



وزارة التعليم العالي والبحث العلمي  
جهاز الإشراف والتقويم العلمي  
دائرة ضمان الجودة والاعتماد الأكاديمي

## استماره وصف البرنامج الأكاديمي للكليات والمعاهد

الجامعة: وارث الانبياء (ع)

الكلية/ المعهد: كلية الطب

القسم العلمي: رئاسة التدريس / الرصيحة اكاديمية

لعام الدراسي : 2025-2026

تاريخ ملا الملف: 2025/12/23

التوقيع:

المعاون العلمي: أ.م.د على عبد الرضا الغرة

التاريخ : 2025 \ 12 \ 23

مصدق الملف من قبل

مدير شعبة ضمان الجودة والأداء الجامعي

أ.د. علي موسى مهدي

2025 \ 12 \ 23

مصادقة السيد العميد  
الاستاذ الدكتور  
علي عبد سعدون  
2025 \ 12 \ 23





وزارة التعليم العالي والبحث العلمي  
جامعة وارث الأنبياء عليه السلام  
كلية الطب

## دليل البرنامج الأكاديمي ووصف المقررات الدراسية

2025

## نموذج وصف المقرر الدراسي

اسم المقرر الدراسي:

الوحدة العلمية: وظائف القلب و التشريح المرضي والعملي امرأة لعل مرحباً لدرا

رمز المقرر  
Medu ٢٠٢

الفصل الدراسي / السنة:

٢٠٢٥-٢٠٣٦

تاريخ إعداد الوصف:

٢٠٢٥

أشكال الحضور المتاحة:

عدد ساعات الاعتماد (الإجمالي) / عدد الوحدات (الإجمالي):

١٢٠ ساعة

أسماء مسؤولي المقرر:

أهداف المقرر:

في نهاية هذه الوحدة يجب أن يكون الطالب قادرًا على

وصف التشريح الطبيعي للقلب، الأوعية الدموية الكبيرة، والدورة التاجية .

شرح فسيولوجيا عضلة القلب، نظام التوصيل الكهربائي، دورة القلب، والديناميكا الدموية .

التعرف على الفيزيولوجيا المرضية للأمراض القلبية الوعائية الرئيسية .

أمراض القلب الإقفارية .

فشل القلب .

أمراض صمامات القلب .

ارتفاع ضغط الدم .

اضطرابات النظم القلبية .

أمراض القلب الخلقية .

تحديد المظاهر السريرية للأمراض القلبية الوعائية الشائعة (المصدر، خفقان، ضيق التنفس، وذمة، إغماء) .

، تخطيط صدى القلب، إنزيمات القلب، الأشعة السينية للصدر، نتائج ECG (ECG) تفسير الفحوصات القلبية الأساسية .

(القسطرة).

- توضيح مبادئ العلاج (تدابير نمط الحياة، العلاج الدوائي، الخيارات التداخلية والجراحية)
- فهم أمراض القلب الوقائية ودور السيطرة على عوامل الخطر (التدخين، السكري، السمنة، اختلال شحوم الدم، ارتفاع ضغط الدم).

استراتيجيات التدريس والتعلم :-

المحاضرات النظرية

التدريب العملي ومخابر المهارات

الندوات والمناقشات الجماعية

(PBL) التعلم القائم على حل المشكلات

هيكل المقرر

١. خريطة المنهج الدراسي

| week | discipline | objectives   | hours | Practical sessions & hours |
|------|------------|--|-------|----------------------------|
| ١    | Anatomy    | ١. Describe the basic anatomy of sympathetic system<br>٢. Describe the basic anatomy of parasympathetic system   | ٢     |                            |
|      | Physiology | ١. Define and Compare terms and concepts related to the sympathetic and parasympathetic systems, including: the central location of cell body of origin, number of synapses between CNS and effector organs, degree of myelination, and general effects on target tissues. | ٤     |                            |

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|--|--|---|--|
|  |  | <ul style="list-style-type: none"> <li>Y. Define and compare pre- and postganglionic autonomic neurons, and white and gray rami communicants.</li> <li>T. Describe the sensory input and roles for visceral afferent fibers of the ANS.</li> <li>T. Describe the synaptic characteristics, receptors, and neurotransmitters for the parasympathetic and sympathetic division of the ANS.</li> <li>S. Describe the function of non-adrenergic, non-cholinergic fibers in the ANS.</li> <li>V. Explain the relatively diffuse action of the sympathetic division compared with the parasympathetic division.</li> <li>V. Describe the ANS signaling mechanism and the effects of sympathetic and parasympathetic stimulation of lungs, heart, arteries, and veins; gastrointestinal function; renal function; and sexual function.</li> <li>A. Explain the Cardiovascular reflexes</li> <li>A. Explain the Cardiorespiratory interactions</li> <li>V. Describe signs and symptoms of ANS dysfunction that may accompany lesions that affect the ANS. Including Horner's Syndrome, medullary dysfunction, common visceral dysfunction, and multiple system atrophy (Shy-Drager syndrome).</li> </ul> |  |
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|---|---------------------|--|---|
|   | <b>Pharmacology</b> | <ul style="list-style-type: none"> <li>1. Explain the Receptor mechanisms regulating central autonomic function</li> <li>2. Describe Nicotinic receptors: distribution, agonists, and antagonists</li> <li>3. Describe Muscarinic receptors: subtypes, distribution, agonists, and antagonists</li> <li>4. describe Alpha adrenergic receptors: subtypes, distribution, agonists, and antagonists</li> <li>5. Describe Beta adrenergic receptors: subtypes, distribution, agonists, and antagonists</li> <li>6. Describe Autonomic neuropeptide receptors</li> </ul> |   |
| 1 | <b>Physiology</b>   | <p>Cardiovascular system overview:<br/>Cardiac system electrical activity:</p> <ul style="list-style-type: none"> <li>1. SA node action potentials</li> <li>2. Spread of electrical activity from the sino-atrial node to the rest of the heart</li> <li>3. Neural regulation of SA node</li> <li>4. Electrocardiogram (ECG): part 1</li> <li>5. ECG and the electrical activity of the heart</li> <li>6. Relation of the P wave, QRS complex, T wave to the spread of electrical activity through the different chambers of the heart</li> </ul>                    | <p><b>Practical lab</b></p> <p><b>Anatomy :</b><br/>Anatomy and histology of the heart and vessel</p> <p><b>Pathology</b></p> |
|   | <b>Anatomy</b>      | <ul style="list-style-type: none"> <li>1. Osteology of the ribs and sternum<br/>Costal cartilages and thoracic articulations</li> <li>2. Intercostal muscles</li> <li>3. Intercostal vessels, nerves</li> </ul>  |   |

|  |                     |  |  |
|--|---------------------|--|--|
|  |                     | 1. Movements of the thoracic   |  |
|  | <b>Pathology</b>    | <p>Hemodynamic disorder:</p> <ul style="list-style-type: none"> <li>1. Define edema and describe its types</li> <li>2. Explain the pathophysiology of edema</li> <li>3. Describe hyperaemia and congestion as terms</li> <li>4. Explain pathogenesis of thrombosis with reference to Virchow's triad</li> <li>5. Describe morphological features of different types of thrombi,</li> <li>6. Differentiate arterial versus venous thrombosis</li> <li>7. Describe the fate of thrombi.</li> <li>8. Define and describe embolism and its types,</li> <li>9. Explain the consequences of thromboembolism, pulmonary embolism</li> <li>10. Define shock and list its types</li> <li>11. Describe the stages of shock</li> <li>12. Recognize the causes of cardiogenic shock</li> </ul> <p>Explain the pathogenesis of septic shock</p> |  |
|  | <b>Pharmacology</b> | <p>Anti-arrhythmic drugs:</p> <ul style="list-style-type: none"> <li>1. Classes of antiarrhythmic drugs &amp; their clinical uses.</li> <li>2. Mechanism of action of each class of antiarrhythmic drugs, commonly used drugs, alternative drugs, clinically important interactions &amp; their adverse effects</li> </ul>   |  |

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|---|--------------------|---|---|--|
|   | Clinical resources | <p>A. Syncope</p> <ol style="list-style-type: none"> <li>1. Definition, etiology of syncope</li> <li>2. Signs &amp; symptoms of syncope</li> <li>3. Diagnostic tests</li> <li>4. Management &amp; prognosis</li> <li>5. How CPR works</li> <li>6. Complications of CPR</li> </ol> <p>B. Atrial fibrillation and other arrhythmias</p> <ol style="list-style-type: none"> <li>1. definition and etiology</li> <li>2. Signs and symptoms</li> <li>3. Management</li> </ol> <p>C. Differentiate between supraventricular and ventricular arrhythmia treatment<br/>Treatment of common and serious arrhythmias: AF, SVT, VT, VF</p> | 1 |  |
| 3 | Pathology          | Valvular heart diseases <ol style="list-style-type: none"> <li>1- Types of valvular heart disease and their etiology</li> <li>2- Rheumatic Valvular Disease.</li> </ol> Infective Endocarditis and the non bacterial thrombotic endocarditis  | 2 | <p><b>1. Practical lab</b></p> <p><b>Anatomy lab</b></p> |
|   | Anatomy            | <p>The heart and great vessels:</p> <ol style="list-style-type: none"> <li>1. Formation and sinuses of the pericardium</li> <li>2. Surface &amp; radiographic anatomy of the heart</li> <li>3. Anatomy of the inside of the chambers of the heart</li> <li>4. Conducting system of the heart</li> <li>5. Blood supply of the heart</li> <li>6. Nerve supply of the heart</li> </ol> <p>Surface Anatomy of the thorax:</p> <ol style="list-style-type: none"> <li>1. Thoracic cage</li> <li>2. Precordium and auscultatory areas.</li> <li>3. Lungs and pleura</li> </ol>  | 2 |  |
|   | Physiology         | <p>Electrocardiogram (ECG): part 2</p> <ol style="list-style-type: none"> <li>1. Orientation of the 12 leads ECG</li> <li>2. Cardiac vector and deviations of ECG.</li> <li>3. Introduction to cardiac arrhythmias.</li> </ol>  | 2 |  |

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|---------------------------|--|--|---|
|                           |  | <p>4. Use of ECG as a clinical tool for the diagnosis of cardiac arrhythmias.</p> <p>The cardiac cycle:</p> <ol style="list-style-type: none"> <li>1. The phases of the cardiac cycle.</li> <li>2. The pressure and volume changes in the heart during each phase of the cardiac cycle.</li> <li>3. Relate the phases of the cardiac cycle to the ECG.</li> <li>5. The role of the heart valves in the cardiac cycle.</li> <li>6. Clinical correlation between heart diseases and cardiac cycle</li> </ol> |   |
| <b>Pharmacology</b>       |  | <p>A. Anti-arrhythmic drugs (2):</p> <ol style="list-style-type: none"> <li>1. General principals of antiarrhythmic therapy</li> <li>2. Classification of antiarrhythmic drugs</li> <li>3. Differences between antiarrhythmic drugs</li> </ol> <p>B. Clinical pharmacology of antiarrhythmic drug</p> <ol style="list-style-type: none"> <li>1. Differentiate between supraventricular and ventricular arrhythmia treatment</li> </ol> <p>Treatment of common and serious arrhythmias: AF, SVT, VT, VF</p> | 2 |
| <b>Microbiology</b>       |  | <p><b>Rheumatic fever</b></p> <p><b>Infective endocarditis</b></p> <ol style="list-style-type: none"> <li>1. Causative pathogens</li> </ol> <p>Including list, Microbiological and biochemical features, virulence factors and laboratory diagnosis.</p> <ol style="list-style-type: none"> <li>2. The mechanism of pathogenesis of each condition</li> </ol>  | 1 |
| <b>Clinical resources</b> |  | <p><b>Management of AS</b></p> <ol style="list-style-type: none"> <li>1. Significance of valvular heart disease.</li> <li>2. Role of valvular heart disease in dyspnoea</li> <li>3. How to distinguish AV sclerosis from stenosis</li> <li>4. Clinical signs of severe AS</li> <li>5. Tests to diagnose AS</li> </ol>  | 1 |

|   |                   |  |   |  |
|---|-------------------|--|---|--|
|   |                   | <p>6. Surgery indication</p> <p><b>Infective endocarditis and rheumatic fever</b></p> <ol style="list-style-type: none"> <li>1. Definition and etiology</li> <li>2. Causative pathogens</li> <li>3. Signs and symptoms</li> <li>4. Management</li> </ol>   | 1 |  |
| 4 | <b>Pathology</b>  | <p>Myocardial infarction:</p> <ol style="list-style-type: none"> <li>1- Infarction, definition and types, the factors that influence the development of infarction.</li> <li>2- reperfusion injury</li> <li>3- Ischemic heart disease pathogenesis. Angina pectoris.</li> <li>4- myocardial infarction pathogenesis and morphological changes, consequences and complications</li> </ol> <p>chronic ischemic heart disease and sudden cardiac death</p>  | 2 | <p><b>Practical lab</b></p> <p><b>a. <u>biochemistry</u></b></p> <p><b>b. <u>pathology</u></b></p> |
|   | <b>Anatomy</b>    | <p>The blood supply of the heart:</p> <ol style="list-style-type: none"> <li>1. Origin, course and distribution of the right and left coronary arteries.</li> <li>2. Branches of the right and left coronary arteries</li> <li>3. Sites of anastomosis between right and left arteries.</li> <li>4. Basic veins draining the heart focusing on the coronary sinus.</li> <li>5. Autonomic innervation of the coronary arteries.</li> <li>6. Define the terms “end arteries anastomosis” with its clinical implications on cardiac diseases</li> </ol> | 2 |  |
|   | <b>Physiology</b> | <p>Control of cardiac output:</p> <ol style="list-style-type: none"> <li>1. The control mechanisms of cardiac output</li> </ol>  |   |  |

|  |                                  |  |   |  |
|--|----------------------------------|--|---|--|
|  |                                  | <p>2. The role of preload and afterload in determining stroke volume</p> <p>3. Cardiac muscle contractility</p> <p>Cardiogenic shock:</p> <ol style="list-style-type: none"> <li>1. Definition of shock</li> <li>2. Causes and types of shock</li> <li>3. The dangers of cardiogenic shock and how it leads to death</li> <li>4. Management of cardiogenic shock</li> </ol>  | 2 |  |
|  | <b><u>Biochemistry</u></b>       | <p>Cardiac enzymes:</p> <ol style="list-style-type: none"> <li>1. Understand Isozymes as markers of myocardial infarction</li> <li>2. Understand Troponin as biomarker: know when to order it and what does the test results mean!</li> <li>3. Distinguish between angina and myocardial infarction</li> </ol>   | 1 |  |
|  | <b><u>Pharmacology</u></b>       | <p>Management of MI:</p> <ol style="list-style-type: none"> <li>1. Rationale for Drug Therapy in MI,</li> <li>2. Classes of Drugs Used to Treat MI,</li> <li>3. Their mode of action, Clinical uses and common side effects.</li> </ol> <p>Hypolipidemic agents:</p> <ol style="list-style-type: none"> <li>1. General outlines of treatment of hyperlipidemia</li> <li>2. Different classes of hypolipidemic agents,</li> <li>3. Pharmacology of every agent regarding: Mechanism of action, Pharmacokinetics, Clinical effects, Side effects and interaction with other drugs</li> </ol> | 3 |  |
|  | <b><u>Clinical resources</u></b> | <p>Management of MI</p> <ol style="list-style-type: none"> <li>1. DD of chest pain</li> <li>2. Analysis of pain</li> <li>3. Sign &amp; symptoms of ischemic coronary syndromes</li> </ol>  | 1 |  |

|          |                           |  |          |  |
|----------|---------------------------|--|----------|--|
|          |                           | <p>4. Examination &amp; diagnosis<br/> 5. Management of MI<br/> 6. Complications of acute MI</p> <p><b>Cardiovascular Imaging</b><br/> 1. To gain knowledge about the different imaging modalities used in examination of the CVS.<br/> 2. To have a protocol for reading the normal chest x-ray.<br/> 3. To review the appearance of some of the common and important abnormalities on Chest x ray.</p> |          |  |
|          | <b>Community medicine</b> | <p>1. epidemiology of IHD<br/> 2. risk factors and prevention of IHD</p>   | <b>1</b> |  |
| <b>5</b> | <b>Pathology</b>          | <p><b>Atherosclerosis</b></p> <p>1- atherosclerosis risk factors, pathogenesis and morphological features.<br/> 2- pathogenesis of hypertension, mechanism of essential hypertension vascular pathology in hypertension.<br/> 3- hypertensive heart disease(systemic and pulmonary hypertensive heart disease</p>  | <b>2</b> | <p><b>Practical Lab</b><br/> a. <u>biochemistry lab</u><br/> <b>Lipid profile</b><br/> (Biochemical lab session)(Lab results interpretation)</p> <p><b>c- pathology lab</b><br/> <b>Morphological changes in atherosclerosis and vascular changes related to hypertension.</b></p> |
|          | <b>Anatomy</b>            | <p><b>Functional histology of cardiovascular system</b></p> <p>1. Function and histological structure of capillaries<br/> 2. Function and components of the arterial system</p>  | <b>2</b> |  |