



College of Medicine

5-year Programme
King Saud University Fellowship in ORL
5-year Programme
King Saud University Fellowship in ORL
Combined with Saudi Board

ORL Department
King Abdulaziz University Hospital

Preface

The College of Medicine, King Saud University has been known as one of the Institutions that offers and caters a continuing medical education thru its Diploma, Residency Programs and Fellowships and other scientific activities over the years.

In the field of otolaryngology, it started with the Diploma in Laryngology and Otology (DLO) with its first batch of Graduates in 1405 – 1407. Having its high aim of a continuous and higher level of intensive training, the University started its Residency Program or the King Saud University Fellowship (KSUF) in ORL specialty where other graduates of the DLO program have continued their training in the said Fellowship.

Apparently, the King Saud University Fellowship (KSUF) in ORL specialty is combined with that of the Saudi Commission for Health Specialties (SCFHS)' Saudi Board in ORL specialty for over the years with its first batch in year 1412-1413 (1991-1992) and currently has 91 Graduates.

As the current Program Director of the Fellowship, I am very proud to say that we have come a long way and I can positively claimed that all of these Graduates have its respective coveted post /position and created a distinct, reputable, impressive and remarkable share in the field in and outside the Kingdom – e.g. Medical Director, Chairman, Head, Program Director, Academic Post – Professor, Associate Professor and Assistant Professor and other.

I am confident that with the same vision, goals and objectives of our Fellowship, the dedication and contribution of all the people behind the training program - the Institution, the Teaching Staff, other Para Medial and Medical Staff including the support services, we can maintain more so to surpass its Graduates' performance and contribution to the society in the field of ORL Head and Neck Surgery

The challenge now that I am passing or giving to the new breed and aspiring Otolaryngologist and Head and Neck Surgeons is to aim high, strive and have this passion for they are the new generation that will continue the legacy that we have received from our former tutor and we are passing it on to these new Candidates of the Fellowship / Residency Program.

Vision

To educate and train future health professionals in an innovative learning environment.

To explore new areas of research and produce significant scientific contributions to the world.

To provide high quality and compassionate healthcare to the Saudi community.

To integrate education, research, and healthcare in an inclusive environment

Mission

To be a leading medical school and health care provider that makes a major effect health in Saudi Arabia and contributes significantly to the Science and practice of medicine worldwide.

Postgraduate Strategic Objective

Improve the quality of postgraduate training programs

Integrate research in residency training programs and establish formal research degrees.

ACCREDITING BODIES

Saudi Council & Health Specialties

The Saudi government, since 6/2/1416H, has delegated the responsibilities of making sure that the health profession is of the highest standard laid down by the Saudi Commission for Health Specialties (SCFHS). Accordingly, SCFHS has established goals to achieve those objectives and a foundation of general rules based on appropriate standards for health care professions.

All health professionals applying to work in the Kingdom need to have their certificates accredited and registered. The importance of accreditation and registration lies in evaluating the certificates for health professionals and classifying them accordingly. SCFHS, moreover, takes into account accuracy and objectivity in the assessment of scientific expertise and sets standards based on Saudi Board training.

SCFHS is the institution responsible for ensuring that health professionals are qualified to work in our society. These standards have been established because any malpractice will constitute a threat to the health of citizens and residents.

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The minimum qualification for any professional degree program me is approved, as are the basic equation scales for all the certificates, which require classification.

King Saud University

The Deanship of Graduate Studies (DGS) was established in 1973 to specifically address the needs of the current and prospective graduate population. As the University has always aspired to make available specialized higher education so as to meet the needs of the Kingdom of qualified graduates holding high academic degrees, in 1978 the University Council approved, the establishment of the College of Graduate Studies. Afterwards, in 1997, name was amended to the Deanship of Graduate Studies to further support the graduate population. This was due to an increased interest in providing services designed for current and prospective graduate students. DGS's profile has expanded to include more full-time masters and doctoral students.

DGS at King Saud University (KSU) administers all graduate programs and implements regulations and executive procedures relating to these programs. It communicates the benefits of the graduate education within and beyond the KSU community.

The University board review accredit and monitor all KSU graduates in residency program.

Program Goals and Objectives

The Department of ORL wants:

General Objective

1. To produce competent, safe and skilled Oto-Rhino-Laryngologist who will be able to deal efficiently with ORL and Head and Neck Surgery
2. To provide research environment and facilities for those who would be researchers, clinician scientist or academic Staff of the specialty
3. To award a certificate of specialization (The Fellowship of King Saud University) after successful completion of the program.

Program Structure

The 5-year program of the fellowship consists of the two integrating parts:

Basic Science and Otorhinolaryngology and Head and Neck Surgery

- a. Didactic lectures
- b. Tutorial
- c. Practical / Clinical sessions

The Otorhinolaryngology and Head and Neck Surgery Residency is a 5 years rotation program based at King Saud University' teaching Hospitals King Abdulaziz University Hospital, King Khalid University Hospital and other affiliated Riyadh hospitals (Training Centers) subject to the prevailing rules and protocol of the Combined Residency Training Program

Continuous evaluation of the Training Program and its Training Center hospitals will be done by the Residency Training Board of the University and the Saudi Commission for Health Specialties

A comprehensive curriculum of lectures and tutorial are given throughout the program.

The clinical training include out-patients – Clinic, Operation, Pre and Post-Operation Rounds with the other clinically based lectures and tutorial during those sessions

The training program will provide the Residents with increasing responsibilities and adequate exposures to clinical materials which are as follows: (as of 2014 from SCFHS)

First year:

The first year of the Residents will be for training in the different fields of General Surgery

1. General Surgery
2. Intensive Care Unit
3. Emergency Medicine
4. Neurosurgery
5. Paediatric Surgery
6. Plastic Surgery
7. Thoracic Surgery

The Residents will be assigned in the recognized and/or affiliated hospitals of the combined training program with the aim of the following objectives, namely,

1. Provides the Resident with a sound knowledge of the principles of general surgery

2. Gives adequate experience in clinical diagnosis and methods of investigation in a wide range of general surgical conditions
3. Develop in the resident maturity of clinical judgment
4. Develop by progressive responsibility good technical and operative skills
5. Imparts an understanding of the ethics of surgical treatment
6. Emphasizes the importance of surgical team work and the necessity for consultation with other disciplines

Second year

The resident will be in ORL training proper and will be attached to senior staff in the outpatient and operating theater with no direct responsibility to the patient. The resident is expected to manage ENT primary care and outpatient Clinic and in OR first under the Supervision and later independently towards the end of the year with cases on his level of residency and must log all his procedures performed / done as part of the requirement of the program same with his succeeding year of training. He is expected to clerk the inpatients and actively participate in the ward rounds. The resident will be given an on-call duty and the number will be in accordance to the hospital's on-call protocol

Third year

Third year (R3) will be given more responsibilities especially in clinics where he will see patients referred from the ORL primary care clinics. He or she will be given an on-call for emergencies cases. He is expected to participate in training students e.g. outpatient training and ward rounds.

Fourth and Fifth year

The R4 and R5 shall be involved in teaching the R2 and R3 residents especially at the operating theater and outpatient

Tutorial to the undergraduate students may be given under supervision of senior staff by those who showed the potentials and the interest to be future teachers.

Rotation

The combined residency program has its 8 affiliated hospitals where the Residents will rotate, note that this is aside from the University's Teaching Hospital – King Khalid University Hospital during general surgery rotations for the Residency Level 1 Residents.

King Saud University's Teaching Hospitals
1. King Abdulaziz University Hosp (KAUH)
2 King Khalid University Hospital (KKUH)
King Fahad Medical City
King Saud Medical City
King Abdulaziz Medical City
Prince Salman Hospital (King Salman Hosp)
Security Forces Hospital
Prince Sultan Military Medical City
King Faisal Specialist Hosp and Research Center

As of the recent academic year – 1434-1435 & 1435-1436, there was a new structure for the rotation scheme for the accepted Residents where training Centers have been divided

Program A (Track A)

KAUH
KFMC
PSH
SFH

Program B (Track B)

KFSH&RC
PSMMC
KAMC
KSMC

Scientific Activities

a) Basic Science Course

This is a one (1)-month compulsory Course to all the R2 Candidates of the Combined Residency training Program as mentioned above and held each year. Residents concerned are released from their clinical training and commitments, and other hospital obligations on the inclusive period.

b) A half day is reserved weekly as an academic day -

Residents should be free from their clinical duties to attend the academic activity that is planned in advance with an assigned tutor, time slot, and venue.

b.1) Grand Rounds

The activity will start at 1:00 p.m. to 2:00 p.m. in the main auditorium, 4th floor of Building 1 of King Abdulaziz University Hospital which is under the supervision of the Head of the ORL Department.

The program is arranged by the Grand Round Coordinator which includes Clinico-Radiological Presentation, Clinico-Pathological Presentation, Case Presentation, Mortality and Morbidity, Speech and Audiology Case Presentation and the Journal Presentation of the Candidates.

Occasionally there are presentations from the Companies, for their machine demonstration which acquired by the Hospital, presentation of the invited Speakers from outside the Hospital and Country.

Participation of all the Teaching Staff in the University is compulsory to ensure a live and active discussions that will be beneficial to all Candidates.

Above activity is announced to all the affiliated hospitals as a sort of information and an invitation as well.

b.2) Tutorial Program

The programme is arranged by the Program Director / Deputy Chairman of the RTC in coordination with the Residency Training Committee which is discussed and approved prior to the commencement of the academic year

Mostly, the topics which are included in the programme are the suggested topics by the Residents which they felt they need to augment their knowledge and can support in their clinical training aspects

This is being held as well in King Abdulaziz University Hospital's main auditorium from 2:00 p.m. to 4:00 p.m. after the Grand Round activity.

c) Journal Club Meeting

This is a monthly activity where the Residents are encourage to attend to since a lot of interesting presentations which was prepared by the Organizing or Scientific Activity in-charge from the Saudi ORL Society as

well as a chance to meet and get along with the rest of its member from the same and other region of the Kingdom.

d) Group activity

This is a weekly basis activity where case presentations are prepared by the respective ENT Group / Team of the Department

In the existence of the 5 sub-specialty Fellowships of the University, each has a activity / presentation – case scenario, and an update of the Fellows' research project, the other rotating residents are invited to attend and be with them for a further theoretical and clinically based presentations.

e) Courses, Seminar, Conference, Workshop

Residents have a mandatory course to attend to

1. Temporal Bone (at least two during the five years)
2. Functional Endoscopic Sinus Surgery (FESS) (at least two during the five years)

and other vital courses that could augment their theoretical knowledge much so of their clinical skill through this hands-on courses

f) Review Course

This is the newly organized Course (2013) which is approved by the Scientific Board and the Residency Training Committee which is designed and intent for the graduating batch to review and refresh their knowledge in preparation to their final Board.

Policies and Procedures (in Training and for Examinations)

All the Residents of the Program are expected to adhere all the outstanding policies and procedures or mandated with the core and principles of the program and of the Training Centers includes

1. Attendance – workload and scientific activities

For the scientific activities, Residents must not exceed 25% absences in the designed programmed or schedule, failure to do so will mean that he or she will not be allowed to sit in the yearly promotion examination and/or to sit in the final board examination.

2. Log book summary

To furnish a copy of the quarterly logbook summary duly signed by the supervisor and/or consultant-in-charge of the rotation for the veracity purposes

Residents are as well expected to adhere in the existing log book summary protocol where it must be put electronically thru the designed electronic program by the Commission and the University

3. On-call and other hospital workloads

Part of Residents duties and responsibilities is the on-call duty. However, each training centers has its own or existing policy in this regards, though it usually should not exceed 10 on-calls per month

4. Other policies in relation to the hospital duty aspect

- It varies in each affiliated hospitals that include
 - a. Patient Admission
 - b. Patient Transfer
 - c. Patient Referral
 - d. Patient Discharge
 - e. Protocol for specific Procedures
 - f. Ethics
 - g. Harassment Policy
 - h. Others

5. Evaluations, Notification Letter, Warning Letter, Repetition, Dismissal, Remendation, Probationary

Evaluation

If any Candidate achieved unsatisfactory evaluation(s) in any field of his/her one (1) year rotation, then the Candidate will not be promoted to the next level of Residency and has to repeat the same level after having such evaluation(s) was/were approved by the Residency Training Committee

Notification Letter

- The Resident has obtained 1 satisfactory evaluation in 3 fields in one rotation evaluation.
- The Resident has obtained 1 unsatisfactory evaluation in any field in one rotation period.
- The Resident has an incident report and has been discussed and approved by the RTC Members. The Candidate may instead receive a warning letter depending on the type of incidence.
- If obtained satisfactory evaluation in the field of responsibilitiy, discipline or ethics

Warning Letter

- ⚡ The Resident has 2 notification letters, then the third one, he/she should be given a warning letter.
- ⚡ The Resident has unsatisfactory in any of the following: Responsibility, Discipline, Ethics and the RTC Members discussed and agreed to give him a warning letter.

Repetition / Retained in the same level of Residency

- ⚡ The Resident has warning letter, secondary to 3 notification letters in one year period.

- ⚡ The Resident has total unsatisfactory evaluation in two rotations period in one academic year.

Dismissal Letter

- ⚡ The Resident has 1 warning letters, if he/she received the second one, he/she will be dismissed from the program.
- ⚡ If the Resident has 1 warning letter and he/she is placed under probation, if no improvement at the end of the decided period, he/she will be dismissed from the program.
- ⚡ If the total annual (evaluation and promotion examination) marks score doesn't qualify the Candidate to be promoted to the next level for three (3) successive years.
- ⚡ Failure to the 1st Part or Final Saudi Board Examination after consuming the allowed chances. (3 X)
- ⚡ If the Candidate exceed double the minimum period for the primary or the total period in case of final year Resident.
- ⚡ If the Candidate discontinued his/her training for a period of more than continuous 12 months or non-continuous 18 months.
- ⚡ If he/she withdraws from the Program.

Remediation

A Resident may be placed on remediation when:

- ⚡ The Resident has failed a Rotation as documented in an evaluation; or,
- ⚡ Poor or borderline performance, or a pattern of poor or borderline performance, as documented in evaluations, written formative feedback, or discussions with the Resident, in one or more of the domains in the CanMEDS role, is identified even though the Resident has not failed a rotation as documented in an evaluation; or
- ⚡ In competency based programs the Program Director identifies that the Resident requires more time to demonstrate an ability to meet the competencies required to progress in the Program

Probationary Period

A Resident may be placed on Probation in the following circumstances:

- ◀ When the Resident has failed to successfully complete a period of Remediation
- ◀ When, in the judgment of the Program Director, correction of identified deficits and weaknesses in performance and conduct require a more formal program of correction than is provided in Remediation under the policy;
- ◀ When, in the judgment of the Program Director, the identified deficits in performance and conduct are of such nature that there can be no tolerance of recurrence and the Resident requires formal monitoring of performance or conduct for the duration of the postgraduate training program.

6. Vacation / Holiday

- a. Only One Eid Holiday per year. (Ramadan or Hajj)
- b. Study Leave (For conferences or preparing for an exam): Residents may apply individually for 7 days of study leave per year,

For the past 3 years, Residents were able to discuss the study leave and it has been approved to have 10 days

- c. If the interruption is due to sickness, a medical report in accordance with the University regulations must be submitted in support of the application.

7. Research

The Postgraduate Medical Education for the past year has its yearly Research Day where all the Residents from different specialties have been invited and encourage to attend including the ORL specialty.

We have acknowledged and knew the importance of research in the field especially in the modern and fast phase of modern technologies as well as to be clinician scientist that would uplift and help in development and in search for the field of ORL

Thus, the recent years (2 years) of the Residency Program, it has been approved to give consideration and weight on the research aspects thus, to be included as one or part of the Residents' requirement

Resident must then has to have at least 1 published research project to be able to fit in sitting the final board. Failure to do so will mean an incomplete in his requirement and hold or abstain in taking the final board

For the past 3 years, it is observed to fill the Final Report for the Graduating Residents by the Chairman of the Residency Training Committee. The said report will be forwarded then to the Scientific Board's Examination Committee after the yearly promotion examination schedule.

8. Examination

a. Selection Examination

The Residency Program selection must be scheduled in March , April or May

Result of the said selection examination should be forwarded on or before end of May

Note: Acceptance of Late Applicants

The Residency Program starts on the 1st of October yearly

Late applicant(s) will be allowed provided that he will complete and can submit all the requirements and will join the program on and before the 1st of March.

b. Promotion Examination

The Promotion examination is usually scheduled on the 2nd Sunday of June for its Written, Wednesday for Oral of the same week

However, due to other considerations and basing on the approval of the Residency Training Committee (RTC), it varies and will determine and will be informed to the Residents then

c. 1st Part Saudi Board Examination

This is a pre-requisite to the Junior Residents to be able to pass in the next level of Residency for Senior Level (R4),

Failure in this examination will mean that the concerned Resident(s) (R3) level will repeat the same residency in the next academic year

d. Final Examination

a. KSU Fellowship

The Finals for the University Fellowship as approved is in the month of either November or December each year.

However, in other occasions, it is in October basing on the discussion and approval of the Examination Committee and endorsed for approval to the Department Board.

There are 2 parts of this examination – the Written and the Oral/Clinical Part.

Marking Guidelines

1. Written = 50%
2. Oral = 50 % (divided into 7 Committees allocation in different fields of specialties
 - 2a Oto-Neurotology
 - 2b. Rhinology
 - 2c. Facial Plastic and Reconstructive Surgery
 - 2d. Paediatric ORL
 - 2e. Larynx and Pharynx
 - 2f. Head and Neck Surgery
 - 2g Principles of Surgery

To be eligible to sit in the final oral, the candidate must get at least 50% in the written examination.

Passing mark is 70%

Rulings / guidelines

CLEAR PASS = 70% or more of the total marks computed cumulatively provided that candidate(s) has not failed in more than 1 Committee

FOR DISCUSSION

- a) 70% total or more cumulative with failure in 2 Committees

FAILURE

- a) Less than 50% in written exam.
- b) Less than 70% cumulative result
- c) 70% or more but with failure in 3 or more Committees

b. Saudi Board

The examination will be determined and announced by the SCFHS

The candidate is allowed a maximum of three (3) consecutive years to complete the exam process. The time limit commences on the first available examination date after the application is received.

APPENDIX I

ANATOMY AND EMBROLOGY

1. Anatomy of the ear
2. Embryology and anatomy of the head, neck, face, palate, nose and paranasal sinuses
3. Embryology and anatomy of salivary glands
4. Neuroanatomy for the laryngologist
5. Anatomy of the larynx and tracheo-bronchial tree

PHYSIOLOGY

1. Physics of sound
2. Physiology of auditory system including Eustachian tube
3. Physiology of Equilibrium
4. Physiology of the nose and paranasal sinuses
5. Physiology of the mouth, pharynx and oesophagus
6. Physiology of salivary gland
7. Physiology of the larynx
8. Generation and reception of speech
9. Physiology of the respiratory tract
10. Neurophysiology for the parathyroid
11. Physiology of thyroid and parathyroid
12. Basic principles of cellular metabolism
13. Physiology of shock
14. Blood clotting

HISTOLOGY AND PATHOLOGY

1. Histology and pathology of the ear
2. Histology and pathology of the nose and paranasal sinuses
3. Histology and pathology of the throat, larynx, oesophagus, tracheo-bronchial tree and thyroid
4. Fluid and electrolytes
5. Wound healing
6. Shock
7. Basic immunology and allergy
8. Microbiology:
 - Bacteriology: basic and applied to ORL
 - Viral disease or O.R.L.
 - Mycoses
9. Antimicrobial therapy
10. S tagging classification
11. Nutritional management of head and neck cancer
12. Haematology

RADIOLOGY

1. Radiology of temporal bone
2. Radiology of the nose and paranasal sinuses
3. Radiology of salivary glands
4. Radiology of lungs and tracheo-bronchial tree
5. Advanced Radiology in O.R.L.

APPENDIX II

AUDIOLOGY AND SPEECH PATHOLOGY

1. Clinical examination of aural infection
2. Diagnostic audiometry
3. Objective tests of hearing
4. Diagnostic tests of balance
5. Audiological rehabilitation
6. Hearing aids
7. Cochlear implant
8. Noise balance disorders
9. Tinnitus
10. Speech Disorders

OTOLOGY

1. Diseases of external ear, congenital, trauma, infection, otalgia, tumor and cyst
2. Disease of the middle ear, congenital, trauma, infection, otosclerosis, tumours and facial nerve disorders
3. Disease of the inner ear and retrocochlear region: Labyrinthitis, sensorineural hearing loss, sudden deafness, vertigo, acoustic tumour
4. Skull base: neoplasm and operative procedure

RHINOLOGY / FACIAL PLASTIC

1. Congenital defects of the nose
2. Infection and granuloma nose and sinuses
3. Trauma
4. Epistaxis
5. Allergy and nasal polyps
6. The nasal septum
7. Tumour of nose and sinuses

8. Endoscopy of nose and sinuses
9. Abnormalities of the smell
10. Rhinoplasty
 - a) closure of septal perforation
 - b) scar revision
11. Headache and facial pain
12. Transsphenoidal hypophysectomy

ORAL AND PHARYNGEAL DISEASES

1. Congenital, trauma, inflammation, neoplasm of salivary glands
2. Diseases of the pharynx and oesophagus
3. Neck mass
4. Diseases of the larynx
5. Tracheostomy
6. Neck spaces infection
7. Lower respiratory condition in
8. Surgery of thyroid and parathyroid

RADIOTHERAPY

1. Principles of radiotherapy in O.R.L.
2. Basic principles of chemotherapy
3. Chemotherapy in O.R.L.

ANAESTHESIA

1. General anaesthesia for O.R.L. procedure
2. Local and regional block anaesthesia for ORL dprocedures
3. Intensive care and resuscitation in ORL

MISCELLANEOUS

1. Laser in O.R.L.

2. Cryosurgery in O.R.L.

CONTENT OF THE LOG BOOK

I. Operations to be Performed by the Resident Minimum Number

1. Tonsillectomy	100
2. Adenoidectomy	100
3. Nasal polypectomy + FESS	30
4. Partial turbinectomy	50
5. Myringotomy and Ventilation tube insertion	30
6. Submucous diathermy	10
7. Direct and microlaryngoscopy	16
8. Examination and biopsy of the nasopharynx	8
9. Submucous resection	30
10. Septoplasty	50
11. Oesophagoscopy and Bronchoscopy	16
12. Tympanoplasty	20
13. Mastoidectomy	10
14. Tracheostomy	20
15. Turbinate Procedure	20
16. Removal of the F.B. - Nose	20
- Ear	

II. Operations to be observed and assisted by the surgeon


1. Salivary gland surgery
2. Laryngectomy
3. Dissection of the neck
4. Rhinoplasty
5. Stapedectomy (tympanotomy)

Suggested Reading

APPLICANTS PROCESSING OF KSU FELLOWSHIP & RESIDENCY TRAINING PROGRAMS MEDICAL EDUCATION CENTER

Applicant Requirements

- Application Form, Curriculum Vitae
- Copy of MBBS and Internship
- Copy of Saudi Council License Exam
- Transcript of Records with minimum GPA 2.75
- Copy of ACLS & BLS Certificate not later than 6 mos. before expiration
- Letters of recommendation
- No Objection letter from sponsor
- Copy of ID (Passport/Iqama for non Saudi)
- 6 photograph (passport size)

 *Submission should be on or before the deadline. Withdrawal of application should be received two weeks before the selection exam.*

POSTGRADUATE MEDICAL EDUCATION (PGME)

- Screening of the application and forwarding the complete ones to the respective Program Directors

PROGRAM DIRECTOR (PD)

- The program director will review each applicant's file and set the date for selection exam (written/oral) in consultation with the Chairman of the Department then will forward it to PGME
- Exam will be carried out by the respective program director / department and supervised by the PGME. The result will be forwarded to PGME.

Appointments for Admission

Appointments for admissions to training programs are made by the Postgraduate Medical Education Office upon the recommendation of the Program Director for the opening of the new academic year. The Department communicates to PGME for the timeline to the newly trainee applicants who wants to apply to specific program.

EMPLOYMENT PROCEDURE

Resident Employment Procedure

Employment - the state of being employed or having a job

Procedure

Saudis Sponsored by Jobs 105 (Training Post)

- All Saudi residents accepted in the training program (with GPA of 3.75) will be eligible for recruitments to annual contract job for duration of training of their residency training program.
- After final acceptance by the training program names will be sent to postgraduate office.
- All resident will be informed and scheduled for a medical exam in the hospital at KCUH.
- If they passed the medical examination, the Recruitment department will submit their processed papers to the Ministry of Civil Affairs. Residents need to visit the recruitment department to sign the contract.

Saudi with external fund

- There is no need to visit the recruitment office as their salary will be paid by their funding agency.
- Non –Saudi without External Fund

Self- Sponsored/ External Funded

As per policy, a resident enrolled in any residency and postgraduate training programs of the College of Medicine is required to pay an annual fee of:

- Thirty thousand Saudi Riyals (SR30, 000) for Non-Saudi Residents per year of training and it will be depending on their status if their institution of the country of origin sponsors them or if they are self-sponsored.

PROCESSING SEQUENCE

Registration

Fill up PGME Application Form Attach all requirements mentioned and submit all documents to PGME. (Each department **MUST** inform us and **SUBMIT** all documents to PGME office at least **1 month** before the training or rotation starts to give us time to process all their requirements.

Acquiring Hospital Badge

PGME office will process the application for hospital badge. ID cards will be issued by Personnel Department.

✚ *All residents/fellows are required to wear hospital badge on the hospital premises at all times.*

Access Card

Fill up and attach a copy of ID. Request form for Accesses Magnetic CARD takes to Security Department (it must be signed and stamped by PGMEU)

Dictation Code

Fill up the Physician Biography Data. It will be sent to IT Department to get the doctor's identification.

Contact Number: (011) 4679430

Proceed to Medical Records Department to process the dictation code and activate it.

Contact Number: (011) 4671441

Las & Lab Access

PGME will send a request to IT Department. (with trainees names, ID number, rotation duration and their personal e-mails).

Lab Coat

PGME will request from the Laundry Department along with the request forms for Lab Coats.

Wi-Fi Access

- PGME will send an e-mail to IT department to request for Wi-Fi Access.
- It is available throughout the College premises. Provided the device is registered in IT Department to have an access.

✚ *Trainees must provide information for their IP address and device type. (processing takes 1-2 weeks)*

KSU Email

Fill up KSU EMAIL request form completely and accurately and attach a copy of ID. **PGME office is responsible to issue KSU email.**

✚ *KSU e-mail is for official communications and for residents to be able to access the library and medical journals.*

Note: The departments should inform us at least 1 month ahead to be able to process all trainee's requirements before start of rotation

Clearance

All Residents are required to get clearance at the end of rotation. For this, you need to fill out the Clearance form available at PGME office. Get it signed from all departments mentioned in the form.

Vaccination

All staff are required to have a PDD screening as part of their physical examination routine to provide treatment if the result indicates its necessity.

Library

All Students and Medical Staff are allowed to use the library during Sunday-Thursday at 8AM-8PM located at College of Medicine 1st Floor.

Contact Number: (011) 467-1330.

Contact information

ORL Department – KAUH	
Dr. Sami Al Harethy	Phone: +966 (011) 4775735 Fax +966 (011) 4775748
Secretariat	+966 (011) 4786100 extn 1419 Hasna 1422 Ghada 1420 Reem 1421 Nai 1429 Undergraduate Unit 1624, 1627 CME

Postgraduate Unit – ORL Department, KAUH	
Prof. Abdulrahman Al Sanosi	Phone: +966 (011) 4786100 extn 5431 or c/o 1443 Fax +966 (011) 4775784 alsanosi@ksu.edu.sa
Secretariat	Phone: +966 (011) 4786100 extn 1443 Fax +966 (011) 4775784 aadiova@ksu.edu.sa

College of Medicine - Postgraduate Medical Education Unit - KKUH

College of Medicine King Saud University King Khalid University Hospital 1 st floor, Medical Education Center Bldg. P.O. Box 2925, Riyadh 11461	Phone: +966 (011) 4671554 +966 (011) 4692503 Fax: +966 (011) 4699113 postgraduateunit2015@gmail.com
Vice Dean, Postgraduate & Continuing Medical Education	Phone: +966114670473
Associate Vice Dean's Assistant	Phone: +966114670473
Director, Postgraduate Medical Education Unit	Phone: +966114699120
Deputy Director, PGMEU	
Coordinator, PGMEU Orientation/Assessment, Data Entry/Handler, Administrative/Educational Operations	Phone: +966114699109 Fax: +966114699109
Coordinator, PGTB Recorder, Program Proposal Handler, Internal Review Committee, Admissions for Clinical Attachment	Phone: +966114699128
Coordinator, Residency Payments and Processing for New Admissions	Phone: +966114672609
IT Specialist, Operating PGME Systems, Processing (ID, Dictations, KSU E-Mail, Lab Access, Lab Coats)	Phone: +966114699114
Coordinator, Data Handler for Completion, University Registrar	Phone: +966114671551 +966114692503
Coordinator, PGME, KSU University Communications	Phone: +9664671551 ext. 30
College of Medicine	
Dean, College of Medicine and Supervisor University Hospital	Phone: +966114670890 - +966114671391
Dean's Associate Assistant	Phone: +966114670890 +966114671391

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- 1. KSUF in ORL specialty Programme**
- 2. Saudi Board in ORL specialty Curriculum**