WELCOME
Dear Medical Students,

Welcome to ORL Department of King Abdulaziz University Hospital, one of the Teaching Hospitals of the College of Medicine, King Saud University. We hope that you'll have a smooth, enjoyable and fruitful stay in the Department in taking up the ORL Course 432.

We further hope to see and have you in one of the University’s continuing medical education in the field of Otorhinolaryngology and Head and Neck Surgery specialty and/or to be part of the Department in the future.

Again, have a nice and fruitful stay and good luck.

ORL DEPARTMENT
College of Medicine
King Saud University
King Abdulaziz University
Riyadh, Saudi Arabia
OVERVIEW
ORL Department
King Abdulaziz University Hospital

King Abdulaziz University Hospital is the first University hospital ever founded in the Kingdom of Saudi Arabia, situated in the heart of Riyadh, Saudi Arabia, a proximity to all crowded parts of the town that have added enormously to the flow of patients to the hospital. It is considered the leading health centre that provides patients’ care.

Though, originally, it is a general hospital that was opened to public in 1375 and named after to HRH Prince Talal bin Abdulaziz in honor and recognition as a founder of this hospital. Few years later, administration was taken over by the Ministry of Health with the same high standard of care being maintained in 1380.

College of Medicine at King Saud University (KSU) then was established, agreement was concluded between them (KSU) and Ministry of Health that, it is necessary to determine a teaching hospital, affiliated to College, where clinical training Doctors could be embarked upon and further teaching to College of Medicine which will be under the supervision of specialized Teaching Staff. Also, carrying out research while maintaining of high standard of patients’ health care.

For these purposes, the hospital later known as King Abdulaziz University Hospital as mentioned, proved to be perfect and fitting choice on the above undertakings. It was as well acknowledged to be one of the centres available for medical education and training in the country. King Khalid University Hospital played an important role in carrying these undertakings which is under the umbrella of King Saud University and was inaugurated in 1402 and all administrative functions and offices are in this hospital.

In spite of the overwhelming recognition attained by University, enhancing its continuing medical education programs has been given a weight and importance with its Diploma, Fellowship and Subspecialty in different fields of studies including Otolaryngology, Neurotology, Rhinology, Facial Plastic, Pediatrics, Head and Neck Surgery and placing its consideration on the necessity to be abreast to the fast pace of Global modernization, its new developments and discoveries.

Since, King Abdulaziz University Hospital has been delegated on the Otolaryngology and Head and Neck Surgery mainly when it comes to specialty’s cases and teaching aspects, all the training program concerning the Diploma, Fellowship and Sub-Specialties were planned, formulated, trained, supervised and imposed in here and in conjunction of King Khalid University Hospital when it comes to administrative aspect e.g. final approval of the Dean on Candidates marks, certificate issuance etc. as mentioned above.

We cannot deny the fact that the University played a vital role in the realization of one of the Country’s objectives, to be acknowledged, reknowned, and at par with other Countries when it comes to Otolaryngology, Head and Neck Practice

Graduates of the University’s Fellowship have gone a long way, holding a prestigious position in their respective fields and continue to spread the ideals of the Fellowship’s

While, the University will kept its assigned task in guiding and building a better Training Program that will lead to the Countries betterment in the field of Medical Education.

<table>
<thead>
<tr>
<th>Course Title (Symbol and Number)</th>
<th>ORL Course 432</th>
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<tr>
<td>Course Name</td>
<td>Otorhinolaryngology Course (Medical Students)</td>
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<tr>
<td>Credit hours</td>
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Course Description

The Otorhinolaryngoly Course is a 5-week course per each set of students (2 weeks theoretical, 2 weeks clinical sessions and 1 week for examination) for fourth year Medical Students. It concentrates on the diseases of ear, nose, throat, head, and neck; its definitions, anatomy, physiology, etiology, pathology, investigations, complications and different modalities of treatment.

The course will be taught through interactive lectures, tutorials and clinical practical activities including: OPD Clinics, Bed Side Teachings, Pre- and Post- Operation Rounds, Operative sessions, Communication and Audiology sessions.

Further, there are 3 Cycles and a Summer Course per academic year. However, for the Summer Course, the discretion on whether to have a Summer Course in a particular academic year depends on the Department Board’s resolution and this will be likewise informed and endorsed to the Vice Dean of Academic Affairs of the University.

Course Objectives

1. To know the basic ENT anatomy and physiology.
2. To recognize assessment and management of common ENT diseases.
3. To know how to handle common ENT emergencies.
4. To handle simple ENT diagnostic instruments.
5. To be aware of common ENT operations.
6. To create an interest for further post-graduate study in ENT.

Teaching Format

1. Theoretical activities - Lectures.
2. Practical and Clinical activities.

Summary of Course Contents (over 5 weeks)

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<th>ACTIVITIES</th>
<th>OUTLINE</th>
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<td>I. Theoretical Activities</td>
<td>1. Lectures</td>
</tr>
<tr>
<td>(1) Clinics:</td>
<td>(Out-Patient Clinic (Consultants); Primary Clinics)</td>
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<tr>
<td>Main objectives:</td>
<td>- Examination for selected patients.</td>
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<tr>
<td>- Assessment and planning management of ENT patients.</td>
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<td>II. Practical Activities</td>
<td>(2) Communication and Swallowing Disorders Unit:</td>
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<tr>
<td>(page 14)</td>
<td>Main objectives:</td>
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<tr>
<td></td>
<td>Observation and discussion of common communication and swallowing cases and diseases.</td>
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<td></td>
<td>(3) Audiology Unit:</td>
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<td></td>
<td>Main objectives:</td>
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<tr>
<td></td>
<td>Observation and discussion of audiological investigations</td>
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### Outline

<table>
<thead>
<tr>
<th>CREDIT HOUR</th>
<th>TOPIC DESCRIPTIONS</th>
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| 1-hour | ORIENTATION  
- orientation of the ORL 431 course and the exams  
- ENT history and examination (in brief) |
| 1-hour | Ear I  
- anatomy physiology of the ear  
- gross anatomy of the external, middle and inner ears  
- nerve supply and earache (in brief)  
- physiology of hearing and balance (function of the Eustachian tube in brief) |
| 1-hour | Audiology  
- PTA, tympanometry and impedance (speech & ABR in brief)  
- vestibular tests in brief |
| 1-hour | Ear II  
- diseases of external ear and acute otitis media  
- congenital anomalies of the external ear (in brief), (protruding ear, preauricular sinus microtia and atresia)  
- wax, ear wash  
- otitis externa (classification and management)  
- acute otitis media (in detail) and recurrent acute otitis media |
| 1-hour | Ear III  
- chronic otitis media and middle ear operation  
- classification of chronic otitis media  
- Otitis Media Effusion, adhesive Otitis Media  
- Chronic suppurative otitis media - types and management  
- ear operation in brief (myringotomy, tube, tympanoplasty and mastoidectomy) |
| 1-hour | Ear IV  
- complication of acute and chronic otitis media  
- classification (extra cranial, cranial (temporal) and intra cranial)  
(in detail acute mastoidectomy and management) |
| 1-hour | Deafness  
- conductive hearing loss (causes and management)  
(onotosclerosis in brief)  
- sensorineural hearing loss (congenital and acquired), presbyacusis etc  
- management of SHNL (in brief) [hearing aids and cochlear implant in brief] |
| 1-hour | Vertigo  
- causes of vertigo (acute and chronic labyrinthitis, Meniere's disease, vestibular neuritis, positional vertigo, etc)  
- investigation of a dizzy patient (in short) |
| 1-hour | Facial Nerve  
- anatomy (course and branches)  
- causes of facial palsy (including Bell's palsy, middle ear complication, traumatic and Ramsy Hunt's syndrome) |
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<tr>
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| 1-hour      | Nose I - anatomy and physiology of the nose and paranasal sinuses  
- anatomy of the external nose and nasal cavity, paranasal sinuses  
(blood supply, nerve supply) in brief  
- function of the nose and paranasal sinus  
- congenital anomalies (in brief) (choanal atresia) |
| 1 hour      | Nose II - acute and chronic rhinitis  
- allergic and non-allergic rhinitis  
- vestibular and furunculosis  
- nasal polyps (allergic and antrochoanal) etc  
- radiology illustration (e.g., CT scan) |
| 1 hour      | Nose III - acute and chronic sinusitis (causes, clinical, and management)  
- fungal sinusitis (in brief)  
- complication of sinusitis (classification, management, and with special attention to  
the to the orbital complications, investigation and general treatment  
radiology illustration |
| 1-hour      | Nose IV - diseases of the nasal septum (DNS etc.)  
- epistaxis (causes, clinical and management)  
- turbinate hypertrophy  
- nasal operations (ESS, septoplasty, turbinate surgery) inshort. |
| 1 hour      | Pharynx I - anatomy of the pharynx and deep neck spaces (retro and parapharyngeal)  
- physiology (function of pharynx in brief)  
- acute and chronic pharyngitis (non-specific and specific) e.g., scarlet fever,  
infectious mononiasis, fungal, Vincent angina, diphtheria  
- Zenker diverticulat (in brief) |
| 1 hour      | Pharynx II - adenoid and tonsil diseases.  
- complication of pharyngeal diseases (Quinsy, para and retropharyngeal,  
Ludwig's angina) + Radiological illustrations)  
adenotonsillectomy (indications, complication and management)  
- differential diagnosis of membraneous tonsil. (in brief) |
| 1 hour      | Larynx I - anatomy and physiology of the larynx  
- gross anatomy, blood and nerve supply  
- congenital diseases of the larynx (in brief)  
(laryngomalacia, web, subglottic stenosis, and hemangioma)  
- benign swelling of larynx (Singer's nodule, polyps, granuloma, J. L. papillomatosis) |
| 1 hour      | Larynx II - acute and chronic laryngitis  
- non-specific laryngitis  
- specific laryngitis (acute epiglottitis, croup)  
- laryngeal paralysis (unilateral and bilateral) |
| 1 hour      | Communication and Swallowing I - physiology of swallowing  
- swallowing disorders  
- GERD |
| 1 hour      | Communication and Swallowing II - voice disorder  
- language disorder |
### ORL Course 432

#### Students Guide

<table>
<thead>
<tr>
<th>Topic</th>
<th>Details</th>
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| **Airway Obstruction** | 1 hour  
- causes of airway obstruction (congenital and acquired)  
- signs and symptoms |
| **Airway Obstruction II** | 1 hour  
- investigation of airway obstruction  
- radiology illustration  
- medical and surgical treatment  
- operations ( indication, procedure and complication) tracheostomy, cricothyroidectomy, intubation, choanal atresia repair etc., |
| **Head and Neck I** | 1 hour  
- A) Neck masses  
  - introduction, anatomy, diagnosis, differential diagnosis, some examples  
- B) Thyroid  
  - anatomy, thyroid nodule evaluation, thyroid cancer  
  - surgery and complications |
| **Head and Neck II** | 1 hour  
- A) Salivary glands  
  - anatomy, physiology (in brief)  
  - infection, autoimmune and tumours  
- B) Tumour of oral cavity  
  - Introduction  
  - Pre-malignant lesion, Leukoplakia etc.  
  - malignant lesion , SCCA |
| **Head and Neck III** | 1 hour  
- A) Tumour of pharynx  
  - Nasopharyngeal carcinoma  
  - Oro & hypopharyngeal carcinoma  
- B) Tumour of larynx  
  - Introduction  
  - laryngeal papillomatosis  
  - carcinoma larynx |
| **Trauma and FB I** | 1-hour  
- trauma to the auricle (laceration and hematoma)  
- traumatic perforation of tympanic membrane  
- F.B. ear  
  - fracture temporal bone  
- trauma to the nose, fracture nasal bone  
- septal hematoma  
- septal perforation  
- F.B. nose  
  - blow-out fracture  
- all with (radiological illustrations) |
| **Trauma and FB II** | 1-hour  
- F.B. pharynx and esophagus  
- perforation of esophagus  
- trauma to larynx (in brief)  
- F.B. tracheo-bronchial tree  
- Radiological illustration |

**Note:**
1. **Clinic: 1, 2, 3, 4** Building 3, Level 3 look for the Head Nurse for clinic distribution (**PHC**) Primary Care Building 5, level 3 (**OR**) Building 1, level 2 (**Audio**) Building 3, level 4 (**CSDU**) Building 3, level 4 (**Admission Clinic**) Building 3, Level 3.
2. Attendance sheet is with the staff in-charge of the corresponding clinic.
3. Attendance sheet should be made for each session and duly signed by the staff in-charge.
4. For O.R., present yourself to O.R. reception nurse before getting into the theatre for guidance & assistance.
5. All Clinical Sessions Starts (morning) Starts at 8:00 AM-12:00 (afternoon) starts at 1:00 to 4:00 PM.

1. Required Text(s)
   a. Ear, Nose and Throat (Latest Edition)
      By: W. Becker (published by Thieme).
   b. Lecture Notes of Diseases of Ear, Nose and Throat (Latest Edition)

2. Essential References
   a. Otorhinolaryngology Head and Neck Surgery, by Cummings
   b. Scott Brown’s Diseases of Ear, Nose and Throat, by Allan Kerr

3- Recommended Books and Reference Material (Journals, Reports, etc) (Attach List)
   b. The Laryngoscope.

4-.Electronic Materials, Web Sites etc
   a. Department’s internet website (www.entksu.org)
   b. Department’s Teaching Staff personal websites on University site.
   c. University and KAUH Library.
   d. Continuing Medical Education Unit of the ENT Department.

5- Other learning material such as computer-based programs/CD, professional standards/regulations
   CD's and materials prepared by seminar, workshops and conferences conducted by ENT department, which are available in the Continuing Medical Education Unit of ENT Department.
   Website of all the ENT Teaching Staff are available and open to all including the Students where portion of the information encoded are related to the Student’s affairs / about their lectures and even samples of the examinations both for the continuous assessment and final examination mainly for students’ guide and reference.
Examinations and Distribution of Marks

These are the examinations composition in each Cycle, namely:

A. Written

   1. 30% for the Multiple Choice Questions (MCQ) – 30-items/ Student has to choose the best answer, no true or false type of question. There are no negative marks in this examination, and each carry 1 mark per question.

   2. 40% for the Short Answer Questions (SAQ) – 20 items, each item carries 2 points - A clinical based questions.

B. Oral / Final Examination

   1. 10% Continuous Tutor Assessment to be held during one of the clinical sessions

   2. 20% for Objective Structured Clinical Exam (OSCE) with 20-items

      There are 2 sets of questions that carries 10% each

Correction of examination:

Written Examination - MCQ and SAQ

   1. MCQ - The correction of the (MCQ) is computerized (scanner). Although in each examination, a manual checking of 1 student’s examination paper will be done to ensure its veracity.

   2. While, the SAQ will be corrected by the Teaching Staff of the Department

Oral Examination Continuous Tutor Assessment and OSCE

The students garnered marks will be recorded and to be added in the written exam result to have the total mark out of 100%.

Summer class / Re-sit for Examination

Student who will fail in the usual Cycle, 1st Cycle, 2nd Cycle, 3rd Cycle, the Course is offered during Summer, otherwise there is an instruction from the Vice Dean of Academic Affairs and from the Department itself.

During the Summer Course, only clinical activities will be there though, as the usual manner there will be 2 examinations, the Continuous Assessment and the Final Examinations.

Complaint / Grievance from Students

Any complaint from the students specifically with regards to the examination results is properly handled
Basing on the protocol, students can raise their complaint

1. If concerns the exam results
   
   1.1. Raised the formal complaint within 15 days upon the result announcement.
   1.2. Raised to the Academic Department through Students Affairs
   1.3. The complaint will be raised to the Course Organizer / Undergraduate Director

Students have the three chances for exam result grievance/complaints during the whole academic year

2. If does not related to exam

   2.1. Report the incident within 5 working days
   2.2. Report will be forwarded to Vice Dean of Academic Affairs and Vice Dean of Female Affairs
   2.3. Refer the grievance and complains to Student Rights Committee
   2.4. Committee discuss and decide on the issue(s) within 15 days from the date of submission of the complaint
   2.5. The decision is announced to the stakeholders
   2.6. The decision will be a negotiable grievance within 15 days from the date of announcement

If the grievance cannot be solved, the committee refers the matter to the standing committee of the university to study and take actions.

The standing committee will raises the decisions to Dean of the College of Medicine, then the Dean raise the University concerned authority.

Ethics

All issues regarding the students and other issues are forwarded to the Department to discuss, the same manner that all the discussions and approval made by the administrative committees and sub-committee are discussed and approved

The same manner that if any issue regarding the ethics concerning the students, the followings are observed

1. Academic department raises misconduct report to development and quality unit and to Development and quality unit follow up the implementation of consideration and actions of student’s disciplinary committee

2. It also raise to the Vice Dean of Academic Affairs and Vice Dean of Female Student Affairs

3. The Vice Dean raise the misconduct report to Students’ disciplinary committee and likewise to the Development and quality unit follow up the implementation of consideration and actions of student’s disciplinary committee

GOOD LUCK