan	1.4.1.1 Develop management plans tailored for
that supports ongoing care, follow-up on	each patient including treatment, rehabilitation, and longer-term management. 1.4.1.2 Discuss outpatient long term plan with







investigations, response to treatment, and	1 1
further consultation	1.4.1.3 Describe the importance of follow-up in patient care
rardier constitution	
	1.4.1.4 Determine the necessity and appropriate
	timing of consultation
1.5 Actively contribute, as an individual and as a	member of a team providing care, to the continuous
improvement of health care quality and patient sa	fety
improvement of nearth care quanty and patient sa	licty
1.5.1 Recognize and respond to harm from	1.5.1.2 Differentiate outcomes of medical
1.5.1 Recognize and respond to harm from	1.5.1.2 Differentiate outcomes of medical
health care delivery, including patient safety	conditions and diseases from complications related
incidents	to the inherent risks of treatments and from patient
	to the innerent risks of treatments and from patient
	safety incidents.
1.5.2 Adopt strategies that promote patient	
safety and address human and system factors	
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Competency Area 2: Communicator		
Enabling Key competencies	Program ILOs	
2.1 Establish professional therapeutic relationships with	patients and their families	
2.1.1 Communicate using a patient-centered approach that encourages patient trust and autonomy and is	• 2.1.1.1Communicate effectively with the patients and their families respecting their beliefs and emotions.	
characterized by empathy, respect, and compassion	 2.1.1.2 Respect patient privacy, confidentiality, and autonomy. 2.1.1.3Listen effectively 	
2.1.2 Optimize the physical environment for patient comfort, dignity, privacy, engagement, and safety	2.1.2.1 Mitigate physical barriers to communication to optimize patient comfort, dignity, privacy, engagement, and safety	
2.1.3 Recognize when the values, biases, or		
perspectives of patients, physicians, or other health		
care professionals may have an impact on the quality		
of care, and modify the approach to the patient		
accordingly		
2.1.4 Respond to a patient's non-verbal behaviors to enhance communication	• 2.1.4.1.observe of patient's body language denoting his satisfaction or not about his plan of treatment.	
2.1.5 Manage disagreements and emotionally charged		
conversations		
2.1.6 Adapt to the unique needs and preferences of	• 2.1.6.1 adapt tailored approach to patients	
each patient and to his or her clinical condition and	clinical condition.	
circumstances		







beliefs and values in the community they

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2.2 Elicit and synthesize accurate and rele	evant information	n, incorporating the perspectives of patients
and their families		
and their families		
2.2.1 Use patient-centered interviewing effectively gather relevant biometry psychosocial information		2.2.1.1 encourage patient to express his concern during history taking.2.2.1.2 explore the impact of symptoms on patients life.
2.2.2 Provide a clear structure for and flow of an entire patient encounter	manage the •	2.2.2.1 Document patient information in a manner that help decision making.
2.2.3 Seek and synthesize relevant informother sources, including the patient's family patient's consent		2.2.3.1 Engage others, including patient family in gathering relevant information with patient consent.
2.3 Share health care information and plan	ns with patients a	and their families
2.3.1 Share information and explanation clear, accurate, and timely, while checking and family understanding		2.3.1.1 Provide information on diagnosis, management plan and prognosis in a clear, compassionate, respectful, and objective manner. 2.3.1.2 Convey information related to the patient's health status, care, and needs in a timely, honest, and transparent manner.
2.3.2 Disclose harmful patient safety	incidents to •	2.3.2.1 Plan and document follow-up 1
patients and their families accur	rately and	harmful patient safety incident
appropriately		
2.4 Engage patients and their families in and goals	developing plans	s that reflect the patient's health care needs
2.4.1 Facilitate discussions with patient	s and their •	2.4.1.1 Respect the different cultural







families in a way that is respectful, non-judgmental,	serve.
and culturally safe	• 2.4.1.2 Explore the perspectives of the patient and others when developing care plans.
2.4.2 Assist patients and their families to identify, access, and make use of information and	• 2.4.2.1 Recognize the role of telemedicine in improving healthcare
communication technologies to support their care and	service
manage their health	
2.4.3 Use communication skills and strategies that help patients and their families make informed decisions regarding their health 2.5 Document and share written and electronic information clinical decision-making, patient safety, confidentiality, and their families make informed decisions regarding their health	clear language, and describe the expected outcome of such therapies for patients at their families • 2.4.3.2 Describe elements of informed consent • 2.4.3.3 Demonstrate steps to obtaining informed consent • 2.4.3.4 Answer questions from the patient and family about next steps ation about the medical encounter to optimize
2.5.1 Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements	 2.5.1.1Organize information in appropriate sections within an electronic or written medical record. 2.5.1.2 Document information about patients and their medical conditions in a manner that enhances intra-and interprofessional care.
2.5.2 Communicate effectively using a written health record, electronic medical record, or other digital	• 2.5.2.1 Demonstrate reflective listening, open-ended inquiry, empathy, and effective eye contact while using a written or electronic medical record.







technology	
2.5.3 Share information with patients and others in a	2.5.3.1 respect patients privacy of
manner that respects patient privacy and	information and preferences
confidentiality and enhances understanding	







Competency Area 3: Collaborator	
Enabling Key competencies	Program ILOs
3.1 Work effectively with physicians and other colleagu	es in the health care professions
3.1.1 Establish and maintain positive relationships with physicians and other colleagues in the health care professions to support relationship-centered collaborative care	 3.1.1.1communicate effectively with the physicians and other colleagues in health care professions in respect to the multidisciplinary nature of the specialty. 3.1.1.2 Analyze interactions among health care professionals to provide feedback to optimize the performance of a team for the benefit of patients. 3.1.1.3 Describe the Dermatologist's roles and responsibilities to other professionals 3.1.1.4 Describe the roles and responsibilities of other professionals within the health care team 3.1.1.5 Recognize and respect the diverse roles, responsibilities and competencies of other professionals in relation to their own 3.1.1.6 Work with others to assess, plan, provide, and integrate care for individuals and groups of patients 3.1.1.7 Respect team ethics, including confidentiality, resource allocation, and professionalism
3.1.2 Negotiate overlapping and shared responsibilities with physicians and other colleagues in the health care professions in episodic and ongoing care	3.1.2.1 Discuss the role and responsibilities of a specialist in their discipline and consult as needed with other health care professionals, including other physicians
3.1.3 Engage in respectful shared decision-making with physicians and other colleagues in the health care	• 3.1.3.1involve other colleagues and physicians in respectful decision making.







professions		
3.2 Work with physicians and other colleagu	es in the health care professions to promote	
understanding, manage differences, and resolve con	nflicts	
3.2.1 Show respect toward collaborators	 3.2.1.1: Provide timely and necessary written information to colleagues to enable effective relationship-centred care. 3.2.1.2 Use referral and consultation as opportunities to improve quality of care and patient safety by sharing expertise 	
3.2.2 Implement strategies to promote understanding, manage differences, and resolve	3.2.2.1Gather the information and resources needed to manage differences and resolve conflicts among collaborators	
conflicts in a manner that supports a collaborative culture	• 3.2.2.2 Implement strategies to promote understanding, manage differences, and resolve conflicts in a manner that supports a collaborative culture	
3.3 Hand over the care of a patient to another health care professional to facilitate continuity of safe patient care		
3.3.1 Determine when care should be transferred to another physician or health care professional	3.3.1.1: perform a plan for consultation of health care professionals of different specialties	
3.3.2 Demonstrate safe handover of care, using	3.3.2.1 Communicate with the receiving	
both verbal and written communication, during a	physicians or health care professionals during	
patient transition to a different health care	transitions in care, clarifying issues after transfer	
professional, setting, or stage of care	as needed.	
Competency Area 4: Health Advocate		
Enabling Key competencies	Program ILOs	
4.1 Respond to an individual patient's health needs by advocating with the patient within and beyond		







the clinical environment	
4.1.1 Work with patients to address determinants	• 4.1.1.1 Analyze a given patient's needs for
of health that affect them and their access to	health services or resources related to the scope of their discipline
needed health services or resources	• 4.1.1.2 Facilitate timely patient access to health services and resources
4.1.2 Work with patients and their families to	• 4.1.2.1: Create health promotion and
increase opportunities to adopt healthy behaviors	education resources.
4.1.3 Incorporate disease prevention, health	4.1.3.1: Evaluate with the patient the potential
promotion, and health surveillance into	benefits and harms of health screening.
interactions with individual patients	







4.2 Respond to an individual patient's health needs by advocating with the patient within and beyond	
the clinical environment	
4.2.1 Work with a community or population to	
identify the determinants of health that affect	
them	
4.2.2 Improve clinical practice by applying a	• 4.2.2.1: Participate in health promotion and disease prevention programs relevant to their
process of continuous quality improvement to	practice.
disease prevention, health promotion, and health	
surveillance activities	
4.2.3 Contribute to a process to improve health in	
the community or population they serve	
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Competency Area 5: Professional	
Enabling Key competencies	Program ILOs
Enabling Key competencies	Program ILOs plying best practices and adhering to high ethical
Enabling Key competencies	· ·
Enabling Key competencies 5.1 Demonstrate a commitment to patients by apstandards 5.1.1 Exhibit appropriate professional behaviors	 plying best practices and adhering to high ethical 5.1.1.1 Demonstrate sensitivity to issues concerning diversity with respect to
Enabling Key competencies 5.1 Demonstrate a commitment to patients by apstandards 5.1.1 Exhibit appropriate professional behaviors and relationships in all aspects of practice,	 plying best practices and adhering to high ethical 5.1.1.1 Demonstrate sensitivity to issues concerning diversity with respect to peers, colleagues, and patients.
Enabling Key competencies 5.1 Demonstrate a commitment to patients by apstandards 5.1.1 Exhibit appropriate professional behaviors and relationships in all aspects of practice, demonstrating honesty, integrity, humility,	 • 5.1.1.1 Demonstrate sensitivity to issues concerning diversity with respect to peers, colleagues, and patients. • 5.1.1.2 Consistently prioritize the needs of patients and others to ensure a
Enabling Key competencies 5.1 Demonstrate a commitment to patients by apstandards 5.1.1 Exhibit appropriate professional behaviors and relationships in all aspects of practice,	 5.1.1.1 Demonstrate sensitivity to issues concerning diversity with respect to peers, colleagues, and patients. 5.1.1.2 Consistently prioritize the needs
Enabling Key competencies 5.1 Demonstrate a commitment to patients by apstandards 5.1.1 Exhibit appropriate professional behaviors and relationships in all aspects of practice, demonstrating honesty, integrity, humility, commitment, compassion, respect, altruism,	 5.1.1.1 Demonstrate sensitivity to issues concerning diversity with respect to peers, colleagues, and patients. 5.1.1.2 Consistently prioritize the needs of patients and others to ensure a







in all aspects of practice	main pillars	
5.1.3 Recognize and respond to ethical issues encountered in practice	 5.1.3.1 demonstrate the basic ethical concepts addressed in medical& clinical practice 5.1.3.2 recognize & respond to ethical issues encountered during their practice 	
5.1.4 Recognize and manage conflicts of interest		
5.1.5 Exhibit professional behaviors in the use of	5.1.5.1 Discuss tele medicine & determine its	
technology-enabled communication	guideline use in medical practice including using	
	social media	
5.2 Demonstrate a commitment to society by reco	ognizing and responding to societal expectations in	
health care		
5.2.1 Demonstrate accountability to patients,		
society, and the profession by responding to		
societal expectations of physicians		
5.2.2 Demonstrate a commitment to patient	• 5.2.2.1 Understand importance of patient's	
safety and quality improvement	safety and workplace quality.	
5.3 Demonstrate a commitment to the profession by adhering to standards and participating in		
physician-led regulation		
5.3.1 Fulfill and adhere to the professional and	• 5.3.1.1 Apply the main articles of	
ethical codes, standards of practice, and laws	Egyptian syndicate regulations	
governing practice		
5.3.2 Recognize and respond to unprofessional	5.3.2.1 Identify and report any unprofessional	
and unethical behaviors in physicians and other	and unethical behaviors or physical or mental	







colleagues in the health care professions	conditions related to himself, colleagues or any
	other person that might jeopardize patients'
	safety
5.3.3 Participate in peer assessment and standard	
setting	
Setting	
5.4 Demonstrate a commitment to physician health	and well-being to foster optimal patient care
5.4.1 Exhibit self-awareness and manage	5.4.1.1 Use strategies to mitigate stressors during
influences on personal well-being and	transitions and enhance professional
professional performance	development
5.4.2 Manage personal and professional demands	5.4.2.1 Save priorities for personal and
for a sustainable practice throughout the	professional demands
	professional demands
physician life cycle	
5.4.3 Promote a culture that recognizes, supports,	5.4.3.1support colleagues and other health care
and responds effectively to colleagues in need	professionals and work cooperatively with them
Competency Area 6: Scholar	
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Enabling Key competencies	Program ILOs
6.1 Engage in the continuous enhancement of their professional activities through ongoing learning	
6.1.1 Develop, implement, monitor, and revise a	
personal learning plan to enhance professional	
practice	
6.1.2 Identify opportunities for learning and	







improvement by regularly reflecting on and	
assessing their performance using various internal	
and external data sources	
6.1.3 Engage in collaborative learning to	
continuously improve personal practice and	
contribute to collective improvements in practice	
6.2 Integrate best available evidence into practice	
6.2.1 Recognize practice uncertainty and	
knowledge gaps in clinical and other professional	
encounters and generate focused questions that	
address them	
6.2.2 Identify, select, and navigate pre-appraised resources	6.2.2.1 Select appropriate sources of knowledge as they relate to addressing focused questions
6.2.3 Critically evaluate the integrity, reliability,	
and applicability of health-related research and	
literature	
6.2.4 Integrate evidence into decision-making in	6.2.4.1: Use the best available scientific
their practice	evidence in clinical decision making and
	improving patient outcome.
6.3 Contribute to the creation and dissemination	n of knowledge and practices applicable to health
6.3.1 Demonstrate an understanding of the	6.3.1.1. Identify the classification of epidemiological studies
scientific principles of research and scholarly	6.3.1.2 Recognize study design for both







inquiry and the role of research evidence in	observational & experimental studies
health care	6.3.1.3 Select the best study design according to preplanned study objective
	6.3.1.4 Demonstrate the study Plan & formulate well-structured research question
	6.3.1.5 Recognize criteria for screening program & assessment of screening test
	6.3.1.6 Recognize types & uses of sampling techniques
	6.3.1.7. Differentiate between quantitative & qualitative variables
	6.3.1.8 Identify different types and uses for test of significance
	6.3.1.9 Differentiate between different forms of data distribution
	6.3.1.10. Select different analytic test according to type of data & distribution
	6.3.1.11 Recognize principles of data presentation
	6.3.1.12 Interpret study results for different analytic techniques to explain difference in health and health related behaviors.
	6.3.1.13 Recognize principles of research writing
	6.3.1.14 Recognize the meaning of artificial intelligence and its application in current research topics.
	6.3.1.15 Recognize the application of bioinformatics in personalized medicine.
6.3.2 Identify ethical principles for research and incorporate them into obtaining informed	• 6.3.2.1 Discuss and provide examples of the ethical principles applicable to research and scholarly inquiry relevant to their discipline.







consent, considering potential harms and	
benefits, and considering vulnerable populations	
6.3.3 Contribute to the work of a research	• 6.3.3.1 identify different reference
program	management programs.
	• 6.3.3.2 Recognize the benefits of citation
	manager and how it works.
6.3.4 Pose questions amenable to scholarly	11 1
inquiry and select appropriate methods to	addressing a given scholarly question.
address them	
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6.3.5 Summarize and communicate to	6.3.5.1 Formally present research and scholarly
professional and lay audiences, including patients	inquiry findings, including presentations at
and their families, the findings of relevant	meetings, journal club, print and digital media.
	meetings, journal order, print and disgram income
research and scholarly inquiry	
6.4 Outlines the expected standards for medical	educators in relation to their own personal and
	educators in relation to their own personal and
professional development	
6.4.1 Identify basic educational theories and	
principles	
6.4.2 Use literature relevant to current	
developments in medical education	
6.4.3 Apply the principles of critical appraisal	
6.4.4 Demonstrate the major issues and	
challenges facing medical educational research	
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6.4.5 Understand and applies a range of	
educational theories and Principles	
eddediform dicories and Timespies	
6.4.6 Critically evaluates the educational literature	
and applies this learning to his or her educational	
practice	
6.4.7 Participates in the design and development	
of educational programs, projects or research	
6.4.8 Interprets and applies the results of	
educational research to his or her educational	
practice	
6.4.9 Demonstrates advanced understanding of a	
wide range of educational theories and principles	
6.4.10 Critically evaluates the literature at an	
advanced level and applies this to his or her	
educational practice	
6.4.11 Develops new educational insights,	
theories and practices, through scholarly	
endeavors	
6.4.12 Designs, supervises, manages and evaluates	
research strategies or projects	
6.4.13 Contributes to educational research or	







projects applying appropriate research methods	
6.4.14 Mentors and supports the professional	
development of educational researchers	
Competency Area 7: Designer & Planner	
Enabling Key competencies	Program ILOs
7.1 Outlines the educational design and learning de	velopment processes
7.1.1. Shows how the principles of learning and	
teaching are incorporated into educational	
developments	
7.1.2 Identify of a range of learning methods,	
experiences, and resources and how they may be	
used effectively	
7.1.3. Applies learning and teaching principles in	
the design of a course, unit, module, or subject	
area	
7.1.4. Matches learning methods, experiences,	
and resources to intended outcomes	
7.1.5. Gathers and interprets basic information	
on the needs of learners	
7.1.6. Conducts complex learning needs analyses	
including those of learners, groups, professions or	







healthcare systems		
7.1.7. Develops learning resources for planned		
courses		
7.2 Evaluate educational interventions		
7.2.1. Responds appropriately to feedback and		
evaluation of educational interventions		
7.2.2. Constructs appropriate learning outcomes		
that can be measured or judged		
7.2.3. Defines learning outcomes within		
theoretical frameworks		
7.2.4. Matches learning methods, experiences,		
and resources to intended outcomes		
7.2.5. Conducts, interprets, acts on, and		
disseminates evaluations of learning programs		
Competency Area 8: Teacher and Facilitator		
Enabling Key competencies	Program ILOs	
8.1 Outlines the expected standards for medical	educators in relation to teaching and facilitating	
learning		
8.1.1 Appropriately uses a broad range of		
educational methods and technologies to achieve		
intended learning		







	,
outcomes	
8.1.2 Describes ways of involving learners in	
actual clinical practice e.g. experiential learning	
opportunities	
8.1.3. Establishes a safe and effective learning	
environment	
8.1.4. Provides educational, personal and	
professional support in relevant contexts	
8.1.5. Monitors and manages the safety and	
effectiveness of complex learning environments	
8.1.6 Proactively seeks to improve the learning	
environment	
8.1.7. Applies learning and teaching methods that	
are relevant to intended learning outcomes and	
program content	
8.1.8. Develops innovative learning resources	
8.1.9. Develops self-awareness in learners and	
teachers	
8.1.10. Interprets, synthesises and deals with	
conflicting information arising from feedback	
from learners and educators	







8.1.11. Engages learners in reflective practice	
8.2 Provide constructive feedback	
8.2.1 Provides effective feedback to learners using	
a range of methods	
8.2.2 Acknowledges and responds actively and	
appropriately to feedback	
8.2.3 Demonstrates a commitment to reflective	
practice in self, learners faculty and colleagues	
8.2.4 Demonstrate to learners the rationale for	
changing or not changing teaching and learning	
activities in response to feedback	
Competency Area9: Assessor	
Competency Area9: Assessor Enabling Key competencies	Program ILOs
	•
Enabling Key competencies	educators in making and reporting judgments that
Enabling Key competencies 9.1 Outlines the expected standards for medical expected standards	educators in making and reporting judgments that
Enabling Key competencies 9.1 Outlines the expected standards for medical capture, guide and make decisions about the learning	educators in making and reporting judgments that
Enabling Key competencies 9.1 Outlines the expected standards for medical experture, guide and make decisions about the learning 9.1.1 Identify the general purpose of assessment	educators in making and reporting judgments that
Enabling Key competencies 9.1 Outlines the expected standards for medical experiments of a standards for medical experiments of a standards for medical experiments. 9.1.1 Identify the general purpose of assessment 9.1.2 Recognize that robust assessment practices	educators in making and reporting judgments that
Enabling Key competencies 9.1 Outlines the expected standards for medical capture, guide and make decisions about the learning 9.1.1 Identify the general purpose of assessment 9.1.2 Recognize that robust assessment practices are integral to course development and effective	educators in making and reporting judgments that







aligned with the educational outcomes.	
9.1.4 Recognize that assessment practices require	
continuous monitoring and improvement	
9.1.5 Designs complex assessment strategies and	
blueprints	
9.1.6 Integrates assessment methods into a	
coherent assessment strategy	
9.1.7 Contributes to the construction of	
assessment items	
9.1.8 Leads design and development of	
assessments utilising accepted good practice such	
as in the determination of reliability, validity,	
acceptability, cost effectiveness, feasibility and	
educational impact	
9.1.9 Selects assessment methods that match the	
purpose, content and level of the learner	
9.1.10 Uses a broad range of methods to assess	
learners	
9.1.11 Makes high stakes professional Judgments	
9.1.12 Maintains assessment quality by accurately	
interpreting assessment reports	







9.1.13 Contributes under guidance to standard	
setting processes	
9.1.14 Applies standard setting procedures most	
relevant to particular methods and format	
relevant to particular methods and format	
9.1.15 Interprets technical data about	
effectiveness of assessment practices	
9.1.16 Prepares assessment reports for learners,	
9.1.10 Frepares assessment reports for learners,	
examination boards and external stakeholders	
Competency Area 10: Leader	
Enabling Key competencies	Program ILOs
Enabling Key competencies 10.1 Contribute to the improvement of health care	
10.1 Contribute to the improvement of health care	
10.1 Contribute to the improvement of health care	
10.1 Contribute to the improvement of health care 10.1.1 Apply the science of quality improvement	
10.1 Contribute to the improvement of health care 10.1.1 Apply the science of quality improvement	
10.1 Contribute to the improvement of health care 10.1.1 Apply the science of quality improvement to contribute to improving systems of patient care 10.1.2 Contribute to a culture that promotes	
10.1 Contribute to the improvement of health care 10.1.1 Apply the science of quality improvement to contribute to improving systems of patient care	
10.1 Contribute to the improvement of health care 10.1.1 Apply the science of quality improvement to contribute to improving systems of patient care 10.1.2 Contribute to a culture that promotes patient safety	
10.1 Contribute to the improvement of health care 10.1.1 Apply the science of quality improvement to contribute to improving systems of patient care 10.1.2 Contribute to a culture that promotes patient safety 10.1.3 Analyze patient safety incidents to	
10.1 Contribute to the improvement of health care 10.1.1 Apply the science of quality improvement to contribute to improving systems of patient care 10.1.2 Contribute to a culture that promotes patient safety	
10.1 Contribute to the improvement of health care 10.1.1 Apply the science of quality improvement to contribute to improving systems of patient care 10.1.2 Contribute to a culture that promotes patient safety 10.1.3 Analyze patient safety incidents to enhance systems of care	
10.1 Contribute to the improvement of health care 10.1.1 Apply the science of quality improvement to contribute to improving systems of patient care 10.1.2 Contribute to a culture that promotes patient safety 10.1.3 Analyze patient safety incidents to	
10.1 Contribute to the improvement of health care 10.1.1 Apply the science of quality improvement to contribute to improving systems of patient care 10.1.2 Contribute to a culture that promotes patient safety 10.1.3 Analyze patient safety incidents to enhance systems of care 10.1.4 Use health informatics to improve the	
10.1 Contribute to the improvement of health care 10.1.1 Apply the science of quality improvement to contribute to improving systems of patient care 10.1.2 Contribute to a culture that promotes patient safety 10.1.3 Analyze patient safety incidents to enhance systems of care	
10.1 Contribute to the improvement of health care 10.1.1 Apply the science of quality improvement to contribute to improving systems of patient care 10.1.2 Contribute to a culture that promotes patient safety 10.1.3 Analyze patient safety incidents to enhance systems of care 10.1.4 Use health informatics to improve the	delivery in teams, organizations, and systems







10.2.1 Allocate health care resources for optimal	
patient care	
10.2.2 Apply evidence and management	
processes to achieve cost-appropriate care	
10.3 Demonstrate leadership in professional practi	ce
10.3.1 Demonstrate leadership skills to enhance	
health care	
10.3.2 Facilitate change in health care to enhance	
services and outcomes	
10.434 1 ' C 11 14	1 ' '
10.4 Manage career planning, finances, and health	numan resources in a practice
10.4.1 Set priorities and manage time to integrate	
practice and personal life	
10.4036	
10.4.2 Manage a career and a practice	
10.4.3 Implement processes to ensure personal	
practice improvement	
10.5 Outlines the expected standards for medical e	ducators in relation to the management, leadership
and governance of medical education	
10.5.1 Manages personal educational time and	
resources effectively	
10.5.2 Understands and delivers intended	
educational outcomes	







10.5.3 Manages educational programs and	
resources, including individuals and/or financial	
resources at and / or beyond the local level	
10.5.4 Understands and takes professional	
responsibility for own role in local education	
10.5.5 Leads educational projects or programs	
locally	
10.5.6 Supports the educational development of	
others within a local team, faculty, or department	
10.5.7 Demonstrates advanced ability to	
communicate, lead, develop, integrate, and	
formulate a wide range of educational	
interventions and programs	
10.5.8 Has an impact on medical education	
beyond immediate geographical locus	
10.5.9 Contributes to educational policy and	
development at a national or international level	
10.5.10 Successfully discharges senior roles in	
medical education	

C) Appendix A.







At the end of the Program the candidates should be demonstrates the following Professional (Clinical and practical) skills.

Clinical Skills:

- Construct and record a detailed and structured dermatology history sheet.
- Utilize most of the information obtained from history, clinical examination, and laboratory investigations.
- Conduct a standard skin, hair, and nail examination
- Make benefit of available data from history, clinical examination, and laboratory investigations
- Record a detailed and structured andrology & STDs history ,
- Perform a standard male genital examination prostate examination

• Investigations:

- 1. Skin biopsy
- 2. Woods light examination
- 3. dermoscopy
- 4. Koh examination
- 5. Microscopic examination of semen(conventional and computer assisted semen analysis (casa) prostatic fluid
- 6. Ultrasonography (a-scan, b-scan, & biometry), doppler us
- 7. Some diagnostic tests for stds like urethral swabs, expressed prostatic fluid microscopic exam and two glasses test..
- 8. Testicular biopsy,
- 9. Intracavernosal injection (ici), monitoring of nocturnal penile erections (using the Rigiscan Fluorescein Angiography

10.

Minor Proceuders:.

- 1. electro, cryotherapy
- 2. intralesional injections
- 3. UV therapy
- 4. dermabrasion and LASER treatments
- 5. chemical peeling, fillers and Botox injections







- 6. semen processing,
- 7. correction of priapism
- 8. testicular sperm extraction (TESE) and percutaneous sperm aspiration (PESA)

D) Curriculum Structure and Contents

The duration of the program is 5 semesters 3 years. Candidates should fulfill a total of ...52..... credit hours divided as follow: 1) 12.. credit hours for the first semester; 2)18..credits hours for the second, third, and fourth semesters; 3) ...10.....credits hours for the fifth semester; and 4) ...12.....credits hours for the thesis. In correspondence the total teaching will be 40 credit hours divided as follow: 1) 435 hours as lectures and 2) 495 hours as clinical

Duration	3Years
Semesters	5
Total credits hours	52
teaching credit hours	40
Number of courses	Induction courses +3 Compulsory Dermatology courses+3 Compulsory Andrology courses
Number of electives	Candidate choose only one course from 4 available courses

E) Program Courses and Articulations

Compulsory Courses

Title	Code	Credits	Total	Position
			teaching	
			hours	
Induction courses		8	120	1 st semester
Basic Derma Andro Part I	DERM 503 BDAI	1	lectures	
	DERM 504 BDAI		15 hrs	
	DERM 507 BDAI		lectures	







	DERM 505 BDAII				
Basic Derma Andro Part II	DERM 512	1			
	,513BDAII		15	hrs	
			lectures		
	DERM 510				
Basic Derma Andro Part III	BDAIII	2			
	DERM 520		30	hrs	
	BDAIII		lectures		
Dermatology part I	D E R M 515 D M I	3	30	hrs	2 nd , 3 rd , 4 th ,
			Lectures	3	semesters
			45	hrs	
			clinical		
Dermatology part II	D E R M 515 D M II	3	30	hrs	
			Lectures	3	
			45	hrs	
			clinical		
Dermatology part III	D E R M 515 D M	3	30	hrs	
	III		Lectures	3	
			45	hrs	
			clinical		
Andrology part I	DERM 515 ANI	3	30	hrs	
			Lectures	3	
			45	hrs	
			clinical		
Andrology part II	DERM 515 AN II	3	30	hrs	
			Lectures	3	
			45	hrs	
			clinical		
Andrology part III	DERM 515 AN III	3	30	hrs	
			Lectures	3	
			45	hrs	







			clinical	
Applied Clinical Course related to	DERM 515 CDA	8	30 hours	5 th semester
dermatology and andrology disorders			Lectures	
			270 hours	
			clinical	
Thesis		12		From 2 to
				5 ^h
				semesters

Elective Courses (1 course only required)

Title	Code	Credits	Total teaching hours	Position
Dermatopathology	DERM 515 DP	2	30	5 th semester
Laser	DERM 515 LAS	2	30	
Sexually transmitted infections	DERM 515 STDs	2	30	
Assisted reproductive techniques)	DERM 515 ART	2	30	







EPA Competencies

The Master Program in Dermatology, Andrology and STDs

(Entrustable Professional Activities)







	1	2	3	4	5	6	7	8	9	1 0
History taking										
Obtain and record an appropriate dermatological history	•	•								
2. Obtain and record general medical history	•	•								
3. Obtain and record an appropriate dermatological history	•	•								
Clinical dermatological and andrological	l exa	min	atio	n						
4. Undertake dermatological inspection	•	•								
5. Perform proper skin examination	•	•	•	•						
6. Perform proper hair examination	•	•	•	•						
7. Perform proper nail examination	•	•	•	•						
8. Woods light examination	•	•	•	•						
9. dermoscopy	•	•	•	•						
10.Koh examination	•	•	•	•	•					
11.Microscopic examination of semen(conventional and computer assisted semen analysis (casa) prostatic fluid	•	•	•	•						
12.Some diagnostic tests for stds like urethral swabs, expressed prostatic fluid microscopic exam and two glasses test	•	•	•	•						
dermatological and andrological investig	atio	ns								
13.Skin biopsy	•	•	•	•	•	•				
14.dermoscopy	•	•	•	•	•	•				
15.Skin prick test	•	•	•	•	•	•				
16.Intracavernosal injection (ici),	•	•	•	•	•	•				
17.monitoring of nocturnal penile erections (using the Rigiscan Fluorescein Angiography	•	•	•	•	•	•				
18.Ultrasonography (a-scan, b-scan, & biometry), doppler us	•	•	•	•	•	•				
19.Some diagnostic tests for stds like urethral swabs, expressed prostatic fluid microscopic exam and two glasses test	•	•	•	•	•	•				







Minor procedures								
20.electro, cryotherapy	•	•	•	•	•			
21. intralesional injections	•	•	•	•	•			
22.UV therapy	•	•	•	•	•			
23.dermabrasion and LASER treatments	•	•	•	•	•			
24.chemical peeling, fillers and Botox	•	•	•	•	•			
injections								
25.semen processing	•	•	•	•	•			
26.correction of priapism	•	•	•	•	•			
27. testicular sperm extraction (TESE) and	•	•	•	•	•			
percutaneous sperm aspiration (PESA								
28.Testicular biopsy	•	•	•	•	•			
29. testicular sperm extraction (TESE) and	•	•	•	•	•			
percutaneous sperm aspiration (PESA								
30.correction of priapism	•	•	•	•	•			







MS Ophthalmology Milestones

1.1.2 Apply know discipline	vledge of the clinic	cal and biomedica	l sciences relevan	t to their
Level 1	Level 2	Level 3	Level 4	Level 5
Articulates knowledge of pathophysiolog y and clinical findings for ophthalmic conditions routinely managed by non- ophthalmologis ts	Demonstrates basic knowledge of pathophysiolog y and clinical findings for common ophthalmic conditions routinely managed by ophthalmologis ts	Demonstrates advanced knowledge of pathophysiolog y and clinical findings for commonly encountered ophthalmic conditions; demonstrates basic knowledge of pathophysiolog y and clinical findings for uncommon conditions	Demonstrates advanced knowledge of pathophysiolog y and clinical findings for uncommon ophthalmic conditions	Contributes new knowledge for pathophysiolog y and clinical findings for ophthalmic conditions (e.g., publication, curriculum development)
Comments				

1.2.1 Prioritize issues to be addressed in a patient encounter						
Level 1	Level 2	Level 3	Level 4	Level 5		
Acquires relevant problem-	Triages consult	Manages consultatio ns	Manages consultatio ns	Oversees the consultation process and		







focused history, including medical records	 Performs a complete examination 	requiring surgical interventio n, including procedural options and timing.	requiring surgical interventio n, including procedural options and timing.	manages interdisciplinar y systems issues affecting patient care	
inpatient consultatio n, with direct supervisio n	Recognizes ophthalmic emergencies and initiates non-surgical treatment plan, with indirect supervision	 Requests ophthalmic subspecialt y advice, with indirect supervision Manages ophthalmic emergencie s with non-surgical and surgical treatment, with indirect supervision . 	 Requests ophthalmic subspecialt y input, with oversight Manages ophthalmic emergencie s with non-surgical and surgical treatment, with oversight 		
Comments					







1.2.2 Elicit a history, perform a physical exam, select appropriate investigations, and interpret their results for the purpose of diagnosis and management, disease prevention, and health promotion

Level 1	Level 2	Level 3	Level 4	Level 5
 Acquires relevant problem- focused history, including outside medical records Performs and documents a comprehensiv e ophthalmic examination; distinguishes between normal and abnormal findings 	 Performs problem- focused exam with appropriate techniques (e.g., slit- lamp, Gonioscopy, tonometry, funduscopy and scleral depression), consistently identifies common abnormalities on examination. Orders, performs, and interprets basic testing (e.g., visual field testing, Optical Coherence 	 Identifies subtle or uncommon examination findings of common disorders and typical or common findings of rarer disorders. Interprets unusual findings on routine testing, identifies artifacts; recognizes indications for advanced diagnostic tests and imaging procedures (e.g., specular microscopy, electroretinograp hy) 	Orders and interprets advanced diagnosti c tests and imaging procedur es accordin g to evidence -based medicine (i.e., when and when not to order testing)	Demonstrates expertise in advanced diagnostic tests and imaging







	B-scan, fluorescein angiography and corneal imaging)		
Comments			

1.2.4 Establish a patient-centered management plan Level 1 Level 2 Level 3 Level 4 Level 5 Identifies Generates Generates refined Generates Recognizes, selfcomprehensive differential based reflects, and resources to probabilistic differential differential shares generate a on patient focused diagnosis based symptoms, history diagnosis in experiences to differential on patient and examination educate others patients with diagnosis. symptoms and multiple ocular on factors that findings, and medical contributed to history; distinguishing documents and between common comorbidities; missed diagnosis presents and uncommon modifies likely or faulty clinical Generates a differential in oral conditions. differential with reasoning (e.g., basic new information presentation publication, differential from additional clearly and curriculum diagnosis development) concisely. testing. Selects additional based on patient diagnostic testing symptoms to distinguish and history Describes between conditions Articulates the on the differential diagnostic tests to rationale for aid in the ordering diagnostic testing in hierarchical fashion based upon probabilistic differential







		diagnosis.	
Comments			

1.3.1 Determine	the most appropri	ate procedures (or therapies	
Level 1	Level 2	Level 3	Level 4	Level 5
 Describes basic concepts of ophthalmic pathophysiol ogy and pharmacolog y. Describes 	• Explains relevant pathophysiolo gy and lists indications and contraindicati ons for planned medical therapy.	• Identifies and describes side effects of medical therapies and ways to minimize potential complicati	• Describes and articulate s the rationale for using emerging alternativ e medical therapies.	• Participates in the developme nt and disseminati on of novel therapies or interventions
basic ophthalmic anatomy and categories of procedural	• Explains indications, contraindications, and relevant steps required for procedural intervention (e.g., anesthesia, technique,	ons. Identifies and describes causes of complicati ons and alternative s for routine procedural	Describes and articulate s the rationale for using novel alternative e procedural interventi	







	instruments)	interventio	ons		
		ns			
				· ·	
Comments					

1.3.4 Perform a procedure in a skillful and safe manner, adapting to unanticipated findings or changing clinical circumstances

 Describes essential Administers anesthesia Administers anesthesia Administers anesthesia Administers anesthesia Administers anesthesia 		ı	1		
essential anesthesia anesthesia anesthesia and and advancement and and and advancement advancement and and and advancement advancement and and advancement and advancement and advancement and and advancement and and and and advancement and advancement and procedure, with with solversight and and and and and advancement and	Level 1	Level 2	Level 3	Level 4	Level 5
informed consent, indications & and contraindicati ons, anesthesia, sterile procedure prep) • Recognizes and ond manages intra- and post- operative complicatio ns, with indirect supervision • Manages intra- and post- operative complicatio ns, with oversight	essential components of care related to office- based procedures	anesthesia and performs procedure, with direct	anesthesia and performs procedure, with indirect	anesthesia and performs procedure, with	recent advancements in technologies or
	consent, indications & contraindicati ons, anesthesia, sterile procedure	and manages intra- and post- operative complicatio ns, with direct	intra- and post- operative complicatio ns, with indirect	intra- and post- operative complicatio ns, with	

Comments







1.3.4 Perform a procedure in a skillful and safe manner, adapting to unanticipated findings or changing clinical circumstances

	1	1 _	1	
Level 1	Level 2	Level 3	Level 4	Level 5
 Identifies visually significant cataract Demonstrates ability to scrub, prep and drape patient for surgery; performs basic suturing skills 	 Assesses patients for routine cataract surgery Performs elements of cataract surgery in the handson surgical skills laboratory and in the operating room (OR) Manages common postoperative complicati ons (e.g., 	 Assesses patients for complex cataract surgery Performs routine cataract surgery in the OR. Manages common intra- and post-operative complicati ons (e.g., posterior capsule rupture, wound leak) 	 Assesses patients who are candidates for refractive intraocular lenses to correct astigmatism and/or provide near correction Performs cataract surgery requiring complex technical maneuvers (e.g., pupil expander, capsular tension ring0 Manages 	 Assesses patients for intraocular lenses complicati ons requiring a more complex intervention Performs lens surgery for patients with complicati ons requiring a more complex intervention in (e.g., sutured intraocular lenses)







	post-op	complex	
	pain, high intraocula r pressure)	intra- and post- operative complication s (e.g., endophthalm itis)	Manages rare and complex intra- and post- operative complicati ons (e.g., aqueous misdirectio n, suprachoro idal hemorrhag e)
Comments			







1.3.4 Perform a procedure in a skillful and safe manner, adapting to unanticipated findings or changing clinical circumstances

_	Level 1		- -	T12		T 14		T 15		
L	evel 1	L	evel 2	Le	evel 3	Le	evel 4	L	evel 5	
•	Demonstrates ability to scrub, prep and drape patient for surgery; performs basic suturing	•	Identifies patients for routine extraocula r surgery Performs	•	Develops a pre- operative plan for routine extraocula r surgery	•	Develops a pre- operative plan for complex extraocula r surgery	•	Assess patients and develops a pre-operative plan for complex/ multidiscipli nary extraocular	
•	skills Identifies common post- operative complication s (e.g., post- op pain,		simple extraocula r surgery (e.g., simple lid laceration repair, nasolacri mal duct probing)	•	Performs routine extraocula r surgery (e.g., complex lid laceration repair, horizontal	•	Performs complex extraocula r surgery (e.g., vertical strabismus), with assistance	•	surgery (e.g., nerve sheath decompression, vessel sparing strabismus) Performs complex	
	bleeding)	•	Manages common post- operative complicati ons	•	strabismus , ptosis) Manages intra- and post- operative complicati ons (e.g., bleeding, perforati	•	Manages complex intra- and post- operative complicati ons (e.g., infection, retrobulba r hemorrha		extraocular surgery	







		ge)	
Comments			

1.3.4 Perform a procedure in a skillful and safe manner, adapting to unanticipated findings or changing clinical circumstances								
Level 1	Level 2	Level 3	Level 4	Level 5				
• Demonstrates ability to scrub, prep and drape patient for surgery; performs basic suturing	 Assesses patients for routine intraocular surgery Performs routine 	 Assesses patients for complex intraocular surgery Assists in subspecialty intraocular 	 Assesses patients for multispecialt y intraocular surgeries Performs routine intraocular 	• Assess patients requiring surgery from multiple disciplines (e.g., plastic surgery, facial trauma)				
skills	intraocular surgery in	surgeryManages	surgeryManages	Performs complex intraocular				

common

complex

the hands-on







	surgical skills laboratory • Manages common post- operative complication s (e.g., post- op pain, high intraocular pressure)	intra- operative complication s (e.g., flat chamber, wound leak, hyphema)	intra- and post- operative complication s (e.g., re- bubble graft, blebitis)	• Manages rare and complex intra- and post-operative complications (e.g., tube erosion, proliferative vitreoretinopat hy)
Comments				







MS Dermatology, Andrology &STDs Matrix

Semester 1

Cour	Medical	communica	collabora	Health	Professio	Schol	Lead
se	Practitio	tor	tor	advoca	nal	ar	er
	ner			te			
Basic	1.2.1.1		3.1.1.1				
Derma	1.2.2.2						
Andro							
Part I							
Basic	1.1.2.7.5		3.1.1.1				
Derma							
Andro							
Part II							
Basic	1.3.4.5		3.1.1.1				
Derma	1.4.1.1						
Andro							
Part III							

Semester 2,3,4

Course	Medical	communicator	collaborator	Health	Professional	Scholar	Leader
	Practitioner			advocate			
Dermatology	1.1.2.5						
part I	1.2.2.3						
Dermatology	1.1.2.2						
part II	1.1.2.3						
	1.1.2.4						







course	Medical	communic	collabora	Health	Professio	Schol	Lead
	Practitio	ator	tor	advoc	nal	ar	er
	ner			ate			
Dermatol	1.1.1.1	2.1.1.1	3.1.1.1	4.1.3.1	5.1.2.1	6.2.4.1	
ogy part	1.1.2.6	2.1.2.1	3.1.1.3		5.2.2.1		
	1.2.1.1	2.3.2.1	3.2.1.1		5.3.1.1		
III	1.3.4	2.4.3.1	3.2.1.2				
	1.4.1.3	2.5.3.1					
Androlog	1.1.1.1	2.1.1.1	3.1.1.1	4.1.1.2	5.1.1.2	6.2.4.1	
y part I	1.1.2.7	2.2.1.1	3.1.1.5		5.4.3.1		
y part 1	1.1.3.1	2.2.1.2	3.2.1.2				
	1.1.4.1	2.2.2.1					
	1.2.2.3	2.4.3.1					
	1.4.1.1						
	1.4.1.4						
Androlog	1.1.1.1	2.1.1.1	3.1.1.1	4.1.3.1	5.1.2.1	6.2.4.1	
y part II	1.1.2.6	2.1.2.1	3.1.1.3		5.2.2.1		
y part II	1.2.1.1	2.3.2.1	3.2.1.1		5.3.1.1		
	1.3.4	2.4.3.1	3.2.1.2				
	1.4.1.3	2.5.3.1					
Androlog	1.1.1.1	2.1.1.1	3.1.1.1	4.1.1.2	5.1.1.2	6.2.4.1	
y part III	1.1.2.7	2.2.1.1	3.1.1.5		5.4.3.1		
y part III	1.1.3.1	2.2.1.2	3.2.1.2				
	1.1.4.1	2.2.2.1					
	1.2.2.3	2.4.3.1					
	1.4.1.1						
	1.4.1.4						







Semester 5

course	Medical	communic	collabora	Health	Professio	Schol	Lead
	Practiotio	ator	tor	advoc	nal	ar	er
	ner			ate			
Applied	1.1.1.1	2.1.1.1	3.1.1.1				
Clinical	1.1.2.7	2.2.1.1	3.1.1.5				
Course	1.1.3.1 1.1.4.1	2.2.1.2 2.2.2.1	3.2.1.2				
related to	1.2.2.3	2.4.3.1					
dermatol	1.4.1.1 1.4.1.4						
ogy and	1						
androlog							
y							
disorders							
Electiv	1.1.2.2						
e	1.1.2.3						
	1.1.2.4						
courses	1.3.1.1						
	1.3.1.3						
	1.2.3.1						
	1.2.2.5						

F) Program Administration Requirement (If applicable):

This course is designed for MS candidates .they must have all these requirement:

- 1) Has a Bachelor degree in medicine and surgery from one of the Egyptian universities or an equivalent degree issued by the Supreme Council of Egyptian Universities;
- 2) Completed Internship period for graduation
 - G) Regulations for progression and program completion







The competencies of this program will be achieved through different modes. As for example:

- 1) Self-Learning;
- 2) Interactive lectures whether face-to-face, virtual, or videos;
- Clinical skill laboratories e.g. in dry, wet, or simulation laboratories with grade d tasks testing important skills;
- 4) Clinical responsibility e.g. active involvement in patient management by taking graded responsibilities in, indoor patient management, attending outpatient department clinics, and emergency duties;
- 5) Participation in practical procedures or clinical setting;
- 6) Academic activities e.g. participation in teaching process, presentation (cases or papers) in a clinical meeting, seminars, journal club etc., participation at a clinical meeting and CME conferences, and participation in different skill courses and workshops;
- 7) Research activities, writing thesis, the monthly audit of the unit, and any publication.

The assessment tasks will be achieved through different modes. As for example:

- Exams which access the theoretical knowledge of the neutral history; clinical approaches in diagnosis and management; attitudes and communications skills; clinical, and technical skills;.
 Exams could be in MCQs, EMQs, case scenarios, OSPE, OSCE and OSLER formats.
- 2) Workplace- based Assessment through an everyday assessment by the tutor(s) highlighting all types of engagement e.g. attendance and participation in the different format of teaching and learning formats. This could be achieved by an accurate and complete record of all the required information in the portfolio and logbook. All recorded information in the portfolio and logbook must be de-identified and comply with the relevant jurisdictional privacy laws. The logbook summary, together with the minimum portfolio and logbook data, must be reviewed by the tutor(s) at the completion of the program,







3) The candidate must complete a research project "thesis". The thesis is based on a piece of research work that has direct relevance to the specialty in Dermatology or andrology

H) Evaluation of Programs' Competencies

The program has been designed by specialist faculty staff member in the department of Dermatology, Andrology and STDs at Mansoura University. The program is structured to ensure that it will cover the required knowledge in the field of Dermatology, Andrology and STDs to cope with the real academic professional development.

Evaluator (s)	
Internal evaluator (s)	
External evaluator (s)	

I) Statement

We certify that all information required to deliver this program is contained in the above specification and will be implemented. All course specification for this program are in place. The program specification should have attached to it all courses specifications for all courses listed in the matrix.

Program coordinator (s)	Date	Signature
Prof. Samir EL hanbaly		
Dean of the Mansoura Faculty of Medicine		
Prof. Ashraf Shoma		
Executive Director of the Quality Assurance		
Unit		
Dr Manar Adel		





