

**COLLEGE OF MEDICINE
HEALTH SCIENCES CENTRE
KUWAIT UNIVERSITY**

**UNDERGRADUATE STUDENT
HANDBOOK**

2025-2026

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Assistant Professor	Yousef Marwan, BMedSc, BMBCh, FRCSC
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Assistant Professor	Abdulaziz Ali Karam, MBBch BAO, FACS, FRCSC, MD
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Pharmacology & Toxicology	Saju Abraham, M.Sc., Ph.D.
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Medicine Khazna S.S. Al-Owaiji, B.Sc., M.Sc.

GENERAL KUWAIT UNIVERSITY INFORMATION

KUWAIT UNIVERSITY

The Kuwait University commenced teaching in October 1966 and provides undergraduate, graduate, and postgraduate education.

The Colleges of Kuwait University are spread over on three campuses: Jabriya, Shadadiya, and Shuwaikh.

The University follows the course unit system with two semesters in a year. The first semester starts in September and continues for about 18 weeks. The second semester also lasts for about 18 weeks and starts in February. The language of instruction at the College of Medicine is English.

The present Colleges (n = 16) in the University are:

1. Allied Health Sciences
2. Arts
3. Architecture
4. Business Administration
5. Dentistry
6. Education
7. Engineering and Petroleum
8. Graduate Studies
9. Law
10. Life Sciences
11. Medicine
12. Pharmacy
13. Public Health
14. Sharia and Islamic Studies
15. Science
16. Social Sciences

THE HEALTH SCIENCES CENTRE

Kuwait University Health Sciences Centre was established in 1982.

The Health Sciences Centre consists of the following Colleges:

- i) Medicine
- ii) Allied Health Sciences
- iii) Pharmacy
- iv) Dentistry
- v) Public Health

The Centre includes common facilities such as the Health Sciences Centre Library containing a large volume of books, journals, and audiovisual titles in addition to computerized literature searching facilities, English Language Unit.

The Health Sciences Centre was established with the objective to expand medical education in Kuwait and to create a community of health care professionals with high international standards.

THE COLLEGE OF MEDICINE

The College of Medicine (COM), Kuwait University, was established in 1973. The objective was to produce high-quality healthcare professionals playing a major role in the development and upgrading of Kuwait's healthcare system. Since its establishment in 1973, the College of Medicine has developed into an internationally recognized medical school, serving Kuwaiti nationals and the international expatriate population of Kuwait. The number of students enrolled in the program has increased over the years.

From 2000-01 academic year onwards, students of Health Sciences Centre were admitted to a common first year program. Students to various HSC Colleges, including the College of Medicine, were admitted based on their performance in the common year.

Since the academic year 2015-2016, students were directly admitted to the College of Medicine. The first-year students of Colleges of Medicine, Dentistry, and Pharmacy undertake a common curriculum, taught by the College of Medicine staff. As a prelude to this, the curriculum of the first year has been revised incorporating medically oriented basic science courses. A custom-built fully furnished clinical skills lab is now commissioned in the College of Medicine.

Since 2005-06, the College has moved into a PBL-based, systems and modules- oriented, case-triggered, and integrated undergraduate curriculum with early clinical exposure. The curriculum is divided into three phases, i.e., Phase I, Phase II, and Phase III. Phase I consists of the first two semesters (year1) of the Program and includes the following courses, i.e., English language, Biology, Biophysics, Biostatistics & Basic Epidemiology, Chemistry, Computers in Medicine, and Social Sciences. Phase II covers years 2 to 4 and it is planned on a system-based and student-centered principle emphasizing the need for self-learning. Evidence-based learning, small group teaching, problem-based learning (PBL) sessions, clinical skills learning sessions, and early clinical exposure are salient features of Phase II. After the successful completion of Phase II, students are awarded the degree of Bachelor of Medical Sciences (B.Med.Sc.) and are qualified to proceed to Phase III (clinical years) for three years (Years 5 to 7). Upon completion of Phase III, students are awarded an M.D. degree.

In addition to the teaching of medical students, the College of Medicine also offers various courses of studies for the students of the Colleges of Allied Health Sciences, Pharmacy, Public Health, and Dentistry. Furthermore, the academic staff members of COM actively participate in the teaching and training of Residents enrolled in various Kuwait Institute of Medical Specialization (KIMS) Board programs/specialties.

The College of Medicine also has an active Graduate Program towards MSc and/or PhD degrees in Anatomy, Biochemistry, Community Medicine, Microbiology, Pathology, Physiology, Pharmacology, and Nuclear Medicine.

Graduates with B.Med.Sc. degree are eligible to join any one of the MSc programs. They can also concurrently join a Master Program in Medical Sciences during Phase III of the M.D. program.

The COM campus is located in the center of the City opposite to one of the major hospitals in Kuwait with an up-to-date infrastructure and facilities to support an engaging educational, training, learning, and assessment facilities to all medical students. Research is among the important missions of the COM and is supported by almost 150 laboratories and the Research Core Facility. The COM building and the facilities within are under continuous inspection and monitoring by the construction and maintenance department with the help of well-trained staff and technical support.

The teaching facilities housed inside the modern five-story COM building include five lecture theatres, eight seminar rooms, five multi-discipline laboratories, a clinical skills laboratory as well as several demonstration, seminar, and conference rooms in the departments.

The departments that make up the body of the College of Medicine include Anatomy, Biochemistry, Community Medicine & Behavioral Sciences, Medicine, Microbiology, Nuclear Medicine, Obstetrics & Gynecology, Pediatrics, Pathology, Pharmacology & Toxicology, Physiology, Psychiatry, Radiology, Surgery, and Organ Transplant. A new dissection hall with state-of-art facilities for learning anatomy was inaugurated in September 2019.

The technical facilities available to academic staff and students for research and teaching are comparable to most established institutions elsewhere in the world. The College also maintains a full complement of highly qualified biomedical engineers to maintain and repair most scientific equipment.

In addition to the professional services provided by the clinical academic staff serving the major secondary and tertiary hospitals and specialized units, each department in the College of Medicine provides special services to the Ministry of Health, including consultation services in various hospitals, sophisticated diagnostic tests, and a variety of highly specialized procedures including Therapeutic Drug Monitoring and Toxicological Screening, as well as conducting seminars and workshops for the medical community.

The College of Medicine was awarded the prestigious Sheikh Hamdan Bin Rashid Al-Maktoum Award for the Best Medical College in the Arab World in 2012.

THE COLLEGE ADMINISTRATION

The Dean of the College of Medicine is the head of the academic and administrative structure of the College assisted by Vice Deans.

The Vice Dean for Clinical Affairs, Consultation, and Training is responsible for directing the College administration regarding budget matters, purchasing, staff and personnel affairs, and building maintenance.

The Vice Dean for Academic and Student Affairs is responsible for the educational programs, curriculum, and teaching activities of the College, as well as all matters related to students.

The Vice Dean for Research and Postgraduate Studies is responsible for all matters related to the College research including administration, service, evaluation, and planning. He/she also chairs the Area Committee for Postgraduate Studies in the College of Medicine and is responsible for supervising the graduate courses (M.Sc. and Ph.D.) offered by the College of Medicine in cooperation with the College of Graduate Studies, Kuwait University.

Additional administrative staff assists the Dean and Vice Deans in maintaining the administrative services including the Administration Manager, the Finance and Purchasing Manager, and other support personnel.

UNDERGRADUATE PROGRAMS

UNDERGRADUATE DEGREES OFFERED BY THE COLLEGE OF MEDICINE

The undergraduate degrees offered by the College of Medicine are:

Bachelor of Medical Sciences
Doctor of Medicine

B.Med.Sc.
M.D.

VISION, MISSION, VALUES AND OBJECTIVES OF THE COLLEGE OF MEDICINE

Vision:

To gain global recognition as a premier institution for innovative medical education, excellence in research, and impactful contributions to healthcare and community services.

Mission:

The mission of the College of Medicine is to foster professional excellence by imparting the knowledge of human health and disease, promoting preventive care and healthy lifestyles, cultivating social accountability, addressing global health challenges through a commitment to scholarship, service, and lifelong learning. The college integrates research and academic development while actively sharing knowledge with the broader community.

Core Values:

At the College of Medicine, our values shape our commitment to excellence in education, research, and patient care:

- **Excellence** – Striving for the highest standards in medical education, research, and healthcare delivery.
- **Integrity** – Upholding ethical principles and professionalism in all aspects of our work.
- **Compassion** – Prioritizing empathy and patient-centred care to enhance well-being.
- **Innovation** – Advancing medical science through research, creativity, and technological progress.
- **Diversity & Inclusion** – Fostering an equitable, respectful, and supportive environment for all.
- **Collaboration** – Encouraging interdisciplinary teamwork among students, faculty, and healthcare professionals.
- **Service** – Committed to improving community and global health through education, outreach, and advocacy.

Objectives:

1. Education and Training

- Provide a comprehensive, evidence-based medical curriculum that seamlessly integrates clinical practice and research.

- Equip students with critical thinking, problem-solving, and leadership skills essential for medical excellence.

2. Research and Innovation

- Drive advancements in biomedical research to enhance patient care and healthcare systems.
- Foster active participation of students and faculty in pioneering medical discoveries and innovations.

3. Clinical Excellence

- Establish strong affiliations with teaching hospitals to offer immersive, hands-on clinical training.
- Promote interdisciplinary collaboration to ensure holistic and patient-centred care.

4. Community and Global Health

- Engage in outreach initiatives aimed at reducing healthcare disparities and improving public health.
- Prepare graduates to serve effectively in underserved and rural communities, addressing critical healthcare needs.

5. Ethical and Professional Development

- Cultivate a strong foundation in medical ethics, professionalism, and effective communication.
- Encourage lifelong learning and adaptability to navigate the evolving healthcare landscape.

LEARNING OUTCOMES

The graduating students should:

- have developed an attitude regarding the practice of medicine which is both scientific and humanitarian and be endowed with the high ethical standards required of a doctor;
- possess adequate knowledge of the structure, function, and development of the human body, the development of human abilities and personality, and the disease processes and other factors which may impair normal function;
- be able to relate clinical symptoms and signs to structural and functional changes so that the management of patients can be based on rational strategies and scientific knowledge;
- have learned how to elicit facts from a patient through the use of effective communication skills. They should have a good knowledge of those diseases which are an acute danger to life and of the more common diseases. They should recognize the limitations of their clinical knowledge and should be prepared, when necessary, to seek further help;

- have learned how to deal with patients and their relatives with sympathy and understanding;
- understand the effect of physical, social, and cultural environment on health and appreciate the responsibility of his/her profession for health promotion and disease prevention;
- know that any conclusions should be reached by logical deduction and be able to assess evidence both as to its reliability and to its relevance;
- recognize that continuing education is an essential prerequisite for the practice of high-quality medicine and that he/she should remain a student and contribute to the progress of medicine throughout his/her professional career;
- endeavor to remain abreast of the advancing frontiers of medical sciences globally and to apply these progressively in medical education, research, and services in Kuwait.

The academic staff in the College is constituted by experienced and talented biomedical and clinical scientists who exhibit devotion and dedication in striving to achieve the mission of the College of Medicine in the didactic, the laboratory, and the clinical settings.

The College of Medicine is committed to attaining and maintaining high standards in medical teaching and community health services and considers it vitally important that medical students, health professionals, and the public mutually share the benefits of these opportunities and achievements.

THE STRUCTURE OF THE MEDICAL PROGRAM

The College has adopted a system and PBL-based, case-triggered integrated curriculum for student intake from 2005 onwards. As a prelude to this, the curriculum of the 1st year has been revised, incorporating medically oriented courses, primarily taught by the College of Medicine staff.

The Curriculum is divided into three phases, i.e. Phase I, II, and III. Phase I consists of the first two semesters of year one. The courses of Phase I are common for students of the Colleges of Medicine, Dentistry, and Pharmacy of the Health Sciences Centre, Kuwait University. These courses include English language, Chemistry for Health Sciences, Biophysics, Introduction to Computers in Medicine, Biology for Health Sciences, Biostatistics and Basic Epidemiology, and Electives.

After the successful completion of Phase I, students will proceed to Phase II and covers the years 2 to 4 (semesters 3 to 8) of the medical curriculum. The students are awarded the B. Med. Sc. degree at the end of the Phase II Program. The Phase II Curriculum is planned on a system-based student-centered principle, emphasizing the need for self-learning and student motivation. The system courses covered in Phase II are Infection & Immunology, Blood, Cardiovascular, Respiratory, Endocrinology, Musculoskeletal, Nervous System, Renal, Reproduction & Breast, and Digestive. In addition to the systems, there are two foundation block courses of 28 weeks at the beginning of Phase II to cover essential basic science topics, which may not be covered as part of system courses. Provision is provided for the students to have electives and Evidence-Based Medicine (EBM) during Phase II. Small group teaching, PBL sessions, training in Clinical Skills laboratory and early clinical exposure are salient features of the current curriculum in Phase II.

At the end of the successful completion of Phase II, students will proceed to Phase III. The duration of Phase III is three years (years 5 to 7). Throughout Phase III clinical PBL and activities delivered on Medical School Day are significant in terms of supporting student independent study during the three years, otherwise, the main activities are clinical and hospital-based. In all clinical activities, there are specific opportunities to integrate basic medical sciences with the clinical science being observed and practiced. Throughout the three-year period, about 30% of all scheduled weeks remain unscheduled for self-directed independent study. In year 5, students rotate through clerkships in Medicine, Surgery and Community Medicine. In addition, they take an elective course in Kuwait or abroad. In year 6, students rotate through clerkships in Pediatrics and Obstetrics & Gynecology, and subspecialties clerkships in Medicine and Surgery. In year 7, students rotate through clerkships in Psychiatry, Medicine and Surgery, followed by two Pre-Internships in Medicine and Surgery. After completion of Phase III, students are awarded an M.D. degree.

FIVE YEAR STRATEGIC GOALS (2025-2029)

- Education & Training
- Basic science and translational research
- Clinical Care and Service
- Community Partnership

EDUCATION & TRAINING

Goal 1: Maintain a learner-centered environment

Objectives:

1. Maintain high student satisfaction through learner input
Involve students in developing the curriculum and use their feedback to tailor courses/modules and ensure every course/module adds value to the students' education. The use of students' feedback will be vital to make changes in the curriculum that positively influence their experience. The students' feedback will also help to have the resources they need to succeed.
2. Emphasize active learning to foster learner engagement, critical thinking, and problem-solving ability
Active learning embraces a variety of teaching and learning techniques that include problem-based learning (PBL), case-based learning, simulation exercises, community-based exercises, self-directed learning, small group discussions, experiential learning, peer problem solving, interactive lecturing, and project-based learning, etc. The updated curriculum may include all these learning modalities.
3. Enhance opportunities for inter-professional collaboration
Inter-professional collaboration (IPC) is *an essential component in the delivery of comprehensive, safe, and therapeutic patient care*. The World Health Organization defines the IPC as “multiple health workers from different professional backgrounds working together with patients, families, caregivers, and communities to deliver the highest quality of care”. IPC involves doctors, nurses, pharmacists, clinic and hospital staff, social workers, public health professionals, and all others involved in the health of individuals and/or communities. Examples of methods of teaching used in design of interprofessional activities include Team-based learning (TBL), simulation, and student led interprofessional clinics.

Goal 2: Ensure adequate infrastructure for education

Objective:

1. Maintain the physical facilities commensurate with the number of students and staff

The college should have adequate facilities for lectures, PBLs, tutorials and practical classes to allow the educational objectives of the medical school to be achieved. This includes lecture theatres, auditoriums, PBL rooms, clinical skills labs, computers and audiovisual equipment, laboratories, laboratory equipment, and research, information technology and recreational facilities. The college should also have a library that maintains a collection of reference materials adequate to meet the curriculum and research needs of the students and the faculty staff. Supportive staff should be available to help the students. Access to computer-based reference systems should also be provided.

Clinical training facilities would include hospitals (adequate mix of primary, secondary, and tertiary), ambulatory services, clinics, primary health care settings, health care centers, and other community health care settings as well as skills laboratories. Facilities for clinical training should be evaluated regularly for their appropriateness and quality regarding medical training programs.

Goal 3: Emphasize the College of Medicine mission

Objectives:

1. Educate graduates prepared to practice patient-centered care, discover and advance biomedical and clinical knowledge, and be responsive to community needs

The graduates should be well-rounded doctors with the following qualities:

- i. Safe and effective clinicians – clinically capable, person-centered with sound clinical judgement
 - ii. Critical thinkers, scientists, and scholars with a thorough understanding of the social and scientific basis of medicine, to support clinical decision making
 - iii. Kind and compassionate professionals – sensitive, responsive, communicate clearly and act with integrity
 - iv. Partners and team players who collaborate effectively and show leadership in clinical care, education, and research
 - v. Dynamic learners and educators – adaptable and committed to lifelong learning
 - vi. Advocates for health improvement – able to impact the health of individuals, communities, and populations positively and responsibly
2. Educate stakeholders about KUCOM's mission and values to the state of Kuwait

The primary stakeholders include the administration of Kuwait University and the College of Medicine, the academic and supportive staff, and students. Other stakeholders include educational and healthcare authorities, representatives of the community, patients' societies, professional organizations, and graduates. Periodic meetings should be held with the stakeholders to educate them about the mission and values

of the college and their relevance to the state of Kuwait. Furthermore, feedbacks should be obtained from them using a standard format.

Goal 4: Continuous review and updating of the curriculum and assessment strategies

Objectives:

1. Continuous review and updating of the curriculum
A review of all teaching, training activities will be undertaken to explore courses/programs designed to help medical professionals maintain and upgrade clinical skills and knowledge, and foster professional development in procedural skills:
 - i. appropriate and judicious changes to the teaching modalities following rapid progress in ChatGPT AI, availability of online/digital platforms.
 - a. Additional effective teaching methods
 - i. Flipped classes
 - ii. Blended learning
 - b. Integrated clinical sessions / student presentations/ MSDs [Phase III]
 - c. Online & video sessions [Phase II, III]
 - d. Remote learning modules/sessions
 - ii. switching self-directed learning to 'supervised self-directed learning sessions [Phase II, III]
 - iii. introduction of 'elective pathways' to the graduating students in the final year
 - iv. *Clinical training*; establishment of a 'simulation center' for clinical training
 - v. extended clinical/procedural training sessions at the clinical skill laboratory
 - vi. innovative Evidence-Based education programs will be continuously renewed
 - vii. explore courses designed to help medical professionals maintain and upgrade clinical skills and knowledge, remain current with basic science research, and foster professional development in procedural skills.
2. Updating the assessment strategies
 - i. to plan for digital assessment strategy
 - ii. to review and approval of '*Learning Outcomes*' of all teaching sessions including clinical rotations [Phase III] to linking them to assessment through blue printing for quality assurance
 - o Review list of core diseases/clinical problems encountered frequently in primary care settings as out-patients
 - o List of important conditions that require immediate intervention (skills), i.e., 'emergency-skills'.
 - o Conditions having serious consequences in individuals and/or community (communicable/infectious, emerging/re-emerging) i.e.,

- ‘Preventive-medicine/ Infection control’. Linking these conditions with the learning level, i.e., year of training and performance/assessment levels (type of assessment)
- iii. to plan to introduce *Programmatic Assessment* component in Phase II and III
- iv. to introduce/provide reliable online self-assessment tools for the student self-learning activities
- v. to strengthen and formalize student feedback process, especially during Phase III
- vi. to review of assessment quality assurance/ reliability guideline

Goal 5: Develop and retain highly motivated and excellent faculty

Objectives:

1. Attract and retain high quality faculty by providing
 - i. Conducive environment
 - ii. Competitive salaries
 - iii. Opportunities for promotion
 - iv. Opportunities for funded research
2. Provide faculty development in education that is continually updated and responsive to faculty needs
 - i. Organization of seminars, symposia and conferences at the College of Medicine premises and Health Sciences Centre
 - ii. Provide financial support to attend and participate in International Conferences
 - iii. Opportunities for sabbaticals and study leave

Goal 6: Identification and interventions for students at risk of remediation

The following methods will be used to identify at risk students.

- i. Attendance
- ii. Formative assessments
- iii. Summative assessments and grades

The at-risk students will be advised appropriately by Students Affairs Office, faculty members as supervisors, and Student Counselling and Guidance Office.

Goal 7: Develop robust interprofessional collaboration

Objective:

1. Develop opportunities for interprofessional collaboration
Interprofessional collaboration in healthcare involves doctors, nurses, pharmacists, dietitians, and other healthcare professionals - they all work together to provide comprehensive patient care. By working collaboratively, professionals will share their expertise, make informed

decisions, and deliver integrated care or services that address the multiple dimensions of a patient's health and well-being.

Goal 8: Career Counselling for students

Objective:

1. Provide opportunism for career counseling to the students
The KUCOM has established a career counseling office to help medical students make informed decisions and plan their medical school years in the College and after graduation. In addition to this office, career counselling for the students will also be available through a variety of programs and workshops conducted by the student body KUMSA. The areas covered in the counselling include:
 - Student Advisory Program
 - Research opportunities
 - Career resources

BASIC SCIENCE AND TRANSLATIONAL RESEARCH

Goal 1: Increase research productivity

Objectives:

1. Increase sponsored research support
Efforts will be made to educate the faculty members and students about the funding bodies for sponsored research in Kuwait. The required help will be provided by the academic departments and Vice Dean Research Office in preparing the applications for funding and their follow-up.
2. Increase the number of publications in peer-reviewed and indexed journals and national/international presentations in conferences.
The research goals of the COM will be debated, formulated, written, and widely disseminated; every faculty member shall know and understand these goals. Identifying these goals should be a matter of high priority for the Vice Dean Research. Outside experts and stakeholders within Kuwait shall combine to prioritize the areas. Areas of value, which nevertheless have uniqueness, will be sought.

Goal 2: Strengthen collaborative research efforts across KU COM departments, the university, and the local and international community

Objective:

1. Increase collaborative research among faculty members and departments
The Departmental Research Committees and the College Research Committee under patronage of the Vice Dean Research Office should identify the areas of collaborative research and identify the faculty members to participate in such research across the departments of COM, the other colleges of KU and the local and international community.

Goal 3: Expand clinical research and translational science opportunities

Objectives:

1. Increase number of grants and contracts meeting the definition of Translational Science
2. Facilitate linkages with COM-affiliated investigators and sites to support mission-based research, medical education, and other research endeavors

Goal 4: Increase research activity and sponsored activity of faculty

Objective:

1. Increase the number of faculty with sponsored research portfolios

Goal 5: Emphasize research that addresses underserved communities

Objectives:

1. Increase grants for priority health concerns of communities COM serves, including elderly, rural, expats and underserved populations
2. Develop and implement platforms and mechanisms to translate the continuum of mission-based discovery into impactful outcomes

Goal 6: Implement workforce development programs in research

Objectives:

1. Increase research opportunities for medical students in all academic years
2. Expand graduate student programs to encompass growth of research, including clinical, behavioral and population health research

CLINICAL CARE AND SERVICE

Goal 1: Establish and strengthen relationships and clinical practice opportunities between community and full-time clinical faculty

Objectives:

1. Enhance the quality of clinical practice settings in the community
2. Identify and enhance collaborations with community practices

Goal 2: Develop a culture of service to the Department, College, University, Profession, and/or Community (local, state, regional, national, and/or international) among all COM personnel (faculty, students, and staff) in support of advancing the COM mission of service

Objective:

1. Develop a common culture of service activities throughout the KU COM

Goal 3: Deliver compassionate, excellent clinical care reflected in measures of value, quality, and outcomes; and patient experience, in concert with the COM mission

Objective:

1. Optimize the performance of the COM's clinical practices approach

COMMUNITY PARTNERSHIP

Goal 1: Develop and nurture community partnerships

Objectives:

1. Become the medical facility of choice
2. Develop loyalty on the part of college and facilities
3. Implement effective communications programs
4. Expand outreach to involve community stakeholders

Goal 2: Assure philanthropic support for COM in accomplishing our mission

Objectives:

1. Create scholarship opportunities for students
2. Create opportunities to strengthen the college's programs including faculty research, and research centers

Goal 3: Establish Kuwait University COM as a leader in the provision of continuing medical education opportunities

Objectives:

1. Provide expanded continuing education opportunities for faculty members and clinical tutors
2. Provide continuing education opportunities for health care professionals who practice primary care and family medicine
3. Provide continuing education opportunities for health care professionals who treat elders and who practice in primary health care centers

Goal 4: Establish formal partnerships with academic health centers and private community organizations that advance the mission of the COM

Objectives:

1. Develop criteria and checklist for establishment of formal partnerships with academic health centers and private community organizations
2. Develop partnerships with community-based organizations that provide experiential and service/learning opportunities for our students while advancing the COM mission
3. Optimize student community service hours and % of students providing community service to community partners

MEDICAL GRADUATE COMPETENCIES

The Kuwait University College of Medicine requires that all students must demonstrate the following competencies prior to graduating with the MD degree.

- 1. Medical Knowledge/Knowledge for Practice** - Knowledge of established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, as well as the application of this knowledge to health promotion, patient care and community service.
 - i. Apply established and emerging bio-medical scientific principles fundamental to health care for patients and populations
 - ii. Apply established and emerging principles of clinical sciences to diagnostic and therapeutic decision-making, clinical problem-solving, and other aspects of evidence-based health care
 - iii. Apply principles of epidemiological sciences to the identification of health problems, risk factors, treatment strategies, resources, and disease prevention/health promotion efforts for patients and populations
 - iv. Apply principles of social-behavioral sciences to provision of patient care, including assessment of the impact of psychosocial and cultural influences on health, disease, care-seeking, care adherence and barriers to and attitudes toward care
- 2. Interpretation of Medical Data/ Practice-Based Learning and Improvement** - Critically appraise literature, apply knowledge, and engage in scholarly activity.
 - i. Identify strengths, deficiencies, and limits in one's knowledge and expertise; be able to set learning and improvement goals
 - ii. Locate, appraise, and assimilate evidence from scientific studies related to patients' health problems
 - iii. Use information technology effectively to manage information and support their own education
- 3. Interpersonal and Communication Skills** – The effective exchange of information and collaboration with patients, their families, and health professionals.
 - i. Communicate effectively with patients, families, and the public/community, as appropriate, across a broad range of socioeconomic and cultural backgrounds and in sensitive and difficult communication situations
 - ii. Communicate effectively with colleagues within one's own profession or specialty, other health professionals, and health-related agencies
 - iii. Document patient encounters in a comprehensive, timely, and logical manner.

4. Patient Care and Clinical Skills - Patient-centered care that is compassionate, appropriate, and effective for the promotion of health in the community and the evaluation and management of disease.

- i. Describe and participate in care that is safe, effective, and efficient
- ii. Gather essential and accurate information about patients and their conditions through comprehensive history-taking, physical examination, and the use of laboratory data, imaging, and other tests
- iii. Make informed decisions about diagnosis and therapy based on patient information and preferences, use up-to-date scientific evidence, and clinical judgment to develop and carry out patient management plans
- iv. Treat, counsel and educate patients and their families with empathy and compassion to empower them to participate in their care and enable shared decision making
- v. Provide health care services to patients, families, and communities aimed at preventing health problems or maintaining health
- vi. Report any errors committed while taking care of patients
- vii. Interpret laboratory data, imaging studies, and other tests considered essential for advancement to graduate medical education
- viii. Knowledge of all medical, diagnostic, and surgical procedures considered essential for advancement to graduate medical education

5. Systems-based Practice/Health Care Systems and Society – The awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care.

- i. Describe the primary concepts of quality and safety in patient care
- ii. Participate in identifying system errors and implementing potential solutions
- iii. Describe the main elements of practice management and business principles, including cost awareness, as it applies to medicine

6. Professionalism - The commitment to fulfill professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.

- i. Compassion, integrity, accountability to patients, respect for patient privacy and autonomy, and respect for others
- ii. Responsiveness to patient needs that supersedes self-interest
- iii. Sensitivity and responsiveness to a diverse patient and healthcare team population, including but not limited to diversity in gender, age, culture, race, religion, and disabilities
- iv. The commitment to ethical principles in clinical practice, including but not limited to pertaining to provision or withholding of care, confidentiality, ethical practices, and informed consent

7. Interprofessional Collaboration - The ability to engage in an interprofessional team in a manner that optimizes safe, effective patient- and community-centered care.

- i. Establish and maintain a climate of mutual respect, dignity, diversity, ethical integrity, and trust on a healthcare team
- ii. Use the knowledge of one's own role and the roles of other health professionals to appropriately assess and address the health care needs of the patients and populations served
- iii. Interprofessional teamwork concepts to provide patient- and population-centered care that is safe, timely, efficient, and effective

8. Personal and Professional Development - The qualities required to sustain lifelong personal and professional growth.

- i. Develop and maintain personal wellness, including physical and emotional health
- ii. Healthy coping mechanisms to respond to stress and prevent burnout
- iii. Appropriate strategies for dealing with uncertainty and ambiguity

GENERAL UNIVERSITY REGULATIONS AS APPLIED TO THE COLLEGE OF MEDICINE

The Credit Hour (C.H.)

The Credit Hour is a criterion for specifying the study load which a student must take each semester and which he/she must carry over several semesters in order to be awarded a degree. The credit hour system regulations only apply to the Phase I program i.e., first two semesters of the B.Med.Sc. program. The Phase II Program (Years 2, 3, and 4) and Phase III program (Years 5, 6, and 7) clinical curricula have their special regulations.

The academic department which offers a particular course specifies the number of credit hours that the course is worth. The credit hour rating of a course is usually estimated based on one hour of theoretical study (i.e., a lecture) or at least two hours of applied study (e.g., a chemistry laboratory session) per week being equal to 1 C.H. All courses must extend throughout a complete semester.

Course Grades

- (i) Excellent: denoted by 'A' and divided into two categories:
 - 'A' is given 4.00 grade points
 - 'A-' is given 3.67 grade points
- (ii) Very good: denoted by 'B' and divided into three categories:
 - 'B+' is given 3.33 grade points
 - 'B' is given 3.00 grade points
 - 'B-' is given 2.67 grade points
- (iii) Good: denoted by 'C' and divided into three categories:
 - 'C+' is given 2.33 grade points
 - 'C' is given 2.00 grade points
 - 'C-' is given 1.67 grade points
- (iv) Pass: denoted by 'D' and divided into two categories:
 - 'D+' is given 1.33 grade points
 - 'D' is given 1.00 grade point
- (v) Fail: denoted by 'F' and is given zero
- (vi) I = Incomplete

PS The grades "C-, D+, and D" apply only to Phase I of the program.

Grade Point Average

The grade point average for a student during his/her University study at the end of his/her degree is calculated as given in the example below:

- (i) The number of credit hours for a course is multiplied by the grade point which a student obtains. This procedure is followed separately for each course which a student has taken (i.e., column B x column C) and given in column D.
- (ii) The results of column D are added together.
- (iii) The cumulative result of column D is divided by the total number of credit hours a student has taken (i.e., column B) to get the grade point average (column F).

Example:

A	B	C	D	E	F
Course	Credit Hours	Grade Point	B x C	Credit Hours Obtained	Grade Point Average
English 181	5	C = 2	10	5	
Chemistry 140	3	B = 3	9	3	
Biology 143	4	C+ = 2.33	9.32	4	
Elective 101	3	F = 0	0	0	
	15		28.32	12	1.88

Academic Advisor

Each student shall have an academic advisor who shall be a member of the College of Medicine. The advisor shall meet his/her students at prescribed times throughout the academic year and at any other times as requested by the students or as deemed necessary by the advisor. The advisor shall also acquaint himself/herself with all administrative, educational, and personal matters of the students to be in a position to encourage, explain, advise, guide, and warn the students, as appropriate, on any problem, which they may encounter during their career at the University.

Examination Procedures

The continuous evaluation shall take place each semester.

When assessing the Grade Point Average, the evaluation of a student shall be based on the courses, which he/she has successfully passed according to the required standards. For courses in which he/she fails, either he/she shall be required to repeat the courses or he/she may be allowed to resit the courses according to the University regulations/College regulations. A student is not allowed to repeat a course he/she studied previously and obtained a grade of "C" or above. When assessing the G.P.A of the courses, the student repeated, the new grade will be taken into account. The value of the scores in all the courses in which he/she succeeds or fails shall be counted in his/her grading. If a student fails to sit the exam, he/she gets an 'F' grade ("0" marks).

Cheating During Examinations/Assessments

A student found guilty of cheating during any form of evaluation procedure will be awarded a grade "F" for all the courses in that semester. In certain circumstances, a student found guilty of cheating may in addition be forbidden to register for any course during the next semester. *(In the case of a medical student, this means, essentially, that he/she loses a full academic year of two semesters).*

If a student is found guilty of cheating on a second occasion, he/she shall be expelled from the University and this action shall be recorded on his/her file.

Distinction Awards

- (i) A student who completes in any semester 15 credits or more and obtains a grade point average of 3.5 points or more, shall have his/her name placed on the distinction list, and the University, at the end of each semester, shall issue a list of these students and award them distinctions.
- (ii) A student who completes his/her study in the University with a grade point average of 3.67 points or more shall be awarded his/her degree with distinction provided he/she has completed his/her course within a maximum of 8 semesters (for the B.Med.Sc. degree) and a maximum of 14 semesters (for the M.D. degree) and did not obtain a mark of less than "C" in any course.
- (ii) The University shall not grant a degree to any student whose grade point average is less than 2.

ETIQUETTES OF USING COLLEGE OF MEDICINE TEACHING VENUES

1. Students should be seated before the beginning of the lecture. Tutors have the right to deny students access to the classroom if they are late.
2. Students should not leave the lecture hall before the end of the lecture without being excused by the lecturer.
3. Talking, drinking, and eating are strictly forbidden in the classrooms.
4. Mobile phones should be turned off during the lecture. No student is allowed to use mobile phones in the lecture theatre for any purpose.

Academic staff will report about students who do not adhere to these common courtesies to the Office of the Vice Dean for Academic and Student Affairs, for disciplinary action.

These measures are taken to ensure that the educational process is carried out smoothly for the benefit of all students and students who violate these guidelines will be subjected to disciplinary action.

DEMEANOR AND DRESS STANDARDS OF MEDICAL STUDENTS

All medical students are expected to observe the following guidelines:

Courtesy

- ☐ Greet others in hallways, elevators, and at work stations with a kind word or smile.
- ☐ Assist people in finding their way.

Respect

- ☐ Respect privacy and dignity.
- ☐ Knock and wait for a response before entering areas.
- ☐ Discuss confidential or sensitive information about patients only with those having a valid need to know and do so privately, never in public places.

Professionalism

- ☐ Present a positive image.
- ☐ Wear a name badge or name tag so that name is clearly visible.
- ☐ Limit eating, drinking, and smoking only to designated areas.

- ☐ Avoid personal conversations with colleagues when providing patient care.
- ☐ Make no inappropriate or negative comments about patients, co-workers, or physicians.

APPEARANCE

Hair

- ☐ Hair should be clean and neat.
- ☐ Hair may not be dyed with unnatural colors.
- ☐ Females: Shoulder length or longer hair shall be pulled back or covered.
- ☐ Males: Short and Well-groomed. Beards, sideburns and mustaches are allowed, but may not interfere with personal protective gear especially in the operating rooms.

Daily Hygiene

- ☐ Daily hygiene must include clean teeth, hair, clothes, and body including use of deodorant.
- ☐ Clothing should be clean, pressed, and in a good condition.

Nails

- ☐ Nails must be neatly manicured and clipped to ensure patient comfort and hygiene.
- ☐ Nails should not be polished.

Scents

- ☐ Male and female students should have a neutral scent.

Make-up

- ☐ Excessive make-up will not be allowed.

Permissible Jewelry

- ☐ A wedding set and one ring
- ☐ One simple chain bracelet
- ☐ A watch

Skirts

- ☐ Skirt length shall be no shorter than the knee and should not be tight fitting.

Necktie

- ☐ All male students should wear a necktie.

Pants

- ☐ Pants shall not be tight fitting.
- ☐ Jeans and denim pants of any color, spandex, leggings, athletic wear and sweat suits shall not be worn.

Laboratory Coat

- ☐ While in the hospital, labs and clinical skills sessions, students should wear clean, neatly pressed white coats.

Shoes

- ☐ Shoes must be clean in good condition.
- ☐ Heels shall be no higher than three inches.
- ☐ Casual sandals and sneakers shall not be worn.

Other

- ☐ Sunglasses are to be worn indoors only if prescribed by a physician or required for the job.
- ☐ T-shirts and caps are not allowed.

REGULATIONS ON STUDENTS' GRIEVANCES ON ASSESSMENT/FINAL EXAMINATION RESULTS

1. Students who have grievance about their grades in an assessment/final exam can review their answer scripts/grades.
2. Students with grievance should submit a written petition to the Vice Dean for Academic and Student Affairs within two working days from publishing the result, preferably specifying the grievance.
3. Upon approval of the petition by the Vice Dean for Academic and Student Affairs, for Phase III programs the Chairman/Chairperson of the concerned Department will discuss the answer scripts/grades with the students. As for Phase I and II programs, the Chairman of the concerned Examination Committee will discuss the answer scripts/grades with the students.
4. Those students who fail to submit the written petition within the stipulated period, as stated in item (2), will forfeit their rights to view their assessment/final examination scripts/grades.



HEALTH SCIENCES CENTRE

COLLEGE OF MEDICINE

GUIDELINES FOR USE OF ONLINE SOCIAL NETWORKS FOR MEDICAL STUDENTS

- I. Overview**
- II. Scope**
- III. Definitions**
- IV. Guidelines**
- V. Implementation**
- VI. References**

I. OVERVIEW

Online social networks such as Facebook, LinkedIn, Twitter, Myspace, etc. have taken on increasing importance in both personal and professional life. These social media offer unique opportunities for people to interact and build relationships and have great potential to enhance interpersonal and professional communication. At the same time, these social media open new risks associated with inappropriate use which must be addressed through professionalism, training, guidelines, and appropriate corrective action when necessary. Medical students must be made aware of the public nature of social media and the permanent nature of its content.

Health professionals including medical students may not be aware of how online posting can reflect negatively on medical professionalism or jeopardize their careers. (Chretien KC, et al. Online posting of unprofessional content by medical students. *JAMA* 2009;302:1309-1315).

Research shows that the use of social media websites by the medical profession is common and growing. Results of a national survey have shown that in the Patient-Doctor relationship and online social networks: medical students hit the survey with a rating of 94%. (Bosslet GT, et al. The patient-doctor relationship and online social networks: results of a national survey. *J Gen Intern Med* 2011;26:1168-1174).

Several cases of questionable behavior have been noted from the medical students, using social networks which violates the professional ethical guidelines. Many medical schools have adopted guidelines to regulate medical students' use of social media in relation to the medical profession and health care practice. This document has been prepared to address these issues.

II. SCOPE

These guidelines apply to all medical students of the College of Medicine in the Health Sciences Centre (HSC), Kuwait University, and all those who utilize the College of Medicine facilities, including undergraduate, graduate, and postgraduate students, who participate in social networking sites and online weblogs. Medical students and all those who utilize the College of Medicine facilities should follow these guidelines whether participating in social networks personally or professionally, or whether they are using personal or HSC computing equipment.

III. DEFINITIONS

- A. Social networking site:** spaces on the internet where users can create a profile and connect that profile to others (individuals or entities) to create a personal network. Examples include Facebook, Myspace, LinkedIn, Twitter, etc.
- B. Weblog:** a website, usually in the form of an online journal, maintained by an individual with regular commentary on any number of subjects. Can incorporate text, audio, video clips, and any other types of media.

IV. GUIDELINES

a. Considerations when using social media

- i. Conduct yourself online as you would be in public places. Your online identity is a projection of your behavior, and thus it is important to maintain professionalism.
- ii. Maintain the confidentiality of patients. Do not discuss clinical encounters openly online.
- iii. Avoid posting of clinical encounters online. This is also a breach of confidentiality. Whenever taking a photo of a patient, always ask the permission from the patient and the attending physician to ensure that you are within your rights as a medical student and document this permission.
- iv. Treat your colleagues with respect. Students should refrain from criticizing specific colleagues or health professionals online. If you feel as though you have been mistreated, you are advised to follow the formal process for addressing such matters.
- v. Harassment and discrimination remain unacceptable in professional and educational communities.
- vi. Behave online with the belief that there will be a permanent record of your actions.

b. Professionalism

The same professionalism principles and policies that apply to medical students in person apply to them online also. Medical students have a responsibility to help maintain public trust and confidence in their future profession.

Students will be subjected to disciplinary actions within the school for comments that are either unprofessional, violate patient privacy, or institutional discipline.

- i. Statements made by a student within online networks will be treated as if the student verbally made the statement in a public place.
- ii. Do not violate copyrighted or trademarked materials. If you post content, photos, or other media, you are acknowledging that you own or have the right to use these items.
- iii. Unprofessional postings by others on your page reflect very poorly on you. Monitor others' postings on your profile and work to ensure that the content would not be viewed as unprofessional. It may be useful to block postings from individuals who post unprofessional content.
- iv. Students are encouraged to alert colleagues to unprofessional or potentially offensive comments made online to avoid future indiscretions and refer them to this document.
- v. Students should refrain from posts that use institutional intellectual property, copyrights, or trademarks (e.g., HSC crest or hospital logo) without explicit written permission.
- vi. Students should not post lecture notes without the written consent of the concerned staff.
- vii. Do not post images of animal experiments held in the College of Medicine, Kuwait University on social media.
- viii. Students should not photograph and post the human body, in full or part in and around the vicinity of the Dissecting Room. No activity held in the Dissecting Room should be photographed and posted on social media.

c. Privacy

Social media sites cannot guarantee confidentiality whatever privacy settings are in place. Medical students are responsible for all content published in their names or in pseudonyms on social media. It is crucial to note that there is no such thing as a private social media network.

- i. Monitor the privacy settings of your social network accounts to optimize their privacy and security.
- ii. It is advisable that you set your privacy profile so that only those people to whom you provide access may see your personal information and photos.
- iii. Avoid sharing identification numbers on your personal profile. These would include address, telephone numbers, student identification number of the college, civil numbers, passport numbers or driver's

license numbers, birth date, or any other data that could be used to obtain your personal records.

- iv. Monitor others who may post photos of you and may “tag” you in each of the photos. It is your responsibility to make sure that these photos are appropriate and are not embarrassing or professionally compromising. It is wise to “untag” yourself from any photos as a general rule and to refrain from tagging others unless you have explicit permission from them to do so.
- v. Maintain the privacy of colleagues, doctors, and other College staff when referring to them in a professional capacity unless they have given their permission for their name or likeness to be used.
- vi. Medical students must recognize that actions online and content posted may negatively affect their reputations among their doctors, patients, and colleagues and may have consequences for their medical careers and can undermine public trust in the medical profession.
- vii. Regularly search using one’s name, a vanity search (e.g., Google search) to identify newly published content which can be professionally inappropriate under the students’ [names in the website].

d. Confidentiality

The publication of private patient information on social media online is a breach of confidentiality.

- i. Online discussions of specific patients should be avoided, even if all identifying information is excluded. It is possible that someone could recognize the patient to which you are referring based upon the context.
- ii. Under no circumstances should photos of patients or photos depicting the body parts of patients be displayed online unless specific written permission to do so has been obtained from the patient. Remember, even if you have permission, such photos may be downloadable and forwarded by others.
- iii. Consent obtained for educational purposes does not extend to consent for public dissemination, and such publication would cross a clear red line

e. Social media in educational and clinical settings

Refrain from accessing personal social networking sites while attending the College educational sessions or in clinical work areas.

V. IMPLEMENTATION

All medical students shall be made aware of this policy. The policy guidelines will be posted on the official HSC website so that its accessible to all. Moreover, at the time of student' enrollment and registration, a printed copy of the guidelines will be available in Students Affairs Office and at the medical students' association (KUMSA) office for their reference. Violation of this policy will result in disciplinary action to be taken by the administrative affairs as per College and University disciplinary rules and regulations.

VI. REFERENCES

1. General Medical Council (2013) Doctor's use of social media London, GMC
2. McGill Faculty of Medicine. Guidelines for medical students in the public forum. Montreal: McGill University; 2011
3. Guidelines for the appropriate use of social media and social networking in medical practice. Rhode Island, Department of Health; 2013
4. IUSM Guidelines for online social networking. Indiana University, School of Medicine
5. Social networking and the medical practice, Guidelines for physician, office staff and patients; Ohio State Medical Association; 2010
6. Using social media: practical and ethical guidance for doctors and medical students. British Medical Association
7. CFMS guide to Medical Professionalism: Recommendations for social media. CFMS 2013
8. Professionalism in the Use of Social Media by John W. McMahon Sr., MD, Chair.

THE DEGREE OF BACHELOR OF MEDICAL SCIENCES (B.Med.Sc.)

THE DEGREE OF BACHELOR OF MEDICAL SCIENCES (B.Med.Sc.)

1. All candidates for the degree of Bachelor of Medical Sciences (B.Med.Sc.) must have satisfied the entrance requirements for the College of Medicine.
2. The program of study and assessments shall be divided into Phase I and Phase II programs.
3. On the recommendation of the College of Medicine, after considering the reports of the examiners, the degree of Bachelor of Medical Sciences (B.Med.Sc.) shall be awarded. Candidates who have an outstanding performance in the program as a whole may be awarded the degrees with distinction.
4. The program of study and subjects of the examinations shall be those prescribed by the Curriculum, Assessments, and Admissions Committee.
5. Assessments of performance during the program/course and end-of-year final examination shall be taken into account in determining the results of the final examinations.
6. A student who fails to satisfy the examiners in the final examinations of Phase II may be permitted to present himself/herself for resit on such terms as the College Council may prescribe on the recommendation of the Board of Examiners. Such a student shall be awarded a grade "C" if he/she satisfies the examiners on his/her resit examination.
7. Satisfactory attendance of classes and progress in performance are prerequisites for admittance to all examinations
8. Students of the Phase II program, who are prevented from appearing in the final examination will be awarded an "F" grade (0' marks) and they are not eligible to appear for the resit examination. Students who are prevented from the final examinations will repeat the year. If they are already repeaters, they will be dismissed from the College of Medicine.
9. A mark of zero and the grade "F" shall be given for any examination which is missed without proper excuse.
10. Students who absent themselves from the final examination (full/part) without prior permission of the Dean/Vice Dean for Academic and Student Affairs will not be allowed to appear in the resit examination.

Admission Requirements to the College of Medicine 2025-26

1. High school students who hold secondary school certificate (Science major), or its equivalent, with a minimum percentage of 85% in the high school marks.
2. Priority of admission will be given to applicants who have the highest equivalent Grade Point Average of the secondary school percentage and the results of aptitude tests as follows:
 - ☐ High School grades - 75%
 - ☐ Result of English language aptitude test - 15%
 - ☐ Result of Mathematics aptitude test - 10%

Promotion to the second semester of Year 1:

1. The student must pass all the courses in the first semester to proceed to the second semester.
2. The students who fail the final examination in up to two courses, at the end of the first semester will be given a resit examination within two weeks.
3. The maximum grade awarded for a passing student in this resit examination will be "C".
4. Students who pass the overall examination (midterm plus resit) will be promoted to the second semester.
5. Those students who have failed more than two subjects will not be given a resit examination.
6. The final course grade for the resit examination (both excused absence and resit due to failure) is computed in the same format as that of the final examination grade, including the midterm grades.
7. Students who fail in elective courses will not be given resit exams and they will not be promoted to the second semester.
8. Students will not be allowed to carry an **F/FA** with them, and all those students who have an unredeemed **F/FA** grade in any of the first semester courses should withdraw from the program.

Successful completion (passing) of the second semester of Year 1

1. The student must pass all the courses in the second semester to proceed to the second year.

2. Students with 'F' grades in one or two courses, at the end of the second semester will be offered a resit examination(s), normally within two weeks.
3. The maximum course grade awarded for a student following this resit examination will be "C".
4. Students who gain a passing grade on the course following the resit examination(s) will be promoted to the second year.
5. Those students who have failed more than two subjects will not be given a resit examination.
6. The final course grade for the resit examination (both excused absence and resit due to failure) is computed in the same format as that of the final examination grade, including the midterm grades.
7. Students who fail in elective courses will not be given resit exams and they will not be promoted to the second year.
8. Students will not be allowed to carry an **F/FA** with them, and all those students who have an unredeemed **F/FA** grade in any of the second semester courses should withdraw from the program, since the courses are not repeated.

Promotion to Second Year

To be able to be promoted to the second year:

1. The student must pass all the subjects of the first year, during the first and second semester after joining the College, and must achieve the required minimum GPA of 2.00 points out of 4.00 points.
2. Students who fail to obtain the minimum GPA of 2.00 points out of 4.00 points will not be promoted to the 2nd year.
3. The Admission and Registration Deanship may preserve the academic records and University numbers of students who fail or withdraw during the first year (first and second semesters). The students withdrawn or not allowed to continue in the College of Medicine will be allowed to apply as a new student, to any other College, except the Colleges of Pharmacy and Dentistry.

Regulations on failing and low GPA students

Those students who are unable to proceed to the second semester due to their failures in the first semester and those who are unable to get promoted to the second year due to inadequate/low GPA or failures in the second semester courses can withdraw from the first year courses and apply as new students

to any other Colleges except Dentistry and Pharmacy. Such students must consult the Office of the Dean of Admissions and Registrations to complete the admission formalities.

Admission Regulations for the Academic Year 2025-2026

The students to the College of Medicine will be admitted during the academic year 2025-2026 based on the following criteria:

1. High school students who hold a secondary school certificate (Science major), or its equivalent, with a minimum percentage of 85% in the high school marks.
2. Priority of admission will be given to applicants who have the highest equivalent Grade Point Average of the secondary school percentage, and the results of aptitude tests as follows:
 - High School grades - 75%
 - Result of English language aptitude test - 15%
 - Result of Mathematics aptitude test - 10%
3. To be able to be promoted to the second year, the student must pass all the subjects of the first year, during the first and second semesters after joining the University and must achieve the required minimum GPA of (2.00) points out of (4.00) points.
4. Students who fail to obtain the above GPA will not be promoted to 2nd year.
5. The maximum number of students, including non-Kuwaitis, admitted to the College of Medicine will be as follows:

Total students: (150)
(This number includes both government and all private school systems).
6. Any attrition from the admitted number of students during the academic year will not be replaced.
7. At the end of the first academic year, transfer from the Colleges of Pharmacy and Dentistry is allowed, in case of obtaining a cumulative GPA of (3.80) or higher, with fulfilling the rest of the transfer regulations.
8. All students admitted to the College of Medicine must register in the prescribed (30) credit hours courses during the first and second semesters of the first year.
9. If a student fails a course (either at the end of the first semester or at the end of the second semester) or fails to obtain the required GPA of

2.00/4.00 at the end of the first year, he/she will not be allowed to continue in the College of Medicine.

10. The Deanship of Admission and Registration may preserve the academic records and numbers of students who fail or withdraw during the first year (first and second semesters). The student withdrawn or is not allowed to continue in the College of Medicine, will be allowed to join another College as a new student, other than the Colleges of Dentistry and Pharmacy.

Transfer Regulations to the College of Medicine 2025-2026

First: General Rules:

- *The number of available student seats for admission to the College of Medicine is defined annually with the approval of both the College Council and KU Council. In case the number of admitted students exceed the defined number of available student seats, then transfer to the College will not be allowed for this academic year. In all cases, student transfer depends on the approval of the College council based on the capacity of the College each year, which is determined based on the number of new and continuing students and the number of the academic staff and seconded staff. The college is not obligated to allow the transfer annually.*
- *Priority for transfer will be given to the Dental and Pharmacy students.*
- Students transferred to the Colleges of Medicine and Dentistry from other colleges at Kuwait University are not entitled to transfer again between the Colleges of Medicine and Dentistry, as Kuwait University students are entitled to transfer to another college only once, according to Article 21 of the “Courses System Regulations”. Ministerial Resolution No. 2-2015.
- There will be no transfer to the clinical years (Years 5, 6, and 7) from the Colleges of Kuwait University or from other Universities.

Second: Transfer of HSC Kuwait University students from the Colleges of Dentistry and Pharmacy at the end of the first year.

- a. The student must pass all the prescribed academic courses for the first year, taught by the College of Medicine.
- b. The student must have a current minimum GPA of 3.80/4.00, Priority will be given to Kuwaiti students who satisfy the transfer regulations.
- c. The Dean of Admission and Registration will make the announcement for transfer, following the announcement of the results for the first year and promotion of the students to the second year, specifying the

number of available student seats, the first and the last day to receive the applications and the required documents.

- d. The transfer application along with the required documents shall be submitted to the Dean of Admission and Registration within the period specified in the announcement. Any application submitted before or after the specified dates shall not be considered.

Third: Transfer regulation applicable to Kuwait University Students in other Colleges

- a. In case the College Council decided to allow the transfer for the currently registered Kuwait University students, then the Dean of Admission and Registration will make the announcement for transfer, following the announcement of the results for the first year and promotion of the students to the second year, specifying the number of available student seats, the first and the last day to receive the applications and the required documents.
- b. The transfer application shall be submitted to the Dean of Admission and Registration within the period specified in the announcement. Any applications without the required documents will not be considered. Also, any application submitted before or after the specified dates shall not be considered.
- c. The student must have a current minimum GPA of 3.80/4.00 and priority will be given to Kuwaiti Students who satisfy the transfer regulations.
- d. The student must have passed 38 credit hours in the following science courses:
 - 1. Chemistry courses (110 & 111) + 114.
 - 2. Physics courses (121 & 125) + (122 & 127)
 - 3. Biology courses (101 or 103)
 - 4. Mathematics or Statistics (except Finite Mathematics 115)
 - 5. 10 credit hours in English courses or (6 credit hours in English courses + minimum 4 credit hours of Science Courses taught in English such as Biology or Chemistry (except Mathematics, Statistics, and Computer).
 - 6. 6 credit hours of University Elective Courses.
- e. Student must pass the English proficiency examination with 70% of marks to be eligible for transfer. The exam will be administered by the Health Sciences Centre (English Department) during the month of September.
- f. Students are admitted to the third semester of the College's academic program.

Fourth: Transfer of students between the Colleges of Medicine and Dentistry in Year 3 and Year 4

The regulations mentioned below are applicable to the current Medical/Dental students who were admitted to Kuwait University from 2019 onwards.

- a. Transfer is allowed at the beginning of the 3rd and 4th year.
- b. Transfer applications shall be submitted to the Vice Dean of Academic and Students Affairs of the concerned College at the end of the 2nd/3rd year.
- c. The student must have a current minimum GPA of 3.00/4.00 and priority will be given to those who have the highest GPA and to Kuwaiti students.
- d. Students must have passed all assessments and final examinations of the Phase II program with a grade of at least “B-”.
- e. A joint committee of the College of Medicine and the College of Dentistry will scrutinize the applications and decide on the eligibility to compete for the transfer, considering the available seats in both Colleges.

Requirements for Graduation

1. Passing all the courses prescribed by the College of Medicine is mandatory for student promotion to the following year/graduation.
2. No student is allowed to repeat any year of the B.Med.Sc. Phase II program more than once. However, 4th year students are allowed to repeat the 4th year twice. Students who repeat the 4th year twice are awarded B.Med.Sc. degree if he/she satisfies the requirements. **However, those students are not allowed to proceed to the clinical years (years 5 to 7).** They must leave the College of Medicine after repeating the 4th year twice (Ref. HSC bylaw item No. 13). If the students who repeat the 4th year twice, fail to pass the 4th year during the third time, they will be dismissed from the College of Medicine without any degree/certificate.
3. Any student granted one year leave of absence from the B.Med.Sc. Phase II program by the College of Medicine will be awarded an “F” grade and treated as a repeater.
4. Any student granted one year's leave of absence from the B.Med.Sc. Phase II program by the College of Medicine shall lose the right to

repeat that year of the program should they fail the year on their return.

5. Any student who is absent for one year from the B.Med.Sc. Phase II program or who does not attend the end of course assessments/final examination of any one year shall, on his/her return be treated as a repeat student as well as lose the right to repeat any subsequent year of the program which he/she might fail after his/her return, except the 4th year students of 2009 intake onwards of medical program.
6. A mark of zero and the grade "F" shall be given for any examination which is missed without proper excuse.
7. Students who are prevented from appearing in the final exams will be awarded an "F" grade ('0' marks) and they are not eligible to appear for the resit examination. Students who are prevented from the final examinations will repeat the year. If they are already repeaters, they will be dismissed from the College of Medicine, except for the 4th year students.
8. Students who absent themselves from the final examination (full/part), without prior permission of the Dean/Vice Dean for Academic and Students Affairs are not allowed to appear in the resit examination.
9. Any student who resits a final examination will take a "C" grade for each resit if he/she satisfied the examiners. Students who are appearing the resit examination due to excused absence from the final examination will get the actual grade.
10. There is no make-up examination following the final examination.
11. Those students who have excused absence according to the criteria outlined in the final examinations regulations can appear in the resit examination held in August/September and shall get the actual grade. However, if such a student fails the resit examination in August/September, he/she will repeat the year/be dismissed from the College, as appropriate. He/she is not given another examination should he/she fail the resit examination in August/September.

PHASE I OF MEDICAL PROGRAM: YEAR 1

PHASE I - CURRICULUM

Background

The Phase I curriculum consists of three components: the general University requirement, the English language study skills courses, and the science courses. The first component, the general University requirement, is intended to give students a broad background education, making them aware especially of their own society, welfare, religion, and heritage. The second component, the English language study skills courses, is intended to equip the students with the communication and study skills necessary to undertake preclinical and clinical programs. The third component, the science courses, provides the foundation in science necessary for a student to proceed to the preclinical and clinical programs.

1. Students must attend and pass all prescribed courses.
2. Students for any examination must enter the exam at the times and in accordance with the conditions prescribed by the General University regulations for examinations.
3. Satisfactory attendance of classes and progress in performance are prerequisites for admittance to all examinations.
4. A student shall only be considered to have satisfactorily completed the Phase I (semester 1 and 2 of Year 1) program if he/she has successfully achieved 30 credit hours in the courses specified by the College of Medicine and obtained a grade point average of not less than 2.00. This is a prerequisite for admission to the Phase II program (Year 2 of medical program).
5. No student is allowed to carry an **F/FA** grade into the Phase II program.
6. The required grade point average (GPA) for admission to the Phase II program shall be computed only from the prescribed courses of the Phase I program.

PHASE I PROGRAM (Two semesters)

First semester (*First Semester of year One*)

Course No.	Course	C.H.
14 88181	English 181	5
14 40 140	Chemistry for Health Sciences	3
14 00 141	Biophysics	3
	Elective	3
14 10 101	Introduction to computers in Medicine	1

Second Semester (*Second Semester of year One*)

14 88182	English182	5
14 20 143	Biology for Health Sciences	4
14 10 144	Biostatistics and Basic Epidemiology	3
	Elective	3
TOTAL C.H.		30

PHASE I PROGRAM COURSES OBJECTIVES

1. ENGLISH LANGUAGE

The English Language Program comprises of three compulsory courses (two course offered in year 1 and one course offered in year 2) based on an integrated skills approach to language learning, including listening, reading, speaking, writing and study skills. The objective of the program is to equip the students with the necessary language and study skills to complete their academic and professional studies.

COURSE DESCRIPTIONS

YEAR ONE, SEMESTER ONE

HSC ENGLISH 181

HSC English 181 provides Health Sciences Centre students with skills in composition, listening, speaking, and reading. Writing simple and extended definitions establishes the concept of the topic sentence. Instruction in limiting and supporting topic sentences, a key element in paragraph development, is given. Since writing reflects thought processes, the cognitive skills of sequencing, generalizing, synthesizing, and making inferences and judgments about information are incorporated into the writing program. Reading and listening, especially to extract information, are integral parts of the course. Academic and scientific/medical vocabulary is developed through reading. Using health sciences topics, communication skills are developed through listening and speaking.

YEAR ONE, SEMESTER TWO

HSC ENGLISH 182

HSC English 182, which builds on skills learned in HSC English 181, is designed to provide Health Sciences Centre students with skills in composition, listening, speaking, and reading. Paragraph organization is reviewed by means of writing paraphrases and summaries and writing five-paragraph essays further develops language skills. The cognitive skills of sequencing, generalizing, synthesizing, and making inferences and judgments about information are continued at a higher level than in HSC English 181. The course includes the broadly scientific rhetorical functions of process, definition, and comparison and contrast. Reading and listening, especially to extract information, are integral parts of the course. Academic and scientific/medical vocabulary is developed through reading and listening to authentic health sciences articles/lectures and discussions of these develop speaking skills.

Prerequisite: HSC English 181

YEAR TWO, SEMESTER ONE

ENGLISH 183

English 183 provides skills in composition, listening, speaking, and reading. Essay organization is reviewed by means of writing five-paragraph essays. The cognitive skills of sequencing, generalizing, synthesizing, and making inferences and judgments about information are incorporated into the writing program at a higher level than in HSC English 182. The course includes the broadly scientific rhetorical function of cause and effect. Students are introduced to research skills and are instructed in abstract, bibliography, and reference writing in order to produce a short research paper. Reading and listening to extract information are integral parts of the course. Academic and scientific/medical vocabulary is developed through reading and listening to authentic health sciences articles/lectures and discussions of these serve to develop speaking skills further. Students are required to give oral presentations to demonstrate their research and presentation skills.

Prerequisite: HSC English 182 and admission to relevant College

2. BIOPHYSICS

The general objectives are to provide the health sciences students with a good understanding of basic biophysics and its relevance to the health sciences.

3. CHEMISTRY FOR HEALTH SCIENCES

The course objective is to educate and train students with an adequate background in basic chemical principles of health sciences and provide understanding of fundamental organic and inorganic components of the human body. With this knowledge, students will be able to advance into Biochemistry and Molecular Biology, Clinical Chemistry and Pharmaceutical Chemistry as a health science profession.

4. INTRODUCTION TO COMPUTERS IN MEDICINE

Upon completion of this course the students should be able to:

1. Manage information on the computer in a systematic, hierarchically organized collection of units, such as files and folders;
2. Develop and demonstrate competence in using applications such as word processing, spreadsheets and power point;
3. Access and use the World Wide Web for professional purposes;

4. Follow established guidelines regarding electronic communication using email;
5. Select and use electronic resources and medical databases available in the network-based resources;
6. Use SPSS to manage, manipulate, display and perform descriptive analysis of a small and simple data set.

4. BIOLOGY FOR HEALTH SCIENCES

This is an introductory course for the students of Health Sciences Centre. It will cover some of the basic aspects of cell biology and its relevance to human health. With the knowledge gained through this course, the students of Health Sciences Centre should be able to advance into further understanding of basic Biomedical Sciences like Biochemistry, Molecular Biology, Microbiology and Physiology, and appreciate the role of cell Biology in human health.

6. BIOSTATISTICS AND BASIC EPIDEMIOLOGY

This course aims to provide health sciences students with the biostatistics quantitative measurement technique required to analyze and interpret health data. The course provides examples which are relevant to health and reflect real life situations. Emphasis in the course is placed upon bringing students to appreciate the relevance and role of biostatistics in health sciences. It also focuses on concepts, limitations and assumptions underlying biostatistics methods.

ATTENDANCE AND PROMOTION POLICIES FOR PHASE I PROGRAM – YEAR I

ATTENDANCE POLICY

- Attendance at all lectures, tutorials, workshops and practical is mandatory.
- Attendance will be compulsory at any other activity announced to be required.
- A student is allowed to sign the attendance sheet or scan the barcode for him/her only. The signing for another student or sending the barcode to another student is unethical and considered as cheating.

Student must check with the Student Affairs office regarding Absence notification and warning letters.

1. Chemistry, Biophysics, Biology, Biostatistics and Basic Epidemiology and Introduction to Computer in Medicine courses:

After 10% of Absences	–	First warning
After 15% of Absences	–	Final warning
After 20% of Absences	–	Failure

Missing 20% unexcused hours of class will result in an “F” grade

2. English Courses 181/182:

After 8 hours of Absences	–	First warning
After 12 hours of Absences	–	Final warning
After 16 hours of Absences	–	Failure

Missing 16 unexcused hours of class will result in an “F” grade

3. Elective courses:

After 3 hours	–	First warning
After 6 hours	–	Second warning
After 9 hours	–	“F” grade

F/A students are NOT eligible to take the final exam

Excused Absences:

All excuses need approval by the Vice Dean for Academic and Student Affairs.

- **Medical excuses:** The sick leave form will be available at the Office of the Vice Dean for Academic and Student Affairs. The completed sick leave form must be submitted to the Office of the Vice Dean for Academic and Student Affairs within two days of return to the class.
- **Death of a first-degree family member:** An absence may be granted because of the death of student's spouse, father, mother, siblings, grandfather, and grandmother.
- **Presentation at a conference:** An absence may be granted by the Vice Dean for Academic and Student Affairs to present a paper at a professional conference. Proof of acceptance of the paper by the conference organizers must be provided.
- **Leadership role excuses:** An absence may be granted to a student to represent the College of Medicine in a leadership capacity at a professional conference. Proof from the conference organizers must be provided.
- **Religious excuse:** An absence may be granted for a student to observe a religious holiday according to the policy of Kuwait University.
- **Court appearance:** An excused absence may be granted for a student to fulfill this civic responsibility.
- Missing class on the date of a graded assignment will not be accepted.

Promotion to the second semester of Year 1:

1. The student must pass all the courses in the first semester to proceed to the second semester.
2. Students with 'F' grades in one or two courses, at the end of the first semester will be offered a resit examination(s), normally within two weeks.
3. The maximum course grade awarded for a student following this resit examination will be "C".
4. Students who gain a passing grade on the course following the resit examination(s) will be promoted to the second semester.
5. Those students who have failed more than two subjects will not be given a resit examination.
6. Students who fail in elective courses will not be given resit exams and they will not be promoted to the second semester.
7. The final course grade for the resit examination (both excused absence and resit due to failure) is computed in the same format as that of the final examination grade, including the midterm grades.
8. Students will not be allowed to carry an 'F'/'FA' with them and all those students who have an unredeemed "F"/"FA" grade in any of the first semester course should withdraw from the program, since the courses are not repeated.

Successful completion (passing) of the second semester of Year 1

1. The student must pass all the courses in the second semester to proceed to the second year.
2. Students with 'F' grades in one or two courses, at the end of the second semester will be offered a resit examination(s), normally within two weeks.
3. The maximum course grade awarded for a student following this resit examination will be "C".
4. Students who gain a passing grade on the course following the resit examination(s) will be promoted to the second year.
5. Those students who have failed more than two subjects will not be given a resit examination.
6. Students who fail in elective courses will not be given resit exams and

they will not be promoted to the second year.

7. The final course grade for the resit examination (both excused absence and resit due to failure) is computed in the same format as that of the final examination grade, including the midterm grades.
8. Students will not be allowed to carry an 'F'/'FA' with them and all those students who have an unredeemed "F"/"FA" grade in any of the second semester course should withdraw from the program, since the courses are not repeated.

Promotion to the Second Year

Only those students who have passed all prescribed first year courses and have scored an overall GPA of 2.00 or above at the end of the first year will be promoted to the second year.

1. The student must pass all the courses and electives in the first and second semesters to proceed to the second year.
2. The students who fail the final examination in one or two courses, at the end of the first semester/or second semester will be given a resit examination normally within two weeks. The maximum grade awarded for a passing student in this resit examination will be "C".
3. Those students who have failed more than two subjects will not be given a resit examination.
4. Students who obtain a passing grade in the course(s) (based on the midterm(s) plus the resit examination(s) results) at the end of the first semester will be promoted to the second semester.
5. Students who fail in elective courses will not be given resit exams and they will not be promoted to the second semester or/ second year.
6. Students will not be allowed to carry an 'F'/'FA' with them and all those students who have an unredeemed "F"/"FA" grade in any of the first semester/ or second semester courses must withdraw from the College.

RESIT EXAMINATION

1. Students who absent themselves from the final examination without prior permission of the Dean/Vice Dean for Academic and Students Affairs will not be allowed to appear in the resit examination.
2. Students gaining a grade of "F" "D" "D+" "C-" in the course grade shall be permitted to take a resit examination for that course. The course grade will then be limited to a maximum score of 73% (C). Students who gain a

passing grade after the resit examination(s) will be promoted to the second semester.

3. The format of the resit examination will be similar to that of the final examination.
4. The final grade for the resit examination will be computed in the same format as that of the final examination grade, including the midterm grades.
5. In taking a resit examination, the student agrees that the score awarded for the resit examination will replace the score awarded for the final examination in the calculation of the course grade, even if the resit score is lower than the score obtained in the final examination.

Regulations on failing and low GPA students

Those students who are unable to proceed to the second semester due to their failures in the first semester and those who are unable to get promoted to the second year due to inadequate/low GPA or failures in the second semester courses can withdraw from the first year courses and apply as new students to any other Colleges except Colleges of Pharmacy and Dentistry. Such students must consult the Office of the Dean of Admissions and Registrations to complete the admission formalities.

ASSESSMENT/EXAMINATION STRATEGY AND REGULATIONS FOR PHASE I

Regulations on absences from Assessments/Examinations

1. There is a provision of a make-up assessment for those candidates who have a valid excuse granted by the Dean/Vice Dean for Academic and Student Affairs according to College of Medicine regulations. Excuses from appearing the assessments will be granted for the following reasons only:
 - a. Admission of the student to the Government hospital as an inpatient, with an authenticated report from the hospital administration.
 - b. Death of a first-degree family member (Grandfather, Grandmother, Father, Mother, and siblings) of the student.
 - c. Other extenuating circumstances approved by the Dean/Vice Dean for Academic and Student Affairs.
2. A make-up assessment is given to a student who has an approved excuse for missing assessments and will receive the actual grade obtained.
3. A mark of 'zero' (grade F) is given for any assessment (full/part) which is missed without proper excuse.
4. The student who is unable to appear in an assessment for any reason stated above must inform the office of the Vice Dean for Academic and Student Affairs of his/her reason for missing the assessment within two working days following the assessment.
5. Students who are prevented from appearing the end of course assessment in any subject, for any reason will forfeit their right to have a resit examination.

Assessment Regulations

The assessment/examination regulations for Phase I are as follows:

1. Course coordinators are responsible for organizing and conducting mid-term and final examinations of their respective courses.
2. Examination/assessment questions are contributed by the college members teaching the course and reviewed by the Year 1 examination committee.
These assessments are MCQs and are marked by a Scranton machine.

3. Students must get a pass grade of at least a “D” to move to the 2nd semester.
4. Students who fail in the final examination get one more chance “RESIT” to pass the course.
5. Students must pass in all courses to be promoted to the next level Year 2.

Phase I Examination Committee

The Phase I Examination Committee is appointed by the Dean’s Executive Committee and consists of members from the College of Medicine, Dentistry, and Pharmacy. The Committee is responsible to collect questions from the concerned course coordinators, analyze the question paper for the mid-term and final examinations. The result of the Phase I examinations must be endorsed by this committee before publication. The Committee is free to invite the course coordinators whenever necessary.

Grading Scale

The criteria for setting pass marks and grade boundaries for courses in

Phase I

<u>Mark split</u>	<u>Grade point</u>	<u>Grade</u>	<u>Category</u>
95-100	4.00	A	Excellent
90-94	3.67	A-	Excellent
87-89	3.33	B+	Very good
83-86	3.00	B	Very good
80-82	2.67	B-	Very good
77-79	2.33	C+	Good
73-76	2.0	C	Good
70-72	1.67	C-	Good
65-69	1.33	D+	Pass
60-64	1.00	D	Pass
Less than 60	0.00	F	Fail

PHASE II OF MEDICAL PROGRAMME – Years 2, 3 & 4

PHASE II - CURRICULUM

Background

Phase II Curriculum comprises of two blocks of Foundation, consisting of 30 weeks, 10 system blocks, and one elective course offered over a period of three years (6 semesters). A five credit hour English course (English 183) will be offered during the first semester of year 2. The curriculum is designed to provide student learning in integrated basic and clinical sciences using a variety of methods including a series of problem-based learning (PBL) cases, self-learning, didactic lectures, tutorials, laboratory exercises, and hospital visits aimed at stimulating active learning.

Themes of Curriculum

The Curriculum has been built on 4 themes:

1. Integrated Basic and Clinical Sciences (IBCS)
2. Clinical Competence (CC)
3. Professional Development (PD)
4. Public Health (PH)

Competencies

The features of the curriculum include an emphasis on self-learning, and an early introduction of students to clinical skills. Each system in the current curriculum has clearly stated goals for the following behavioral changes:

1. Knowledge
2. Skills
3. Attitude

Course Requirements - Phase II Curriculum

Course No.	Course	C.H.
05 88 183	English	5
05 50 303	Foundation Block I	11
05 50 307	Foundation Block II	11
05 50 306	Infection and Immunology	5
05 70 402	Blood	5
05 80 309	Musculoskeletal System	8
05 80 308	Endocrinology System	8
05 80 306	Cardiovascular System	8
05 80 307	Respiratory System	8
05 30 312	Nervous System	8
05 80 404	Renal Module	6
05 00 406	Elective	2
05 75 311	Digestive System	8
05 80 403	Reproduction & Breast	6
Total C.H.		99

The grand total credit hours for the Bachelor of Medical Sciences (B.Med.Sc.) Program is 129, comprising 30 C.H. of Phase I and 99 C.H of Phase II program.

DESCRIPTION OF ORGAN-SYSTEMS MODULES, PHASE II

During Phase II there is an integrated study of nine organ system modules plus an elective, English Language, and two Foundation Block courses.

Each organ system module is 5-9 weeks long with a module examination at its end. The modules are planned in a logical sequence either based on the more important pathological conditions or as an anatomical sequence. Either way, the course of study covers the most important problems related to the respective organ-system.

Below follows a very brief summary for each organ-system module:

- 1. Foundation Block I:** In this module, the students are introduced to basic important concepts and information in the Basic Medical Science subjects; anatomy, physiology, biochemistry, social demographic and health information (SDHI), medical statistics & epidemiology. In addition, students also get 5 CH of English. The knowledge in these subjects prepares students for system-based learning later in Year 3 and Phase III.
- 2. Foundation Block II:** The students are introduced to additional basic important concepts and information in the Basic Medical Science subjects; microbiology, pathology, pharmacology, and psychology. The knowledge in these subjects prepares students for system-based learning later in Year 3 and Phase III.
- 3. Infection and Immunology:** In this module, the major emphasis is on the basics of microbiology and immunology covering the important topics of infectious diseases, such as travel medicine, sexually transmitted infections and immunodeficiencies.
- 4. Blood:** The important concepts of hematology are introduced and illustrated with sequential conditions of the red cells, white cells, and platelets. Importantly, the diseases covered have special relevance to commonly encountered conditions in Kuwait.
- 5. Musculoskeletal:** In this module, the important anatomical areas are used to illustrate musculoskeletal disorders including those which most commonly affect residents of Kuwait.
- 6. Endocrinology:** The major endocrine disorders are considered from a pathophysiological view and related to specific organ-related pathologies and clinical features. The PBL cases selected are used to illustrate the far-reaching and diverse effects of endocrine disease.
- 7. Cardiovascular:** This module covers the important conditions of the heart, arteries, and venous system and includes the study of lymphatics.

Common to all organ systems, a Problem-based learning case is chosen for each week to illustrate some of the topics for study during that week.

- 8. Respiratory:** The weeks of study are related to the anatomical divisions of the functional respiratory system and during the weeks of integrated study important issues such as prevention and education related to important diseases are introduced and discussed.
- 9. Nervous:** The weeks are logically divided between the study of the central and peripheral nervous systems and their related functions with the more important disorders most commonly met.
- 10. Renal:** The role of the kidney in human morbidity and normal homeostasis is presented in an integrated and sequential way with PBL cases to illustrate the major themes for the weekly study.
- 11. Elective:**
- 12. Digestive:** The digestive system is presented in a logical sequence from mouth to anus with the more important disorders presented and discussed in manageable weeks of study. Importantly, and continuing through all the organ-systems, there are clinical skills sessions that support the study of the gastrointestinal system.
- 13. Reproduction & Breast:** The weeks of study are related to the anatomical divisions of the functional male and female genital system plus 1 week of on Breast tissue. Important anatomical structures are discussed in relation to function and disease in an integrated sequential way with PBL cases to illustrate the major themes for weekly study.

ATTENDANCE POLICY FOR PHASE II PROGRAM – YEARS 2, 3 and 4

- Attendance is mandatory for all lectures, tutorials, seminars, small group teachings, practical sessions, PBLs, clinical skill sessions, and hospital visits.
- Attendance will be mandatory for any other activity announced by the College.
- A student is allowed to sign the attendance sheet or scan the barcode for him/her only. The signing for another student or sending the barcode to another student is unethical and considered as cheating.
- Students who miss more than twenty percent of the Practical/Tutorials/ Seminars/Lectures are prevented from appearing in the final examination. Such students are not allowed to appear in the resit examinations.
- Students who are absent from two or more sessions of PBLs/Clinical skills/Hospital visits are not allowed to appear for the end of module assessment of the module where their third absence occurs and will be awarded with an "F" grade ('0' grade) for that module. Students who miss the first session of any of this activity will be issued with a first warning, and second and final warning will be issued when they miss the second session of PBLs/Clinical Skills/Hospital visits.
- The absence is calculated for the duration of the complete academic year and is not calculated on a module-by-module basis.
- Only the Dean/Vice Dean for Academic and Student Affairs has the authority to approve the excuses for missing PBLs/Clinical Skills/Hospital visits.

Student must check with the Student Affairs office regarding Absence notification and warning letters.

Excused Absences:

All excuses need approval by the Vice Dean for Academic and Student Affairs.

- **Medical excuses:** The sick leave form will be available at the Office of the Vice Dean for Academic and Student Affairs. The completed sick leave form must be submitted to the Office of the Vice Dean for Academic and Student Affairs within two days of return to the class.
- **Death of a first-degree family member:** An absence may be granted because of the death of student's spouse, father, mother, siblings, grandfather, and grandmother.

- **Presentation at a conference:** An absence may be granted by the Vice Dean for Academic and Student Affairs to present a paper at a professional conference. Proof of acceptance of the paper by the conference organizers must be provided.
- **Leadership role excuses:** An absence may be granted to a student to represent the College of Medicine in a leadership capacity at a professional conference. Proof from the conference organizers must be provided.
- **Religious excuse:** An absence may be granted for a student to observe a religious holiday according to the policy of Kuwait University.
- **Court appearance:** An excused absence may be granted for a student to fulfill this civic responsibility.

ASSESSMENT/EXAMINATION STRATEGY & REGULATIONS

PHASE II PROGRAM (YEARS 2, 3 & 4 OF MEDICAL PROGRAM)

CURRICULUM ASSESSMENT STRATEGY

Strategies have been based on the following principles:

1. To allow continuous summative and formative examinations
2. To encourage students to learn actively
3. To allow student promotion to the next level
4. To enable early identification of those students who are deemed likely to fail from the program
5. To provide remediation for weak students

General Description

The assessments includes an End of Module Examination for the Foundation blocks and for each system module, and three final Examinations (end of year examinations) at the end of each year: Phase II 2nd year final examination at the end of 2nd year includes three modules (Foundation Blocks I & II and I & I module), Phase II 3rd year final examination at the end of Phase II 3rd year includes five modules (Blood, Musculoskeletal, Endocrinology, CVS and Respiratory), and the Phase II 4th year final examination at the end of Phase II 4th year includes the remaining 4 system modules (Nervous System, Renal, Digestive and Reproductive and Breast module) and the elective. The Phase II year 4 final examination will be a comprehensive examination, which includes all system modules of Phase II (both years 3 and 4). The end-of-year final examinations are scheduled at the end of the academic year. External Examiners are present for the final examinations at the end of Phase II years 3 and 4. *Post hoc* Hofstee standard setting is determined for all assessments and the scores may be adjusted, if recommended after thorough review by the Phase II Examination Committee.

Themes

Assessments shall be aligned with the curricula outcomes and weekly learning objectives. 70% of the assessment will cover knowledge-based themes and the rest 30% will cover the remaining themes (CC, PD, and PH).

1. STRATEGY MAP

According to this strategy, the Curriculum map has been divided into three years.

PHASE II – YEAR 2, SEPT-JUNE

SEMESTER III

SEMESTER IV

FOUNDATION I (05 - 50 – 303) AND ENGLISH 183 17 weeks	Mid Semester Break	FOUNDATION II (05 – 50 – 307) 10 Weeks	INFECTION & IMMUNOLOGY (05-50-306) 5 Weeks	Exam Break	FINAL EXAM
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PHASE II – YEAR 3, SEPT-JUNE

SEMESTER III

SEMESTER IV

BLOOD (05-70-402) 5 Weeks	ENDO (05-80-308) 6 Weeks	MUSCULO. (05-80-309) 7 Weeks	Mid Semester Break	CVS (05-80-306) 7 Weeks	RESP. (05-80-307) 7 Weeks	Exam Break	FINAL EXAM MCQ OSCE/OSPE
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PHASE II – YEAR 4, SEPT-JUNE

SEMESTER III

SEMESTER IV

NERVOUS SYSTEM (05-30-312) 10 Weeks	RENAL (05-80-404) 5 Weeks	ELECT. (05-00-406) 3 Weeks	Mid Semester Break	DIGESTIVE (05-75-311) 8 Weeks	REPRO. & BREAST (05-00-403) 6 Weeks	Exam Break	FINAL EXAM MCQ OSCE/OSPE
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GRADING SCALE OF COLLEGE OF MEDICINE (Years 2 - 7)

Applicable from the academic year 2018-19

The criteria for setting pass marks and grade boundaries for Phase II and Phase III students

Mark split	Grade point	Grade	Category
90-100	4.00	A	Excellent
85-89	3.67	A-	Excellent
80-84	3.33	B+	Very good
75-79	3.00	B	Very good
70-74	2.67	B-	Very good
65-69	2.33	C+	Good
60-64	2.0	C	Good
Less than 60	0.00	F	Fail

Assessment and Examination Regulations

Phase II: Years 2, 3 and 4 of Medical Program - Assessments and Final Examinations

1.1 Assessments (End of Module Assessment) – Phase II Year 2 of Medical Program

1. Foundation blocks have a total of four assessments (two each in each semester).
2. The Infection and Immunology module has an-end-of module assessment at the end of the module.
3. The combined in-course assessments contribute 40% to the final mark for Year 2 of the medical program.
4. MCQs are used as an assessment format in the proportion as decided by the Examination Committee, giving a fair weightage to the themes covered.
5. There is a make-up assessment for those candidates who have valid excuses granted by the Dean/Vice Dean for Academic and Student Affairs according to the College of Medicine regulations. Excuses from appearing for the assessments are granted only for the following reasons:
 - a. Admission of the student to a Government hospital as an inpatient, with an authenticated report from the hospital administration;
 - b. Death of a first-degree family member (Father, Mother, Grandfather, Grandmother, and siblings of the student);
 - c. Other extenuating circumstances approved by the Dean/Vice Dean for Academic and Student Affairs.
5. Make-up assessment is given to a student when he/she is fit, but not later than the resumption of study (first week of the following module) using a format similar to the regular assessment.
6. Students are awarded their actual grades in a make-up assessment.
7. Phase II Examination Committee collects the examination questions from the System/Module Coordinators for review.
9. A post-test review of the questions and the exam is carried out based on item analysis and the feedback is provided to the system coordinators and Vice Dean for Academic and Student Affairs.
10. The examination is conducted by the Office of the Vice Dean for Academic and Student Affairs.

1.2. Phase II: Year 2 of Medical Program - Final Examination (End of Year Examination)

(A) English 183

1. English 183 final examination is conducted and graded by the English Language Unit independently according to the University grading scale.
2. Students who fail the English 183 examinations are given a resit examination at the beginning of the second semester.
3. Those students who fail the resit examination at the beginning of the second semester are allowed to continue in the program and are given another resit examination along with the end-of-year final examinations of Phase II Year 2 of the Medical Program.
4. Those students who fail the second resit examination have to repeat the English 183 course and examinations.
5. Students who fail to successfully complete the requirements of the English 183 course at the end of the repeat year are dismissed from the College of Medicine.

(B) Foundation blocks and I & I module

1. The pass mark is sixty percent.
2. Phase II Examination Committee collects and reviews examination questions from the System/Module Coordinators.
3. At the end of Phase II Year 2 of the Medical Program, there is a summative final examination, which contributes 60% to the final mark.
4. MCQs are used as a format in the proportion as decided by the Phase II Examination Committee; giving a fair weightage to the themes covered.
5. The student who is unable to appear in an assessment for any reason stated in 1.1.(5) must inform the office of the Vice Dean for Academic and Student Affairs of his/her reason for missing the examinations within two working days following the examinations.
6. There is no make-up examination following the final examination. However, those candidates who have excused absence according to the criteria outlined in item 6.2. (ii) below, can appear in the resit examination held in August/September and get their actual grade. However, if such students fail the resit examination in August/September, he/she repeats the year/dismissed from the College, as appropriate.

7. The students getting <60% total marks are qualified for a resit examination.
8. The resit examination is conducted in August/September.
9. The final grade for the resit examination (both excused absence and resit due to failure) is computed in the same format as that of the final examination grade, including the end of module course assessment grades.
10. The maximum final grade given to a passing student in the resit examination is 'C' (60% marks). However, the student taking a resit exam due to an excused absence is awarded the actual grade.
11. Those who fail in the resit examination are allowed to repeat the year only once.
12. Any student repeating Year 2 of the Phase II program, who subsequently fails the final examination is allowed to appear for a resit examination in August/September, but if he/she fails in this resit examination, he/she is dismissed from the Undergraduate Medical Program of the College of Medicine.

2. Phase II: Year 3 and 4 Assessments and Final Examinations

2.1 End of Module Assessments: Phase II year 3 and 4

1. Each system/module is assessed separately during the last week of each system.
2. The combined assessments contribute 50% to the end-of-year overall marks.
3. MCQs are used as an assessment format in the proportion as decided by the Examination Committee, giving a fair weightage to the themes covered.
4. There is a make-up assessment for those candidates who have valid excuses granted by the Dean/Vice Dean for Academic and Student Affairs according to the College of Medicine regulations. Excuse from appearing the assessment is granted only for the following reasons:
 - a. Admission of the student to the Government hospital as an inpatient, with an authenticated report from the hospital administration;
 - b. Death of a first-degree family member (Father, Mother, Grandfather, Grandmother, and siblings of the student);
 - c. Other extenuating circumstances approved by the Dean/Vice Dean for Academic and Student Affairs.
5. Make-up assessment is given to a student when he/she is fit to attend the examination using the format similar to the regular assessment.
6. Students are awarded their actual grades in a make-up assessment.
7. Phase II Examination Committee collects examination questions from the System Coordinators for review.
8. A post-test review of the questions is carried out based on item analysis and the feedback is provided to the system coordinators and Vice Dean for Academic and Student Affairs.
9. The examination is conducted by the Office of the Vice Dean for Academic and Student Affairs.

2.2. Final Examinations: Phase II Year 3 and 4

2.2.1. OSCE and OSPE: (years 3 and 4)

1. OSCE and OSPE are important components of the curriculum.
2. The OSCE and OSPE examinations cover the clinical and laboratory skills respectively.
3. OSPE is given at the end of each semester.
4. OSCE is given at the end of the year.

2.2.2. Final Examination

1. The Final examination will contribute 50% to the end-of-year overall final mark.
2. MCQs are used as a format, giving a fair weightage to the themes covered.
3. Questions are reviewed before and after the examination, based on item analysis by the Examination Committee.
4. The examination will be conducted as two papers (Paper I and Paper II) with a duration of 1 hour 45 minutes for each examination with a 30 to 60 minutes break. Both examinations will be held on the same day. The results will be published as a single examination.
5. There is no make-up examination following the final examination. However, those students who have excused absence according to the criteria outlined in item 6.2 (ii) below, can appear in the resit examination held in August/September and will get the actual grade. However, if such students fail the resit examination in August/September, he/she will repeat the year/dismissed from the College, as appropriate.
6. Students getting <60% total accumulated marks qualify for a resit examination.
7. Any student repeating the year 3 of Phase II program and who fails in the June final examinations shall be allowed to appear for the resit examination in August/September, but if he/she fails this resit examination, he/she will be dismissed from the Undergraduate Medical Program of the College of Medicine.
8. Any student repeating the Phase II, year 4 (student intake of 2009 onwards) and who fails in the June final examinations shall be allowed to appear for the resit examination in August/September, but if he/she

fails this resit examination, he/she will be given a third year to complete the requirements of B.Med.Sc. program. If he/she fails the third June final examinations, he/she will be given a resit examination in the following August/September, which will be his/her final chance to pass the B.Med.Sc. program. If he/she passes the third June final examinations or August/September resit examination, he/she will be awarded with the degree of B.Med.Sc. but will not be admitted to the clinical year program (Phase III program- 5th year). If he/she fails the third August/September resit examinations, he/she will be dismissed from the College of Medicine. (Ref. HSC by law item No. 13). (This bylaw is applicable to 2009 student intake onwards).

9. Students who fail **more than** two academic years in the Phase II program (year 2, 3 and 4 of the medical program) are not allowed to proceed to the clinical program. However, students who repeat the 4th year (2009 student intake onwards) will be given an extra year to complete the B.Med.Sc. program but will not be allowed to proceed to the clinical program. (Ref. HSC bylaw item No. 13).

3. Resit Examination

1. Resit examinations will be given only for the final examination.
2. A candidate who obtains a final grade <60% will be allowed to take a resit examination.
3. Any student who fails the resit examination may repeat the year once. If he/she fails in the resit examination at the end of the repeat year, he/she shall be dismissed from the Undergraduate Medical Program of the College of Medicine.
4. The format of the resit examination will be similar to that of the final examination.
5. The final grade for the resit examination will be computed in the same format as that of the final examination grade, including the end of module assessment grades.
6. The resit examination will be conducted during August/September.
7. A maximum of "C" (60% marks) grade will be awarded to a passing student in the resit examination.
8. Students who are appearing the resit examination due to excused absence from the final examination will get the actual grade.
10. A mark of zero and the grade "F" shall be given for any examination

which is missed without proper excuse.

11. Candidates who absent themselves from the final examination (full/part), without prior permission of the Dean/Vice Dean for Academic and Student Affairs will not be allowed to appear in the resit examination.

4. External Examiners

1. External examiners are invited to evaluate the process of the final examination.
2. An oral examination is given to those students who have scored 59% to be considered for possible promotion to Pass (C grade) and to those students who have scored 87%, 88% and 89% to be considered for possible promotion to Distinction (A grade). However, a student who fails two or more modules will not be eligible for the oral examination by the external examiners.

No oral examination is given as part of the resit examination.

5. Assessment/Examination Format

The following formats are used in the assessments and final examinations:

1. MCQ (Multiple Choice Questions)
2. OSCE (Objective Structured Clinical Examination)
3. OSPE (Objective Structured Practical Examination)

6. Regulations

6.1. Assessments

1. There will be the provision of a make-up assessment for those candidates who have a valid excuse granted by the Dean/Vice Dean for Academic and Student Affairs according to the College of Medicine regulations. Excuses from appearing the assessments will be granted for the following reasons only:
 - a. Admission of the student to the Government hospital as an inpatient, with an authenticated report from the hospital administration.
 - b. Death of a first-degree family member (Grandfather, Grandmother, Father, Mother, and siblings) of the student.

- c. Other extenuating circumstances approved by the Dean/Vice Dean for Academic and Student Affairs.
- 2. A make-up assessment shall be given to a student who has an approved excuse for missing assessments and will receive the actual grade obtained.
- 3. A mark 'zero' (grade F) will be given for any assessment which is missed without proper excuse.
- 4. The student who is unable to appear in an assessment for any reason stated above shall inform the office of the Vice Dean for Academic and Student Affairs his/her reason for missing the assessment within two working days following the assessment.
- 5. Students who are prevented from appearing the end of module assessment for any reason will forfeit their right to have a resit examination.

6.2. Final Examination

- 1. The pass mark is sixty percent.
- 2. Excused absence: Excuse from appearing in the final examination is granted by the Dean/Vice Dean for Academic and Student Affairs only for the following reasons:
 - a. Admission of the student to the Government hospital as an inpatient, with an authenticated report from the hospital administration.
 - b. Death of a first-degree family member (Grandfather, Grandmother, Father, Mother, and siblings) of the student.
 - c. Other extenuating circumstances approved by the Dean/Vice Dean for Academic and Student Affairs.
- 3. The student who is unable to appear in the final examination for any reason stated above must inform the office of the Vice Dean for Academic and Student Affairs his/her reason for missing the examination within two working days following the examination.
- 4. Students who absent themselves from the final examination (full/part) without prior permission of the Dean/Vice Dean for Academic and Student Affairs are not allowed to appear in the resit examination.

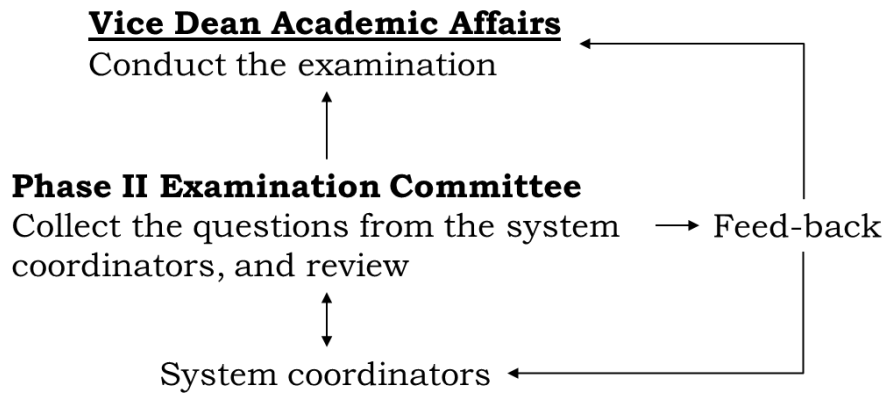
5. Students who miss a final examination or any component of it without a valid excuse as approved by the Vice Dean for Academic and Student Affairs are granted zero marks (F grade).
6. There is no make-up examination following the final examination.
7. However, those students who have an excused absence according to criteria outlined in 6.2. (ii), appear in the resit examination in August/September and get their actual grade. However, if such a student fails the resit exam, he/she repeats the year/dismissed from the College of Medicine, as appropriate. He/ She is not given another examination, should he/she fail the resit examination in August/September. The final grade in this resit examination is computed in the same format as that of the final examination grade, including the end of module assessment grades.
8. Students who are prevented from final examinations for any reason forfeit their right to have resit examinations.

7. Phase II Examination Committee

There are two examination committees for the Phase II program. One examination is responsible for year 2 and the second examination committee is responsible for years 3 and 4.

Phase II Examination Committees are appointed by the Dean's Executive Committee. The Phase II Examination Committees:

1. are responsible for End of Module Assessment and the Final examinations
2. collect questions from various systems coordinators according to the guidelines and examination blueprint
3. review the questions before the examination
4. prepare question papers and send them to the Vice Dean for Academic and Student Affairs for conducting the examination
5. review the questions based on item analysis after the examination and give feedback to the Vice Dean for Academic and Student Affairs and the System Coordinators
6. give feedback to students on their performance



THE DEGREE OF DOCTOR OF MEDICINE (M.D.)

THE DEGREE OF DOCTOR OF MEDICINE (M.D.)

1. The program of study and subjects of the examinations shall be those prescribed by the Curriculum, Assessments, and Admissions Committee.
2. Assessments of performance during the program shall be taken into account in determining the results of the examinations.
3. On the recommendation of the College of Medicine, after considering the reports of the examiners, the degree of Doctor of Medicine (M.D.) shall be awarded to successful candidates.
4. A candidate who fails to satisfy the examiners in the final examinations may be permitted to present himself/herself for resit on such terms as the College Council may prescribe on the recommendation of the Board of Examiners. Such a candidate shall be required to undertake further prescribed study and shall be awarded a grade "C" if he/she satisfies the examiners on his/her resit.
5. Satisfactory attendance of classes and progress in performance are prerequisites for admittance to all examinations.
6. Students who are prevented from appearing in the final examinations will be awarded with "F" grade ('0' marks) and they are not eligible to appear for the resit examination. Students who are prevented from the final examinations will repeat the year. If they are already repeaters, they will be dismissed from the College of Medicine.
7. A mark of zero and the grade "F" shall be given for any examination which is missed without proper excuse.
8. Candidates who miss a final examination or any component of it without a valid excuse as approved by the Vice Dean for Academic and Student Affairs will be granted zero marks (F grade).
9. Candidates who absent themselves from the final examination (full/part) without prior permission of the Dean/Vice Dean for Academic and Student Affairs will not be allowed to appear in the resit examination.
10. Satisfactory performance in all required components of internal assessments/evaluations will be a prerequisite for appearing in the in-course/end of course assessment/Final examination.

CLINICAL DEGREE PROGRAM

To obtain the degree of Doctor of Medicine (M.D.), students must (a) successfully complete the B.Med.Sc. program, and (b) successfully complete the three years of clinical study program prescribed by the College of Medicine.

Admission and Transfer Regulations and Requirements for the M.D. Program

1. Candidates must have obtained the B.Med.Sc. degree of Kuwait University.
2. Transfer into the M.D. program is not allowed.

Requirements for Graduation

1. Approved programs of study shall be those prescribed by the College of Medicine. A student shall not be held to have pursued an approved program unless his/her studies are certified as satisfactory by the College of Medicine. The passing of all the courses prescribed by the College of Medicine is mandatory for student promotion to the following year/graduation.
2. To qualify for graduation with the M.D. degree, a candidate must have pursued approved courses for not less than three years after obtaining the B.Med.Sc. degree and have satisfied the examiners. Except by special permission of the College of Medicine, these three years shall be the fifth, sixth, and seventh years following a candidate's admission to Kuwait University.
3. No candidate shall be allowed to repeat the fifth and sixth years of the M.D. clinical program more than once and the seventh year more than twice.
4. Any student granted one year leave of absence from the B.Med.Sc. Phase II program by the College of Medicine will be awarded an "F" grade and treated as a repeater.
5. Any candidate granted one year's leave of absence from the M.D. clinical program by the College of Medicine shall lose the right to repeat that year of the program should they fail the year on their return.
6. Any candidate who is absent for one year or who does not attend the in-course assessments and examination of any one year shall on his/her return be treated as a repeat student as well as lose the right to repeat any subsequent year of that program which he/she might fail after his/her return.
7. A mark of zero and the grade "F" shall be given for any examination which is missed in full or part, without proper excuse.
8. A student who has failed the theory or clinical examination will not be promoted to the following year/allowed to graduate. A clear pass in both the theory and clinical examination/OSCE is mandatory for the

promotion/graduation of the student. The theory marks cannot compensate for the shortage of marks in clinical examination/OSCE and the clinical marks cannot compensate for the shortage of marks in theory examination. The candidate must achieve a minimum of a pass grade in both theory and in the clinical examinations/OSCE to be eligible to be promoted to the following year/graduation.

9. Any candidate who resits a final examination shall take a "C" grade for each resit if he/she satisfied the examiners. The resit examination will be conducted using the regular examination format (theory, clinical/OSCE).
10. Any candidate who sits a supplementary examination shall take the grade achieved if it is his/her first attempt in that subject.
11. Supplementary examination is given to those students who have approved excused absence from sitting the examination.
12. Students who are prevented from appearing in the final examinations will be awarded an "F" grade (0 marks) and they are not eligible to appear for the resit examination. Students who are prevented from the final examinations will repeat the year. If they are already repeaters, they will be dismissed from the College of Medicine.
13. There will not be any make-up examination following the final examination. Those candidates who have excused absence according to the criteria outlined in the final examinations regulations can appear in the resit examination held in August/September and shall get the actual grade. However, if such students fail the resit examination in August/September, he/she will repeat the year/dismissed from the College, as appropriate. He/she will not be given another examination should he/she fail the resit examination in August/September.
14. A student who has failed the clinical examination will not be promoted to the following year/allowed to graduate. A student who has failed the theory examination will not be promoted to the following year/allowed to graduate. A clear pass in both the theory and clinical examination is mandatory for the promotion/graduation of the student.
15. Candidates who absent themselves from the final examination (full/part), without prior permission of the Dean/Vice Dean for Academic and Student Affairs will not be allowed to appear in the resit examination.

PHASE III OF MEDICAL PROGRAMME – Years 5, 6 & 7
CLINICAL YEARS

PLAN FOR PHASE III PROGRAM

YEAR (5TH YEAR) – FIRST CLINICAL YEAR – 33 WEEKS OF ROTATION

Clinical Skills Development Week (1 Week)	MEDICINE – 11 WEEKS (14 CH) 05 80 504 / 505	SURGERY – 11 WEEKS (14 CH) 05 75 504 / 505	COMM.MEDICINE – 7 WEEKS (6 CH) 05 10 504 / 505 ELECTIVES – 4 WEEKS (2 CH) 05 00 502	FINAL EXAM
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YEAR (6TH YEAR) – SECOND CLINICAL YEAR – 33 WEEKS OF ROTATION

MEDICINE – 5.5 WEEKS (6 CH) 05 80 604 / 605 SURGERY – 5.5 WEEKS (6 CH) 05 75 604 / 605	PEDIATRICS– 11 WEEKS (14 CH) 05 85 604 / 605	OBS. & GYNAECOLOGY – 11 WEEKS (14 CH) 05 90 604 / 605	FINAL EXAM
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YEAR (7TH YEAR) – THIRD CLINICAL YEAR – 31 WEEKS OF ROTATION

PSYCHIATRY 8 WEEKS (8 CH) 05 80 708 / 709	MEDICINE 8 WEEKS (18 CH) (including Pre-Internship) 05 80 706 / 707	SURGERY 8 WEEKS (18 CH) (including Pre-Internship) 05 75 706 / 707	Pre-Internship (7 Weeks) Orientation (1 week) Medicine (3 Weeks) Surgery (3 Weeks)	FINAL EXAM
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PHASE III - CURRICULUM

Course Requirements

FIRST CLINICAL YEAR (5th year)

COURSE NO.	COURSE	CH	
05 80 504	Medicine	7	
05 80 505	Medicine	7	
05 75 504	Surgery	7	
05 75 505	Surgery	7	
05 10 504	Community Medicine	3	
05 10 505	Community Medicine	3	
05 00 502	Elective	2	36

SECOND CLINICAL YEAR (6th year)

COURSE NO.	COURSE	CH	
05 80 604	Medicine	3	
05 80 605	Medicine	3	
05 75 604	Surgery	3	
05 75 605	Surgery	3	
05 85 604	Pediatrics	7	
05 85 605	Pediatrics	7	
05 90 604	Obstetrics & Gynecology	7	
05 90 605	Obstetrics & Gynecology	7	40

THIRD CLINICAL YEAR (7th year)

COURSE NO.	COURSE	CH	
05 80 708	Psychiatry	4	
05 80 709	Psychiatry	4	
05 80 706	Medicine	9	
05 80 707	Medicine	9	
05 75 706	Surgery	9	
05 75 707	Surgery	9	44

Total: 120 CH

Phase III Curriculum

In Year 5, three groups of students rotate through clerkships in Medicine (11 weeks), Surgery (11 weeks), and a combined period with Community Medicine (7 weeks) and an Elective (4 weeks). The Electives may be taken in Kuwait or abroad and are an opportunity to make more in-depth studies in an area that is a personal choice or experience overseas medical practice. The current curriculum is characterized by four major themes which run through the whole program starting in Phase II: Basic and Clinical Science Theme, Professional and Behavioral Development Theme, Public Health Theme, and the Clinical Competence Theme. Years 5-7 place a major emphasis on the latter theme. Throughout Phase III clinical PBL and activities delivered on Medical School Day are significant in terms of supporting student independent study during the three years, otherwise, the main activities are clinical and hospital-based. In all clinical activities, there will be specific opportunities to integrate basic medical sciences with the clinical science being observed and practiced.

Throughout the three-year period, about 30% of all scheduled weeks will remain unscheduled for self-directed independent study.

Core Clinical Competence and Procedural Skills and other Study Guidelines

Guiding students through their clinical studies are discipline-based core clinical case competencies published by each department. Together with the prescribed procedural skills and the theme outcomes, this makes the basis for the delivery of criterion-referenced assessments. For every scheduled session there are learning objectives provided that make absence due to on-call or certified absence less significant. All core clinical case competencies, procedures, and Medical School Day teaching/learning materials are delivered with their objectives and are included in all formative assessments.

Medical School Day

The format is flexible but will usually consist of two separate lecture sessions when more than one short lecture may be delivered in a single session. One seminar is organized often with a multi-disciplinary theme. Finally, each week a group of three students will organize the presentation of their seminar before senior staff with relevant expertise. All activities, except the student-led seminars, are supported by the provision of learning objectives and an overview of each session. In Year 5, there will be 33 Medical School Days, divided between the three participating departments. The program is non-repeating in a three-year cycle. The program will be published at least six months in advance.

Logbooks

Most clerkship rotations require that students complete a logbook of their activities to provide evidence and a record of sufficient attendance or participation in required activities.

Year 5 Medical Clerkship

As students enter Phase III they are expected to demonstrate sufficient clinical skills to partake fully in student-led clinical activities from the outset. Patient clerking, both on the wards and outpatients, note writing, presentations with patient demonstrations, and small group tutorials are expected to be stressed. Every week a PBL case will be studied, one set of clinical notes will be submitted and marked by a clinical tutor and all activities on Medical School Day are compulsory. A selected number of procedural skills is introduced in the Clinical Skills Lab.

Year 5 Surgical Clerkship

Surgical clerks will rotate through a series of postings in General Surgery, Urology, and Orthopedic Surgery. The major activity will be clinical activities based on hospital wards and will include attendance in the operating theatres, outpatient departments, patient clerking, student-led presentations and demonstrations, on-call, weekly PBL, and attendance for Medical School Days. There are a series of skills lab sessions planned to allow students to master prescribed procedural skills, such as male catheterization.

Year 5 Community Medicine

During the Community Medicine rotation, students will be prepared with lectures, learning topics, and small group tutorials for the task of carrying out a research project later. On two Medical School Days each rotation, topics important to Public Health will be presented and discussed. Additionally, students will attend field visits to a variety of Community sites for further experience in the field of Community Medicine.

Community-based Research: Students complete a community-based research project on Community Medicine or a health situation analysis in small groups, which is presented as a part of the student-led seminars on one Medical School Day each rotation.

Year 5 Electives

All students will complete a four-week elective of their own choice. Specific instructions will have been circulated to those students who wish to spend this time overseas or in the College of Medicine departments offering opportunities for an elective course. To guide these Elective activities, there will be set objectives written by each student and approved by a departmental and or overseas supervisor. Although the Elective will receive credits towards

their final grade, the completion of this period will be counted as satisfactory on submission of documented participation and production of a 2000 words summary showing evidence of successful fulfillment of the written objectives for the activities undertaken during this period.

Year 6

During this year two major specialties, Pediatrics and Obstetrics and Gynecology will offer clerkships, while there will be an opportunity for students to study relevant specialties and subspecialties in Medicine and Surgery to broaden their experience contributing to an eventual choice of specialty or subspecialty as a field of further study after graduation.

Year 6 Pediatric Clerkship

There will be a formal introduction to the clerkship rotation followed by clinical activities based on small groups in the pediatric units of the five hospitals used for teaching. The plan for weekly activities is similar to those outlined in the Year 5 clerkships.

Year 6 Obstetrics and Gynecology Clerkship

There will be a formal introduction to the clerkship rotation followed by clinical activities based in small groups in the maternity units of the hospitals used for teaching. The plan for weekly activities is similar to those outlined in the Year 5 clerkships.

Year 6 Surgical Specialties Clerkship

During this clerkship, 6 specialties/subspecialties will be covered. Anesthesiology & Critical Care Medicine, ENT, Neurosurgery, Ophthalmology, Plastic and Thoracic Surgery. Due to the diversity of these specialties, relevant and common topics will be covered. Medical students will rotate in blocks through Anesthesiology & Critical Care Medicine, ENT, and Ophthalmology while topics in the remaining 3 specialties will be theoretically covered in the form of clinical rounds. The contribution of Medical School Days and PBLs will be proportionate among the 6 specialties.

Year 6 Medicine Specialties Clerkship

A series of medical specialties will be scheduled for the student rotations in each clerkship. All four disciplines will contribute proportionately to Medical School Days with non-repeating activities for the whole three-year period.

Year 7

The final year of Phase III will be divided into two major periods (a) three clerkships for Psychiatry, Medicine, and Surgery; followed by (b) two Pre-Internship periods in Medicine and Surgery. The psychiatry clerkship will be driven by the inculcation of professional development and clinical competency within the context of the factual knowledge about the common psychiatric morbidity at the community and the general hospital level, expected from a fresh medical graduate.

ATTENDANCE POLICY FOR PHASE III PROGRAM – YEARS 5 to 7

Attendance

- Attendance is mandatory for all lectures, tutorials, seminars, small group teachings, practical sessions, PBLs, clinical skills lab sessions, Medical School Days, clinical sessions and hospital clinical rotations.
- Attendance will be mandatory for any other activity announced by the College.
- A student is allowed to sign the attendance sheet or scan the barcode for him/her only. The signing for another student or sending the barcode to another student is unethical, and considered a policy violation.

1. PBLs/Clinical Skills/Clinical sessions

- a. Students who are absent from these sessions without excuse will not be allowed to appear for the end-of-course assessment/final examinations and will be awarded zero mark ("F" grade) for that subject.
- b. Students who are prevented from appearing in the end-of-course assessments in two or more subjects will not be allowed to proceed to the subsequent rotations.
- c. Absence in clinical sessions and PBLs must be repeated, in case of a excuses approved by the Vice Dean for Academic and Student Affairs, in order to be admitted to the examination.

2. MSD activities/Practical/Tutorials/Lectures

- a. An absence exceeding 20% from these will prevent the student from appearing in the final examinations.
- b. The absence will be calculated for the duration of the whole program.
- c. Students prevented from appearing the final examinations due to excessive absence will not be allowed to appear for the resit examination.

3. Clinical Attachments

- Attendance at hospital rotation is mandatory.
- Each clinical discipline must implement a system whereby the daily attendance of each student on hospital rotations is strictly monitored. This should include, both 'sign-in' and 'sign-out' by the student under the supervision of the tutor/coordinator.

- If a student has an excused absence, this should be made up by repeat rotation unless recommended otherwise by the Department and approved by the Vice Dean for Academic and Student Affairs.
- Absence in clinical sessions must be repeated in case of accepted excuse in order to be admitted to the examination.
- Students who do not fulfill the attendance requirements will be prevented from appearing the end of block assessment and a mark of zero ("F" grade) will be awarded for that exam.
- Failure to make up any absence at hospital rotations, unless approved by the Vice Dean for Academic and Student Affairs, will prevent the student from appearing the end-of-course assessment/final examination in that subject. Students prevented from appearing in the final examinations due to excessive absence will not be allowed to appear for the resit examination.

Student must check with the Student Affairs office regarding Absence notification and warning letters.

Excused Absences:

All excuses need approval by the Vice Dean for Academic and Student Affairs.

- **Medical excuses:** The sick leave form will be available at the Office of the Vice Dean for Academic and Student Affairs. The completed sick leave form must be submitted to the Office of the Vice Dean for Academic and Student Affairs within two days of return to the class.
- **Death of a first-degree family member:** An absence may be granted because of the death of student's spouse, father, mother, siblings, grandfather, and grandmother.
- **Presentation at a conference:** An absence may be granted by the Vice Dean for Academic and Student Affairs to present a paper at a professional conference. Proof of acceptance of the paper by the conference organizers must be provided.
- **Leadership role excuses:** An absence may be granted to a student to represent the College of Medicine in a leadership capacity at a professional conference. Proof from the conference organizers must be provided.
- **Religious excuse:** An absence may be granted for a student to observe a religious holiday according to the policy of Kuwait University.

- **Court appearance:** An excused absence may be granted for a student to fulfill this civic responsibility.

METHOD OF IMPLEMENTATION OF CLINICAL REMEDIAL ROTATION

A. Procedures on Students with Excused Absence

Attendance at hospital rotations is mandatory and the students who have excused absence must remedy the missed rotation, before allowed to attend the end of block assessment.

Conditions for Compensation

1. The Department Chairperson is authorized to arrange a remedial period for those students who miss the clinical rotations **up to three days**, whose excuse has been approved by the Vice Dean Academic and Student Affairs. Such students will be required to do **one** on-call or weekend hospital rotation for **each day** of excused absence.
2. Upon successful completion of the remedial period, the Department must inform the Vice Dean Academic and Student Affairs about the completion of the remedial period.
3. Those students who are absent for **more than three days even with excuse**, will have to do the remedial period during the mid-semester break or at other times, to ensure proper training, in consultation with the concerned department, unless the Vice Dean approves to make any exemptions.

B. Procedures on Students with Unexcused Absence

Attendance at hospital rotations is mandatory and the students who do not fulfill the attendance requirements will be prevented from appearing the end-of-block assessment and mark of zero ("F" grade) will be awarded for that exam. Any student who is absent from clinical rotations or failed to report on time, without excuse are considered to have unsatisfactory clinical rotation.

Conditions for Compensation

1. The Department Chairperson is authorized to arrange a remedial rotation to those students who miss the clinical period, **without excuse up to two days**. Such students will be required to do **two** on-calls or weekend hospital attendance for **each day** of unexcused absence.

2. Upon successful completion of the remedial rotation, the Department must inform the Vice Dean for Academic and Student Affairs about the completion of the remedial rotation.
3. Those students who are absent for **more than two days without excuse**, unless the Vice Dean approves to make any exemptions, will have to do the remedial period **during the mid-semester break or at other times, prior to final examinations**, to ensure proper training, in consultation with the concerned department.
4. The report on students who have missed the clinical rotation, without excuse, for more than two days must be reported in writing to the Vice Dean for Academic and Student Affairs, as soon as possible, to take appropriate action.

TARDINESS RULES

- Students who report late to their duties by up to 30 minutes will be considered “Tardy”.
- Students who report late to their duties by more than 30 minutes will be considered “Absent”.
- Students who are “Tardy” for more than 3 times in a single clinical block will be considered “Absent” for one day and must present an acceptable excuse to the Vice Dean for Academic and Student Affairs office and be given a remediation/compensation plan.
- Each clinical department is responsible for implementing this policy and making sure that it is being adhered to.

ASSESSMENT/EXAMINATION STRATEGY & REGULATIONS

PHASE III PROGRAM (YEAR 5, 6 & 7 OF MEDICAL PROGRAM)

Assessments in Phase III

All clerkships in years 5 and 6 will contribute 30% of the final year mark in-course, with a series of discipline-based assessments to be held at the end of the year contributing 70%. More exact details of all the assessments will be distributed to students at the beginning of the academic year.

Final Examination Regulations for the Clinical Program – Phase III Program

The following guidelines are to assist the Vice Dean for Academic and Student Affairs and the Dean in governing the annual/final examinations, subject to the final approval of the Board of Examiners and/or the College Council, as appropriate.

- a. In-course and/or end-of-clinical rotation assessments carried out throughout Phase III shall contribute 30% in Year 5 and Year 6, and 20% in Year 7 towards the overall final marks.
- b. There will be TWO components of the Final Examination; i) Theory Examination ii) Clinical/OSCE examination. The passing mark shall be 60% in each of the components.
- c. A student must score a clear pass in both Theory and Clinical/OSCE independently, with no compensation between the two components for promotion to the next year and/or for graduation. The theory marks cannot compensate for the shortage of marks in clinical examination/OSCE and vice versa.
- d. All clinical students must be examined by the external examiners wherever possible before being promoted to the following year/graduated. All clinical students attending the exit examination will be examined by the external examiners.
- e. Students who are prevented from the end-of-course assessment/final examinations for any reason will forfeit their right to have a resit examination.

1. First Clinical Year (Phase III – Year 1) – 5th year of Medical Program

- a. There will be final examinations in Community Medicine, Medicine and Surgery at the end of the academic year.
- b. End-of-course assessments in Community Medicine, Medicine and Surgery will contribute 30% to the final grade and the final examinations will contribute 70% to the final grade in each subject.
- c. A student must score a clear pass in both Theory and Clinical/OSCE independently of each in Medicine and Surgery. There will be **no compensation between the two components** (Theory & Clinical/OSCE examination) for promotion to year 6. The theory marks cannot compensate for the shortage of marks in clinical examination/OSCE and vice versa.
- d. The elective courses will be graded as pass/fail.
- e. If a student satisfies the attendance requirement but fails the end-of-course assessment, the student shall be allowed to sit the final examination in June and carry the end-of-course assessment mark to be counted in the final grade.
- f. A student failing in one clinical subject (i.e., Medicine or Surgery) in the final examination and/or the Community Medicine course, will be required to take a resit examination in these failed subjects at the end of the summer holidays (August/September) after undertaking clinical rotation/courses as recommended by the Board of Examiners and the College Council.
- g. A student failing in both the clinical subjects (i.e., Medicine and Surgery) but has passed Community Medicine, in the final examination will be required to repeat the year, including assessments and will undertake clinical rotation in the two subjects in which he/she failed and undertake clinical rotation in other disciplines as recommended by the Board of Examiners and College Council. The student will take final examinations only in the failed subjects (Medicine and Surgery), provided the student fulfills the clinical attachments prescribed, satisfactorily.
- h. Students who fail three or four subjects (including elective) in the final examinations will be required to repeat the whole year including the final examinations in all subjects.
- i. A student who has unsatisfactory attendance due to unexcused absence, in one subject, will not be allowed to attend the end-of-course assessment and an **F** grade and a mark of '0' (zero) will be awarded to that assessment.

- j. If a student has unsatisfactory attendance in more than one subject regardless of the reason, he/she will not be allowed to appear for the end-of-course assessment and final examinations in June. The student will be required to repeat the year, (in all subjects) and will be considered as a repeater.
- k. A student failing in one subject in the final examination will be required to take a resit examination in the failed subject at the end of the summer holidays (August/September) after undertaking clinical rotation as recommended by the Board of Examiners and College Council.
- l. In the case of resit examination, the grade obtained in the end-of-course/rotation assessment will be carried over to the resit grade.
- m. A student who fails the resit examination in August/September in one subject will repeat the year and be required to appear in the following June final examination after undertaking the courses/clinical rotations and the end-of-course assessment in that subject. The student will be required to undertake clinical attachment(s) and/or courses in other disciplines of the 1st clinical year program, as recommended by the Board of Examiners and College Council.
- n. A student who has satisfied the end-of-course requirement but has failed to attend the June final examination in one subject (in part /full) without excuse, will repeat the year and be required to appear for that subject in the following June final examination, after undertaking courses/clinical rotations and assessments. The student will be required to undertake clinical attachment(s) and/or courses in other disciplines of the 1st clinical year (5th year of Medical Program), as recommended by the Board of Examiners and College Council.
- o. If a student fails two times the June examination, he/she will be given a resit examination in August/September after undertaking a clinical rotation during the summer period.
- p. A student who fails the August/September resit examination after having repeated the year will be dismissed from the College of Medicine.
- q. Students who fail to obtain the pass grade in the elective course will be given a remedial assessment in the form of an essay assessment to be evaluated by a committee appointed by the Vice Dean for Academic and Student Affairs provided the student has passed at least two subjects in the June final examinations.

- r. A pass grade in the electives will be mandatory before being promoted to the 2nd clinical year (Phase III – Year 2) - 6th year of medical program.
- s. Students who fail the year for a second time shall be dismissed from the College of Medicine.
- t. Students who are prevented from the end-of-course assessment/final examinations for any reason will forfeit their right to have a resit examination.

2. Second Clinical Year (Phase III – Year 2) – 6th year of medical program

- a. There will be final examinations in Pediatrics, Obstetrics & Gynecology, Medicine and Surgery. The final examinations will contribute 70% to the final grade in each subject.
- b. End-of-course assessments in Pediatrics, Obstetrics & Gynecology, Medicine and Surgery will contribute 30% to the final grade and the final examinations will contribute 70% to the final grade in each subject.
- c. A student must score a clear pass in both Theory and Clinical/OSCE independently of each in Pediatrics and Obstetrics & Gynecology. There will be **no compensation between the two components** (Theory & Clinical/OSCE examination) for promotion to year seven. The theory marks cannot compensate for the shortage of marks in clinical examination/OSCE and vice versa.
- d. If a student satisfies the attendance requirement but fails the end-of-course assessment, the student shall be allowed to sit the final examination in June and carry the end-of-course assessment mark to be counted in the final grade.
- e. Students who are prevented from the end-of-course assessment/final examinations for any reason will forfeit their right to have a resit examination.
- f. Students who fail three or four subjects in the final examinations shall be required to repeat the whole year including the final examinations in all subjects.
- g. A student failing in both Pediatrics and Obstetrics & Gynecology, but has passed Medicine and Surgery, will be required to repeat the year, including assessments, and will undertake clinical rotations in these two subjects (Pediatrics and Obstetrics & Gynecology) and undertake clinical rotations in other disciplines as recommended by the Board of Examiners and the College Council. This student will take final examinations only in Pediatrics and Obstetrics and Gynecology, provided the student fulfills the clinical attachments prescribed, satisfactorily.
- h. A student failing either in (Pediatrics or Obstetrics and Gynecology) and/or Medicine/Surgery will be required to take a resit examination in the failed subjects at the end of the summer holidays (August/September) after undertaking clinical rotation as recommended by the Board of Examiners and College Council.
- i. A student who fails the resit examination in August/September in one subject will repeat the year and be required to appear in the following

June final examination after undertaking the courses/clinical rotations and the end-of-course assessment in that subject. The student will be required to undertake clinical attachment(s) and/or courses in other disciplines of the 2nd clinical year program (6th year), as recommended by the Board of Examiners and College Council.

- j. A student who has unsatisfactory attendance due to unexcused absence, in one subject, will not be allowed to attend the end-of-course assessment and an **F** grade and a mark of '0' (zero) will be awarded to that assessment.
- k. If a student has unsatisfactory attendance in more than one subject regardless of the reason, he/she will not be allowed to appear for the end-of-course assessment and final examinations in June. The student will be required to repeat the year, (in all subjects) and will be considered as a repeater.
- l. In the case of a resit examination, the grade obtained in the end-of-course assessment will be carried over to the resit grade.
- m. A student who has satisfied the end-of-course requirement but has failed to attend the June final examination in one subject (in part/full) without excuse, will repeat the year and be required to appear for that subject in the following June final examination, after undertaking courses/clinical rotations. The student will be required to undertake clinical attachment(s) and/or courses in other disciplines of the 2nd clinical year program (6th year), as recommended by the Board of Examiners and College Council.
- n. If a student fails two times the June examination, he/she will be given a resit examination in August/September after undertaking a clinical rotation during the summer period.
- o. A student who fails the August/September resit examination after having repeated the year will be dismissed from the College of Medicine.
- p. Students who are prevented from the end-of-course assessment/final examinations for any reasons will forfeit their right to have resit examination.

3. Third Clinical Year (Phase III – Year 3) - 7th year of medical program

- a. There will be final examinations in Medicine, Surgery, and Psychiatry at the end of the academic year. The final examinations will contribute 80% to the final grade in each subject.
- b. End-of-course assessments in Medicine, Surgery, and Psychiatry will contribute 20% to the final grade and the final examinations will contribute 80% percent to the final grade in each subject.
- c. A student must score a clear pass in both Theory and Clinical/OSCE independently of each in Medicine, Surgery, and Psychiatry. There will be **no compensation between the two components** (Theory & Clinical/OSCE examination) for graduation. The theory marks cannot compensate for the shortage of marks in clinical examination/OSCE and vice versa.
- d. Satisfactory attendance is mandatory before allowing the students to attend the end-of-course assessment and/or final examinations. A student who has unsatisfactory attendance due to unexcused absence, in any one subject, will not be allowed to attend the end-of-course assessment and/or final examinations in that subject, and an 'F' grade and a mark of '0' (zero) will be awarded to that assessment.
- e. Students who fail all three subjects in the final examinations shall be required to repeat the whole year including the final examinations in all subjects. He/She will be required to undertake clinical attachments as assigned by the Chairmen of the Departments concerned and to take a resit examination in the failed subjects in the following June, provided the student fulfills the clinical attachments prescribed by the Departments satisfactorily.
- f. A student failing in both Medicine and Surgery, but has passed Psychiatry, will be required to repeat the year, including assessments, and will undertake clinical rotations in these two subjects (Medicine and Surgery) and undertake clinical rotations in other disciplines as recommended by the Board of Examiners and the College Council. This student will take final examinations only in Medicine and Surgery, provided the student fulfills the clinical attachments prescribed, satisfactorily.
- g. Students who fail in one subject in the June final examinations will be required to undertake clinical attachment as assigned by the Chairman of the Department concerned and to take a resit examination in the failed subject in December/January, provided the student fulfills the clinical attachment prescribed by the department concerned.
- h. Students who fail either Medicine or Surgery and Psychiatry in the June final examinations will be required to undertake clinical attachments

as assigned by the Chairmen of the Departments concerned and to take a resit examination in the failed subjects in December/January, provided the student fulfills the clinical attachment prescribed by the departments concerned.

- i. Students who fail the December/January resit examinations will be required to undertake clinical attachment, and to take the examinations in the failed subject in the following June.
- j. Students who fail the examination in the following June will be required to take a resit examination in the failed subject in the following December/January, provided, the student fulfills the clinical attachment prescribed by the department concerned.
- k. Students who fail the resit examination in December/January for the second time will be required to undertake clinical attachments and to take the examinations in the failed subject in the following June.
- l. Students who fail in any June final examinations for third time shall be dismissed from the College of Medicine.
- m. In the case of a resit examination, the grade obtained in the end-of course/in-course assessment will be carried over.
- n. Students who are prevented from appearing in the final examinations will be awarded an "F" grade ('0' marks) and they are not eligible to appear for the resit examination. Students who are prevented from the final examinations will repeat the year. If they are already repeaters, they will be dismissed from the College of Medicine.
- o. Students who are prevented from the end-of-course assessment/final examinations for any reasons will forfeit their right to have resit examination.

4. Resit Examination

- a. Resit examinations will be given only for the final examination.
- b. A student who obtains a final grade of <60% will be allowed to take a resit examination.
- c. The format of the resit examination will be similar to that of the final examination and will include all components (theory, clinical, OSCE).
- d. The final grade for the resit examination will be computed in the same format as that of the final examination grade, including the end-of-course/in-course assessment grades.
- e. The resit examination will be conducted during August/September, except for the third clinical year (7th year) which will be in December/January.
- f. A maximum of "C" (60% marks) grade will be awarded to a passing student in the resit examination.
- g. Students who are appearing for the make-up examination due to excused absence from the final examination will get the actual grade.

5. External Examiners

- a. External examiners will be invited to participate in the process of the final examination.
- b. An oral examination in the presence of the external examiner will be given to those students who are borderline failures by 3% marks (i.e., scoring 57%-59%), and to those candidates who have scored 84% and above may be considered for possible promotion to the next grade or distinction (A grade). Students who have a clear failure in the clinical examination will not be called for an oral examination, irrespective of the mark of the student. No oral examination will be given as a part of the resit examination.

6. Assessment/Examination Format

Most of the following formats will be used in the assessments/final examinations:

- 1. MCQ (multiple choice questions)
- 2. Short notes
- 3. OSCE (Objective structured clinical examination)
- 4. Clinical examinations with External Examiners

7. Regulations

7.1. Assessments

1. There will be the provision of a make-up assessment for those candidates who have a valid excuse granted by the Dean/Vice Dean for Academic and Student Affairs according to College of Medicine regulations. Excuses from appearing the assessments will be granted for the following reasons only:
 - a. Admission of the student to the Government hospital as an inpatient, with an authenticated report from the hospital administration.
 - b. Death of a first-degree family member (Grandfather, Grandmother, Father, Mother, and siblings) of the student.
 - c. Other extenuating circumstances approved by the Dean/Vice Dean for Academic and Student Affairs.
2. A make-up assessment shall be given to a student who has an approved excuse for missing assessments and will receive the actual grade obtained.
3. A mark of 'zero' (grade F) will be given for any assessment (full/part) which is missed without proper excuse.
4. The student who is unable to appear in an assessment for any reason stated above shall inform the office of the Vice Dean for Academic and Student Affairs of his/her reason for missing the assessment within two working days following the assessment.
5. Students who are prevented from appearing in the end of course assessment in any subject, for any reason will forfeit their right to have a resit examination.

7.2. Final Examination

1. The pass mark will be sixty percent.
2. Excused absence: Excuse from appearing in the final examination will be granted by the Dean/Vice Dean for Academic and Student Affairs only for the following reasons:
 - a. Admission of the student to the Government hospital as an inpatient, with an authenticated report from the hospital administration.
 - b. Death of a first-degree family member (Grandfather, Grandmother, Father, Mother, and siblings) of the student.
 - c. Other extenuating circumstances approved by the Dean/Vice Dean for Academic and Student Affairs.
3. The student who is unable to appear in the final examinations for any reason stated above shall inform the office of the Vice Dean for Academic and Student Affairs his/her reason for missing the examinations within two working days.
4. Candidates who absent themselves from the final examination (in full or part) without prior permission of the Dean/Vice Dean for Academic

- and Student Affairs will not be allowed to appear in the resit examination.
5. Candidates who miss a final examination (in full or part) without a valid excuse as approved by the Vice Dean for Academic and Student Affairs will be granted zero mark ("F" grade).
 6. There will not be any make-up examination following the final examination.
 7. However, those candidates who have an excused absence will appear in the resit examination in August/September or December/January as appropriate, after satisfactorily undertaking the clinical attachments as assigned by the College Council/Department Chairman, and shall get their actual grade. However, if such a student fails the resit exam, he/she will repeat the year/dismissed from the College of Medicine, as appropriate. He/she will not be given another examination, should he/she fail the resit examination in August/September or December/January. The final grade in this resit examination will be computed in the same format as that of the final examination grade, including the end of course/in-course assessment grades.
 8. Students who are prevented from appearing in the final examinations for any reason will forfeit their right to have a resit examination.

8. Phase III Examination Committee

The Phase III Examination Committee is appointed by the Dean's Executive Committee. This committee will be responsible to analyze the questions and the examination results. The result of the Phase III examinations must be endorsed by this committee before publication. The Committee is free to invite the Chairmen/Chairpersons of the clinical departments whenever necessary.

The meeting of this committee, which finalizes the final examination result will be attended by the concerned Departmental Chairmen/ Chairpersons, Dean and Vice Dean for Academic and Student Affairs.

GUIDELINES FOR ACADEMIC ADVISORS

1. Role & responsibility:

The academic advisor will counsel each of his/her allocated students throughout the duration of the student's academic journey.

The student will be responsible in contacting their advisor whenever they need to.

The academic advisor must contact his/her students in case the student fails any examination (midterm, final, end of module, resit etc) and arrange a meeting with them (face to face or using teams).

Maintaining the students' confidentiality is essential.

Be kind, patient & compassionate with the students & offer them advice by using non-judgmental language.

Introduce the students to the grading system & the rules in the handbook (such as how many times the students are allowed to fail etc).

2. Complete the questionnaire (attached) with your student, to identify if the student's problem is academic or related to mental health/personal problems or medical problems.

Keep notes about the student so that you can remember the details & the advice that you have given for follow up.

3. Mental health issues:

If the student's problem is related to mental health issues, refer the students who have asked to speak to a counsellor in the COM discretely, by emailing the head of counselling in the COM (contact the Office of the Vice Dean for Academic and Student Affairs for details).

After that, it is up to the discretion of the counselling committee to follow up with the student and/or make recommendations for them to the VDA.

Remember that not all students will admit to having mental health issues so watch out for those who are struggling in silence & advise them to seek help.

4. Academic support:

Where needed, guide each student by giving a specific & tailored feedback that is actionable & follow up on whether the student was able to do it/benefit from it.

Actively check in with the students who are struggling and have asked for help by email.

When the problems relate to exams, lack of understanding, need for reviews etc, email the head of the medical education unit to relay the problems & ask for advice on how to solve them.

After asking all the students involved if they mind, connect the struggling students with other struggling students so that they can support each other, as well as with successful students who can coach them & offer them advice & study tips.

Email the compiled advice & study tips to any student who fails any exam or needs guidance on how to study.

5. Medical problems:

Report to the administration the names, student ID & emails of any student with chronic medical problems such as diabetes, ADHD/ADD, migraines, kidney stones etc, so that their lecturers, tutors & exam invigilators are aware that they may need extra support (eg: snacks during exams for diabetics, flexibility with attendance & use of toilets when needed etc).

6. In case of any problems, queries or need for clarification, please contact a member of the student academic advisory committee and counselling committee for help (contact the Office of the Vice Dean for Academic and Student Affairs for details).

**QUESTIONNAIRE FOR ADVISOR TO ASK THE STUDENT AND NOTE
DOWN:**

Student number

ID

Student name

College the student belongs to (medicine or dentistry- M/D)

Date of meeting

Academic staff name

Student's high school (gov or private, name, result- % or GPA)

University admission English performance result

Difficulty in transition to English education (Y/N)

1st year GPA of student

Has student had enough teaching?

Are the lectures helpful?

Does the student attend most lectures?

Is the study time enough during the week?

How many hours a day/week does the student study (without distractions)

Does the student seek help from the lecturer or colleagues when a problem is encountered?

Are the exams fair?

Was the grade received representative of the student's efforts?

What was the motivation level when the student first joined the college (0-5)

What is the student's motivation level now (0-5)

Does the student have any health or mental health issues?

Have they been addressed?

Was this a reason for the student underperforming?

Does the student have any family/personal issues (loss of family or friend)

Have they been addressed?

Was this a reason for the student underperforming?

Comments from the student.

STUDY TIPS AND ADVICE FROM A STUDENTS IN YEAR 3 AND YEAR 4:

[Students, please remember the following are guidelines and may not work for everyone]

1. Take it easy the first week of the module, especially the first couple of days after the exam, to rest and re-energize for the next module. However, make sure though that you spend the first weekend catching up with the lectures of the first week.
2. Attend most of the classes to establish a good foundation of the topics and take your own notes during the lecture on top of the handout.
3. Each day, try to finish two lectures, even though sometimes you have a long day until 4 p.m. When there is a long break between these lectures, you can study.
4. Try to finish studying for all the lectures of the week by the end of the weekend. Use the weekend to catch up on studying the lectures that you didn't have time to study during the week.
5. The most important thing is the summary. Most don't prefer to use other students' summaries because they believe each student has their own way of summarizing, and it does not take a lot of time as you copy and paste from the lecture note. Some believe in taking summary notes by hand, not just cut and paste online, as the act of physically writing things down helps them remember things better.
6. While reading the lecture notes, try to isolate each point by point, understand it at first, and memorize later on what needs memorizing - understanding is really important and without it you cannot memorize as well.
7. If something is unclear from the lecture notes, add your own notes from your own research online.
8. Try to link between lecture notes from the same or different subject, which further consolidates the information.
9. Again, on the weekend, make sure you revise the lectures you took during the week as that is helpful in sticking the information into your memory. Because you have already studied them once during the week and summarized them and took notes, you will finish studying them easily and quickly and so you will have time in the weekend to relax and do fun things.
10. If something is unclear or you are having difficulty understanding anything, try YouTube's videos (Ninja Nerd) or Onlinemed website; they are very helpful. Also don't hesitate to ask questions to doctors (all doctors

can help you and answer your questions), but don't leave it to the end of the module.

11. If you are able to follow the advice above it means that before the week of the exam you would have studied each lecture twice (once after the lecture and once on the weekend), so you will be free to only revise only your summaries and study the few lectures that were given on the last week.
12. As the day of the exam gets closer, try to recap everything that you can or whatever you felt was important/difficult. Start with concepts that need further understanding (if not understood fully), then when the exam is really close, like one day prior for example, recap all that needs memorizing (drugs, tables, infographics, nuclear medicine). This method of 'one day prior' really helps especially with subjects such as Pharmacology, because it consolidates the drug names, class, and MOA one last time before the exam.
13. It is important to be consistent in studying. Make a schedule for studying and try to stick to it as much as possible.
14. Find out the best time to study, for some students they are more efficient in studying during the morning, others during the evening. Find out what works for you.
15. While studying take short regular breaks for prayer, snacks, etc.
16. You should not neglect the actual exam day. Being well-slept, fed, and energized before the exam is one of the major factors contributing to achieving a good grade in an exam. Also, being confident on the day of the exam and actually believing that you have done all what you could, put in the effort, and studied decreases the stress levels you might experience while actually taking the exam.

PHYSICAL FACILITIES AT THE COLLEGE OF MEDICINE

Lecture theatres and rooms for PBLs and small group teaching

COM has four lecture theatres [LT-141 (capacity = 176 seats), LT-142 (capacity = 160 seats), LT-143 (capacity = 182 seats), LT-144 (capacity = 204 seats)] on the 1st floor and 1 lecture theatre [LT 0-10 (capacity = 70 seats)] on the ground floor for all students. In addition, two lecture theatres [LT 1-99 (capacity = 140 seats) and LT1-108 (capacity = 70 seats)] are located in HSC building on the 1st floor for Phase I students. There are 10 seminar rooms (total number of seats 325) in the COM building, 8 seminar rooms on the 1st floor, and 1 seminar room each on the 2nd and 3rd floors for small group teaching of phase II and III students. COM has 14 Tutorial/PBL rooms (capacity = 10 to 15 seats in each room) for phase II and III PBLs. All the lecture theatres, seminar rooms, and tutorial rooms are equipped with necessary audio-visual systems and wireless internet access.

Teaching laboratories

COM has 8 multi-discipline laboratories (MDL) (301 seats) for conducting practical sessions for phase I and phase II students. All laboratories are equipped with modern technologies needed for experimental teaching of medical students in a safe environment. In addition, the pathology and anatomy museums and the anatomy dissection room, located on the ground floor of COM, provide students in phase II with the tools to ensure delivery of the curriculum.

Clinical skills laboratory (1324.55 square meters)

The Clinical Skills Laboratory (CSL) provides a safe education environment facility to teach clinical knowledge, clinical and communication skills in a controlled supervised setting with simulators, models, and manikins. The CSL has the capacity to accommodate up to 200 students. It has a 42-set lecture theatre and video recording equipment.

Dissection Room

The recently commissioned new dissection room depicts the modern facility available for the human anatomy laboratory. The dissection room has a main large hall in which twelve groups of students can easily be accommodated. The control room has two tables for two groups, and the inner hall houses four groups. Sixteen dissection tables are individually ventilated, thus making them safer for students and teachers. The entire dissection hall is equipped with a state-of-the-art HVAC ventilation system, the best available furniture, and a highly technical digital integrated system. The integrated system helps students to communicate between the groups placed at distant tables. High-resolution cameras and computer systems allow the students to show structures in one cadaver to students in another group/s in such a way that learning becomes fun and enjoyable. The instructor in the control room can digitally monitor students in all groups. Using a master computer and main cameras, the instructor can conduct quizzes, oral examinations, etc. The new dissection room will soon receive Anatomage which will help students to learn the complex science of anatomy, radiology, and histology in a student-friendly environment. The dissection room also has twelve modern cadaver freezers which can accommodate up to sixty cadavers. Moreover, there are individually

ventilated cabinets in which soft specimens can be stored without contaminating the atmosphere. The dissection room already has numerous plastinated specimens, models, and other study materials which are useful for understanding anatomy.

Student amenities

Students have multiple spaces including the large atrium, 2 recreational rooms, and 2 reading rooms that can be used for individual or small group study as well as relaxation areas to encourage informal interaction among students. A separate room is also available for Kuwait University Medical Student Association (KUMSA) for meetings and official activities. Medical students are also allowed to use sports facilities located at other Kuwait University campuses. Furthermore, more than 700 personal lockers are available for students and are located on the ground floor of the COM building. KU provides a free transportation facility for exchange students who are staying at free accommodation off-campus. COM staff and students share a free multi-story car parking building with 1,142 parking slots. A designated prayer area is also available at the campus. Students can also use the book and stationery shops located at HSC/KU campus.

Facilities for individuals with special needs

COM has an electrically operated escalator for persons on wheelchairs, to enter the first floor of the building and a ramp to enter the ground floor of the building. In addition, there are designated parking spaces for individuals with special needs both in the car parking building and at the parking area in front of the building. Four lavatories are also available to serve them.

Kitchen and cafeteria

COM has one central kitchen located on the ground floor and 3 cafeterias are available. One open space cafeteria is also available for students and staff. All cafeterias are on the 1st floor.

STUDENT SUPPORT SERVICES

STUDENT COUNSELING AND GUIDANCE OFFICE

The Office was established in 2012 by the College of Medicine in response to the student's curricular and extra-curricular needs. The office offers advice and practical support on a wide range of issues that medical students might struggle with during their academic journey. The office operates by self-referral policy along with staff-referrals, and students have direct contact with the office along with any staff member at the College.

STUDENT GRIEVANCES COMMITTEE

Terms of Reference

The Committee is responsible to study the grievances submitted by the student on issues related to the final examination and give recommendations to the Dean, based on the College regulations.

Membership

Vice Dean for Academic and Student Affairs	ex-officio and Chair
Director of Student Counseling and Guidance Centre	ex-officio

In addition, the Dean appoints one member of staff to be a member of this committee from a Department, which is not related to the grievances submitted by the student. The committee is free to invite the Chair of the concerned Department, Chair of the Examination Committee concerned, or any other staff, depending on the grievance of the student.

Procedure:

The Dean refers the student grievances to the committee and the committee submits its recommendation to the Dean in a month's time.

The proceedings of the committee are recorded and the minutes and the recommendations are signed by all members of the committee.

CAREER COUNSELING OFFICE FOR UNDERGRADUATE MEDICAL STUDENTS

The Office has been established in 2021 in response to the suggestion from the accreditation body TEPDAD. It provides career counseling to help medical students make informed decisions and plan their medical school years in the College and after graduation. In addition to this office, career counseling for the students is available through a variety of programs and workshops conducted by the student body KUMSA. The areas covered in the counseling include:

- Student Advisory Program
- Research opportunities
- Career resources

STUDENT REPRESENTATION AT THE COLLEGE COMMITTEES

College of Medicine Advisory Board

Terms of Reference

The Advisory Board of the College of Medicine is to assist the leadership of the College of Medicine in formulating, updating, and fulfilling its mission, promoting the growth and success of the College, supporting continuous quality improvement by identifying deficiencies in teaching, research, and patient care, and suggesting modalities to overcome the identified deficiencies by participating in program evaluation processes.

Membership

Dean, College of Medicine	Chair
Vice Deans of the College of Medicine	
Representatives from other Colleges of the Health Sciences Centre	
Director, Medical Education	
Chair, Accreditation committee	
The Chair of Departments	
One representative of Full Professors	
One representative of Associate Professors	
One representative of Assistant Professors	
One representative from Kuwait Medical Association	
One representative of students	
One representative of other staff	
One member from the Ministry of Higher Education	
One member from the Ministry of Health	
One member from the Private Sector	
One member from a Patient Organization	
One member from the Community	
Any other person with special knowledge or expertise may be invited to attend the meetings of the Advisory Board as appropriate.	

The Advisory Board will meet at least once annually at the end of each academic year. The Chair may schedule additional meetings as and when necessary.

CURRICULUM, ASSESSMENTS AND ADMISSIONS COMMITTEE

Terms of Reference

The Curriculum, Assessments, and Admissions Committee is a sub-committee of the Dean's Executive Committee and submits recommendations to it.

Membership

Vice Dean for Academic and Student Affairs	Chair
Dean	ex-officio
Vice Dean for Clinical Affairs, Consultation, and Training	ex-officio
Vice Dean for Research and Postgraduate Studies	ex-officio
Director, Center for Medical Education	
The Chairpersons of the Departments	
The Chairperson, Phase I Curriculum Committee	
The Chairperson, Phase II Curriculum Committee	
The Chairperson, Phase III Curriculum Committee	
Three Student Representatives (one each from Phase I, Phase II and Phase III)	
Representative of Ministry of Health	
Representative of Patient Society	

Function

The Curriculum, Assessments, and Admissions Committee:

- a. KUMSA is requested to submit, annually, the names of three students (one each from Phase I, Phase II and Phase III) to the Dean's Executive Committee to be the students' representatives. These representatives are permitted to attend all meetings of the Committee except when reserved items of business are under discussion.
- b. Invite any other person with special expertise may be invited to attend meetings of the Committee as appropriate.
- c. Refer any proposal to change the membership of the Committee to the Dean's Executive Committee.

Responsibility with regard to the Curriculum

The Committee is charged with the responsibility for planning, reviewing, and amending the undergraduate curricula leading to the degrees of B.Med.Sc. and M.D. of the College of Medicine, Kuwait University, and any other appropriate degree programs.

Responsibility with regard to Assessments

- a. The Committee is charged with the responsibility for devising, reviewing, and amending a scheme for the assessment of students pursuing the undergraduate curricula leading to the degrees of B.Med.Sc. and M.D. of the Kuwait University and any other appropriate degrees.

Responsibility with regard to Admissions

- a. The Committee prepares recommendations on the size of the annual student intake.
- b. The Committee is responsible for preparing and revising the admission requirements and regulations for the B.Med.Sc. degree and the MD degree of Kuwait University and any other appropriate academic program.

The Committee also considers any other matter referred to it by the Dean's Executive Committee or its associated committees.

On approval of the Committee's recommendations by the College Council, the Vice Dean for Academic and Student Affairs is responsible for executing the decisions.

Curriculum and Assessment Subcommittees:

In response to the suggestion by the accreditation body TEPDAD to integrate the medical curriculum horizontally and vertically and conduct formative and summative assessments, the College of Medicine has decided to establish curriculum and assessments subcommittees. Each subcommittee should prepare an integrated curriculum and formulate the modalities for formative and summative assessments, and submit them to the Vice Dean for Academic and Student Affairs, within the suggested date. In addition, the subcommittees should meet annually at the end of each academic year and provide a report to the Vice Dean for Academic and Student Affairs on the updating of the curriculum and assessments methods. The report should also include the problems faced in the delivery of the curriculum and conducting assessments.

All the changes suggested by the curriculum subcommittees will need approval by the College of Medicine Curriculum and Assessments Committee and the College Council.

1. Phase I (Year 1):

Curriculum subcommittee:

Dr. Ali Shuaib

Chair

Course Coordinators of Phase I

A student representative from Phase I, Year 1

Assessment subcommittee:

Prof. Suhail Ahmad

Chair

2. Phase II:

Year 2

Curriculum subcommittee:

Prof. Jamshaid Iqbal

Chair

Course/Module Coordinators of Phase II, Years 2, 3 and 4

A student representative from Phase II, Years 2, 3 and 4

Assessment subcommittee:

Prof. Narayana Kilarkaje

Chair

Years 3 and 4

Curriculum subcommittee:

Prof. Jamshaid Iqbal

Chair

Course/Module Coordinators of Phase II, Years 2, 3 and 4

A student representative from Phase II, Years 2, 3 and 4

Assessment subcommittee:

Prof. Jamshaid Iqbal

Chair

3. Phase III (Years 5, 6 and 7)

Curriculum subcommittee:

Dr. Ahmad AlHashemi

Chair

Course Coordinators of Phase III

A student representative from Phase III, Years 5, 6 and 7

Assessment subcommittee:

Dr. Mervat Al-Saleh

Chair

STAFF-STUDENT CONSULTATIVE COMMITTEE

The Staff-Student Consultative Committee is a sub-committee of the Dean's Executive Committee.

Membership

- a. The President of the Medical Students' Society ex-officio
The Student Representative of the Curriculum
and Assessments Committee ex-officio
- b. One student representative nominated by the Vice Dean for Academic
and Student Affairs, from each of the premedical, preclinical and
clinical student groups.
- c. Four members of the academic staff; two from the basic sciences
departments and two from the clinical departments appointed annually
by the Dean's Executive Committee.
- d. Kuwait University social worker attached to the College of Medicine will
be a member of this Committee.

Chairmanship

The Chairman will be appointed by the Dean's Executive Committee.

Functions

- a. The Committee is a non-executive body with the responsibility of obtaining
the views of the medical students on those College matters pertinent to
them, and to identify and discuss general problems as these arise, relating
to the curriculum, assessments, timetables and domestic arrangements.
The Committee should also be a forum for the exchange of ideas.
- b. All members of the Committee should be concerned to obtain "feed-back"
from the medical student body to enable the Committee to act as a channel
of communication through which constructive suggestions from the
students will come to the attention of the College of Medicine.

ACADEMIC ACCREDITATION AND QUALITY ASSURANCE UNIT (AAQAU)

ACADEMIC ACCREDITATION AND QUALITY ASSURANCE UNIT (AAQAU)

The Academic Accreditation and Quality Assurance Unit was established by the Dean of the College of Medicine in December 2016 to obtain academic accreditation for the College of Medicine, Kuwait University. A Chairman/Director was appointed to head the Unit. In addition, an Academic Accreditation and Quality Assurance Committee was appointed by the Dean consisting of 11 members (9 college members, 1 administrative staff, and 1 student) from the College of Medicine and 1 member (observer) from the College of Dentistry.

The functions of the Unit are to:

1. Formulate and put into action a blueprint for obtaining accreditation
2. Oversee all aspects of the academic accreditation and quality assurance process
3. Collect data supporting the College's adherence to the various accreditation and quality assurance standards
4. Communicate and coordinate with reviewers and delegations visiting for the purpose of accreditation and quality assurance

The Unit is in contact with Kuwait's National Bureau for Academic Accreditation and Education Quality Assurance (NBAQ), the Association for Evaluation and Accreditation of Medical Education Program (Turkey) (TEPDAD), and the World Federation for Medical Education (WFME). The AAQAU has taken steps towards achieving accreditation by getting approval from Kuwait University for TEPDAD as the accreditation body and writing the Self-Evaluation Report according to the requirements of TEPDAD/WFME. The Self-Evaluation Report was submitted to the accreditation agency (TEPDAD) in December 2019. The TEPDAD Team was satisfied with the contents of the Self-Evaluation Report and conducted a face-to-face visit in June 2023. After the visit, the TEPDAD declared that the College of Medicine fulfills the requirements of full accreditation and granted the accreditation for 6 years (starting date: 01/09/2021, and ending date 31/08/2027).

For contact & additional information:

Director:

Prof. Abu Salim Mustafa

Email: abu.mustafa@ku.edu.kw

Secretary:

Mr. Eslam Twfik

Email: eslam.shehatwo@ku.edu.kw

CENTRE FOR MEDICAL EDUCATION

CENTRE FOR MEDICAL EDUCATION

INTRODUCTION

The Centre for Medical Education acts as a service unit in support of the new curriculum. The main working load by the members is administrative related to every module, theoretical test, OSCE/OSPE, and module and staff evaluations. The teaching load though is limited to remedial classes and coordination of clinical skills training sessions. However, the Director of the Unit is actively involved in teaching both at the Undergraduate and Postgraduate level. The research component is getting active within the unit and in cooperation with other departments.

Mission:

The overall mission of the Centre is to provide leadership for the College of Medicine's undergraduate program and support its educational mission.

The Centre provides the following services:

- Support the planning and review of all the three phases of the new curriculum
- Assist the delivery of scheduled teaching, learning resources and associated programs
- Hold training workshops under the theme 'Faculty Capacity Development' to enhance faculty development with new educational skills i.e. PBLs, clinical skills teaching
- Hold training workshops for simulated patients used during the clinical skill sessions, structured clinical examinations (OSCEs) and communication skills.
- Organize quality assurance indicators for all aspects of the new curriculum
- Enhance the delivery of comprehensive high quality student assessment
- Quality assurance of student assessments and maintain the central question bank
- Develop an environment of continuous quality improvement through faculty and student feedback
- Provide immediate detailed electronic graphic feedback to students on their academic
- Suggest remedial courses/support to students
- Develop innovations to support the delivery of a world class educational experience
- Introduce and encourage Faculty in the use of Best Evidence Medical Education

- Promote the College of Medicine as a Centre of excellence in Medical Education
- Initiate scholarship and research in the field of Medical Education
- The Faculty Assessment Office established to deliver such services as formatting test questions as per the in-house style, scoring, analysis of students and questions performance, standard setting, and administration of College of Medicine Question Bank.

The Centre works closely with the appointed faculty members who coordinate and direct all phases and components of the program, including module coordinators, phase committees, assessment committees, clinical skill coordinators, PBL coordination group and ad-hoc planning groups.

The assessment office, established in 2013 by the unit director, continued to deliver such services as:

- formatting test questions as per the in-house style,
- scoring, analysis of students and questions performance,
- standard setting,
- administration of the 'Faculty Question Bank',

The office also reports on the:

- Quality assurance of the assessments and assessment items
- Detailed item analysis of test items
- Detailed feedback to students on each assessment that includes graphic detail on subject performance, averages, and class ranking
- Detailed item analysis report to the staff on their questions
- Detailed electronic feedback with performance and item analysis on all assessment items forwarded to all Heads of the department and module coordinators.

The Centre is now utilizing the services in the new Clinical Skills Centre for training in clinical skills and conducting OSCE examinations for the Medical & Dental students

The Centre for Medical Education is supervised by the Vice Dean Academic Affairs.

For contact & additional information:

Director, Prof. Jamshaid Iqbal
Email: jamshaid.rafique@ku.edu.kw

Assistant Director, Dr. Ahmad AlHashemi
ahmad.alhashemi@ku.edu.kw

Mr. Ahmed Mohammed
Senior Teaching assistant
ahmed.m@ku.edu.kw

CLINICAL SKILLS LAB (CSL)

CLINICAL SKILLS LAB

The Clinical Skills Lab (CSL) was established at the College of Medicine in 2015. The goal of the CSL is to provide a safe education environment facility that serves as a training center for clinical skills and clinical procedures and an examination center for the OSCE and clinical examination.

Clinical knowledge and skills are taught in a controlled supervised setting with simulators, models, and manikins. The CSL is accessible to the Health Sciences Centre staff and students, Kuwait Institute for Medical Specialization (KIMS) staff and residents, and Ministry of Health (MOH) staff. The CSL has the capacity to accommodate up to 200 learners. It includes a 42-seat lecture theatre fully equipped with audio-video facilities for use during debriefing sessions. It currently includes various medium and high-fidelity simulators. The CSL has the capacity to replicate a hospital setting (ward or clinic) where clinical and communication skills are practiced with simulated patients.

Since its inception, the CSL has been an integral part of the curriculum of Phase II and III of the College of Medicine. Phase II students get supervised training sessions to practice clinical and communication skills during the system modules. Similarly, phase III students utilize the CSL for clinical and technical skills such as intubation and intravenous access.

The Faculty, residents, and the students may also use the CSL facilities for supervised practice sessions and/or MOCK examinations by submitting a written request on the prescribed CSL request forms to the Director, CSL.

For contact & additional information:

Director, Dr. Saud N. AlZaid
Email: saud.alzaid@ku.edu.kw

Ms. Mona A. Elmowyaed
CSL Staff Technician
Email: Mona.elmowyaed@ku.edu.kw

Ms. Sumi Mol M. Sudarsanan
CSL Staff Nurse
Email: sumimolms4@gmail.com

MEDICAL PHOTOGRAPHY AND ILLUSTRATION UNIT

MEDICAL PHOTOGRAPHY AND ILLUSTRATION UNIT

The Medical Photography and Illustration Unit was established in the College of Medicine in 1979, with one Chief Technician hired from the Czech Republic (Czechia) to make teaching slides and medical printing and illustrations for the academic staff. I joined this unit in June 1982 and started doing clinical and research-data illustrations for academic staff. Because computers were not yet introduced in the College and each drawing had to be done by hand with ink/pens/adhesive alphabets on transparent sheets and transferring images to film negatives and then producing b/w prints to send them to the publishers. Black/white and color prints for publication in international journals were prepared and produced from patients in wards, operation theaters, X-rays, and clinical specimens. The computer era in the Medical College started in 1996 and technical research-data drawings were started to prepare on computers.

Research Posters presentation, a new research activity was introduced in the Medical College in 1996. We started to prepare posters for the academic staff by writing the titles of posters by hand/cutting pieces of the alphabet, arranging the alphabet on large-size paper sheets to make titles, and the rest of the poster's parts were prepared by photocopying. Then after a few years, a poster's title-making machine was purchased, and posters became easy to prepare on computers and now are printed on a large format printer in this unit.

In 2015-2017, thousands of old prints and negatives were scanned, which were archived since the start of this unit. Now we can find photographic records of any activity of HSC of the past in a few minutes except some records that were lost during the Iraqi invasion of 2nd August 1990.

We also do videography of seminars, conferences, graduation ceremonies, and social activities at the College of Medicine and to a limited extent for the other colleges of the HSC.

Currently, the unit has one staff for photography and printing for HSC, and one staff member for videography, editing, and copying.

Presently we are three staff members including one laboratory assistant, hired in 2022 who is learning and doing the help in our photographic activities which are mostly for the College of Medicine and to a limited extent for other colleges of HSC.

Mohammad Siddique, B.Sc. DPH
Chief Specialist and In-charge
Email: mohammad.sahrif@ku.edu.kw

- 1- Zakir Hussain. (Lab Technician)
Higher Secondary School Certificate & Certificate in Photoshop
- 2- Shemul Pervez. (Lab Assistant), Higher Secondary School Certificate.

CENTRE FOR RESEARCH SUPPORT AND CONFERENCES

CENTRE FOR RESEARCH SUPPORT AND CONFERENCES

The Center for Research Support and Conferences (CRC) operates under the supervision of the Vice Dean for Research and Postgraduate Studies at the College of Medicine. It serves as a centralized hub for supporting academic and scientific events across the Health Sciences Center (HSC), as well as for advancing college research activities.

Leadership

- **Dr. Heba Al Hussaini** – Vice Dean of Research & Postgraduate Studies
- **Dr. Maryam Al-Qabandi** – Director, Assistant Professor
Email: maryam.alqabandi@ku.edu.kw

Staff

- **Ms. Teena Sadan** – Medical Chief Specialist
Email: teena.sadan@ku.edu.kw
- **Ms. Rania Al-Mawlawi** – Specialized Executive Coordinator
Email: rania.m@ku.edu.kw
- **Mr. MD Ismail Hossain** - Service Executive
Email: mdismail.hossain@ku.edu.kw

Center for Research Support and Conferences (CRC) plays a key role in supporting and coordinating several academic and institutional committees, including:

- Conference Committee (International and Local)
- College Promotion Committee (Academic staff)
- Workshops, Symposiums, and Seminars Committees (International and Local)
- Ethical Committees (across HSC Colleges and the Ministry of Health)

Core Functions and Services

I. Event Support Services

CRC provides full logistical and scientific assistance for organizing conferences, symposia, seminars, and workshops hosted by HSC faculties and the Ministry of Health.

- Website creation and management for event communications and registration
- Budget planning, event program development, and coordination with speakers
- Online and onsite registration with QR-coded links and barcode tracking

- Design and dissemination of promotional materials (posters, brochures, announcements)
- Preparation of event materials, including abstracts, e-books, reports, and magazines
- Accreditation processing and issuance of CME and participation certificates via KIMS
- Coordination with scientific committees for abstract submission and review
- Evaluation design, data collection, and reporting for continuous improvement
- Comprehensive logistical arrangements for all event-related needs

II. Social Media Support

The CRC employs a multi-channel media strategy to maximize the visibility and reach of academic events. Services include:

- Targeted email advertisements segmented by specialty and academic discipline
- Social media promotion via platforms such as WhatsApp channels, Instagram, and other networks
- Poster creation and offline advertisements across key campus locations
- Weekly digital screen advertisements within the College of Medicine and Health Sciences Center
- Media coverage and outreach through curated email databases
- Coordinated online and offline campaigns to engage the HSC community effectively

III. Program Management

The CRC ensures the smooth execution of academic events by providing strategic and technical oversight. Services include:

- Planning event schedules and identifying facilitators and presenters
- Managing logistics, including audiovisual, telecommunication, and IT arrangements
- Supervising event websites and digital infrastructure
- Developing evaluation tools and summary reports
- Supporting faculty in research grant writing
- Networking and coordinating with academic, professional, and community stakeholders

Registration Services

The CRC offers comprehensive registration support for conferences, workshops, symposia, and seminars, including:

- Online and onsite registration with QR code access and barcode-based attendance tracking

- Design and maintenance of event websites and promotional materials
- Development of registration forms, call-for-papers, and name tags
- Issuance of confirmation letters and distribution of participant information
- Coordination of mailing lists, announcements, and visitor support materials (e.g., tourist guides)

Accessibility and Communication

The CRC is located within the College of Medicine and offers services to all faculty and researchers of the College and HSC-affiliated institutions. Its team collaborates closely with academic staff to meet diverse research and event management needs.

Further details and updates are available on the Health Sciences Center website: www.hsc.edu.kw under the College of Medicine section.

Contact: Center for Research Support & Conferences; Vice Dean for Research & Postgraduate Studies, College of Medicine, Kuwait University; crc.hsc@ku.edu.kw

More Info: +965 24636418; +965 24634569

WhatsApp: +24634123: <https://wa.me/message/GXF5EFLPFQPHA1>

WhatsApp Channel: Center for Research Support and Conferences

ELECTRON MICROSCOPY UNIT

ELECTRON MICROSCOPY UNIT

The Electron Microscopy Unit (EMU) of the College of Medicine is an independent body of the Health Sciences Centre that functions under the administration of the Vice Dean for Research and Postgraduate Studies. It provides Transmission and Scanning Electron Microscopic services to the entire Health Science Centre in the areas of teaching and research. In addition, the Electron Microscope Unit provides laboratory diagnostic services to MOH of the State of Kuwait. For diagnostic services, specimens are received through the Department of Pathology. The major objective of the EMU is to provide teaching to undergraduate, graduate, and Doctoral students in the field of Electron Microscopy. The students are introduced to morphological studies and observations at the cellular as well as the subcellular levels. They are also exposed to the basic physics and working of Electron Microscopes. The UNIT assists staff, Master's and Doctoral students from different colleges of the HSC in the conduct of their research work; thus, bridging the gap between electron microscopic research and cutting-edge molecular research. Training of staff is also provided.

Director

Dr. Issam Francis

Email: Issam.francis@ku.edu.kw

Chief Specialist

Mrs. Jessy Rachel Mathew

Email: jessy.mathew@ku.edu.kw

Tel: 36027

ANIMAL RESOURCES CENTER (ARC)

ANIMAL RESOURCES CENTER (ARC)

The Animal Resources Center (ARC) is the housing facility of laboratory animals used for teaching and research at the Health Sciences Center, Kuwait University. The ARC manages the care and use of experimental animals and provides a framework of responsibilities and standards that guides the ongoing animal-based research activities. The mission of the ARC is to support researchers at the Health Sciences Center in their animal-based research by providing high quality animal housing and care and promoting high ethical standards of animal use. The main objectives of the ARC are to provide good quality experimental animals necessary for good quality research and to ensure that animal use and handling procedures comply with the standards of the International Council of Laboratory Animals Sciences.

The ARC facility includes specialized sections that accommodate various species and strains of laboratory animals for breeding and stock and other sections such as surgical theaters, experimental laboratories and housekeeping and storage facilities. A team of highly qualified veterinarians and laboratory technical staff work at the ARC. They perform the animal breeding and daily maintenance procedures and oversee the animals' welfare in support of the HSC researchers. They provide help and expertise in conducting specific experimental procedures upon request. They also conduct workshops to train and certify researchers and students for proper animal handling and ethical practices.

The ARC is managed by a director under the administration of the Vice-Dean for Research and Postgraduate Studies.

Director:

Dr Abeer Al-Abdallah

Email: abeer.alabdulla@ku.edu.kw

RESEARCH CORE FACILITY (RCF)

RESEARCH CORE FACILITY (RCF)

The Research Core Facility (RCF) provides students and faculty of the five colleges of the Health Science Centre (HSC) with state-of-the-art equipment and trained support staff with the aim of performing world class research.

As the RCF houses equipment related to the study of genomics, proteomics and cellomics, the facility is also referred to as the (OMICS) Research unit (OMICSRU). The OMICSRU is financially supported by the research sector (RS) at Kuwait University through general Facility grants GM01/15 and SRUL02/13.

The aim of the OMICSRU is to foster a research culture at the HSC and promote collaboration between basic and clinical sciences by providing the infrastructure and support to perform research in genomics, proteomics and cellomics. Through the support of the RS at KU the equipment at the OMICSRU is under continuous maintenance and is frequently upgraded.

The Facilities available at the OMICSRU are:

Sample Preparation Facility:

- Nucleic acid extraction system, Biorobot M48 (Qiagen)
- Laser Micro-dissection
- Digital Tissue Homogenizer
- Isotherm Oven
- Hybridization Oven
- Ultrasonic Bath Branson CPX
- SONIPREP 150 PLUS
- Ultracentrifuge – Optima L-100XP
- Ultracentrifuge – Sorval WX+
- Automated Sample Preparation
- Speed Vac
- Benchtop Autoclave

Proteomics:

- Orbitrap Nano LCMS
- ProteomeLab PF 2D
- Peptide Synthesizer – Symphony X
- HPLC
- Lyophilizer – Freeze dryer

Genomics:

- ABI3130 Genetic Analyzer
- 7500 Fast Real-time PCR System
- 7900 HT Fast Real-time PCR System
- GeneChip Microarray System
- Automated Karyotyping System
- DNA Micro Array Analyzer
- Calibrated Densitometer

- Gel Documentation
- 2100 Bioanalyzer – Agilent
- Agarose Electrophoresis - Biorad
- Epoch Biotek – Spectrophotometer
- Flexcycler – Analytik Jena
- MerMade – 12 Oligonucleotide Synthesizer
- Waters UPLC
- Qubit Fluorometer - Invitrogen
- UV Crosslinker – Stratagene

Cell Biology:

- Axio Imager
- Karyotyping – CarlZeiss
- LSM 700 Confocal Microscopy
- LSM 800 Meta Confocal Microscopy
- LSM 980 Confocal Microscopy
- Cell Observer
- Qiaxcel – Capillary Electrophoresis
- Culture Cell Imaging System
- Flow Cytometer Cytomics FC500
- Vi-Cell Series Cell Viability Analyzer

HEALTH SCIENCES CENTRE LIBRARY ADMINISTRATION

HEALTH SCIENCES CENTRE LIBRARY ADMINISTRATION

The HSCL Administration aims to facilitate information flow in support of education, research, patient care and to provide biomedical information services to health professionals and students throughout Kuwait and the Gulf region.

HOURS

Academic Semester

Sunday – Thursday	7:00 a.m. - 10:00 p.m.
Saturday & Friday	8:30 a.m. – 10:00 p.m. (Third Floor)

Holy Month of Ramadan

Sunday – Thursday	9:00 a.m. – 5:00 p.m. 8:00 p.m. - 1:00 a.m. (Third Floor)
Friday & Saturday	9:00 a.m. – 5:00 p.m. 8:00 p.m. – 1:00 a.m. (Third Floor)

RESOURCES

- 1) Periodicals:** Electronic journals (Medical Collection) are available from different publisher databases and are accessible from the library homepage.
- 2) Reference Collection:** The reference collection contains encyclopedias, dictionaries, directories and indexes to provide quick, concise answers. This collection is located adjacent to the reference desk and is available for in-house use.
- 3) Books:** The HSCL Administration has approximately 32490 book volumes. Books are arranged by call number and are located at the circulation display area (First floor of HSC new building).
- 4) Reserve Collection:** The reserve collection is located adjacent to the circulation desk. It includes both, items designated by the faculty for their course usage, as well as, highly used core texts, which require limited circulation.
- 5) Audiovisuals:** HSCL Administration has an audiovisual collection of 2362 which includes videocassettes, slides, CD-ROMS and other media. Original audiovisual materials are restricted to in-house use (Third floor of HSC new building).

6) Databases: HSCLA renewed a range of databases such as:

- Access Anesthesiology
- Access Cardiology
- Access Emergency Medicine
- Access Medicine
- Access Pediatrics
- Access Pharmacy (including Pharmacotherapy Principles & Practice)
- Access Physiotherapy
- Access Surgery
- American Medical Association (JAMA)
- BMJ Best Practice
- BMJ Learning
- CINAHL Complete
- Clinical Key Student
- Cochrane Library
- Complete Anatomy
- Dentistry & Oral Sciences Source
- EMBASE
- Essential Evidence Plus
- JAMA Evidence
- Lexicomp Online
- LWW Total Access Medical Collection plus Neurology
- MedMarc Online and ITS for Windows Software
- Nature Medical e-Journal Collection
- New England Journal of Medicine
- Oxford English Dictionary Online
- Oxford Medicine Online (Textbooks, Handbooks and Mayo Clinic Scientific Press)
- Psychiatry Online.org Institutional
- Science Direct – Medical Collection plus Biomaterials
- Scopus
- Springer – Full Medical & Health Collection
- Taylor & Francis includes Informa Healthcare
- ULRICH's Web
- Up-To-Date
- Web of Science (ISI Web of Knowledge)
- Wiley Online Library (Medical Collection)

7) Digital Collection: A collection of electronic books is available through subscribed databases, in addition to collections of CD-ROMS (English and Arabic), DVDs, Software, Audio Cassettes, Videos, Slides, Slide Cassettes, Kits, Transparencies and Laser Disks that are available from the library (On Campus).

8) The Health Sciences Center Library Administration's homepage can be accessed using the following URL:
<http://hsclibrary.ku.edu.kw>

DEPARTMENTS AND LIBRARY SERVICES

The Health Sciences Center Library Administration offers a variety of services that facilitate the effective use of information resources on campus and at remote sites.

Acquisitions:

- Adding new library materials to the available library collection.
- Processing Faculty staff requests for library resources such as books, reference journals, databases and audiovisual materials needed for educational process.
- Following up Faculty staff requests.
- Following up with local and external vendors through emails or direct contact.
- Receiving library materials from the vendors and claim not received items.
- Applying Dynix – Acquisitions modules in order to automation acquisitions process.

Cataloging:

- The library applies the” National Library of Medicine “(NLM) classification to catalog library collections such as books, references, software and audiovisual materials.
- Using Dynix-cataloging module to enter different library materials in the Library Management System, in order to facilitate the search through the library “Online Catalog”.
- Current awareness to update the faculty with latest available resources in the library either through emails or the library homepage new arrivals.

Circulation:

- Implement library policies on HSCL Administration members.
- Assist patrons in using library catalog.
- Place course materials on reserve.
- Conduct library orientations and tours for staff and students.
- Register of borrowing privileges.

Reference and Journals:

- Answer reference queries.
- Assist in the use of library resources print and electronic.
- Perform citation verification for bibliographies.
- Perform mediated literature search.
- Instruct patrons on database selection and usage.
- Conduct library orientations and training for students on how to use the resources available in the library.

Automation & literature search:

- Wide variety of medical databases caters the users need to access medical information online.
- Provides a rich collection of full text electronic journals.
- Provides e-books databases.

- Remote access through VPN by staff and students.
- Perform citation verifications for academic staff.
- Ensure online access to electronic resources regularly.
- Literature Search Department provides high quality services to students and staff of four faculties and other health professionals. It provides easy accessibility to hands on practice at the time of training for the large group of students and faculty members. In addition to the availability of online library orientation, guides and tutorials that can be accessed from the library homepage.

Audiovisual Materials:

- It houses audiovisual materials in support of the teaching programs in the University such as Videos, CD's, Laser Discs, Slides, Kits and Softwares.
- Implement library borrowing policies on HSCL Administration members.
- Assist patrons in using library catalog for audio-visual material.

Training:

- Conduct library orientations and trainings on library resources for HSC Staff, Students and other Healthcare Professionals.
- Provide individual and group training sessions on library databases, online journals, eBooks and other digital collection for HSC Faculty members, Students and other professionals in the medical field.
- Prepare hands-on practices and hand-outs for course specific training sessions.
- Organize publisher training events on library databases.
- Prepare announcements & invitations to HSC Staff and Students for publisher training sessions.
- Instruct patrons on selecting bibliographic and full text databases according to specialty.
- Instruct patrons on accessing library resources (on-campus & off-campus).
- Prepare library guides & tutorials.

Marketing Resources:

- Market Library Resources.
- To develop internal communication messages that ensure HSC Faculty, staff and students remain informed about activities, services, forthcoming training or any newly added resources to the library collection.
- Plan, develop and implement programs that draws people to the library and motivates them to utilize library resources and services.

Interlibrary Loan:

- Journal articles which are not available in the HSCL Administration can be procured by staff and students through Interlibrary Loan facility.
- Correspondence with Infotrieve to facilitate electronic document delivery transactions.
- Correspondence with GCC libraries.
- Resource sharing among medical libraries in the Arab World.

Library System:

- Designs and updates HSCL Administration websites and maintains its databases to locate articles, electronic books and other information to support staff and students.
- Use multi-media PC to create presentations with audio and video content or scan images.
- More than 120 computer workstations throughout the library provide access to the World Wide Web as well as the productivity software such as Microsoft Office and to the campus network.
- HSCL Administration provides wireless connectivity throughout the building. You may also connect your own laptop to the KU Wi-Fi.
- Provides assistive technology for library users with special needs.

CIRCULATION POLICY

- HSC Faculty, Staff and Students need the following to obtain library membership:

HSC Staff	Copy of University ID & Civil ID	1 Photograph
Student	Copy of University ID & Civil ID	2 Photographs
MoH Professional	Copy of Work Center ID & Civil ID	1 Photograph + KD.40/-
Private Health Professional	Copy of Work Center ID & Civil ID	1 Photograph + KD. 80/-

- Library members are entitled to the following loan privileges:

	HSC Faculty	HSC Staff	HSC Students	Postgraduate Students/Clinical Tutors	Others
Books	10 books for one month	5 books for one month	5 books for Two weeks	5 books for one month	3 books for one month
Reserve Books	1 book for two working hours				None
Audio & Video tapes	3 items for three days				
Slides	3 sets for three days	None			
Journals	3 issues for two hours	None			

- Reserve book is to be checked out for two hours or overnight, weekends and throughout National holidays and are to be returned on the first working day.
- Periodicals, reference materials, microfilms, computer software, CD's and laser disc are restricted to in-house use.

- Periodicals are restricted to be checked out for faculty staff only for two hours.
- Borrowing privileges will be suspended for overdue materials or unpaid fines.

Item	Fine
Book	Fils 0.250/day
Reserve Book	Fils 0.250/2- hours delay & KD 1/day
Audiovisual Materials	Fils 0.250/day

INTERLIBRARY LOAN POLICY

- HSC Faculty is entitled to obtain 20 articles per academic year free of charge from commercial document suppliers. Requester must sign interlibrary loan form to declare that the article is required for private study/research, and it is not for commercial purpose, in order not to pay the copyright fees.
- Students are eligible to obtain interlibrary loan for a fee.
- Turnaround time for a journal article is 48 hours and two weeks for books.

LITERATURE SEARCH POLICY

- HSC Faculty is entitled to mediated literature search free of charge.
- Other HSC members, Clinical tutors and Students are entitled to conduct free literature search, and are charged for print out.
- Non-HSC members are entitled to conduct literature search for a fee.

PHOTOCOPY POLICY

- Photocopy requests are usually completed within one working day.
- Self-service photocopying is available.
- Photocopying is permissible only for the materials held in the library.

	Eligible	Fee
HSC Faculty	600 pages/year	Additional 20 Fils/page
Students	-	20 Fils/page
Clinical Tutors	200 pages/year	Additional 20 Fils/page
Non-HSC members	-	20 Fils/page

Visit HSCL Administration homepage for more details:
<http://hsclibrary.ku.edu.kw>

GOVERNANCE OF THE COLLEGE OF MEDICINE

GOVERNANCE OF THE COLLEGE OF MEDICINE

The governing body of the College of Medicine is the College Council. The head of the College Administration is the Dean assisted by the Vice-Deans. The College's officers are responsible to the Dean for carrying out the policy decisions of the College Council.

The College Council was established according to the law and regulations of the Kuwait University. Its function is the formation of major policies for the College of Medicine.

COLLEGE COUNCIL

Terms of Reference

Subject to the law and regulations of the Kuwait University, the College Council shall have the following membership and functions:

Membership

- | | |
|--|-------------|
| a) Dean, College of Medicine | Chairperson |
| Vice-Deans | ex-officio |
| The Chairperson of Departments | |
| One representative of the Full Professors | |
| One representative of the Associate Professors | |
| One representative of the Assistant Professors | |
- b) Any other person with special knowledge or expertise may be invited to attend meetings of the Council as appropriate.

Functions

- a) It shall be the policy making body in the College of Medicine.
- b) It shall approve and recommend to the University Council the educational, research and service programs of the College of Medicine.
- c) It shall approve and recommend to the University Council all examination results which contribute marks towards the award of degrees.
- d) It shall approve and recommend to the University Council annually the admission and transfer regulations of College of Medicine.
- e) It shall make recommendations to the University Council for the award of degrees within the College of Medicine.
- f) It shall make recommendations to the University Council for the award of honorary degrees.
- g) It shall make recommendations to the University Council for the academic staff promotion, sabbatical leave, leave of absence, private practice license

and scholarships.

- h) It shall approve new developments within the College of Medicine and where necessary recommend these to the University Council.
- i) It shall recommend to the University Council the regulations of the College of Medicine.
- j) It shall deal with any other matters referred or delegated to it by the University Council.

The College Council shall meet at least once a month and at such other times as may be required.

THE COLLEGE COMMITTEES

DEAN'S EXECUTIVE COMMITTEE

Terms of Reference

The Dean's Executive Committee is the executive body of the College of Medicine.

The Committee may delegate authority to execute decisions and it is kept informed of progress on all activities in the College of Medicine through its administrative officers. It is served by a number of subordinate committees with specific terms of reference, which report to it by means of the minutes of their meetings and oral reports from their chairperson.

Membership

- | | |
|------------------------|-------------|
| a) Dean | Chairperson |
| Vice-Deans | ex-officio |
| Administrative Manager | ex-officio |
- b) Any other person with special knowledge or expertise may be invited to attend meetings of the Committee as appropriate.

All recommendations made by the subordinate committees are submitted to the Dean's Executive Committee.

The Committee shall also consider any other matters referred to it by the Dean.

BOARD OF EXAMINERS

Terms of Reference

The Board of Examiners submit final examination decisions to the College Council. It is the responsibility of the Board of Examiners to receive and agree the internal mark list prepared by the departmental examiners; College Examination Committees to decide which students have passed and which have failed the final examinations of the College of Medicine; and to submit these decisions to the College Council.

Membership

Dean	Chairperson
Vice-Deans	ex-officio

Chairmen of the departments/module coordinators or their representative for the year concerned.
The External Examiners for the year concerned.
Chairperson and members of the Examination Committee.
Other heads of departments may attend as observers.

EXAMINATION COMMITTEES

1. Departmental Examination Committees

All Clinical departments will have examination committees appointed by their respective Department Councils. The departmental examination committee is responsible to finalize the questions in consultation with the Phase III Examination Committee.

This committee will be responsible for the conduct of the examination and analysis of the result. All examination results are to be submitted to the Phase III Examination Committee, who will endorse and forward it to the Vice-Dean for Academic and Student Affairs for publishing.

2. Phase I Examination Committee – Year 1 of the HSC Program

- i) The chairperson and committee members will be appointed by the Dean's Executive Committee for a term of 2 years.
- ii) The Deans of the Colleges of Dentistry and Pharmacy will nominate their representatives to this committee.
- iii) This committee will be responsible for collecting questions from the course coordinators, analyze them, and finalize the question papers for the midterm and final examinations.

The finalized question papers should be handed over to the Office of the Vice Dean for Academic and Student Affairs well in advance. The nominated committee members will attend the meetings to finalize and approve the midterm and final exams results.

3. Phase II Examination Committee – Year 2 of Medical Program

- i) This committee will be appointed by the Dean's Executive Committee for a term of 2 years.
- ii) The Dean of the College of Dentistry will nominate the representative to this committee.
- iii) This committee will be responsible to collect questions from the concerned staff, analyze them and finalize the question papers for the end of block assessments/final examinations.

The finalized question paper should be handed over to the Office of the Vice Dean for Academic and Student Affairs well in advance. The meeting of this committee which finalizes the final exam result will be attended by

the module coordinator of I & I module, Dean and Vice-Dean for Academic and Student Affairs.

4. Phase II Examination Committee – Year 3 and 4 of Medical Program

- i) This committee will be appointed by the Dean's Executive Committee for a term of 2 years.
- ii) The coordinator of the 3rd and 4th year medical program (Phase II) will be the Chairperson of this committee.
- iii) The Dean of the College of Dentistry will nominate their representative to the committee.
- iv) This committee will be responsible to collect questions from the concerned staff, analyze them and finalize the question papers for the end of module assessments/final examinations.

The finalized question paper should be handed over to the Office of the Vice Dean for Academic and Student Affairs well in advance. The meeting of this committee which finalizes the final exam result will be attended by the module coordinators, Dean and Vice-Dean for Academic and Student Affairs.

5. Phase III Examination Committee – Year 5, 6 and 7 of Medical Program

- i) This committee will be appointed by the Dean's Executive Committee for a term of 2 years.
- ii) Membership: Chairperson or their representative of the examination committee of the Departments of Medicine, Surgery, Pediatrics, Obstetrics & Gynecology, Psychiatry and Community Medicine will serve as ex-officio members.

In addition to these members, the Dean's Executive Committee will appoint 3 or 4 members of staff from the Basic Science Departments.

- iii) This committee will be responsible to analyze the questions and the examination results. The result of the Phase III examinations must be endorsed by this committee before publication. The Committee is free to invite the Chairperson of the clinical departments whenever necessary.

The meeting of this committee which finalizes the final examination result will be attended by the concerned Departmental Chairperson, Dean and Vice Dean for Academic and Student Affairs.

DEAN'S ADVISORY COMMITTEE

Terms of Reference

The Committee shall advise the Dean on major matters related to the operation of the College of Medicine.

Membership

Dean	Chairperson
Vice-Deans	ex-officio
Chairperson of Departments and Heads of Divisions	

The Committee shall be convened as deemed necessary by the Dean.

COLLEGE COMMITTEE ON PROMOTIONS

Terms of Reference

The College Committee on Promotions is a committee appointed by the College Council and reports to the Dean. The recommendations concerning all matters related to the promotions of academic staff to the rank of Associate Professor or Full Professor in the College of Medicine is submitted to the Dean.

Membership

- a) The Committee shall consist of more than four members, all of whom shall be Full Professors. One half of the membership shall have clinical appointments and one half shall have medical science appointments in the College of Medicine. The members of the Committee shall be nominated by the Dean after consultation with the Chairperson of departments and approved by the College Council.
- b) Membership on the Committee shall be limited to Full Professors who shall be full-time staff members in the College of Medicine and who shall not hold the post of Dean or Vice-Dean.
- c) Committee members may serve for two academic years which shall constitute a full term. No member may serve for more than two consecutive full terms.

Procedures

- a) The Dean shall select the Chairperson and the members elect the Secretary.
- b) Minutes of the meetings shall be signed by all members of the Committee who attend the meeting. These minutes shall remain confidential and shall be distributed only to the Dean.
- c) The minutes of the Committee meetings shall record the distribution of all votes.
- d) All voting in the Committee shall be by secret ballot. The Chairperson and Secretary vote on all issues.
- e) A quorum is required for the Committee meeting.

AD HOC COLLEGE INTERVIEW COMMITTEE

Terms of Reference

The Ad hoc College Interview Committee is a committee of the College Council and reports to the Dean.

The function of this Committee is to interview all candidates for appointments to the rank of Assistant Professor, Associate Professor and Full Professor and make appropriate recommendations to the Dean.

Membership

- a) The minimum membership of an Ad hoc College Interview Committee shall be:
 - Dean Chairperson
 - Chairperson of College Committee on Promotions
 - Chairperson of Department in which appointment is to be made
 - One staff member with a clinical appointment
 - One staff member with a basic science appointment
- b) The Dean may add further members of the academic staff to the committee as deemed appropriate.
- c) For transfer from Ministry of Health appointments, the Ministry of Health shall be invited to nominate a representative.

AD HOC COLLEGE APPOINTMENT COMMITTEE

Terms of Reference

The Ad hoc College Appointment Committee is a sub-committee to the Dean's Executive Committee and reports to the Dean.

Membership

- Dean/Vice-Dean for Academic and Student Affairs Chairperson
- One staff member from the clinical department nominated by the Dean's Executive Committee annually.
- One staff member from the basic science department nominated by the Dean's Executive Committee annually.

Functions

- a) This committee reviews the requests received from the Departments for all academic and non-academic positions and submits its recommendations to the Dean, considering the need of the Department and the overall developmental plans of the College.
- b) The committee shall also consider any other matter referred to it by the Dean related to the appointments.

The Committee shall be convened as deemed necessary by the Dean.

COLLEGE APPOINTMENT AND CONTRACT RENEWAL COMMITTEE

Terms of Reference

The College Appointment and Contract Renewal Committee is a sub-committee to the Dean's Executive Committee.

Membership

- Dean Chairperson
- Four staff members nominated by the Dean's Executive Committee.

Functions

The committee is responsible for reviewing and approving:

- a) The appointment nominations received for both academic and support academic positions from the departments, in accordance with the Kuwait University rules and regulations for appointment.

- b) Promotion files of support academic positions in accordance with the promotion rules and regulations of the Kuwait University.
- c) Contract renewal requests of both academic and support academic staff in the College.

The term of this Committee is for two years. The Committee shall be convened as deemed necessary by the Dean.

AREA COMMITTEE FOR GRADUATE PROGRAMS

Terms of Reference

The Area Committee for Graduate Programs is a committee of the College of Graduate Studies.

Membership

- a) Vice-Dean for Research and Postgraduate Studies Chairperson
- b) Coordinators, Departmental Graduate Program Committees
- c) Any other member of staff with special knowledge or expertise may be appointed to the Committee as deemed appropriate.

Functions

The Area Committee shall be responsible for:

- a) Supervision and coordination of the graduate programs in the College of Medicine.
- b) Consideration of proposals from the graduate programs in the College of Medicine.
- c) Initiation and submission of proposals regarding the area program to the Dean of the College of Graduate Studies.
- d) Review and consideration of any issue referred to it by the Dean of the College of Graduate Studies.

ANIMAL ETHICS COMMITTEE

Terms of Reference

The Animal Ethics Committee is a sub-committee of the Dean's Executive Committee and submits its recommendations to it.

Membership

- | | |
|--|--------------|
| a) Vice-Dean for Research and Postgraduate studies | Chairperson |
| Director of the Animal Resources Centre | ex-officio |
| Chief Technician, Animal Resources Centre | ex-officio & |
| | Secretary |
- Three members of the staff from Basic Science/Clinical departments appointed by the Dean's Executive Committee
One academic staff from the College of Pharmacy
One academic staff from the College of Allied Health Sciences
- b) Any other person with special knowledge or expertise may be invited to attend meetings of the committee as deemed appropriate.
- c) Any proposal to change the membership of the committee shall be referred to the Dean's Executive Committee.
- d) Continuous membership of the Committee (except ex-officio members) shall be limited to two years with eligibility for re-appointment.

Functions

- a) The committee shall supervise the ethical use of animals in research.
- b) Rationalize the purpose of using the animals in experiments.
- c) Supervise animal maintenance, experiments, euthanasia, and humane disposal of the dead animals.
- d) Educate the personnel to conduct the experiments that meet internationally acceptable ethical standards.
- e) Review applications to use animals.

SCHOLARSHIP COMMITTEE

Terms of Reference

The Scholarship Committee is appointed annually according to the regulations of Kuwait University.

Membership

- | | |
|------------|-------------|
| a) Dean | Chairperson |
| Vice-Deans | ex-officio |
- b) All Chairpersons of College of Medicine.
- c) Any other member of staff with special knowledge or expertise may be invited to attend meetings of the Committee as deemed appropriate.

Responsibility regarding scholarships

The Committee shall be responsible for:

- a) Establishing, reviewing, and amending the procedures and regulations governing the award of scholarships.
- b) Proposing the number and types of scholarship to be awarded annually according to the needs of the College of Medicine.
- c) Setting the criteria for selection of candidates.
- d) Laying down the terms and conditions, including duration of individual scholarships.

The Committee shall also consider any other matter referred to it by the Dean.

DEPARTMENT SCHOLARSHIP COMMITTEE

The Department Scholarship Committee will be appointed by the respective Department Councils, according to the regulations of Kuwait University.

HEALTH AND SAFETY COMMITTEE

Terms of Reference

The Health and Safety Committee is a sub-committee of the Dean's Executive Committee.

Membership

- a. The Chairperson of the committee will be appointed by the Dean's Executive Committee.
- b. Two representatives from the clinical departments nominated by the Dean's Executive Committee.
- c. Two representatives from the basic medical science departments nominated by the Dean's Executive Committee.
- d. Safety officers nominated by the academic departments in the College of Medicine.
- e. Any other members with special expertise can be invited, as required.

Functions

The committee will be responsible to look into issues related to health and safety in the College of Medicine.

- a) To formulate the College Safety Policy which shall be embodied in a College Safety Manual subject to periodical updating.

Such a policy is to cover regulations concerning aspects of safety within the College which may be identified as:

- i. Accidents which may occur because of performing different activities in the workshops and laboratories, from electrical shocks, mechanical injuries, etc.
 - ii. Fire in the College premises.
 - iii. Chemical hazards arising from experimental work, handling, and storage.
 - iv. Biological hazards resulting from handling animals and micro-organisms.
 - v. Radiation from sources emitting both ionizing and non-ionizing radiation.
- b) To receive and consider recommendations regarding matters of safety within the College.

The Committee shall meet at least once each semester and submit its recommendations to the Vice-Dean for Clinical Affairs, Consultation and Training.

Procedures

- a) The committee will report to the Vice-Dean for Clinical Affairs, Consultation and Training.
- b) The committee shall submit a report to the Vice-Dean for Clinical Affairs, Consultation and Training at the end of each semester.

AD HOC ALLOCATION OF SPACE COMMITTEE

Terms of Reference

The Ad hoc Allocation of Space Committee is a sub-committee of the Dean's Executive Committee and submits recommendations to it.

Membership

Vice-Dean for Clinical Affairs, Consultation and Training Chairperson
Three members of staff appointed by the Dean's Executive Committee

Functions

- a) To formulate all allocation of space policies for the College of Medicine designed to equitably allocate space and optimize its usage within the College, bearing in mind both the present needs and future requirements of departments, units, and divisions.
- b) To receive, consider, and make recommendations concerning requirements for changes and/or additions to space allocations.
- c) To consider the feasibility of the establishment of new departments regarding space requirements.

POSTGRADUATE STUDENT GRIEVANCES COMMITTEE

Terms of Reference

The Committee will be responsible for studying the grievance submitted by the student on issues related to the in-course performance, final examination, or final grades and give recommendations to the Dean, College of Graduate Studies based on the College regulations.

Membership

Vice-Dean for Research and Postgraduate Studies

Chairperson

In addition, the Dean will appoint two senior members of staff to be members of this committee from Departments which are not related to the grievances submitted by the student.

The committee is free to invite the Chairperson of the concerned Department, Program Director of the concerned Department or any other staff, depending on the grievance of the student.

Procedures

The Vice-Dean for Research and Postgraduate Studies will meet with the members of the Committee to discuss the student grievance and the committee will submit its recommendation to the College of Graduate Studies in a month's time.

The proceedings of the committee shall be recorded, and the minutes and the recommendations will be signed by the members of the committee.

MEDICAL RESEARCH COMMITTEE

Terms of Reference

The Medical Research Committee is a sub-committee of the Dean's Executive Committee and submits recommendations to it.

Membership

- | | |
|--|-------------|
| a) Vice-Dean for Research and Postgraduate studies | Chairperson |
| Dean, College of Medicine | ex-officio |
| Vice-Dean for Academic and Student Affairs | ex-officio |
| Director of Research, Ministry of Health | ex-officio |
- b) Eight academic staff members appointed by the Dean's Executive Committee to represent the basic medical science and clinical departments.
- c) Any other person with special knowledge or expertise may be invited to attend the meetings of the Committee as appropriate.
- d) Continuous membership of the Committee can be up to three years (except ex-officio members) with eligibility for re-appointment.

Any proposal to change the membership of the Committee shall be referred to the Dean's Executive Committee.

Functions

The Committee is the principal research body of the Health Science Centre. The Committee shall be responsible for:

- a) The review and assessment of all research proposals in the College of Medicine.
- b) Determining additional inputs for funding decisions, e.g. ethical review, radiation protection, etc.
- c) Making funding decisions on research projects submitted to it, subject to endorsement by the Vice-President for Research.

Procedures

- a) The Committee members shall select a secretary among themselves.
- b) The Committee's deliberations shall be confidential, and the minutes shall be distributed only to the Dean. Decisions taken shall be communicated to the individual concerned and the Dean's Executive Committee who shall also be informed on all matters of policy.

RADIATION SAFETY COMMITTEE

Terms of Reference

The Radiation Safety Committee is a sub-committee of the Dean's Executive Committee and submits recommendations to it.

Membership

- | | |
|--|---------------------------|
| a) Vice-Dean for Research and Postgraduate Studies | Chairperson |
| Dean | ex-officio |
| Chairperson, Department of Radiology | ex-officio |
| Chairperson, Department of Nuclear Medicine | ex-officio |
| Chairperson, Department of Radiologic Sciences, | |
| College of Allied Health Sciences and Nursing | ex-officio |
| Radiation Protection Officer | ex-officio &
Secretary |
- b) A representative of the Ministry of Health Radiation Protection Division.
 - c) A representative from the clinical departments nominated by the Dean's Executive Committee.

- d) A representative from the basic medical science departments nominated by the Dean's Executive Committee.
- e) Any other member of staff with special knowledge or expertise may be invited to attend meetings of the Committee as deemed appropriate.
- f) Continuous membership of the Committee (except ex-officio members) shall be limited to three years with eligibility for re-appointment after one year. Any proposal to change the membership or functions of the Committee shall be referred to the Dean's Executive Committee.

Functions

Once the license for granting permits for the use of radioactive materials has been extended to the University Health Sciences Centre, the Committee shall be responsible for:

- a) The license given to the University Health Sciences Centre.
- b) The protection of all workers, patients, and members of the public in the departments of Radiology and Nuclear Medicine or any other laboratory where radio nuclides are used.
- c) Devising, implementing, monitoring, and reviewing policies and operational procedures, making recommendations for changes where necessary.
- d) Receiving applications for inspecting, issuing, and reviewing permits to use unsealed radio isotopes for diagnostic, therapeutic and research purposes in the College.
- e) Considering any recommendations and reports received from the Radiation Protection Advisor to the Ministry of Health.

The Committee shall also consider any other relevant matters referred to it by the Dean, College of Medicine.

The Committee shall be convened as required.

INSTRUMENT COMMITTEE

Terms of Reference

The Instrument Committee is a sub-committee of the Dean's Executive Committee. The term of this Committee is for two years.

Membership

- a) Vice-Dean for Clinical Affairs, Consultation and Training Chairperson
- b) Two representatives from the clinical departments nominated by the Dean's Executive Committee.
- c) Two representatives from the basic medical science departments nominated by the Dean's Executive Committee.
- d) One chief technician

Functions

The purpose of this committee is to avoid duplication of equipment in various departments of the College.

DEPARTMENTAL COUNCIL

Membership

- a) The Chairperson of the department, who shall be the Chairperson of the Departmental Council.
- b) All departmental academic staff.
- c) Any other person with special knowledge or expertise may be invited to attend meetings of the Departmental Council as deemed appropriate.

Functions

- a) It shall recommend the departmental budget for approval.
- b) It shall recommend to the Dean the annual departmental report.
- c) It shall serve as a forum for the discussion of all matters pertaining to education, research, and service within the department.
- d) It shall be responsible for formulating the educational program of the department.
- e) It shall consider any other matters which may be referred to it.

Procedures

- a) The Departmental Council shall meet at least once each month during the academic year. Additional meetings may be convened by the Chairman of

the department or at the written request of a simple majority of departmental members who have stated the reason for the meeting.

- b) The Departmental Council shall appoint each year a secretary from among its members who will be responsible for keeping the minutes and preparing agendas of meetings.
- c) A copy of the agenda and minutes of all meetings shall be sent to the Dean with a covering memorandum referring to any decisions proposed, which require approval.
- d) Any recommendations by the Departmental Council shall be conveyed by the Chairman to the College Council if they are relevant to the discussions of that body.