

Programme Report

A- Basic Information

- 1- Programme Title: **MD degree in diagnostic radiology.**
- 2- Programme Type: **Single** Double Multiple
- 3-Department(s): Diagnostic Radiology Department
- 4-Co-ordinator: Dr .Medhat Ibrahim
- 5- External Evaluator: Dr. Yousef Badran
- 6- Year of Operation : 2011-2012.

B- Statistics

1. No. of students starting the programme: 4
2. Ratio of students attending the programme this year to those of last year: 5:4.
3. No. and percentage of students passing in each Level.

	No. of students passing	% of students passing
1 st part	0	0 %
2 nd part	1	25%

4. No. of students completing the programme and as a percentage of those who started

	No. of students completing	% of students completing
1 st part	0	0 %
Thesis evaluation	-	0

5. Grading: No. and percentage in each grade

	Excellent		Very good		Good		Accepted		Weak	
	No	%	No	%	No	%	No	%	No	%
1 st part										
2 nd part										

First destinations of graduates:

First destinations	No	%
Assistance Lecturers in Sohag faculty of medicine	4	100%
Consultant in ministry of health	-	0
Consultant in health insurance	-	0

Give percentages of the graduating cohort who have

- i. Proceeded to appropriate employment
- ii. Proceeded to other employment
- iii. Undertaken postgraduate study
- iv. Engaged in other types of activity
- v. Unknown first destination

Academic Standards

1- Achievement of Programme Intended Learning Outcomes

Course	Programme ILOs (By No.)			
	K, U *	IS **	P.S ***	G.T.S ****
1st part				
Biostatistical an computer	A1-3-11-12-14	B1-3	C1-3	D1
Methodology and researchs	A1-2-3	B1-2-3-4-9	C2	D1
Medical reports				
Physics and interventional	A1-7.	B1-4-6-8-9	C1-2-4-5	D2-3-4.
2nd part				
Diagnostic Radiology	A1-7.	B1-4-6-8-9	C1-2-4-5	D2-3-4.

- * Knowledge and Understanding
- ** Intellectual Skills
- *** Professional and Practical Skills
- **** General and Transferable Skills

Commentary (quoting evaluations from external evaluator and other stakeholders)

No students completing the program.

2. Achievement of Programme Aims

Commentary(quoting evaluations from external evaluator and other stakeholders)

No students completing the program.

3. Assessment Methods

Commentary (quoting evaluations from external evaluator and other stakeholders)

No students completing the program.

4. Student Achievement

Commentary (quoting statistics from Section B and evaluations from external evaluator and other stakeholders)

Range of success in all academic level is fair & adequate indicating good student achievement especially in the 1st part.

Quality of Learning Opportunities

5. Quality of Teaching and Learning

Commentary on the quality of teaching and learning (quoting evaluations by stakeholders including students)

Good percentage of students concluded that the teaching programme helped them

6. Effectiveness of Student Support Systems

Commentary on both academic and pastoral/personal support for all students

- **Despite the ability of faculty to cover the process by staff from other faculties & the two hours paid for them to academic support, there is no clear policy of the faculty to detect and punish the careless one through a time tabled tutorial sessions for every staff members.**
- **There is no adequate support provided for outstanding students. Also there is no actual policy for those with disabilities. No special provision to support students who were at risk dropping out.**
- **The availability for borrowing of student books for whole year (student library) as well as the steps was performed to construct e learning center, provide a provision to those whose performance was outstanding and who could benefit from a greater challenge.**
- **The orientation course at beginning of the every academic year, The Youth Care and Welfare Office ,the faculty web site, the student handbook represent the good pastoral support**

7. Learning Resources

a. No. and ratio of faculty members and their assistants to students

No .of staff and assistant = 27

No. of students= 4

Ratio of Staff /students= 2:1

b. Matching of faculty members specialization to programme needs.

Properly matched

c. Availability and adequacy of Programme Handbook

Available both online and hard copies. It contains Sufficient details about programme rules (admission, progression, completion, ...etc)

d. Adequacy of Library facilities.

There is a large library in the faculty serves staff, postgraduates and undergraduates.

The library is located in the 3rd floor in the central services building.

The library is divided into many halls, for the belongings of the library; references, periodical, thesis video aids, student books (interior borrowing), students books hall (external borrowing), digital library& large hall for interior reading. All halls have 15

(fifteen) tables, 120 (one hundred and twenty) seats for interior reading. Treasure unite; in the left of the entrance of the library where personal belonging are saved. A photocopy center for every thing in the library. All content of the library are current, sufficient for all students and suitable for the programme requirements.

Work in library is from 9 a.m. to 5p.m. The library staff are adequate in number and efficient. The rules of the library are flexible and appropriate of for facilitating borrowing. However, a separate postgraduates library is under construction in the university hospital.

e. Adequacy of Laboratories

Need more skill labs and equipments.

The number of students per experiment is:

The clinical work performance is properly matched to that given in course specifications.

There are 20 twenty qualified technician.

The laboratories are not available to students for self learning.

f. Adequacy of Computer facilities

There are four computer labs three for students & one for staff members present in the underground floor and contain 162 computers with new software and continue review with internet connection.

Another lab is present in the library for the purpose of digital library, it contains 12 computer linked to the internet 2 laser jet printer, all of these are available only to researcher and visit all web sites.

Work in the computer lab is from 9 a.m. to 5 p.m, with presence of efficient technician support

g. Adequacy of Field/practical training resources

Adequate in (**community medicine/ forensic medicine**) in regard to period, timing, place, suitability to intended skills outcomes, number and percentage of students who completed training.

The achieved field study is matched to the programme specifications

h. Adequacy of any other programme needs

The faculty contains museums for self learning in the following specialty : forensic medicine, but the number of the specimen in them are not sufficient.

8. Quality Management

The faculty of medicine in Sohag university is so concerned as regard quality enhancement process so all members do their best to obtain accreditation. As regard faculty response to students, availability of regular evaluation and revision system for the program the faculty put all the resources to fulfill its mission so this part can be guaranteed and the steps for facilitation and fulfillment have been taken. As regard effectiveness of the system, effectiveness of faculty; university laws, regulation for progression and completion, and effectiveness of program external evaluation system still can not be discussed or reported at the time being because the system still under implementation; but the faculty guaranteed doing all her best to be committed to fulfill its mission.

e. Faculty response to student and external evaluations

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9. Proposals for programme development

a. Programme structure (units/credit-hours)

A new bylaw according to credit-hours system is currently under declaration .

b. Courses, deletions and additions and modifications

Some courses prepare to decrease the theoretical contents and increase the practical content .

c. Staff development requirements

All staff members are engaged into continuous faculties' development programs.

10. Progress of Previous Year's Action Plan

We achieved good results in follow up and rising the activity of the students questionnaire system, designing of an electronic database of follow up our graduates , and completing the staff members but still we have shortage in developing the labs by making maintenance and providing instruments and constructing Postgraduate library.

11. Action Plan

Action Required	Person responsible	Completion date
Follow up and rising the activity of the students questionnaire system.	Quality assurance unite &- learning unite director.	June 2013
Designing of an electronic database of follow up our graduates.	Dean, Quality assurance unite &-learning unite director	June 2013
Developing the labs by making maintenance and providing instruments as possible	Dean, Vice Dean for Postgraduate affaires and head of department.	September 2012
Constructing Postgraduate library	Dean, Vice Dean for Postgraduate affaires	September 2012
Completing the staff members	Dean, Vice Dean for Postgraduate affaires,head of the department .	December 2012